

**Georgia
Association
Of
Recovery
Residences, Inc.**

Recovery Residence Standards
For Programs Offering Residential Support
and/or Treatment of Addiction

Purpose of Standards:

To ensure integrity of program services and quality and environment of care, for both residential addiction treatment programs and other residential recovery programs offering supportive services to addicts and alcoholics in need. GARR recognizes that recovery takes time and that residential support has many facets. From residential treatment models to long-term recovery homes, GARR affirms the necessity of a continuum of care to adequately address the total needs of the addicted community.

Property:

The recovery residence chemical dependence program shall meet all local requirements promulgated by the fire and building departments, zoning authorities, city or county ordinances, state departments of public health, welfare and licensure requirements and federal regulations to insure the health and safety of its residents and staff population.

The physical structure shall be such as to maintain a home-like atmosphere at all times. The program shall create a residential environment.

(Preferably) the recovery residence should be a community-based, free-standing structure, with sufficient space to comfortably house an appropriate number of persons. (Full consideration will be given to the variety of structures, community location, etc., and the inherent potential for bed capacity, given facility size, licensure and rule applicable.)

Living space for each client must include reasonable storage, comfortable living area, and separate sleeping space.

Administration and Management:

The recommended structure for operating a recovery residence program is through a non-profit corporation with an elected Board of Directors that is representative of the community. This structure assures involvement by the local community and the ability to adjust to the changing needs of the community. The elected Board of Directors shall be the ultimate policy-making body for the corporation and shall adopt such by-laws and committees to appropriately meet its legal and implied responsibilities.

The Board of Directors shall hire an Executive Director or chief administrator who shall have full responsibility for implementing the policies established by the Board.

The duties and responsibilities of the Executive Director shall be clearly stated in a written job description and/or contract. The Director shall be the chief administrator of the corporation's financial matters and records management. The recovery residence shall maintain an accounting system adequate to fully document its financial transactions.

Adequate and secure records on all residents and personnel must be kept. Records and documentation of adequate insurance coverage (personnel life/health, property, etc.) must be in force at all times. IRS letters of exemption, other federal, state and local exemption documents must be on file or posted as required.

PERSONNEL:

Minimum standards for staff in recovery residence addiction programs are personal qualities of understanding, dedication, empathy, and sensitivity to those with alcoholism and other disorders; the ability to perform duties and responsibilities of the position both physically and mentally without harm to self or others; moral and social character which is above reproach.

Confidentiality of records must be maintained in strict accordance with federal, state and local regulations. Records showing evidence of staff salaries, benefits and other compensations must be on file; personnel files are to be kept confidential and must indicate evaluations/wage adjustments, and other pertinent information with regard to Personnel Policies.

The corporation must adhere to the standards and requirements set forth under the Fair Labor Standards Act. The Board of Directors should encourage and financially underwrite education and in-service training for personnel. The recovering alcoholic or drug addicted staff person must have an appropriate time of continuous recovery for the position held. For example, all clinical personnel must have a minimum of two continuous years of recovery.

PROGRAM:

The principles and philosophy of Alcoholics Anonymous are the primary modalities of treatment and support in the recovery residence programming; other self-help groups and modalities may also be used.

In-house rules and regulations relative to the health and safety of the residents and staff shall be in written form and prominently displayed. Each resident shall be given a personal copy upon admission.

A primary rule shall state the program philosophy of no drinking and no drug taking as the condition for acceptance. A written admissions procedure must be on file. Upon admission, residents have the right to know the nature of, intent and process by which the program operates.

Termination and re-admission procedures must be in writing and explained to the resident. Each re-admission must be considered on the basis of its own merit.

Each resident should be given a written statement of his/her rights, to include the following: an explanation of the cost of care, how much of that cost is charged to the client, what fees are paid by other resources on their behalf, and an explanation of what these payments cover; a high moral climate within the home; competent staff who are free from mood/mind altering drugs; treatment and evaluation according to individual needs. The program will make every full and reasonable effort to provide a recovering peer group; a physically safe home; free from hazards, including communicable diseases; physical, psychological, spiritual resources (examination, testing, evaluation, etc.) if requested; an orientation to the recovery residence program and practices and what is expected of a resident.

