# **Washington Alliance for Quality Recovery Residences**



## **Quality Standards**

Adopted 9/12/17

1	Adı	mi	nist	trative and Operational Domain	LEVELS			
					Ι	II	III	IV
A	Coi	re P	rinc	ciple: Operate with integrity				
	1.	Be	guid	led by a mission and vision			_	
		a.		A written mission statement that corresponds with NARR's core principles as stated in this document.	✓	<b>✓</b>	<b>✓</b>	<b>✓</b>
		b.		A vision statement that corresponds with NARR's core principles as stated in this document.	✓	<b>✓</b>	<b>&gt;</b>	<b>✓</b>
	2.	Ad	here	e to legal and ethical codes				
		a.		An affidavit that attests to complying with non-discriminatory state and federal requirements.	<b>✓</b>	<b>✓</b>	>	<b>✓</b>
		b.		A policy that marketing materials, claims and advertising will be honest and substantiated and that forbids the use of any of the following:	✓	✓	✓	✓
				<ul> <li>False or misleading statements or unfounded claims or exaggerations;</li> </ul>				
				<ul> <li>Testimonials that do not really reflect the real opinion of the involved individual;</li> </ul>				
				Price claims that are misleading;				
				<ul> <li>Therapeutic strategies for which licensure and/or counseling certifications are required but not applicable at the site; or</li> </ul>				
				Misleading representation of outcomes.				
		c.	╚	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.	✓	<b>/</b>	<b>V</b>	<b>✓</b>
		d.		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.	✓	>	<b>✓</b>	>
		e.		Refund policy and procedure presented to applicants in advance of signing any binding residency agreement.	✓	<b>✓</b>	<b>\</b>	<b>\</b>
		f.		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.)	<b>✓</b>	<b>&gt;</b>	<b>√</b>	<b>&gt;</b>
	'	g.		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.	✓	✓	<b>√</b>	<b>✓</b>

							IV
3.	Be	fina	ncially honest and forthright				
	a.		Use of an accounting system which documents all resident	./	./	./	./
			financial transactions, such as fees, payments and deposits.	•	•	*	
			Ability to produce clear statements of a resident's financial dealings				
			with the operator within reasonable time frames.				
	b.		Policy and procedure for disclosing to potential residents their	✓	<b>√</b>	<b>√</b>	<b>✓</b>
			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.		Policy and procedure for return of deposits if financial depos-	✓	✓	✓	✓
	<u> </u>		its are required, including time frame for return.				
	d.		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> <li>Paid work arrangements are completely voluntary.</li> <li>Residents do not suffer consequences for declining work.</li> </ul>				
			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.				
			<ul> <li>Wages are commensurate with marketplace value, and at least minimum wage.</li> </ul>				
			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.	Co	llect	data for continuous quality improvement				
	a.		Procedures that collect resident's demographic information.	✓	✓	✓	✓
	b.		Procedures that collect, evaluate and report accurate process	-	-	✓	✓
			and outcomes data for continuous quality improvement.				
5.	Op	erat	e with prudence				
	a.	П	Legal business entity documentation e.g. incorporation, LLC	-	_	./	./
			documents or business license.			`	*
	b.		Documentation that the owner/operator has current liability	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>
			coverage and other insurance appropriate to the level of sup-				
			port.				
	c.		Written permission from the property owner of record (if	-	-	✓	✓
			someone other than the recovery residence operator) to				
	<u> </u>		operate a recovery residence on the property.		_		
	d.		Policies and procedures that ensure that background checks are	-	®	R	✓
			conducted on all staff, including volunteers that have direct				
			and regular interaction with residents.				
			®	Stron	gly re	comme	ended
Co	re P	rino	ciple: Uphold Residents' Rights				
6.	T		unicate rights and requirements <u>before</u> agreements	are :	sign	ed	
	a.		Documentation of an orientation process that ensures residents		•		
	""	l۳	understand agreements, policies and procedures prior to com-	<b>'</b>	<b>'</b>	<b>'</b>	<b>~</b>
			mitting to terms.				
	•						

