



SKAGIT COUNTY PUBLIC HEALTH

NOTICE OF FUNDING AVAILABILITY (NOFA) RECOVERY HOUSING

STAFF CONTACT:

Sarah Hinman

Skagit County Public Health

700 S. 2nd Street

Mount Vernon, WA 98273

360-416-1507

sarahh@co.skagit.wa.us

NOTICE OF FUNDING AVAILABILITY

Program name: Recovery Housing

Skagit County Public Health is accepting applications for Recovery Housing. Applications must be submitted to: Skagit County Public Health, 700 S. 2nd St. Mt. Vernon, WA 98273 and emailed to sarahh@co.skagit.wa.us no later than 4:00pm on December 15th, 2017. Late applications will not be accepted.

Letter of Interest (Attached) is due by 4:00pm on November 17th, 2017. No applications will be accepted from any organization that does not submit a Letter of Interest.

Skagit County reserves the right to reject, in whole or in part, any and all applications received. Skagit County reserves the right to negotiate contract terms subsequent to the submissions of applications from the selected qualified applicants.

All applications are public information and subject to public disclosure.

The County is not liable for any costs incurred by applicants prior to entering into a Contract. Costs associated with developing the application, preparing for oral presentations, and any other expenses incurred by the applicant in responding to the NOFA are entirely the responsibility of the applicant, and shall not be reimbursed in any manner by the County.

Applicants are encouraged to submit questions to the County for additional information. Responses to questions will be added to the County's [Website](#) weekly during the NOFA period. Questions should be submitted via email to sarahh@co.skagit.wa.us with "Recovery Housing NOFA Questions" as the subject line.

1.0 NOFA TIMELINE

In administering this NOFA, Skagit County will adhere to the below timeline.

Action	Date	Time
NOFA Release	10/23/17	10:00am
Letters of Interest Due	11/17/17	4:00pm
Applications Due	12/15/17	4:00pm
Tentative Awards Announced	12/29/17	4:00pm
Contracts Begin	3/1/2017	n/a

2.0 INTRODUCTION

Skagit County Public Health supports individual choice in housing. Skagit County Public Health believes that people should have the ability to choose the type of housing that

best meets their needs and goals, including both Housing First and Recovery Housing models.

The purpose of this NOFA is to increase community capacity to provide Recovery Housing to individuals recovering from substance use disorders.

Skagit County Public Health recognizes the need to expand current services to support sustained recovery. Recovery Housing is one aspect of a Recovery Oriented System of Care, providing a safe, healthy, drug and alcohol free environment that supports community members in their road to recovery.

3.0 BACKGROUND INFORMATION

Recovery Housing is housing for individuals recovering from substance use disorders. Recovery Housing provides an alcohol and drug free living environment, peer support, and assistance with obtaining treatment and support services where the length of stay is not limited to a specific duration. For more information, please see the National Association for Recovery Residences' Primer on Recovery Housing at: <http://narronline.org/wp-content/uploads/2014/06/Primer-on-Recovery-Residences-09-20-2012a.pdf>

The population to be served is: individuals with a substance use disorder who are seeking to maintain recovery. Individuals may be transitioning from homelessness, inpatient treatment facilities, criminal justice facilities, shelters, or who have no other supportive safe living environment available. Individuals served through this funding must be at or below 220% of the federal poverty level.

This NOFA is limited to Levels I, II, and III Recovery Housing as defined by the National Association of Recovery Residences (see Attachment A.)

Recovery Housing funded through this NOFA shall not limit a resident's duration of stay to an arbitrary or fixed amount of time. Duration of stay shall be determined by the resident's needs, progress, and willingness to abide by the Recovery Housing's protocols, in collaboration with the housing owner and operator, and if appropriate, the resident's treatment provider.

Dependent children of the Recovery Housing's residents may reside in the Recovery Housing to the extent the Recovery Housing's protocols permit.

Individuals receiving Medication Assisted Treatment may not be excluded from County-funded Recovery Housing on the basis of the use of this treatment.

Recovery Housing owners and operators must abide by federal Fair Housing Law and the Washington Law Against Discrimination.

4.0 SCOPE OF WORK

Applicant must identify and prioritize the proposed population of focus (e.g. drug court clients, women, families with children, medication assisted treatment clients, etc.) based on local needs, and establish a target number of clients to be served over the contract period.

Models must facilitate multiple pathways to recovery. Pathways to recovery must include peer to peer support and may include but are not limited to the following: use of traditional treatment services, use of medication assisted treatment, use of support groups, use of faith-based support, and use of recovery support services. Models must describe how they will incorporate the social model of recovery into their proposed projects.

Applications must include criteria for prioritization for admittance into the Recovery House and describe whether and how waitlists will be utilized.

Applications must demonstrate how the following outcomes will be captured and measured:

1. Abstinence from substance use
2. Reduction in criminal justice involvement
3. Increase in social connectedness
4. Increase in employment/education
5. Stability in housing

Successful applicants must work with Skagit County Public Health to report on outcome measures. Additionally applicants must demonstrate how they will ensure a quality recovery house through adherence to the Washington Alliance for Quality Recovery Residences' (WAQRR) Domains, Core Principals and Standards (Attachment B.)

