Counseling Services Policies and Information

This document contains information about professional services and business policies of Riverstone Counseling at Spectrum Youth & Family Services. Please review it carefully as you will be asked to sign a form indicating that you understand the policies.

Description of Services

Here at Riverstone Counseling, our goal is to create an environment that fosters healing and growth. We believe we can empower our clients to make positive and lasting change in their lives. Riverstone provides individuals and families with supported opportunities for growth and change. Counseling is a cooperative effort between the client and counselor and may involve the discussion of material which is upsetting in nature, but in which may help you resolve your problems.

Riverstone Counseling is committed to serving all persons without regard to race, color, religion, national origin, gender, gender identity, sexual orientation, age, physical disability, and marital or civil union status. Under the Americans with Disabilities Act, Riverstone will consider reasonable accommodation whenever possible for all persons. However, accommodations made must not impose undue hardship on Riverstone Counseling at Spectrum, in conformance with state and federal laws.

Our services include outpatient counseling for adolescents, young adults from the ages of 12 to 30, and their families. We work with individuals and families experiencing mental health and substance use issues, including: depression, anxiety, PTSD and trauma, substance use, life transitions, family conflict, parenting concerns and relationship issues. We serve clients who are of the ages mentioned previously and/or who are parents of individuals in that age range, and who meet the ASAM (American Society of Addiction Medicine) guidelines pertaining to outpatient counseling (Level One). Length of treatment is generally a minimum of 3-5 sessions to complete Informed Consent & Orientation, Screening, Assessment, Recommendations and Feedback. Further brief treatment if indicated can be an additional 5-20 sessions depending on the chronicity and severity of the presenting problems and client motivation. However, length of treatment is determined by ASAM criteria, and should the assessment indicate the need for a higher level of care, then a referral to those services would be made in the recommendation and feedback session.

Riverstone is grounded in the Youth Development model, which is a strength-based approach, and is committed to “evidence-based best practices” as part of our overall mission. We believe that mental health and substance use issues are inherently linked and should be addressed in a
comprehensive and integrated approach. We believe that individuals are connected to family groups, biological or otherwise, and that family work is an important part of counseling adolescents. The individual adolescent and young adult treatment approach may integrate several therapeutic techniques, including but not limited to: Motivational Interviewing, Cognitive Behavioral Theory, Mindfulness-based practices, Narrative Therapy, and Eye Movement Desensitization and Reprocessing (EMDR). EMDR, can help people heal from symptoms and emotional distress caused by psychological trauma. Family treatment is primary based on behavioral and family systems theories, incorporating skills training and parent/family education. Coordination with primary care/physical health care is also strongly recommended.

**We provide the following services:**
- Screening & assessment for substance use and mental health problems
- Individual substance use & mental health counseling
- Family counseling and parent education
- Psychiatric referrals
- Urine analysis – based on medical necessity and for Riverstone clients only
- Coordinated health care through the Pearl Street Youth Clinic
- Access to all services at Spectrum Youth & Family Services
- Assistance in accessing Medicaid and assistance in accessing other entitlements and services

**Program Staff**
All are trained as Clinical Mental Health Counselors, Clinical Social Workers and Substance Abuse Counselors. Staff are either licensed in one or both disciplines, or are in the process of becoming licensed. Riverstone is also a training site for Masters-level graduate students completing internships for Masters in Science and Masters in Social Work degree programs.

**Fee and Insurance Reimbursement Information**
Riverstone has funding to serve uninsured clients. Riverstone is also an approved Medicaid provider. Currently, Riverstone is an approved Blue Cross Blue Shield, Cigna, MVP, United Health, and Tri-Care. Our staff will assist in determining your eligibility and your medical coverage options. If you are uninsured, and do not meet the qualifications for funding sources we have available, we have a sliding scale fee available upon request. If it is determined that you will be on a sliding scale fee, then you will be responsible for the designated amount each session.

The published rates are as follows: initial diagnostic evaluation is $200.00, 45-50 minute individual session is $125.00, and group counseling is $50.00 per session. Your insurance will be billed directly if we are contracted providers with your insurance company, and you are responsible for paying any co-payments at the time services are rendered.