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		b.		Verification that written residents' rights and requirements (e.g. Residence rules and grievance process) are posted in	✓	✓	✓	✓		
				common areas.						
		c.		Written resident agreement that includes:	✓	✓	✓	✓		
				Services provided     Recovery plan including a move-in (i.e. goals and objectives) and move-out (i.e. contingency plan)						
				• Financial terms move-out (i.e. contingency plan)						
		d.		Policy regarding possessions (personal property) left in a home shared with residents at orientation.	✓	✓	✓	✓		
	7.	Pro	omo	te self and peer advocacy						
		a.		Grievance policy and procedures, including the right to take unresolved grievances to the operator's oversight organization.	✓	<b>&gt;</b>	<b>✓</b>	<b>\</b>		
		b.		Applicant screening policies and procedures that provide current residents a voice in the acceptance of new residents.	✓	R	®	-		
		c.		Policies and procedures that promote resident-driven length of stay.	✓	✓	✓	✓		
		d.		Policies and procedures that defend residents' fair housing rights.	✓	<b>✓</b>	✓	✓		
	8.	Su	ppor	t Housing Choice						
L		a.		Applicant screening policies and procedures provide current residents a voice in the acceptance of new members.	✓	>				
		b.		Policies and procedures that promote resident-driven length of stay.	✓	<b>&gt;</b>	<b>\</b>	<b>\</b>		
		c.		Policies and procedures that defend residents' fair housing rights.	✓	<b>✓</b>	<b>✓</b>	<b>✓</b>		
	9.	Pro	otect							
		a.		Policies and procedures that keep resident's records secure, with access limited to authorized staff.	✓	✓	✓	✓		
		b.		Policies and procedures that comply with applicable confidentiality laws.	✓	<b>✓</b>	<b>\</b>	<b>✓</b>		
				®	Strong	gly red	comme	nded		
C				iple: Be Recovery Oriented						
	10.	Vie	ewre	covery as a person-driven, holistic and lifelong proces	S		_			
		a.		Documentation that residents participate in the development of their recovery plan including an exit plan and/or lifelong plan.	✓	<b>✓</b>	✓	✓		
	_	b.		Documentation that the operator cultivates alumni participation.	<b>✓</b>	>	>	>		
	11.	En	sure	staff are culturally responsive and competent						
		a.		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.		A staffing or leadership plan that reflects the priority population's needs.	✓	✓	<b>✓</b>	<b>√</b>		
		c.		Documentation of cultural responsiveness and competence staff trainings that are relevant to the priority population.	-	R	✓	<b>√</b>		
		d.		Policies and procedures that encourage residents to make their	✓	<b>√</b>	<b>√</b>	<b>√</b>		
				own outside appointments.	,	,		-		
				® S	Strong	ly rece	ommen	ded		

