

THE
University of Vermont
MEDICAL CENTER
DayOne Program

Welcome to DayOne,

DayOne is the adult substance use disorder program at The University of Vermont Medical Center, a division of Psychiatry Services. We have a two-part process to enter our program. The first part is completing the necessary intake paperwork, signing releases of information, and reviewing the participation Agreement and patient Rights. Our Support Specialist at the front desk will then provide an evaluation date to meet with a Licensed Clinician.

The second part is an individual session with a Licensed Clinician to review your intake paperwork, obtain additional information, and then assist in determining the appropriate level of care for you. Upon agreeing to receive DayOne services, additional paperwork will be signed as well as signing the Participation Agreement. The clinician will then assist in developing an Individualized Treatment Plan with you to address your particular needs.

DayOne offers a broad range of services from two Intensive Outpatient Programs that meet three times a week for three hour sessions, to weekly group counseling sessions and individual sessions. With a concentration on group therapy we utilize emotion regulation, mindfulness, group psychotherapy, motivational enhancement, Cognitive Behavior Therapy, relapse prevention, coping & life skills training and other evidence-based solution focused techniques. Each group meets for a minimum of 12 sessions. (Individuals seeking driver license reinstatement, DayOne requires a minimum of three months continuous total abstinence from all non-prescribed mood altering substances.)

We also provide the following; intergraded services with primary care medicine, medical mental health assessment with onsite psychiatric services, psychopharmacological evaluation and monitoring, random urine screens, consultation for integrating mental health services, assessment for detoxification, referral services to residential services as needed, collaboration with Seneca Center and/or Mood and Anxiety Disorders Clinic at The University of Vermont Medical Center, etc.

If we can be of further help in any way, please let us know.

The DayOne Staff

DayOne Program
1 So Prospect St. Burlington, VT 05401
(802)847-3333
Fax: (802)847-3326

Participation Agreement

1. DayOne is an outpatient substance abuse treatment program designed to assist clients in achieving and maintain abstinence from mood-altering substances.
2. DayOne's primary method for assisting clients with substance use problems is through psychosocial therapies. Group and individual counseling are available. Counseling can vary in frequency from once per week to as many as five times per week. Family or significant other involvement is encouraged.
3. DayOne may use pharmacotherapies (medications) when indicated, as adjuncts to counseling to support and maintain abstinence.
4. DayOne clients are asked to accept the goal of abstinence from all alcohol, non-prescribed medication, or illicit substances for the duration of the treatment. Urinalysis and the use of breathalyzers are a part of the treatment process and all clients will be asked to submit to these tests randomly. I understand that alcohol and drug screening (urine/breath) are sometimes used in conjunction with the other therapies to help achieve and maintain abstinence. My initials _____ indicate that I am committed to avoiding all substance use/abuse, that I agree that I will comply with urine screens to verify my self-report.
5. If a client presents as impaired and has driven to the UVM Medical Center, S Prospect, he/she will be asked to surrender the car keys and arrangements will be made for transportation. This is not intended as a punishment but is meant to help identify situations in which a participant may need additional support to manage substance use. If a client refuses to surrender his/her keys, staff are obligated to call Security to report this incident. However, a client's name and relationship to DayOne will not be disclosed in order to maintain confidentiality.
6. Participants who demonstrate a pattern of alcohol and/or drug use during treatment may be referred to alternative treatment in addition to or in place of DayOne. This may include detoxification and/or residential services. If you find that you are having urges to use substances, please let a staff member know so that we might try to help you find more effective coping strategies.
7. Treatment plans that outline the level of counseling and other adjuncts (medications or drug screening) are determined through an initial assessment process. This plan should represent collaboration between the therapist and client. I agree to participate in the therapeutic program in compliance with the treatment plan. My initials _____ indicates my agreement.
8. I understand that I am expected to attend sessions as scheduled. I will be on time for all scheduled sessions. Please call us (847-3333) before 8:30 if you are going to be late or absent for the day. Consistent absences may be grounds for discharge from the program. Lack of attendance may be an indication that the program is not right for you at this time.
9. I understand that I am expected to respect the confidentiality of other program participants. It is extremely difficult to talk in groups if there is any concern that information may be shared outside of the group setting. You are encouraged to be sharing the work you are doing here with your support

network, however, please do not repeat anything that has been said regarding anyone else in the program. My initials _____ indicates that I commit to maintaining the confidentiality of all group members.

10. We ask that group members avoid forming sexual relationships with each other, as these relationships do not allow the individuals involved to focus on their own treatment and recovery processes. My initials _____ indicate that I commit that I will not form sexual relationships with any group members.
11. Please be respectful of each other's limits. You are encouraged to openly express your feelings. Physically or verbally aggressive behavior is not accepted. Clients are not allowed to damage/destroy property within DayOne property. Weapons of any kind are not permitted at DayOne. In addition, the sale or exchange of drugs will not be tolerated. These behaviors are grounds for termination from the program and Security will be notified. My initials _____ indicate that I agree to act safely and respectfully while in treatment.
12. Because a person has the potential to be a safety risk when they are experiencing a psychiatric crisis, if it is our assessment that you are at risk of lethally hurting yourself or another person, the staff is legally mandated to report that to the proper persons, with or without your permission. Additionally, if the staff believes that a child or an elder, is currently being abused or neglected, we are also mandated to make a report of abuse or suspected abuse.
13. There is no smoking anywhere in the UVM Medical Center, S Prospect or on the grounds of UVM Medical Center. If you need to smoke, you must leave the building and cross the parking lot onto the grass in order to be off the grounds. Please reserve smoking for break time so as to not interfere with the group.
14. I am expected to pay for the DayOne services via insurance or private funds. A sliding scale and various payment plans are available. No client will be refused services due to inability to pay.
15. We may contact you after you leave the program for a follow-up survey. Do we have permission to contact you? My initials _____ Yes _____ No _____

✓ I have read and fully understand the requirement of this treatment contract and agree to them.

Client Signature/Date/Time

Witness/Date/Time

Client received Participation Agreement.

My initials _____

☐ YES

☐ NO

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