**Cancellations/Missed Appointments/Late Policy**
- Please call 24 hours in advance if you need to cancel your appointment.
- Call as soon as possible before or after the appointment if there is a personal or family emergency that caused you to miss your appointment.
- If you do not call and do not show up for your appointment and you do not call within 24 hours, we cannot guarantee future appointments.
- If you are more than 15 minutes late, your therapist may need to reschedule your appointment.
You are allowed to cancel up to three appointments per year (either with 24 hours’ notice or within 24 hours after the appointment if there is an emergency). If you have to cancel due to an extenuating circumstance, please discuss this with your counselor. If you cannot meet this standard, referrals may be made for counseling with another therapist in the community. Your year is determined by your anniversary date of your first therapy session. The purpose of this policy is to ensure the best care for you.

Consent and Agreement to the Use and Disclosure of Health Information for Treatment, Payment, or Healthcare Operations

I understand that as part of my care, Riverstone Counseling originates and maintains records which may describe my health history, symptoms, examination and test results, diagnoses, treatment, and any plans for future care or treatment. I understand that this information serves as:

- A basis for planning my care and treatment.
- A means of communication among the professionals who contribute to my care.
- A source of information for applying my diagnosis and information to my bill.
- A means by which a third party can verify that services billed were actually provided.
- A tool for routine healthcare operations such as assessing quality and reviewing the competence of health care professionals and the services that are offered.

I have been provided with a Notice of Privacy Practices that provides a more complete description of information uses and disclosures (release of, or access to, your information). I understand that I have the right to review the notice prior to signing this consent. I understand that Riverstone reserves the right to change their notice and practices. However, prior to a material change taking effect the agency will publish an announcement of the change at every agency facility, on its website, and in the local paper. I understand that a new notice will be distributed to me.

I understand that my records are subject to confidentiality imposed by state and federal regulations. I also understand that alcohol and drug abuse client records are protected by 42CFR part 2, and that records may not be released or disclosed without my written consent unless otherwise provided for in the regulations.

I understand that I have the right to request restrictions as to how my health information may be used or disclosed to carry out treatment, payment, or healthcare operations. I understand that the organization is not required to agree to the restrictions requested; however, if Riverstone agrees to the requested restrictions, they are bound by our agreement.

By signing this form, I consent to the agency’s use and disclosure of protected health information about me for treatment, payment, and health care operations. I understand that I may revoke this consent in writing, except to the extent that the agency has already taken action based upon my prior consent.

Confidentiality

Your confidentiality is important. Federal (42 CFR, Part 2 for substance abuse related issues) and State laws protect the release of confidential information. No information can be disclosed to anyone outside of this practice without your written consent except in certain cases, such as the following, where counselors are mandated to report to appropriate agencies or individuals:

1.) Vermont law requires counselor to report actual or suspected cases of abuse involving children and vulnerable persons including the disabled and elderly.
2.) Counselors will take appropriate actions if you are in imminent danger to yourself or others.
3.) Counselors reserve the right to disclose to appropriate personnel credible threats of violence or harm made against identifiable victims, including persons and property.
4.) On rare occasions, counselors may be required to comply with a court-ordered subpoena to testify or provide records.
5.) Counselors may need to convey medical information about you in an emergency situation.

In addition, counselors may need to relay diagnostic and treatment plan information to your insurance company in order to obtain authorization for services, payment and to comply with regulatory health care operations such as quality improvement activities.

Minors

We will discuss with you what kind of information you would like us to share with your parents. In certain cases, you may not need to have parental consent for mental health or addiction services. We will need to determine this on an individual basis, and we urge you to discuss this issue with your counselor or therapist. In certain instances, we may need to relay information to your parents in cases of emergencies (medical emergencies, suicidal issues or attempts, drug/alcohol overdoses, for example).

Client Rights and Responsibilities

As a client of Riverstone Counseling at Spectrum, you have the following rights. Additionally, there is a list of your responsibilities that will help us to provide you with the best care we can.