				Ι	II	III	IV					
Cor	e Pı	rinc	ciple: Use Peers to Staff and Govern									
12.	Inv	olv	e peers in governance in meaningful ways									
	a.		Documentation that some rules are made by the residents that the residents (not the staff) enforce.	<b>√</b>	<b>✓</b>	✓	✓					
	b.		Documentation that a resident council or process is in place that ensures residents' voices can be heard.	<b>✓</b>	<b>\</b>	✓	✓					
	c.		Documentation that the resident council has a voice in the governance of the home.	>	<b>&gt;</b>	✓	✓					
13.	Us	e pe		_			]					
	a.		their length of stay or progress in their recovery.	✓	✓	✓	✓					
	b.		component.	✓	✓	✓	✓					
	c.		leaders.	-	-	✓	✓					
14.	Maintain resident and staff leadership based on recovery principles											
	a.		residents and where possible, former residents who model recovery principles.	✓	✓	✓	✓					
	b.		selections are based in part on modeling recovery	✓	✓	✓	✓					
15.	Cr	eate										
	a.		Documentation that recovery support is integrated in the	✓	✓	✓	✓					
	b.		Documentation that residents' schedules include formal and informal opportunities for staff and resident interaction	-	✓	✓	✓					
16.	Ensure staff are trained or credentialed appropriate to their level											
	a.		Written staffing or workforce development plan.	-	R	✓	✓					
	b.		and verification.	-	-	✓	✓					
17.		ovid				1						
	a.		Policies and procedures for supervision of staff.	(R)	(R)	✓	✓					
	b.		Documentation that staff are provided with ongoing skills development, oversight and support policies and procedures appropriate to staff roles and level of support.	R	R	✓	<b>~</b>					
				® Str	ongly r	ecomm	ended					
Rec	ove	ery	Support Domain		LEV	ELS						
				Ι	II	III	IV					
Cor	e Pi	rin	ciple: Create a Healthy Recovery Environ	men	t							
18.	En	cou										
	а.		Policies and procedures that encourage each resident to develop and participate in her/his own personalized recovery plan (Person-driven recovery).	<b>√</b>	✓	<b>√</b>	<b>✓</b>					
	12. 13. 14. 15. 16. Cor	12. Inv a. b. c. 13. Us a. b. c. 14. Ma a. b. 15. Cr a. b. 17. Pro a. b.  Recove	12. Involve   a.	a. Documentation that some rules are made by the residents that the residents (not the staff) enforce.  b. Documentation that a resident council or process is in place that ensures residents' voices can be heard.  c. Documentation that the resident council has a voice in the governance of the home.  13. Use peer staff and leaders in meaningful ways  a. Documentation that residents' responsibilities increase with their length of stay or progress in their recovery.  b. Staffing or leadership plan that formally includes a peer component.  c. Written job descriptions and/or contracts for peer staff and leaders.  14. Maintain resident and staff leadership based on recover a staffing or leadership plan that includes input from current residents and where possible, former residents who model recovery principles.  b. 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 and informal opportunities for staff and resident interaction in support of recovery.  16. Ensure staff are trained or credentialed appropriate to an important of the staffing or workforce development plan.  b. 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 and written staffing or workforce development plan.  b. Policies and procedures for acceptance of certification(s) and verification.  17. Provide Supportive Staff Supervision  a. Policies and procedures for supervision of staff.  b. Documentation that staff are provided with ongoing skills development, oversight and support policies and procedures appropriate to staff roles and level of support.  Recovery Support Domain	12. Involve peers in governance in meaningful ways  a. □ Documentation that some rules are made by the residents that the residents (not the staff) enforce.  b. □ Documentation that a resident council or process is in place that ensures residents' voices can be heard.  c. □ Documentation that the resident council has a voice in the governance of the home.  13. Use peer staff and leaders in meaningful ways  a. □ Documentation that residents' responsibilities increase with their length of stay or progress in their recovery.  b. □ Staffing or leadership plan that formally includes a peer component.  c. □ Written job descriptions and/or contracts for peer staff and leaders.  14. Maintain resident and staff leadership based on recovery pri as a staffing or leadership plan that includes input from current residents and where possible, former residents who model recovery principles.  b. □ Documentation that leader and/or staff job descriptions and selections are based in part on modeling recovery support as elections are based in part on modeling recovery support and informal opportunities for staff and resident interaction in support of recovery.  15. Create and sustain an atmosphere of recovery support and informal opportunities for staff and resident interaction in support of recovery.  16. Ensure staff are trained or credentialed appropriate to their and informal opportunities for staff and resident interaction in support of recovery.  16. Ensure staff are trained or credentialed appropriate to their and verification.  17. Provide Supportive Staff Supervision  a. □ Policies and procedures for supervision of staff.  b. □ Documentation that staff are provided with ongoing skills development, oversight and support policies and procedures appropriate to staff roles and level of support.  © Str	Core Principle: Use Peers to Staff and Govern	Core Principle: Use Peers to Staff and Govern					