5.0 COMPENSATION

Eligible uses of funds may include: personnel costs, rent or mortgage payments, utilities, travel for residents or staff, food for residents, equipment and furniture.

Residents must be required to contribute 30% of their income to housing costs, up to an established upper limit per resident.

Skagit County Public Health intends to award a total amount of up to \$150,000 per year, not to exceed \$75,000 per year for each funded Recovery House.

6.0 MINIMUM REQUIREMENTS

Organizations must meet the following minimum qualifications to be considered for funding:

- Organization must be a local behavioral health or housing service provider (includes peer-run recovery organizations), or a non-profit or faith based organization
- Organization must be able to comply with all applicable local, state and federal laws; Organizations should review [“A Guide to Fair Housing for Nonprofit Housing & Shelter Providers”](#) prior to applying for funding
- Organization must be able to comply with all contract requirements of Skagit County
- Organization must have qualified and responsible management and staffing resources necessary to implement the project, including any applicable licensing and credentialing requirements
- Organization must have sound financial management systems and financial capacity to operate programs on a reimbursement basis
- Organization must be able to comply with the insurance requirements of the contract
- Organization must have experience in operating proposed project or program, or demonstrated knowledge and training necessary to operate proposed project

The applicant’s overall capability, specialized experience, reputation, past performance for similar services, technical competence, financial stability, ability to meet program goals, performance under contract terms and fee schedule will be considered in the award decision.

7.0 APPLICATION SUBMISSION REQUIREMENTS; Includes Letter of Interest, Application Narrative, Budget, and Budget Narrative

Letter of Interest: A Letter of Interest must be submitted by November 17th at 4:00pm in order to be eligible to apply. However, a Letter of Interest does not bind an organization to submit an application.

Application Narrative: The Application Narrative is limited to 5 pages single spaced in 12 point font. The page limit does not include the Budget or Budget Narrative. The following items must be included in the narrative, in the order presented below:

1. Describe the targeted population of focus and how recovery housing for this population is a community priority. Please also address the anticipated number of clients to be served.
2. Describe the proposed project including the level of Recovery Housing (I, II or III), housing environment (e.g. single family home, apartments, occupancy, bedrooms, bathrooms, gathering space, etc..) administration, services, and staffing to be provided. Include method of prioritizing selection of residents and how waitlists will be utilized if applicable.

3. Provide a detailed implementation and operations plan, including duties and functions, responsible staff, and specific timelines.
4. Describe how the project will ensure adherence to the WAQRR's Recovery Housing standards.
5. Describe program policies and procedures, and house rules that will be required for residents. Describe circumstances which would cause residents to be removed and the process involved. Describe any policies or protocols related to medication assisted treatment. Describe policies and protocols related to relapse, and what steps will be taken to ensure housing stability. Also include a description of the program and services that will be provided to residents.
6. Describe how outcomes will be collected and measured. Include the process for data collection and the outcomes to be measured. Data must include, but is not limited to: (1) abstinence (2) reduction in criminal justice involvement (3) social connectedness (4) increase in employment and education (5) stability in housing.

Throughout the application narrative, the applicant must ensure and demonstrate that cultural competence is integrated into planning and implementation of services and that services are provided in a trauma informed manner.

Budget and Budget Narrative: Applicant must include completed Budget and Budget Narrative. (Attachment C)

The application must be signed by a person with the ability to bind the proposing entity and must submit the name of the central contact person, along with their phone number(s) and any cellular phone number, pager number, and/or fax number.

8.0 CONTRACT TERM

The Services to be performed under this Agreement are anticipated to begin on or around March 1, 2018. The initial term of this Agreement shall be through June 30th, 2019. Upon sole discretion of the County, the County may extend this agreement for up to five additional one year terms. The County has the right to terminate the contract for public convenience with 30 days' notice.

9.0 APPLICATION EVALUATION PROCESS

9.1 Skagit County Public Health intends to select the application(s) which is the most qualified to meet its needs. The application submitted must fully address the requirements listed in this solicitation and the applicant's degree of experience, knowledge, and ability to provide experienced and qualified support staff and perform the services as proposed. Public Health reserves the right to reject any and all applications received by reason of this request or to negotiate separately with any source whatsoever, in any manner deemed to be in the best interests of the County.

9.2 During the course of the evaluation and selection process, the County may request the highest scoring applicants to give a brief presentation to the Selection Committee. The purpose of the presentation would be to offer a brief explanation of the applicant's services and how the applicant plans to provide the services outlined in the NOFA, and to answer any questions the team may have. Any costs associated with the preparation or presentation will be at the expense of the applicant.

9.3 The County also reserves the right to require other evidence of managerial, financial, or other abilities prior to award of the contract.