As a Riverstone client you have the right:

1.) To basic civil and legal rights as a person served by Riverstone and as a citizen or resident of the United States.
2.) To have these policies communicated in a way you understand.
3.) To communicate in your primary language and primary mode of communication.
4.) To ask questions about anything not understood.
5.) To choose your counselor and to have access to the services you need, including services to ensure continuity of care.
6.) To be given a Riverstone Counseling Program Description as part of Riverstone’s informed consent and orientation policy and procedure. This will describe the treatment approach and the admission criteria used by the program.
7.) To refuse counseling, and appropriate referrals if Riverstone cannot meet your needs.
8.) To receive treatment according to commonly accepted professional standards regardless of race, creed, gender, age, nation of origin, political belief, disability, sexual orientation, or infectious disease.
9.) To be treated with respect and dignity at all times under all circumstances.
10.) To receive services in a manner responsive to your unique characteristics, needs, and abilities.
11.) To request reasonable accommodation for special needs.
12.) To be notified as far in advance as possible should an appointment need to be rescheduled.
13.) To be informed about your condition and progress, and to be provided with information to facilitate decision making.
14.) To participate in all aspects of your treatment plan, and all decisions regarding your counseling experience.
15.) To not be subjected to experimental research without your express and informed consent and/or the consent of your legal guardian. If consent is given research will adhere to all Riverstone, professional and governmental regulations. You and/or your legal guardian may withdraw consent at any time.

16.) To voice and/or file a complaint or grievance, request re-assignment to a different provider, to recommend changes in policies or exercise of legal rights without fear of retaliation or punishment, and to receive due process with regard to the complaint/grievance. Attached you will find a copy of the Riverstone Policy Regarding Grievance and Appeals.

17.) To receive support in accessing and referral to self-help groups, advocacy services, legal services, and other community services as appropriate.

18.) To access and review your treatment and financial records as per the federal guidelines put forth by HIPAA (Health Information Portability and Accountability Act). In addition, you will be informed of your rights in treatment as part of the informed consent procedures of the Riverstone Counseling Program.

19.) To have your medical record handled in a professional and confidential manner. Written and electronic records will be kept confidential, except for disclosure as required by law.

20.) To stop services at any time.

As a client of Riverstone Counseling, it is your responsibility to:

1.) Be on time for all scheduled appointments. Call ahead if you will be late.
2.) Cancel appointments at least 24 hours in advance if needed.
3.) Be courteous to all other clients and staff.
4.) Discuss your symptoms and problems with your counselor as completely and honestly as possible.
5.) Participate fully in decisions regarding the services you receive.
6.) Follow through on treatment recommendations, your treatment plan, and complete all take-home practice exercises.
7.) Ask questions about any aspect of your treatment that you do not understand or agree with.
8.) Pay for services as you receive them (as applicable).
9.) Attend all appointments drug and alcohol free.
10.) Not carry weapons on Riverstone Counseling at Spectrum’s property.
11.) Inform your counselor should you choose to stop treatment.

Office of Professional Regulation

The Office of Professional Regulation provides Vermont licenses, certifications, and registrations for over 37,000 practitioners and businesses. Thirty-nine professions and occupations are supported and managed by this office. A list of professions regulated can be found at http://voprofessional.org

Each profession or occupation is governed by laws defining professional conduct. Consumers who have inquiries or wish to obtain a form to register a complaint may do so by calling (802) 828-2363 or by writing the Secretary of State’s Office of Professional Regulation at 26 Terrace St., Montpelier, VT 05602-2972.

Upon receipt of a complaint, an administrative review determines if the issues raised are covered by the applicable professional conduct statute. If so, a committee is assigned to investigate, collect information, and recommend action or closure to the appropriate governing body.

All complaint investigations are confidential. Should the investigation conclude with a decision for disciplinary action against a professional’s license and ability to practice, the name of the license holder will then be made public.

Disciplinary action through the Office of Professional Regulation ranges from reprimand to revocation of license but does not involve financial compensation or restoration, with some exceptions. Financial restoration can be pursued through private attorneys, small claims courts, or other available remedies.

The Vermont Statutes Online
Title 3: Executive
Chapter 5: SECRETARY OF STATE
3 V.S.A. § 129a. Unprofessional conduct