-					Ι	II	III	IV
	19.			and encourage residents to participate in a range supports	of co	omn	nunit	<b>y</b> -
L		a.		Documentation that staff and/or resident leaders are provided	-	-		
		а.	╽╵	with proficiently knowledgeable of local community-based		<b>~</b>	<b>~</b>	*
				resources.				
		b.		Documentation that resource directories or similar resources	<b>✓</b>	<b>✓</b>	✓	✓
	20.	Ot	for r	are readily available to residents.				
	20.	a.	ler i	ecovery support in informal social settings  Staffing plan documenting informal recovery support				
		a.		services.		<b>~</b>	>	<b>~</b>
		b.		Documentation of traditions, policies or procedures that foster	✓	<b>^</b>	<b>\</b>	✓
				mutually supportive and recovery-oriented relationships				
	21.	Of	for r	between residents and/or staff through peer-based interactions.	ш			
	41.			Documentation of weekly schedule(s) of recovery support				
		a.	╽╙	services recognized as appropriate by the respective NARR	-	-	<b>√</b>	<
				Affiliate organization.				
		b.		Documentation of weekly schedule(s) of recovery-oriented	-	-	<b>√</b>	<b>√</b>
				presentations, group exercises, and activities				
		c.		Staffing plan documenting delivery of support services in	-	-	✓	✓
	22.	Of	for I	formal settings.  ife skills development services in a formal setting	ш			
L	22.	a.		Documentation of weekly scheduling of formal life skills				
		а.	╽╙	development services or classes.	-	_	<b>✓</b>	~
		b.		Staffing plan that corresponds to the delivery of life skills	-	-	<b>√</b>	1
_				development in a formal setting.			·	Ĭ
L	23.	Of	fer c	linical services in accordance with state law				
		a.		Documentation of weekly clinical services scheduling made available to residents across all phases if multiple phases are	-	-	-	✓
				used.				
		b.		Staffing plan that documents delivery of clinical services in	- 1	-	-	1
				accordance with state law.	Ш			
				ciple: Provide a Home-like Experience				
ı	24.			e a physically and emotionally safe, secure and res	pect	ful		
L			VIFO	nment				
		a.		Policies and procedures that establish the residence's priority population(s) and cultivate physically and emotionally safe	🗸	<b>√</b>	✓	🗸
				environments for meeting the needs of individual residents				
				and sustaining recovery-support connections.				
		b.		Policies that promote resident-determined lengths of stay that	✓	<b>^</b>	R	R
r	25	Dw	 	support health and safety of the household/community.				
L	25.		I	e an alcohol and illicit drug-free environment  Policy regarding the use of alcohol and/or other prohibited				
		a.	ᅵᅛ	drug-seeking.	🗸	<b>✓</b>	<b>✓</b>	✓
		b.		Policy and procedures regarding possession of hazardous and	<b>√</b>	<b>✓</b>	<b>√</b>	1
				other prohibited items and associated searches.	Ľ			Ľ
		c.		Policies and procedures for drug screening and/or toxicology	✓	✓	✓	✓
		a		protocols.	$\vdash$			
		d.	lШ	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	Ш	IV
	26.	En	viro	nment cultivated through structure and accountable	ility			
·		a.		Written resident rights, requirements, agreements, social covenants and/or "Residence Rules."	✓	✓	✓	✓
		b.		Written requirements and protocols for peer leadership and/or mentoring policies that foster individual and community accountability.	✓	✓	✓	<b>✓</b>
				·	Stron	ıglv re	comm	ended
	Car	D	•			6.7		
G		,		ciple: Inspire Purpose				
	27.	_	omo	te meaningful daily activities				
		a.		Documentation of weekly schedule of resident activities.	✓	✓	✓	✓
		b.		Documentation that residents are encouraged to do at least one of the following:  Work, going to school, or volunteer outside of the residence community (Level 1, 2 and some 3s)	✓	✓	✓	✓
				<ul> <li>Participate in mutual aid or caregiving (All Levels)</li> <li>Participate in social, physical or creative activities (All Levels)</li> <li>Attend daily or weekly programming (All Levels)</li> </ul>				
		c.		Documentation that recovery planning & peer governance are person-driven activities.	✓	✓	✓	✓
Н	Cor	40 D	uin.					
П	_			ciple: Cultivate Community a "functionally equivalent family" within the resident			• •	
	28.	by						
		a.		Documentation that residents are involved in food preparation.	<b>✓</b>	✓	<b>\</b>	✓
		b.		Documentation that residents have a significant voice in determining with whom they live.	<b>✓</b>	<b>√</b>	<b>&gt;</b>	✓
		c.		Documentation that residents help maintain and clean the home (chores, etc.).	✓	✓	✓	✓
		d.		Documentation that residents share in household expenses.	<b>\</b>	✓	<b>✓</b>	✓
		e.		Documentation that family or residence meetings are held at least once a week.	<b>✓</b>	<b>√</b>	<b>\</b>	✓
		f.		Documentation that residents have access to the common areas of the home.	✓	✓	✓	✓
	29.			ethical, peer-based mutually supportive relationships	s be	twee	n	
		-		ats and/or staff	_		_	
		a.		Policies and procedures that encourage residents to engage one another in informal activities and conversation.	<b>_</b>	<b>_</b>	<b>✓</b>	<b>'</b>
		b.		Policies and procedures that encourage staff to engage residents in informal activities and conversations.	✓	✓	<b>✓</b>	<b>'</b>
		c.		Policies and procedures that coordinate community gatherings, recreational events and/or other social activities amongst	✓	✓	✓	✓
	20	C	nna	residents and/or staff. ct residents to the local (greater) recovery communications.	tw e	C 017	dona	- Ad
	30.			east 50% of the following for levels II, III, and IV, a	•			
				Collowing for level I:	iiu a	100	ist UI	10
		a.		Documentation that residents are informed of or linked to mutual aid, recovery community centers, recovery ministries, recovery-focused leisure activities, and/or	✓	✓	✓	✓
		h		recovery advocacy opportunities.	_	Ļ		
		b.		Documentation that the recovery residence helps participants find a recovery mentor or mutual aid sponsor if they are having difficulty finding one.	✓	✓	<b>&gt;</b>	<b>\</b>