9.4 Membership of the Application Evaluation Committee shall include two Skagit County Public Health Staff and two members of the Behavioral Health Sales Tax Allocation Advisory Committee. At the discretion of the committee, other non-voting participants may be invited to offer input. The full Behavioral Health Sales Tax Allocation Advisory Committee will vote on providing recommendation for funding the Skagit Board of County Commissioners. The Board of County Commissioners makes all final funding and contracting decisions.

9.5 Upon selection, the applicant(s) must enter into a contract with Skagit County. If a contract agreement is not able to be reached with the selected applicant(s), the application(s) will not be funded.

10.0 APPLICATION EVALUATION CRITERIA

Evaluation of applications which meet the minimum requirements will be based on the following criteria:

Criteria Points:

Target Population	10
Project Description	20
Operation, Services and Implementation Plan	10
Policies, Procedures and Rules consistent with WAQRR Standards	20
Cultural Competency / Trauma Informed Services	10
Financial feasibility and Sustainability	20
Outcomes / Plan for Housing Stability	10
Total points possible	100

LETTER OF INTEREST FORM

Please type or print all information. Return the completed and signed form to: Sarah Hinman, Skagit County Public Health, 700 S. 2nd Street, Mount Vernon, WA 98273. Forms may also be emailed to sarahh@co.skagit.wa.us Letter of Interest Form must be received by 4:00pm on November 17th, 2017. Late or incomplete forms will not be accepted.

IDENTIFYING INFORMATION

Contractor's Name _____

Organization's Name _____

Address _____

Street or Box # _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email Address _____

Signature below indicates an interest in becoming a contractor for Skagit County. I understand that signing this letter does not bind me to submission of a full application. All information submitted in this letter of intent is true to the best of my knowledge and belief. I fully understand that any significant misstatement in or omission from this application may constitute cause for denial of participation.

Name and Title (print or type)

Signature

Date

Attachment B: Application Cover Sheet

Name and Title of Authorized Representative: _____

Name of Organization: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Phone: _____ Fax: _____

E-mail: _____

Please check the appropriate box below and provide the information requested:

- Incorporated as a private non-profit corporation in the State of Washington and has been granted 501(c) (3) tax exempt status by the U.S. Internal Revenue Service. IRS Employer Identification Number (EIN): _____
- A public corporation, commission, or authority established pursuant to applicable Washington State law
- Other _____

State of Washington Business License Number(s): _____

Program Licensure or Certification Status, if applicable: _____

Has there been any Audit Finding or Management Letters (within the last 3 years) from any public funder? If so, please attach.

Total Dollars Requested: _____

I understand the terms and conditions of the NOFA and certify that the above-named agencies will comply with all Skagit County requirements if a contract award is made. All information contained in this application is true and accurate to the best of my knowledge.

Print Name

Title

Signature

Date



RECOVERY RESIDENCE LEVELS OF SUPPORT

		RECOVERY RESIDENCE LEVELS OF SUPPORT			
		LEVEL I Peer-Run	LEVEL II Monitored	LEVEL III Supervised	LEVEL IV Service Provider
STANDARDS CRITERIA	ADMINISTRATION	<ul style="list-style-type: none"> • Democratically run • Manual or P&P 	<ul style="list-style-type: none"> • House manager or senior resident • Policy and Procedures 	<ul style="list-style-type: none"> • Organizational hierarchy • Administrative oversight for service providers • Policy and Procedures • Licensing varies from state to state 	<ul style="list-style-type: none"> • Overseen organizational hierarchy • Clinical and administrative supervision • Policy and Procedures • Licensing varies from state to state
	SERVICES	<ul style="list-style-type: none"> • Drug Screening • House meetings • Self help meetings encouraged 	<ul style="list-style-type: none"> • House rules provide structure • Peer run groups • Drug Screening • House meetings • Involvement in self help and/or treatment services 	<ul style="list-style-type: none"> • Life skill development emphasis • Clinical services utilized in outside community • Service hours provided in house 	<ul style="list-style-type: none"> • Clinical services and programming are provided in house • Life skill development
	RESIDENCE	<ul style="list-style-type: none"> • Generally single family residences 	<ul style="list-style-type: none"> • Primarily single family residences • Possibly apartments or other dwelling types 	<ul style="list-style-type: none"> • Varies – all types of residential settings 	<ul style="list-style-type: none"> • All types – often a step down phase within care continuum of a treatment center • May be a more institutional in environment
	STAFF	<ul style="list-style-type: none"> • No paid positions within the residence • Perhaps an overseeing officer 	<ul style="list-style-type: none"> • At least 1 compensated position 	<ul style="list-style-type: none"> • Facility manager • Certified staff or case managers 	<ul style="list-style-type: none"> • Credentialed staff

Washington Alliance for Quality Recovery Residences [logo coming soon]