§ 129a. Unprofessional conduct
(a) In addition to any other provision of law, the following conduct by a licensee constitutes unprofessional conduct. When that conduct is by an applicant or person who later becomes an applicant, it may constitute grounds for denial of a license or other disciplinary action. Any one of the following items, or any combination of items, whether or not the conduct at issue was committed within or outside the state, shall constitute unprofessional conduct:
(1) Fraudulent or deceptive procurement or use of a license.
(2) Advertising that is intended or has a tendency to deceive.
(3) Failing to comply with provisions of federal or state statutes or rules governing the practice of the profession.
(4) Failing to comply with an order of the board or violating any term or condition of a license restricted by the board.
(5) Practicing the profession when medically or psychologically unfit to do so.
(6) Delegating professional responsibilities to a person whom the licensed professional knows, or has reason to know, is not qualified by training, experience, education or licensing credentials to perform them.
(7) Willfully making or filing false reports or records in the practice of the profession; willfully impeding or obstructing the proper making or filing of reports or records; or failing to file the proper reports or records.
(8) Failing to make available promptly to a person using professional health care services, that person's representative, succeeding health care professionals or institutions, upon written request and direction of the person using professional health care services, copies of that person's records in the possession or under the control of the licensed practitioner.
(9) Failing to retain client records for a period of seven years, unless laws specific to the profession allow for a shorter retention period. When other laws or agency rules require retention for a longer period of time, the longer retention period shall apply.
(10) Conviction of a crime related to the practice of the profession or conviction of a felony, whether or not related to the practice of the profession.
(11) Failing to report to the office a conviction of any felony or any offense related to the practice of the profession in a Vermont district court, a Vermont superior court, a federal court, or a court outside Vermont within 30 days.
(12) Exercising undue influence on or taking improper advantage of a person using professional services, or promoting the sale of services or goods in a manner which exploits a person for the financial gain of the practitioner or a third party.
(13) Performing treatments or providing services which the licensee is not qualified to perform or which are beyond the scope of the licensee's education, training, capabilities, experience, or scope of practice.
(14) Failing to report to the office within 30 days a change of name or address.
(15) Failing to exercise independent professional judgment in the performance of licensed activities when that judgment is necessary to avoid action repugnant to the obligations of the profession.
(b) Failure to practice competently by reason of any cause on a single occasion or on multiple occasions may constitute unprofessional conduct, whether actual injury to a client, patient, or customer has occurred. Failure to practice competently includes:
(1) Performance of unsafe or unacceptable patient or client care; or
(2) Failure to conform to the essential standards of acceptable and prevailing practice.
(c) The burden of proof in a disciplinary action shall be on the state to show by a preponderance of the evidence that the person has engaged in unprofessional conduct.
(d) After hearing, and upon a finding of unprofessional conduct, a board or an administrative law officer may take disciplinary action against a licensee or applicant, including imposing an administrative penalty not to exceed $1,000.00 for each unprofessional conduct violation. Any money received under this subsection shall be deposited in the professional regulatory fee fund established in section 124 of this title for the purpose of providing education and training for board members and advisor appointees. The director shall detail in the annual report receipts and expenses from money received under this subsection.
(e) In the case where a standard of unprofessional conduct as set forth in this section conflicts with a standard set forth in a specific board’s statute or rule, the standard that is most protective of the public shall govern. (Added 1997, No. 40, § 5; amended 2001, No. 151 (Adj. Sess.), § 2; eff. June 27, 2002; 2003, No. 60, § 2; 2005, No. 27, § 5; 2005, No. 146 (Adj. Sess.), § 4; 2009, No. 35, § 2.)

Title 26: Professions and Occupations
Chapter 65: Clinical Mental Health Counselors
3 V.S.A. § 129a. Unprofessional conduct

§ 3271. Unprofessional conduct
(a) Unprofessional conduct means the following conduct and conduct set forth in 3 V.S.A. § 129a.
(1) Using dishonest or misleading advertising;
(2) Misusing a title in professional activity;
(3) Conduct which evidences unfitness to practice clinical mental health counseling;
(4) Engaging in any sexual conduct with a client, or with the immediate family member of a client, with whom the licensee has had a professional relationship within the previous five years;
(5) Harassing, intimidating, or abusing a client;
(6) Entering into an additional relationship with a client, supervisee, research participant, or student that might impair the licensed clinical mental health counselor’s objectivity or otherwise interfere with the clinical mental health counselor’s professional obligations;
(7) Independently practicing outside or beyond a clinical mental health counselor's area of training, experience, or competence without appropriate supervision.
(b) After hearing, and upon a finding of unprofessional conduct, the board may take disciplinary action against a licensed clinical mental health counselor or applicant. (Added 1987, No. 245 (Adj. Sess.), § 1; amended 1993, No. 98, § 17; 1993, No. 222 (Adj. Sess.), § 10; 1997, No. 40, § 57; 1997, No. 145 (Adj. Sess.), § 53; 2007, No. 29, § 45.)