					Ι	II	Ш	IV
		c.		Documentation that mutual aid meetings are hosted on site and there are typically attendees from the greater recovery community.	✓	✓	✓	<b>✓</b>
		d.		Documentation that participants are encouraged to find a recovery mentor or mutual aid sponsor before leaving the recovery residence.	✓	✓	✓	✓
		e.		Documentation that residents are formally linked with the community such as job search, education, family services, health and/or housing programs.	✓	✓	✓	✓
		f.		Documentation that residents engage in community relations and interactions to promote kinship with other recovery communities and goodwill for recovery services.	✓	✓	✓	<b>√</b>
		g.		Documentation that sober social events are regularly scheduled (each participant can attend at least one).	✓	✓	✓	✓
3	Prop	ert	ty a	and Architecture Domain		LEX	VELS	
					Ι	II	III	IV
	I Cor	p P	rinc	iple: Provide a Home-like Space				
				-				
	31.		eate	a home-like environment				
		а.		Verification that furnishings are typical of those in single family homes or apartments as opposed to institutional settings.	<b>✓</b>	<b>✓</b>	✓	<b>✓</b>
		b.		Verification that entrances and exits are home-like vs. institutional or clinical.	✓	✓	✓	✓
		c.		Verification that there are 50+ sq. ft. per bed per sleeping room.	✓	✓	✓	<b>✓</b>
		d.		Verification that there is one sink, toilet and shower per six residents.	✓	✓	✓	✓
		e.		Verification that each resident has personal item storage.	✓	✓	✓	✓
		f.		Verification that each resident has food storage space.	✓	✓	✓	✓
		g.		Verification that laundry services are accessible to all residents.	✓	✓	<b>√</b>	✓
		h.		Verification that all appliances are in safe, working condition.	✓	✓	✓	<b>✓</b>
		i.	╽╙	Documentation of a staffing plan that provides for addressing repairs and maintenance in a timely fashion.	✓	✓	✓	✓
	32.	Pro	omo	te community				
		a.		Verification that community room (space) is large enough to reasonably accommodate community living and meetings.	✓	✓	✓	✓
		b.		Verification that a comfortable group area, a living room or sofas, are provided for participants to informally socialize.	<b>~</b>	✓	✓	✓
		c.		Verification that kitchen and dining area(s) are large enough to accommodate residents sharing meals together.	✓	✓	✓	✓
		d.		Verification that entertainment or recreational areas and/or furnishings that promote social engagement are provided.	✓	✓	✓	<b>✓</b>
		e.		Verification that furniture is in good condition.	✓	✓	✓	✓
J	_		_	e: Promote Health and Safety				
	33.	Cr	eate	Home Safety				
		а.		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.	<b>√</b>	<b>√</b>	<b>✓</b>	<b>√</b>