Domains, Core Principles, and Standards Adopted 9/12/17

1 Administrative and Operational Domain		LEVELS			
		I	II	III	IV
A	Core Principle: Operate with integrity				
	1. Be guided by a mission and vision				
	a. <input type="checkbox"/> A written mission statement that corresponds with NARR’s core principles as stated in this document.	✓	✓	✓	✓
	b. <input type="checkbox"/> A vision statement that corresponds with NARR’s core principles as stated in this document.	✓	✓	✓	✓
	2. Adhere to legal and ethical codes				
	a. <input type="checkbox"/> An affidavit that attests to complying with non-discriminatory state and federal requirements.	✓	✓	✓	✓
	b. <input type="checkbox"/> A policy that marketing materials, claims and advertising will be honest and substantiated and that forbids the use of any of the following: <ul style="list-style-type: none"> • False or misleading statements or unfounded claims or exaggerations; • Testimonials that do not really reflect the real opinion of the involved individual; • Price claims that are misleading; • Therapeutic strategies for which licensure and/or counseling certifications are required but not applicable at the site; or • Misleading representation of outcomes. 	✓	✓	✓	✓
	c. <input type="checkbox"/> A policy that all fees and charges a resident will be expected to pay, will be presented, explained, and signed prior to the individual entering into any binding agreement.	✓	✓	✓	✓
	d. <input type="checkbox"/> Policies and procedures for insuring accurate, complete records of charges, payments, and deposits, and the ability to provide residents with statements of their individual charges and payment history upon request.	✓	✓	✓	✓
	e. <input type="checkbox"/> Refund policy and procedure presented to applicants in advance of signing any binding residency agreement.	✓	✓	✓	✓
	f. <input type="checkbox"/> Policies and procedures that preclude staff becoming involved in residents’ personal financial affairs, including lending or borrowing money, or other transactions involving property or services. (Exception: operators may make agreements with residents with respect to payment of fees.)	✓	✓	✓	✓
	g. <input type="checkbox"/> Policy and procedure that ensures refunds consistent with terms of resident agreements and ensuring that refunds are provided no later than 10 business days after departure.	✓	✓	✓	✓

			I	II	III	IV
3.	Be financially honest and forthright					
a.	<input type="checkbox"/>	Use of an accounting system which documents all resident financial transactions, such as fees, payments and deposits. <ul style="list-style-type: none"> Ability to produce clear statements of a resident's financial dealings with the operator within reasonable time frames. 	✓	✓	✓	✓
b.	<input type="checkbox"/>	Policy and procedure for disclosing to potential residents their financial obligations, including costs for which they might become liable, such as forfeiture of any deposits and fees as a result of prematurely leaving the residence.	✓	✓	✓	✓
c.	<input type="checkbox"/>	Policy and procedure for return of deposits if financial deposits are required, including time frame for return.	✓	✓	✓	✓
d.	<input type="checkbox"/>	Policies and procedures that ensure the following conditions are met if the residence provider or a staff member employs, contracts with or enters into a paid work agreement with residents: <ul style="list-style-type: none"> Paid work arrangements are completely voluntary. Residents do not suffer consequences for declining work. Residents who accept paid work are not treated more favorably than residents who do not. Paid work for the operator or staff does not impair participating residents' progress towards their recovery goals. The paid work is treated the same as any other employment situation. Wages are commensurate with marketplace value, and at least minimum wage. The arrangements are viewed by a majority of the residents as fair. Paid work does not confer special privileges on residents doing the work. Work relationships do not negatively affect the recovery environment or morale of the home. Unsatisfactory work relationships are terminated without recriminations that can impair recovery. 	✓	✓	✓	✓
4.	Collect data for continuous quality improvement					
a.	<input type="checkbox"/>	Procedures that collect resident's demographic information.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Procedures that collect, evaluate and report accurate process and outcomes data for continuous quality improvement.	-	-	✓	✓
5.	Operate with prudence					
a.	<input type="checkbox"/>	Legal business entity documentation e.g. incorporation, LLC documents or business license.	-	-	✓	✓
b.	<input type="checkbox"/>	Documentation that the owner/operator has current liability coverage and other insurance appropriate to the level of support.	✓	✓	✓	✓
c.	<input type="checkbox"/>	Written permission from the property owner of record (if someone other than the recovery residence operator) to operate a recovery residence on the property.	-	-	✓	✓
d.	<input type="checkbox"/>	Policies and procedures that ensure that background checks are conducted on all staff, including volunteers that have direct and regular interaction with residents.	-	®	®	✓
<i>® Strongly recommended</i>						
B	Core Principle: Uphold Residents' Rights					
6.	Communicate rights and requirements <u>before</u> agreements are signed					
a.	<input type="checkbox"/>	Documentation of an orientation process that ensures residents understand agreements, policies and procedures prior to committing to terms.	✓	✓	✓	✓