Title 26: Professions and Occupations
Chapter 61: CLINICAL SOCIAL WORKERS
26 V.S.A. § 3210. Unprofessional conduct

§ 3210. Unprofessional conduct
(a) The following conduct and the conduct set forth in section 129a of Title 3 by a licensed social worker constitutes unprofessional conduct. When that conduct is by an applicant or a person who later becomes an applicant, it may constitute grounds for denial of a license:
(1) Failing to use a correct title in professional activity;
(2) conduct which evidences unfitness to practice clinical social work;
(3) engaging in any sexual conduct with a client, or with the immediate family member of a client, with whom the licensee has had a professional relationship within the previous two years;
(4) harassing, intimidating, or abusing a client or patient;
(5) practicing outside or beyond a clinical social worker's area of training, experience or competence without appropriate supervision;
(6) engaging in conflicts of interest that interfere with the exercise of the clinical social worker's professional discretion and impartial judgment;
(7) failing to inform a client when a real or potential conflict of interest arises and to take reasonable steps to resolve the issue in a manner that makes the client's interest primary and protects the client's interest to the greatest extent possible;
(8) taking unfair advantage of any professional relationship or exploiting others to further the clinical social worker's personal, religious, political or business interests;
(9) engaging in dual or multiple relationships with a client or former client in which there is a risk of exploitation or potential harm to the client;
(10) failing to take steps to protect a client and to set clear, appropriate and culturally sensitive boundaries, in instances where dual or multiple relationships are unavoidable;
(11) failing to clarify with all parties which individuals will be considered clients and the nature of the clinical social worker's professional obligations to the various individuals who are receiving services, when a clinical social worker provides services to two or more people who have a spousal, familial or other relationship with each other;
(12) failing to clarify the clinical social worker's role with the parties involved and to take appropriate action to minimize any conflicts of interest when the clinical social worker anticipates a conflict of interest among the individuals receiving services or anticipates having to perform in conflicting roles such as testifying in a child custody dispute or divorce proceedings involving clients.

Chapter 07B: ROSTER of PSYCHOTHERAPISTS WHO ARE NONLICENSED and NONCERTIFIED

26 VSA § 3210. Unprofessional conduct

§ 4093. Unprofessional conduct
(a) Unprofessional conduct means the following conduct and conduct set forth in 3 VSA § 129a:
(1) Providing fraudulent or deceptive information in an application for entry on the roster.
(2) Conviction of a crime that evinces an unfitness to practice psychotherapy.
(3) Unauthorized use of a protected title in professional activity.
(4) Conduct which evidences moral unfitness to practice psychotherapy.
(5) Engaging in any sexual conduct with a client, or with the immediate family member of a client, with whom the psychotherapist has had a professional relationship within the previous two years.
(6) Harassing, intimidating, or abusing a client.
(7) Entering into an additional relationship with a client, supervisee, research participant, or student that might impair the psychotherapist's objectivity or otherwise interfere with his or her professional obligations.
(8) Practicing outside or beyond a psychotherapist's area of training, experience, or competence without appropriate supervision.
(b) After hearing, and upon a finding of unprofessional conduct, the board may take disciplinary action against a rostered psychotherapist or an applicant. (Added 1993, No. 222 (Adj. Sess.). § 17; amended 1997, No. 40, § 71; 1997, No. 145 (Adj. Sess.), § 61; 1999, No. 52, § 37.)

Program Description 2017
Telehealth Policy

I understand that “telehealth” includes the practice of health care delivery, assessment, diagnosis, consultation, treatment, transfer of medical data, and psychoeducation using interactive audio, video, or data communications.

I understand the following with respect to telehealth:

- I understand that Riverstone Counseling uses a HIPPA encrypted platform to provide telehealth services. These electronic systems used will incorporate network and software security protocols to protect the privacy and security of health information and imaging data, and will include measures to safeguard the data to ensure its integrity against intentional or unintentional corruption.

- I will need access to, and familiarity with, the appropriate technology in order to participate in the service provided.

- I understand that I have the right to withdraw consent at any time without affecting my right to future care, services, or program benefits to which I would otherwise be entitled.

- I understand that there are risks, benefits, and consequences associated with telehealth, including but not limited to: disruption of transmission by technology failures, interruption and/or breaches of confidentiality by unauthorized persons, and/or limited ability to respond to emergencies. This service is provided by technology (including but not limited to video, phone, and email) and may not involve direct face to face communication. There are benefits and limitations to this service.