					Ι	II	III	IV
		b.		Signed, dated safety self-assessment checklist which includes	<b>✓</b>	<b>✓</b>	<b>✓</b>	<b>√</b>
				Functioning smoke detectors in the sleeping rooms				
				<ul> <li>Functioning carbon monoxide detectors, if there are gas appliances</li> </ul>				
				• Functioning fire extinguishers in plain sight and/or clearly				
				* * *				
				clean condition and free of fire nazards				
		c.		Policy regarding smoke free living environment policy and/or	<b>√</b>	<b>√</b>	1	<b>√</b>
					السا	Ů	Ů	Ů
		d.				✓	✓	✓
		Δ						
				evidence that residents are trained in its use.	<b>~</b>			
	34.	Ha	ve a	n emergency plan				
		a.		Verification that emergency numbers, procedures and	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>
				evacuation maps are posted in conspicuous locations.	لــــــا	Ů	Ľ	J
		b.			✓	✓	✓	✓
marked locations   letterior of the property are in a functional, safe and clean condition and free of fire hazards   letterior and exterior of the property are in a functional, safe and clean condition and free of fire hazards   letterior and exterior of the project of the residence.   Policy regarding smoke free living environment policy and/or designated smoking area outside of the residence.   Verification that Naloxone is available and accessible; evidence that staff members and residents are trained in its use.   Verification that Naloxone is available and accessible; evidence that residents are trained in its use.								
	$\mathbf{G}_{00}$	1 h	Jaio	ghhar Damain		LEX	/FLS	
	Guu	u 1	TOI	giibui Duinain		12,2	Lies	
					I	II	III	IV
T/	Con	ı D		inles De a Cood Naighbor	_			
N		er.	rinc	apie: De a Good Neighbor				
	35.	Be	Con	npatible with the neighborhood	Adated safety self-assessment checklist which includes nctioning smoke detectors in the sleeping rooms nctioning garbon monoxide detectors, if there are gas appliances nctioning fare extinguishers in plain sight and/or clearly rked locations erior and exterior of the property are in a functional, safe and an condition and free of fire hazards regarding smoke-free living environment policy and/or sted smoking area outside of the residence. Attoin that Naloxone is available and accessible; ethat staff members and residents are trained in its use. attoin that Naloxone is available and accessible; ethat staff members and residents are trained in its use. attoin that emergency numbers, procedures and tion maps are posted in conspicuous locations. entation that emergency contact information is deform residents and that they are oriented to mey procedures.  Promain  LEVELS  Be a Good Neighbor  with the neighborhood  entation that if recovery residence is in a residential orhood, there are no external indications that the yis anything other than a single family household of its neighborhood.  ation that the property and its structures are consistently yis anything other than a single family household of its neighbor concerns  s and procedures that provide neighbors with the sible person(s) contact information upon request. Sand procedures that require the responsible person(s) to to neighbor's concerns even if it is not possible to release issue.  entation that new resident orientation includes how ts and staff are to greet and interact with neighbors and/or need parties.  Prules  sthat are responsive or preemptive to neighbors' reasonmplaints regarding oking tering king see with the residence are and interact with neighbors and/or need parties.			
		a.			<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>
		h	$\overline{}$			-		
		ο.			<b>~</b>	~	~	~
	36.	Be	resp	ongivo to noighbor concerns				
		_		onsive to neighbor concerns				
		a.		Policies and procedures that provide neighbors with the	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>
				Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.	<b>√</b>	<b>✓</b>	✓	✓
				Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.  Policies and procedures that require the responsible person(s) to		✓ ✓	✓ ✓	✓ ✓
				Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.  Policies and procedures that require the responsible person(s) to respond to neighbor's concerns even if it is not possible to re-		✓ ✓	✓ ✓	✓ ✓
		b.		Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.  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.	✓	✓ ✓	✓ ✓	√ √
		b.		Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.  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.  Documentation that new resident orientation includes how residents and staff are to greet and interact with neighbors and/or	✓	✓ ✓	✓ ✓	✓ ✓ ✓
=	Core Principle: Be a Good Neighbor	√ ✓ ✓						
	37.	b.		Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.  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.  Documentation that new resident orientation includes how residents and staff are to greet and interact with neighbors and/or concerned parties.  ourtesy rules	✓	✓ ✓	✓ ✓	√ ✓
	37.	b. c.		Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.  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.  Documentation that new resident orientation includes how residents and staff are to greet and interact with neighbors and/or concerned parties.  ourtesy rules  Policies that are responsive or preemptive to neighbors' reason-	<b>√</b>	✓ ✓	✓ ✓ ✓	✓ ✓ ✓
	37.	b. c.		Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.  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.  Documentation that new resident orientation includes how residents and staff are to greet and interact with neighbors and/or concerned parties.  Ourtesy rules  Policies that are responsive or preemptive to neighbors' reasonable complaints regarding	<b>√</b>	✓ ✓ ✓	✓ ✓ ✓	✓ ✓ ✓
	37.	b. c.		Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.  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.  Documentation that new resident orientation includes how residents and staffare to greet and interact with neighbors and/or concerned parties.  Ourtesy rules  Policies that are responsive or preemptive to neighbors' reasonable complaints regarding  • Smoking	<b>√</b>	✓ ✓ ✓	✓ ✓ ✓	✓ ✓ ✓
	37.	b. c.		Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.  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.  Documentation that new resident orientation includes how residents and staff are to greet and interact with neighbors and/or concerned parties.  ourtesy rules  Policies that are responsive or preemptive to neighbors' reasonable complaints regarding  • Smoking  • Loitering	<b>√</b>	✓ ✓ ✓	✓ ✓ ✓	✓ ✓ ✓
	37.	b. c.		Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.  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.  Documentation that new resident orientation includes how residents and staff are to greet and interact with neighbors and/or concerned parties.  Ourtesy rules  Policies that are responsive or preemptive to neighbors' reasonable complaints regarding  • Smoking  • Loitering  • Parking	<b>√</b>	✓ ✓ ✓	✓ ✓ ✓	✓ ✓ ✓
	37.	b. c.		Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.  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.  Documentation that new resident orientation includes how residents and staff are to greet and interact with neighbors and/or concerned parties.  Ourtesy rules  Policies that are responsive or preemptive to neighbors' reasonable complaints regarding  • Smoking  • Loitering  • Parking  • Noise	<b>√</b>	✓ ✓ ✓	✓ ✓ ✓	✓ ✓ ✓
	37.	b. c.		Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.  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.  Documentation that new resident orientation includes how residents and staff are to greet and interact with neighbors and/or concerned parties.  Ourtesy rules  Policies that are responsive or preemptive to neighbors' reasonable complaints regarding  • Smoking  • Loitering  • Parking  • Noise  • Lewd or offensive language	<b>√</b>	✓ ✓ ✓	✓ ✓	✓ ✓ ✓
	37.	c. Ha		Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.  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.  Documentation that new resident orientation includes how residents and staff are to greet and interact with neighbors and/or concerned parties.  Ourtesy rules  Policies that are responsive or preemptive to neighbors' reasonable complaints regarding  • Smoking  • Loitering  • Parking  • Noise  • Lewd or offensive language  • Cleanliness of public space around the property	<b>✓</b>	✓ ✓ ✓	✓ ✓ ✓	✓ ✓ ✓
	37.	c. Ha		Policies and procedures that provide neighbors with the responsible person(s) contact information upon request.  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.  Documentation that new resident orientation includes how residents and staff are to greet and interact with neighbors and/or concerned parties.  Ourtesy rules  Policies that are responsive or preemptive to neighbors' reasonable complaints regarding  • Smoking  • Loitering  • Parking  • Noise  • Lewd or offensive language  • Cleanliness of public space around the property  Documentation that there are parking courtesy rules where	<b>✓</b>	<b>✓</b>	✓ ✓ ✓	✓ ✓ ✓