			I	II	III	IV
b.	<input type="checkbox"/>	Verification that written residents' rights and requirements (e.g. Residence rules and grievance process) are posted in common areas.	✓	✓	✓	✓
c.	<input type="checkbox"/>	Written resident agreement that includes: <ul style="list-style-type: none"> • Services provided • Recovery plan including a move-in (i.e. goals and objectives) and move-out (i.e. contingency plan) • Financial terms 	✓	✓	✓	✓
d.	<input type="checkbox"/>	Policy regarding possessions (personal property) left in a home shared with residents at orientation.	✓	✓	✓	✓
7. Promote self and peer advocacy						
a.	<input type="checkbox"/>	Grievance policy and procedures, including the right to take unresolved grievances to the operator's oversight organization.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Applicant screening policies and procedures that provide current residents a voice in the acceptance of new residents.	✓	®	®	-
c.	<input type="checkbox"/>	Policies and procedures that promote resident-driven length of stay.	✓	✓	✓	✓
d.	<input type="checkbox"/>	Policies and procedures that defend residents' fair housing rights.	✓	✓	✓	✓
8. Support Housing Choice						
a.	<input type="checkbox"/>	Applicant screening policies and procedures provide current residents a voice in the acceptance of new members.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Policies and procedures that promote resident-driven length of stay.	✓	✓	✓	✓
c.	<input type="checkbox"/>	Policies and procedures that defend residents' fair housing rights.	✓	✓	✓	✓
9. Protect privacy						
a.	<input type="checkbox"/>	Policies and procedures that keep resident's records secure, with access limited to authorized staff.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Policies and procedures that comply with applicable confidentiality laws.	✓	✓	✓	✓
<i>® Strongly recommended</i>						
C Core Principle: Be Recovery Oriented						
10. View recovery as a person-driven, holistic and lifelong process						
a.	<input type="checkbox"/>	Documentation that residents participate in the development of their recovery plan including an exit plan and/or lifelong plan.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Documentation that the operator cultivates alumni participation.	✓	✓	✓	✓
11. Ensure staff are culturally responsive and competent						
a.	<input type="checkbox"/>	Policies and procedures that identify the priority population for residents, which at a minimum includes persons in recovery from substance use but may also include other demographic criterion.	✓	✓	✓	✓
b.	<input type="checkbox"/>	A staffing or leadership plan that reflects the priority population's needs.	✓	✓	✓	✓
c.	<input type="checkbox"/>	Documentation of cultural responsiveness and competence staff trainings that are relevant to the priority population.	-	®	✓	✓
d.	<input type="checkbox"/>	Policies and procedures that encourage residents to make their own outside appointments.	✓	✓	✓	✓
<i>® Strongly recommended</i>						

			I	II	III	IV
D	Core Principle: Use Peers to Staff and Govern					
12.	Involve peers in governance in meaningful ways					
a.	<input type="checkbox"/>	Documentation that some rules are made by the residents that the residents (not the staff) enforce.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Documentation that a resident council or process is in place that ensures residents' voices can be heard.	✓	✓	✓	✓
c.	<input type="checkbox"/>	Documentation that the resident council has a voice in the governance of the home.	✓	✓	✓	✓
13.	Use peer staff and leaders in meaningful ways					
a.	<input type="checkbox"/>	Documentation that residents' responsibilities increase with their length of stay or progress in their recovery.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Staffing or leadership plan that formally includes a peer component.	✓	✓	✓	✓
c.	<input type="checkbox"/>	Written job descriptions and/or contracts for peer staff and leaders.	-	-	✓	✓
14.	Maintain resident and staff leadership based on recovery principles					
a.	<input type="checkbox"/>	Staffing or leadership plan that includes input from current residents and where possible, former residents who model recovery principles.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Documentation that leader and/or staff job descriptions and selections are based in part on modeling recovery principles.	✓	✓	✓	✓
15.	Create and sustain an atmosphere of recovery support					
a.	<input type="checkbox"/>	Documentation that recovery support is integrated in the daily activity schedule.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Documentation that residents' schedules include formal and informal opportunities for staff and resident interaction in support of recovery.	-	✓	✓	✓
16.	Ensure staff are trained or credentialed appropriate to their level					
a.	<input type="checkbox"/>	Written staffing or workforce development plan.	-	®	✓	✓
b.	<input type="checkbox"/>	Policies and procedures for acceptance of certification(s) and verification.	-	-	✓	✓
17.	Provide Supportive Staff Supervision					
a.	<input type="checkbox"/>	Policies and procedures for supervision of staff.	®	®	✓	✓
b.	<input type="checkbox"/>	Documentation that staff are provided with ongoing skills development, oversight and support policies and procedures appropriate to staff roles and level of support.	®	®	✓	✓

® Strongly recommended

2 Recovery Support Domain

LEVELS

			I	II	III	IV
E	Core Principle: Create a Healthy Recovery Environment					
18.	Encourage residents to own their recovery					
a.	<input type="checkbox"/>	Policies and procedures that encourage each resident to develop and participate in her/his own personalized recovery plan (Person-driven recovery).	✓	✓	✓	✓