The recovery residence is a vital part of the total continuum of care which may include medical assessment and treatment, 12 Step program, education about the disease or addiction, group and individual counseling, integration back into society and aftercare. The recovery residence must make efforts to cooperate with community agencies, resources, governmental bodies, etc., in the provision of resident care services.

The recovery residence program shall have the responsibility for the establishment of liaison with other community resources. Counseling and program elements shall place emphasis on the disease concept, learning to use available resources in support of recovery, dealing with family issues, and developing a productive drug-free lifestyle.

The recovery residence has the responsibility to make appropriate referrals for any resident to other resources, should it be deemed necessary for any health reason. The recovery residence has the responsibility to intercede in any crisis situation that may arise, and to make the appropriate type of referral or termination of services. Full control over the programming, admissions criteria/qualifications, and services rendered must remain with the recovery residence.

STANDARDS COMPLIANCE FACT SHEET

Name of Program:

Name of Corporation:

Program Mailing Address:

Administrator and/or Executive Director:

Telephone:

Program Data:

Total Bed Capacity:

Population served (men, women, women with small children, etc.):

Socioeconomic target group:

Age group served (children, adolescents, adults):

Total full-time staff members:

Total volunteers:

Total other staff:

Program location (rural, reservation, small town, residential, suburban, urban):

Brief description of area(s) in which program is located:

Team Member:

PLEASE RATE EACH QUESTION ON THE FOLLOWING PAGES. MAKE NOTATIONS FOR IMPROVEMENTS. MAKE RECOMMENDATIONS FOR COMPLIANCE WHEN DEEMED NECESSARY. PLACE NAME OF FACILITY ON EACH EVALUATION PAGE.

FULL CONTROL OVER THE PROGRAMMING, ADMISSIONS CRITERIA/QUALIFICATIONS, AND SERVICES RENDERED MUST REMAIN WITH THE RECOVERY RESIDENCE.

Based on level and description of care, some compliance items may not apply.

NAME OF PROGRAM:

PROPERTY EVALUATION

1. Is the home appropriately zoned?	5 4 3 2 1 0 N/A
2. Are State licenses, certificates of compliance and other required documents visible for public view?	5 4 3 2 1 0 N/A
3. Are the facilities well maintained?	5 4 3 2 1 0 N/A
4. Is the home located near public transportation, where available, and other commercial outlets needed by the residents?	5 4 3 2 1 0 N/A
5. Does the home meet local codes?	5 4 3 2 1 0 N/A
6. Is the house so furnished and physically arranged as to present a home-like atmosphere?	5 4 3 2 1 0 N/A
7. Are bedrooms clean, comfortable and functionally arranged?	5 4 3 2 1 0 N/A
8. Are washroom facilities and laundry areas appropriate to resident needs?	5 4 3 2 1 0 N/A
9. Is adequate space available for family-type activities, group meetings and gatherings?	5 4 3 2 1 0 N/A
10. Are there adequate staff offices and private counseling areas?	5 4 3 2 1 0 N/A
11. Are there appropriate kitchen and dining room areas?	5 4 3 2 1 0 N/A
12. Does the home maintain high standards of cleanliness and sanitation throughout the interior and exterior?	5 4 3 2 1 0 N/A
13. Is there ample evidence that the home is safe and meets health/fire conditions?	5 4 3 2 1 0 N/A
14. Does living environment comply with minimum DHR standards?	5 4 3 2 1 0 N/A

COMPLIANCE TEAM:

Over-all rating on Property Standards compliance: 5 4 3 2 1 0 N/A

Compliance Team suggestions for improvements:

Compliance Team recommendation in order to met compliance:

NAME OF PROGRAM:

ADMINISTRATION AND MANAGEMENT EVALUATION:

1. Has the corporation achieved tax exempt status with the IRS?	5 4 3 2 1 0 N/A
2. Do the by-laws provide for regular elections of a Board of Directors?	5 4 3 2 1 0 N/A
3. Are the by-laws reviewed annually?	5 4 3 2 1 0 N/A
4. Does the Board set policy for the corporation?	5 4 3 2 1 0 N/A
5. Has the Board set forth an organization structure?	5 4 3 2 1 0 N/A
6. Does the Board exercise final authority for the business of the corporation?	5 4 3 2 1 0 N/A
7. Are the personnel policies of the corporation reviewed annually?	5 4 3 2 1 0 N/A
8. Have the Director's responsibilities and authorities been clearly defined in a written contract and/or personnel policies?	5 4 3 2 1 0 N/A
9. Is there an annual budget approved by the Board?	5 4 3 2 1 0 N/A
10. Is there evidence that the Board is actively involved in maintaining quality programming services to the community?	5 4 3 2 1 0 N/A
11. Is there a standard system of records keeping for clients and personnel?	5 4 3 2 1 0 N/A
12. Do client records and treatment plans reflect sources of referral, description of problems and continuing staff evaluation of programs for each resident?	5 4 3 2 1 0 N/A
13. Do client records contain adequate and legal releases of information from former treatment programs/hospitals?	5 4 3 2 1 0 N/A
14. Is there evidence that adequate statistical summaries are prepared on resident (age, sex, length of stay, etc.)?	5 4 3 2 1 0 N/A
15. Are records and statistical data kept on income and expenditures?	5 4 3 2 1 0 N/A
16. Are fiscal procedures conducive to responsible performance and accountability?	5 4 3 2 1 0 N/A
17. Have the books of the previous fiscal year been audited, reviewed or a compilation made by a CPA?	5 4 3 2 1 0 N/A
18. Is there a written policy for complaints/grievances by residents? Personnel? Public?	5 4 3 2 1 0 N/A
19. Does the corporation have an Affirmative Action Policy?	5 4 3 2 1 0 N/A
20. Is there evidence that the corporation is in compliance with existing federal and state human rights, civil rights, etc., laws?	5 4 3 2 1 0 N/A

COMPLIANCE TEAM:

Over-all rating on Administration/Management Standards

Compliance:

5 4 3 2 1 0

Compliance Team suggestions for improvements:

Compliance Team recommendations in order to meet compliance:

NAME OF PROGRAM:

PERSONNEL EVALUATION:

1. Does the staff exhibit the capacity and willingness to enter into warm, supportive relationships with each other?	5 4 3 2 1 0 N/A
2. Does the staff show understanding of the means by which a resident establishes a drug-free lifestyle?	5 4 3 2 1 0 N/A
3. Has the staff developed relationships and procedures for handling emergency medical and/or behavioral situations?	5 4 3 2 1 0 N/A
4. Does the admission policy directly involve the staff in evaluation of potential residents?	5 4 3 2 1 0 N/A
5. Does the home have staff commensurate with the needs of the home and the number of residents using the home?	5 4 3 2 1 0 N/A
6. Does the staff demonstrate understanding of the disease concept of addiction and expectations that the residents remain drug free?	5 4 3 2 1 0 N/A
7. Does the staff show evidence of incorporating knowledge of the concepts and practices of Alcoholics Anonymous?	5 4 3 2 1 0 N/A
8. Do the Board and staff project a positive public image?	5 4 3 2 1 0 N/A
9. Are staff members required to continually upgrade their skills?	5 4 3 2 1 0 N/A
10. Is there a Code of Ethics to which the staff are held accountable?	5 4 3 2 1 0 N/A
11. Are recovering staff members held responsible for their recovery program?	5 4 3 2 1 0 N/A
12. Do all staff members qualify for their respective positions?	5 4 3 2 1 0 N/A
13. Does the Executive Director exhibit the qualities and abilities to administer, manage and coordinate the business and program of the corporation?	5 4 3 2 1 0 N/A
14. Is there evidence that the Director shows a desire and an ability to understand and relate to residents?	5 4 3 2 1 0 N/A
15. Does the Director have the minimum qualifications for the position held?	5 4 3 2 1 0 N/A
16. Is there evidence that the Executive Director and all staff members work harmoniously as a therapeutic program?	5 4 3 2 1 0 N/A
17. Are all personnel members knowledgeable of other community resources/referral sources?	5 4 3 2 1 0 N/A
18. Do staff demonstrate and practice a clear understanding of confidentiality laws?	5 4 3 2 1 0 N/A

COMPLIANCE TEAM:

Over-all rating on Personnel Standards compliance: 5 4 3 2 1 0 N/A

Compliance Team suggestions for improvements:

Compliance Team recommendations in order to meet compliance:

NAME OF PROGRAM:

PROGRAM EVALUATION:

1. Does the program have a written intake policy?	5 4 3 2 1 0 N/A
2. Does the recovery residence make all necessary efforts to determine the presence of a secondary diagnosis of the patient on admission? <i>The efforts can include, but are not limited to, a medical history and physical, a psychological evaluation, lab blood and urinalysis and history of medical problems.</i>	5 4 3 2 1 0 N/A
3. Does the program show evidence of making provisions for ongoing medical and psychiatric care of each patient?	5 4 3 2 1 0 N/A
4. Are the rules and regulations given in writing as well as verbally discussed with each admission?	5 4 3 2 1 0 N/A
5 Does the program have a written policy on the use, abuse and non-use of prescribed medications, over-the-counter drugs, etc.?	5 4 3 2 1 0 N/A
6 Are the reasons for termination and readmission thoroughly explained to each admission?	5 4 3 2 1 0 N/A
7 Are fees and conditions of payments explained thoroughly?	5 4 3 2 1 0 N/A
8 Is the program explained in detail and the person given a handbook or written statement of what is expected of him or her?	5 4 3 2 1 0 N/A
9 Are the program philosophies and concepts defined for the resident?	5 4 3 2 1 0 N/A
10 Are the recovery process and related program aspects defined for the resident?	5 4 3 2 1 0 N/A
11 Is each admission told of his/her rights and of the rules for confidentiality?	5 4 3 2 1 0 N/A
12 Are patient rights protected?	5 4 3 2 1 0 N/A
13 Are staff members free from mood-altering or mind-changing drugs?	5 4 3 2 1 0 N/A
14 Are the individual patient's basic needs considered and addressed?	5 4 3 2 1 0 N/A
15 Is there evidence of group activities, meetings and the like?	5 4 3 2 1 0 N/A
16 Does each person receive employment/training information guidance, and/or referral assistance?	5 4 3 2 1 0 N/A
17 Is counseling and referral assistance provided upon request and/or based on need?	5 4 3 2 1 0 N/A
18 Are regular orientation sessions provided by the staff for new	5 4 3 2 1 0 N/A

persons to the program?	
19 Is staff competence and performance evaluated regularly?	5 4 3 2 1 0 N/A
20 Does the recovery residence show evidence of promoting creative and recreational activities?	5 4 3 2 1 0 N/A
21 Does the program show evidence of assisting the residents in the restoration of interpersonal relationships?	5 4 3 2 1 0 N/A
22 Is the resident made aware of related self-help groups and programs?	5 4 3 2 1 0 N/A
23 Are there service agreements and professional referral links for resident on-going care?	5 4 3 2 1 0 N/A
24 Is the staff competent and knowledgeable about procedures for emergencies?	5 4 3 2 1 0 N/A
25 Is there a posted program format?	5 4 3 2 1 0 N/A
26 Is there a posted list of staff schedules?	5 4 3 2 1 0 N/A
27 Is there a posted list of resident responsibilities?	5 4 3 2 1 0 N/A
28 Are fees reasonable and customary for the services rendered?	5 4 3 2 1 0 N/A
29 Is there an admission note, weekly resident progress report, and discharge summary prepared for all residents?	5 4 3 2 1 0 N/A
30 Is there an administrative process for doing follow-through evaluations?	5 4 3 2 1 0 N/A
31 Does the program have an alumni association?	5 4 3 2 1 0 N/A
32 Does the program have a non-resident program of services?	5 4 3 2 1 0 N/A

COMPLIANCE TEAM:

Over-all rating on Program Standards compliance: 5 4 3 2 1 0 N/A

Compliance Team suggestions for improvements:

Compliance Team recommendations in order to meet compliance:

NAME OF PROGRAM:

Date of on-site visit:

Name of Compliance Team Members:

Overall rating on Standards compliance:

5 4 3 2 1 0 N/A

Summary of recommendations in order to meet compliance:

G ♦ A ♦ R ♦ R

♦ GEORGIA ASSOCIATION OF RECOVERY RESIDENCES ♦

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