### 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 <u>major sections</u> of the document, labeled numerically 1-4: (These are the largest numbers on the document and are in white on a black background)

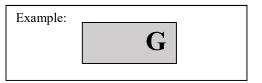
Administrative and Operational Domain Recovery Support Domain Property and Architecture Domain Good Neighbor Domain



#### Core Principles:

Under each of the **4 Domains** are nine (9) **Core Principles** labeled alphabetically in <u>capital letters</u>, "**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



#### 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.

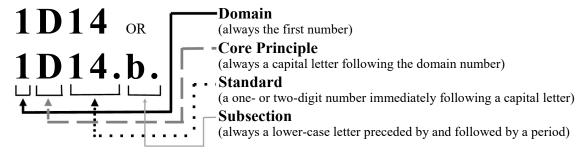
Example: 24.

#### 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	Ш	IV
	19.		and encourage residents to participate in a range upports	of co	omn	nunity	<b>y</b> -
•		a.	Documentation that staffand/or resident leaders are provided with proficiently knowledgeable of local community-based resources.	✓	✓	<b>✓</b>	✓

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: <a href="http://narronline.org/resources/">http://narronline.org/resources/</a>.

### **Contact information**

For information about the Washington Alliance for Quality Recovery Residences, please email <a href="mailto:info@recoveryhousingwa.org">info@recoveryhousingwa.org</a>

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/