			I	II	III	IV
19.	Inform and encourage residents to participate in a range of community-based supports					
a.	<input type="checkbox"/>	Documentation that staff and/or resident leaders are provided with proficiently knowledgeable of local community-based resources.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Documentation that resource directories or similar resources are readily available to residents.	✓	✓	✓	✓
20.	Offer recovery support in informal social settings					
a.	<input type="checkbox"/>	Staffing plan documenting informal recovery support services.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Documentation of traditions, policies or procedures that foster mutually supportive and recovery-oriented relationships between residents and/or staff through peer-based interactions.	✓	✓	✓	✓
21.	Offer recovery support services in formal settings					
a.	<input type="checkbox"/>	Documentation of weekly schedule(s) of recovery support services recognized as appropriate by the respective NARR Affiliate organization.	-	-	✓	✓
b.	<input type="checkbox"/>	Documentation of weekly schedule(s) of recovery-oriented presentations, group exercises, and activities	-	-	✓	✓
c.	<input type="checkbox"/>	Staffing plan documenting delivery of support services in formal settings.	-	-	✓	✓
22.	Offer life skills development services in a formal setting					
a.	<input type="checkbox"/>	Documentation of weekly scheduling of formal life skills development services or classes.	-	-	✓	✓
b.	<input type="checkbox"/>	Staffing plan that corresponds to the delivery of life skills development in a formal setting.	-	-	✓	✓
23.	Offer clinical services in accordance with state law					
a.	<input type="checkbox"/>	Documentation of weekly clinical services scheduling made available to residents across all phases if multiple phases are used.	-	-	-	✓
b.	<input type="checkbox"/>	Staffing plan that documents delivery of clinical services in accordance with state law.	-	-	-	✓
F	Core Principle: Provide a Home-like Experience					
24.	Provide a physically and emotionally safe, secure and respectful environment					
a.	<input type="checkbox"/>	Policies and procedures that establish the residence's priority population(s) and cultivate physically and emotionally safe environments for meeting the needs of individual residents and sustaining recovery-support connections.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Policies that promote resident-determined lengths of stay that support health and safety of the household/community.	✓	✓	®	®
25.	Provide an alcohol and illicit drug-free environment					
a.	<input type="checkbox"/>	Policy regarding the use of alcohol and/or other prohibited drug-seeking.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Policy and procedures regarding possession of hazardous and other prohibited items and associated searches.	✓	✓	✓	✓
c.	<input type="checkbox"/>	Policies and procedures for drug screening and/or toxicology protocols.	✓	✓	✓	✓
d.	<input type="checkbox"/>	Policies and procedures for dealing with residents' prescription and non-prescription medication usage and storage, consistent with the residence's level and with relevant state law.	✓	✓	✓	✓

			I	II	III	IV
26.	Environment cultivated through structure and accountability					
a.	<input type="checkbox"/>	Written resident rights, requirements, agreements, social covenants and/or "Residence Rules."	✓	✓	✓	✓
b.	<input type="checkbox"/>	Written requirements and protocols for peer leadership and/or mentoring policies that foster individual and community accountability.	✓	✓	✓	✓
<i>® Strongly recommended</i>						
G	Core Principle: Inspire Purpose					
27.	Promote meaningful daily activities					
a.	<input type="checkbox"/>	Documentation of weekly schedule of resident activities.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Documentation that residents are encouraged to do at least one of the following: <ul style="list-style-type: none"> • Work, going to school, or volunteer outside of the residence community (Level 1, 2 and some 3s) • Participate in mutual aid or caregiving (All Levels) • Participate in social, physical or creative activities (All Levels) • Attend daily or weekly programming (All Levels) 	✓	✓	✓	✓
c.	<input type="checkbox"/>	Documentation that recovery planning & peer governance are person-driven activities.	✓	✓	✓	✓
H	Core Principle: Cultivate Community					
28.	Create a "functionally equivalent family" within the residence as evidenced by meeting at least 50% of the following:					
a.	<input type="checkbox"/>	Documentation that residents are involved in food preparation.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Documentation that residents have a significant voice in determining with whom they live.	✓	✓	✓	✓
c.	<input type="checkbox"/>	Documentation that residents help maintain and clean the home (chores, etc.).	✓	✓	✓	✓
d.	<input type="checkbox"/>	Documentation that residents share in household expenses.	✓	✓	✓	✓
e.	<input type="checkbox"/>	Documentation that family or residence meetings are held at least once a week.	✓	✓	✓	✓
f.	<input type="checkbox"/>	Documentation that residents have access to the common areas of the home.	✓	✓	✓	✓
29.	Foster ethical, peer-based mutually supportive relationships between residents and/or staff					
a.	<input type="checkbox"/>	Policies and procedures that encourage residents to engage one another in informal activities and conversation.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Policies and procedures that encourage staff to engage residents in informal activities and conversations.	✓	✓	✓	✓
c.	<input type="checkbox"/>	Policies and procedures that coordinate community gatherings, recreational events and/or other social activities amongst residents and/or staff.	✓	✓	✓	✓
30.	Connect residents to the local (greater) recovery community as evidenced by at least 50% of the following for levels II, III, and IV, and at least one of the following for level I:					
a.	<input type="checkbox"/>	Documentation that residents are informed of or linked to mutual aid, recovery community centers, recovery ministries, recovery-focused leisure activities, and/or recovery advocacy opportunities.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Documentation that the recovery residence helps participants find a recovery mentor or mutual aid sponsor if they are having difficulty finding one.	✓	✓	✓	✓