- I understand that there will be no recording of any of the online sessions by either party with prior consent. All information disclosed within sessions and written records pertaining to those sessions are confidential and may not be disclosed to anyone without written authorization, except where the disclosure is permitted and/or required by law.

- My counselor and I will regularly reassess the appropriateness of continuing to deliver services to me through the use of the technologies we have agreed upon today, and modify our plan as needed.

- I understand that the privacy laws that protect the confidentiality of my protected health information (PHI) also apply to telehealth unless an exception to confidentiality applies (i.e. mandatory reporting of child, elder, or vulnerable adult abuse; danger to self or others).

- I understand that if I am having suicidal or homicidal thoughts, actively experiencing psychotic symptoms or experiencing a mental health crisis that cannot be resolved remotely, it may be determined that telehealth services are not appropriate and a higher level of care is required.

- I understand that during a telehealth session, we could encounter technical difficulties resulting in service interruptions. If this occurs, end and restart the session. If we are unable to reconnect within ten minutes, I will reach out by phone or email to my counselor and reschedule the session. Prior to telehealth services, I will provide my counselor with the current contact information if a service interruption occurs.
• I understand that my counselor may need to contact my emergency contact and/or appropriate authorities in case of an emergency. Emergency Protocols dictates that your counselor needs to know your location in case of an emergency. You agree to inform your counselor of your location at the beginning of each session. I also understand I will need to provide a contact person who my counselor may contact on my behalf in a life-threatening emergency only. This person will only be contacted to go to your location or take you to the hospital in the event of an emergency.
Riverstone Counseling
Spectrum Youth and Family Services
Policy Regarding Grievances and Appeals

Riverstone Counseling, in an effort to be compliant with the Vermont Agency of Human Services (AHS) Department of Mental Health, and Department of Health’s Division of Alcohol and Drug Abuse Programs sets out this process to receive complaints, appeals and grievances from individuals we serve, and their authorized representatives.

- Spectrum has appointed Tammy Guilbault, the Grievance & Privacy Officer, to receive and be responsible for grievances including, but not limited to, the quality of care or service provided, aspects of interpersonal relationships such as rudeness of a provider or employee, or failure to respect the beneficiary’s basic rights.

- All complaints received by us will be directed to this individual for proper processing and handling.

Our grievance policy:

1. Complaints, grievances, and/or appeals may be filed verbally or in writing consistent with policies and procedures provided by the Agency of Human Services;
2. The complaint, grievance or appeal will be immediately forwarded to the Grievance Officer and will be logged into the appropriate database;
3. Written acknowledgment of the grievance will be mailed to the complainant within 5 days of receipt of the complaint;
4. Beneficiaries or their designated representatives may withdraw their grievance orally or in writing at any time. If the grievance is withdrawn orally, the withdrawal will be acknowledged by Spectrum in writing within 5 calendar days;
5. The Grievance Officer will review the complaint, grievance, or appeal for resolution;
6. All grievances must be addressed within 90 days of receipt;
7. The Grievance Officer will report results of the investigation to the appropriate individuals including the individual complainant;
8. The Grievance Officer will periodically submit a summary report of activity to the designated persons (for example, Board of Directors, the Executive Committee, the Performance and Compliance Committee).

Spectrum will not take any retaliatory action against any individual who files a complaint with the agency or AHS.

Additional information is available at the following websites:

**Department of Mental Health** (802) 828-3824
http://mentalhealth.vermont.gov/about/grievance

**Vermont Department of Health**
**Division of Alcohol and Drug Abuse Programs** (802) 651-1550

Grievance Policy December 2019
TOBACCO-FREE POLICY

Because we recognize the hazards caused by exposure to environmental tobacco smoke, as well as the life-threatening diseases linked to the use of all forms of tobacco, it shall be the policy of Riverstone Counseling at Spectrum Youth & Family Services to provide a tobacco-free environment for all employees and visitors. This policy covers the smoking of any tobacco product and the use of oral tobacco products or “spit” tobacco, and it applies to both employees and non-employee visitors of Riverstone.

Definition:

1.) No use of tobacco products will be allowed within the facilities of Riverstone Counseling at Spectrum at any time.
   - The decision to not provide designated smoking areas outside the building will be at the discretion of management or other decision-making body.
   - No use of tobacco products is permitted within the facilities or on the property of Riverstone at Spectrum Youth & Family Services at any time.