			I	II	III	IV
c.	<input type="checkbox"/>	Documentation that mutual aid meetings are hosted on site and there are typically attendees from the greater recovery community.	✓	✓	✓	✓
d.	<input type="checkbox"/>	Documentation that participants are encouraged to find a recovery mentor or mutual aid sponsor before leaving the recovery residence.	✓	✓	✓	✓
e.	<input type="checkbox"/>	Documentation that residents are formally linked with the community such as job search, education, family services, health and/or housing programs.	✓	✓	✓	✓
f.	<input type="checkbox"/>	Documentation that residents engage in community relations and interactions to promote kinship with other recovery communities and goodwill for recovery services.	✓	✓	✓	✓
g.	<input type="checkbox"/>	Documentation that sober social events are regularly scheduled (each participant can attend at least one).	✓	✓	✓	✓

3 Property and Architecture Domain

LEVELS

			I	II	III	IV
I Core Principle: Provide a Home-like Space						
31.	Create a home-like environment					
a.	<input type="checkbox"/>	Verification that furnishings are typical of those in single family homes or apartments as opposed to institutional settings.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Verification that entrances and exits are home-like vs. institutional or clinical.	✓	✓	✓	✓
c.	<input type="checkbox"/>	Verification that there are 50+ sq. ft. per bed per sleeping room.	✓	✓	✓	✓
d.	<input type="checkbox"/>	Verification that there is one sink, toilet and shower per six residents.	✓	✓	✓	✓
e.	<input type="checkbox"/>	Verification that each resident has personal item storage.	✓	✓	✓	✓
f.	<input type="checkbox"/>	Verification that each resident has food storage space.	✓	✓	✓	✓
g.	<input type="checkbox"/>	Verification that laundry services are accessible to all residents.	✓	✓	✓	✓
h.	<input type="checkbox"/>	Verification that all appliances are in safe, working condition.	✓	✓	✓	✓
i.	<input type="checkbox"/>	Documentation of a staffing plan that provides for addressing repairs and maintenance in a timely fashion.	✓	✓	✓	✓
32.	Promote community					
a.	<input type="checkbox"/>	Verification that community room (space) is large enough to reasonably accommodate community living and meetings.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Verification that a comfortable group area, a living room or sofas, are provided for participants to informally socialize.	✓	✓	✓	✓
c.	<input type="checkbox"/>	Verification that kitchen and dining area(s) are large enough to accommodate residents sharing meals together.	✓	✓	✓	✓
d.	<input type="checkbox"/>	Verification that entertainment or recreational areas and/or furnishings that promote social engagement are provided.	✓	✓	✓	✓
e.	<input type="checkbox"/>	Verification that furniture is in good condition.	✓	✓	✓	✓
J Core Principle: Promote Health and Safety						
33.	Create Home Safety					
a.	<input type="checkbox"/>	Affidavit from the owner or operator attesting that the residence meets nondiscriminatory local health and safety codes OR document from government agency or credentialed inspector attesting to the property meeting health and safety standards.	✓	✓	✓	✓

			I	II	III	IV
b.	<input type="checkbox"/>	Signed, dated safety self-assessment checklist which includes <ul style="list-style-type: none"> Functioning smoke detectors in the sleeping rooms Functioning carbon monoxide detectors, if there are gas appliances Functioning fire extinguishers in plain sight and/or clearly marked locations Interior and exterior of the property are in a functional, safe and clean condition and free of fire hazards 	✓	✓	✓	✓
c.	<input type="checkbox"/>	Policy regarding smoke-free living environment policy and/or designated smoking area outside of the residence.	✓	✓	✓	✓
d.	<input type="checkbox"/>	Verification that Naloxone is available and accessible; evidence that staff members and residents are trained in its use.		✓	✓	✓
e.	<input type="checkbox"/>	Verification that Naloxone is available and accessible; evidence that residents are trained in its use.	✓			
34. Have an emergency plan						
a.	<input type="checkbox"/>	Verification that emergency numbers, procedures and evacuation maps are posted in conspicuous locations.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Documentation that emergency contact information is collected from residents and that they are oriented to emergency procedures.	✓	✓	✓	✓