2.) No tobacco use in any company vehicle.
   - There will be no use of any form of tobacco in Riverstone at Spectrum vehicles at any time.
   - There will be no tobacco use in personal vehicles when transporting people on Riverstone-authorized business.

3.) Breaks
   - Supervisors will discuss the issue of taking breaks with their staff, both smokers and non-smokers.
   - Together they will develop effective solutions that do not interfere with the productivity of the staff.

Procedure:

1.) Employees will be informed of this policy through signs posted in Riverstone facilities and vehicles, newsletters, inserts in pay envelopes, the policy manual, e-mail, and/or orientation and training provided by their supervisors.

2.) Visitors will be informed of this policy through signs, and it will be explained by their hosts.

3.) Riverstone staff can access the Employee Assistance Program (EAP) who can help employees who want to quit tobacco by helping them access recommended cessation programs and materials. More detailed information from Human Resources regarding EAP is available.
### Adolescent Criteria: Crosswalk of Levels 0.5 through IV

<table>
<thead>
<tr>
<th>Criteria Dimensions</th>
<th>Level 0.5 Early Intervention</th>
<th>Level I Outpatient Treatment</th>
<th>Levels of Service</th>
<th>Level II Intensive Outpatient Treatment</th>
<th>Level III Medically-Monitored Intensive Inpatient Treatment</th>
<th>Level IV Medically-Managed Intensive Inpatient Treatment</th>
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<tbody>
<tr>
<td>DIMENSION 1: Acute Intoxication and/or Withdrawal Potential</td>
<td>No withdrawal risk</td>
<td>No withdrawal risk</td>
<td>Manifests no overt symptoms of withdrawal risk</td>
<td>Risk of withdrawal syndrome is present but manageable in Level III</td>
<td>Severe withdrawal risk</td>
<td></td>
</tr>
<tr>
<td>DIMENSION 2: Biomedical Conditions and Complications</td>
<td>None or very stable</td>
<td>None or very stable</td>
<td>None or, if present, does not distract from addiction treatment; manageable at Level II</td>
<td>Require medical monitoring but not intensive treatment</td>
<td>Requires 24-hour medical and nursing care</td>
<td></td>
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<tr>
<td>DIMENSION 3: Emotional/Behavioral Conditions and Complications</td>
<td>None or very stable</td>
<td>None or manageable in an outpatient structured environment</td>
<td>Mild severity, with the potential to distract from recovery efforts</td>
<td>Moderate severity; requires a 24-hour structured setting</td>
<td>Severe problems require 24-hour psychiatric care with concomitant addiction treatment</td>
<td></td>
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<tr>
<td>DIMENSION 4: Treatment Acceptance/Resistance</td>
<td>Willing to understand how current use may affect personal goals</td>
<td>Willing to cooperate but needs motivating and monitoring strategies</td>
<td>Resistance high enough to require structured program but not so high as to render outpatient treatment ineffective</td>
<td>Resistance high despite negative consequences; needs intensive motivating strategies in a 24-hour setting</td>
<td>Problems in this dimension do not qualify patient for Level IV treatment</td>
<td></td>
</tr>
<tr>
<td>DIMENSION 5: Relapse/Continued Use Potential</td>
<td>Needs understanding of, or skills to change, current use patterns</td>
<td>Able to maintain abstinence and recovery goals with minimal support</td>
<td>Intensification of addiction symptoms; high likelihood of relapse without close monitoring and support</td>
<td>Unable to control use despite active participation in less intensive care; needs 24-hour structure</td>
<td>Problems in this dimension do not qualify patient for Level IV treatment</td>
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<tr>
<td>DIMENSION 6: Recovery Environment</td>
<td>Social support system or significant others increase risk of personal conflict about alcohol/other drug use</td>
<td>Supportive recovery environment and/or patient has skills to cope</td>
<td>Environment unsupportive but, with structure or support, patient can cope</td>
<td>Environment dangerous for recovery, necessitation removal from the environment; logistical impediments to outpatient treatment</td>
<td>Problems in this dimension do not qualify patient for Level IV treatment</td>
<td></td>
</tr>
</tbody>
</table>

This overview of the Adolescent Admission Criteria is an approximate summary to illustrate the principal concepts and structure of the criteria.