4 Good Neighbor Domain

LEVELS

			I	II	III	IV
K	Core Principle: Be a Good Neighbor					
35.	Be Compatible with the neighborhood					
a.	<input type="checkbox"/>	Documentation that if recovery residence is in a residential neighborhood, there are no external indications that the property is anything other than a single family household typical of its neighborhood.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Verification that the property and its structures are consistently maintained.	✓	✓	✓	✓
36.	Be responsive to neighbor concerns					
a.	<input type="checkbox"/>	Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.	✓	✓	✓	✓
b.	<input type="checkbox"/>	Policies and procedures that require the responsible person(s) to respond to neighbor's concerns even if it is not possible to resolve the issue.	✓	✓	✓	✓
c.	<input type="checkbox"/>	Documentation that new resident orientation includes how residents and staff are to greet and interact with neighbors and/or concerned parties.	✓	✓	✓	✓
37.	Have courtesy rules					
a.	<input type="checkbox"/>	Policies that are responsive or preemptive to neighbors' reasonable complaints regarding <ul style="list-style-type: none"> Smoking Loitering Parking Noise Lewd or offensive language Cleanliness of public space around the property 	✓	✓	✓	✓
b.	<input type="checkbox"/>	Documentation that there are parking courtesy rules where street parking is scarce.	✓	✓	✓	✓

Reference Guide

The following provides a key to the scheme used for labeling and identifying elements of the NARR Standard (on which the WAQRR Standard is based). It is reproduced from a forthcoming companion guide to the Standard, to be published by NARR in 2018.

Domains:

Notice that there are four (4) **Domains**, the major sections of the document, labeled numerically 1-4: (These are the largest numbers on the document and are in white on a black background)

Administrative and Operational Domain
Recovery Support Domain
Property and Architecture Domain
Good Neighbor Domain

Example:

1

Core Principles:

Under each of the **4 Domains** are nine (9) **Core Principles** labeled alphabetically in capital letters, “A - K” in black type with gray backgrounds:

Operate with Integrity
Uphold Residents’ Rights
Be Recovery Oriented
Use Peers to Staff and Govern
Create a Healthy Recovery Environment
Provide a Home-like Experience
Inspire Purpose
Cultivate Community
Provide a Home-like Space
Promote Health and Safety
Be a Good Neighbor

Example:

G

Standards:

Under each of the **9 Core Principles** are the thirty-seven (37) **Standards**, labeled numerically from 1-37, in black print with white backgrounds.

Example:

24.

Subsections:

And, finally, under each of the 37 Standards are indented subsections labeled alphabetically in lower-case letters, from “a.” to as many letters as needed for each standard.

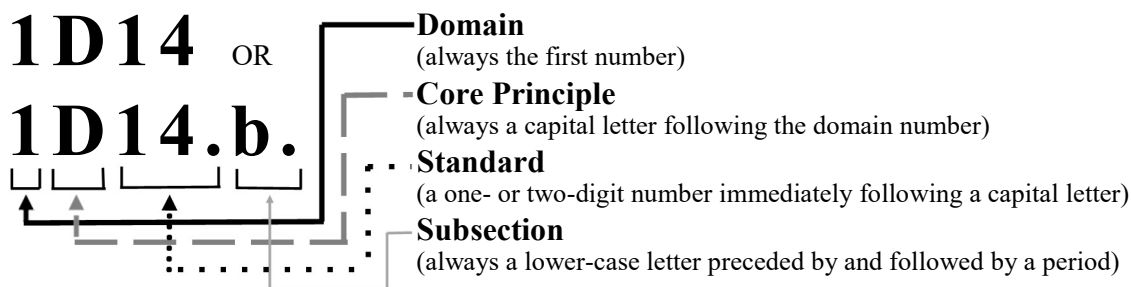
Example:

a.

b.

c.

Throughout the forthcoming manual, as we break down and discuss the various domains, core principles, and standards, you will see references such as the following:



This is just a short-hand way of saying, “We are referring to the Administrative and Operational Domain “1”, Core Principle “D” (“Use Peers to Staff and Govern”), Standard “14.” (“Maintain resident and staff leadership based on recovery principles”). If you see a period (.) after the “standard” number and then a lower case letter (such as “a” or “b” or “c,” etc., followed by a period), then you know to look at “subsection “a”, “b”, or “c,” etc. (in the example above, the subsection is “b”: “Leader and/or staff job descriptions and selections are based in part on modeling recovery principles”).

Levels:

NARR defines four levels of recovery support, and rules applicable to a specific residence are based on its support level. The right-most four columns of the Standard correspond to the four levels. A check mark in a column signifies that the specific rule is applicable to the level indicated in the column header. This is an example:

			I	II	III	IV	
19.	Inform and encourage residents to participate in a range of community-based supports						
a.	<input type="checkbox"/>	Documentation that staff and/or resident leaders are provided with proficiently knowledgeable of local community-based resources.	✓	✓	✓	✓	

The check marks below columns labeled I, II, III and IV indicate that this rule (rule 2E19.a.) is applicable to residences of all levels.

For more information about the NARR levels of recovery support, please consult the documentation on our website: <http://narronline.org/resources/>.

Contact information

For information about the Washington Alliance for Quality Recovery Residences, please email info@recoveryhousingwa.org

For more information about the NARR Standard, and about referencing it in publications, please contact

National Alliance for Recovery Residences

569 Selby Ave.
 St. Paul, MN 55102
 (888) 877-4236
info@narronline.org

This document is available online on the NARR website: <http://narronline.org/resources/>

