



WVARR
West Virginia Alliance
of Recovery Residences

CERTIFICATION PREPARATION PACKET

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WVARR Certification Preparation Packet 2021

Certification Eligibility:

The WVARR certification process is designed for recovery residence program operators who are **currently** operating recovery housing programs in West Virginia. All residences and levels of housing in each organization will be thoroughly reviewed prior to the on-site visits, including policies and procedures for homes that aren't open yet. To become a WVARR certified residence, a dwelling will need to be in operation for at least **60 days** and have **60% occupancy** at the time of the review.

The review process is for recovery residences that meet the definition of recovery residences. Key elements of recovery residences include:

- Assuring the maintenance of an illicit drug and alcohol-free living environment;
- Offering peer recovery support and other recovery supports;
- Offered or advertised as promoting sustained long-term recovery from Substance Use Disorder (SUD);
- Minimum qualification for admission is people with Substance Use Disorder (or Alcohol Use Disorder, Poly-Substance Use, Opioid Use Disorder, etc.); and
- Striving to have a resident-driven length of stay.

The steps below provide an outline of the WVARR certification process:

HOW TO GET STARTED

Begin with the Pre-Application Phase:

Step 1: Read the National Quality Standards and NARR Code of Ethics

The first step is to become familiar with the [NARR Quality Standards \(3.0 version\)](#) as well as the [NARR Code of Ethics](#). The certification application process is designed to verify that your organization meets these minimum quality requirements. Everyone associated with your organization (including volunteers) is expected to adhere to the NARR Code of Ethics.

Step 2: Complete the Levels Quiz on the WVARR website wvarr.org for each dwelling

After you have become familiar with the NARR Quality Standards and the NARR Code of Ethics and have read through all of the steps outlined in this packet, the next step is to determine what level of recovery housing you operate. Your recovery residence level is based on what level of recovery support you offer, what type of staffing and/or oversight your residence has, and if you offer any formal clinical programming.

[Click here to take a quick survey](#) to find out what NARR Level *best* fits your recovery residence.

Please note: *This Levels Survey is for informational purposes only. Your NARR level for certification will be officially determined by WVARR staff through the certification process*

Step 3: Complete “Recovery Residences Preliminary Information” step in the WVARR Certemy software

Create a new professional profile on WVARR’s [Certemy Certification Platform](#). *Your application must be submitted online through Certemy.* You will be required to create an account in order to complete an application.

First, complete the “Recovery Residences Preliminary Information” requirement with information (Address/County/Bed Count/Bathroom Count) on all dwellings (each separate address) operated by your organization, including all levels of care. This information will prepare WVARR staff for your organization’s required Pre- Application Call.

Step 4: Sign Assurances

Next, review, sign, and upload the [WVARR Assurances document](#) in Certemy. This document needs to be signed by the person in your organization who is authorized to sign agreements and documents.

This document clarifies that the WVARR is reviewing your organization’s recovery environment. It is your responsibility as an organization to ensure that you comply with all local, state, and federal laws and codes, including building codes and fire codes, of your municipality. It is also your responsibility to ensure that your organization carries appropriate liability insurance for your operation.

When you sign this Assurances document, you are attesting that you have contacted the appropriate entities, have completed all appropriate inspections, that you are registered appropriately, and that you are currently following all business, fiscal, and reporting policies as required by the law and your organization.

Submitting the signed Assurances *prior to engaging in any of these activities will be considered submitting false information and a violation of the NARR Code of Ethics.*

[Click here to view to WVARR Assurances document.](#)

Step 5: Sign WVARR Certification and Compliance Agreement

The [2021 WVARR Certification Agreement](#) outlines the NARR Core Principles and addresses other issues, including grievances, incident reporting, and data sharing. It also denotes that you have read and understand each domain of the NARR Standards: Administrative and Operational, Physical Environment, Recovery Supports, and Good Neighbor domains. Your signature is attesting that you are implementing these minimum quality standards in your program. *(This short summary is for reference only and does not in any way replace thoroughly reading the full document of the WVARR Certification and Compliance Agreement.)*

Step 6: Pre-Application Call

Once you have completed the above steps and submitted the required information in Certemy, WVARR staff will review your professional profile and contact you within 5 business days.

Once this phone conversation has happened, you will receive access to your application for your first dwelling in the Certemy software. The Certification Reviewer assigned to your organization will determine when you can move forward with the other applications. You will submit one application for each address/dwelling your organization operates. All dwellings must meet the minimum requirements for your organization to become WVARR certified.

We ask that you be respectful and professional. Our staff is available Monday- Friday from 9 am - 5 pm. Please do not send text messages to our staff and please do not ask them to call you outside of our normal business hours.

Step 7: Payment of Associate Fees

Once it is confirmed that your application and documentation is complete, WVARR will send you an invoice for your Associate Fees. Fees are based on total capacity of all of the residences that you would like to be certified by WVARR. The review includes a one-day on-site review. If your properties are unable to be reviewed in a single day (organizations that have more than 5 properties or properties that are a significant driving distance apart), WVARR may charge an additional fee to cover the expense of a second day of reviews. You are welcome to contact WVARR for a quote prior to submission of your application.

If approved, your initial application, application fee, and certification will cover one year of certification. After your first year, your organization may be eligible for a two-year certification based on performance, complaints, and reliability. Associate fees are non-refundable.

If you submit payment by check, please make checks payable to:

West Virginia Alliance of Recovery Residences
1116 Smith St. Suite 414
Charleston, WV 25301

WVARR Certification Fee Schedule

You will receive an Invoice for your organization's annual Affiliate Fee and the *estimated* cost of your WVARR Certification Fees. This Invoice **must be paid** before the WVARR Certification Staff begin reviewing your application and documentation. This invoice is **not** completely comprehensive or a final total cost; there may be additional fees based on indeterminate factors such as final bed counts and how many times WVARR staff will need to do on-site visits of your dwellings (based upon your Quality Improvement Plan).

WVARR Annual Affiliate Fee: Each organization will be required to pay one flat-rate, annual WVARR Affiliate Fee of \$500. This fee is paid once per organization per year, even if the organization has multiple residences. For example, if Recovery House Inc. operates 5 residences, Recovery House Inc. will pay a one-time \$500 Affiliate fee which will cover all residences Recovery House Inc. operates.

WVARR Annual Certification Fee: See Fee Table Below. The fee is based on the total number of beds operated by the organization. If your organization had 5 residences with 45 beds total, your certification fee would be \$675.

Bed Count	Fee
1-12 beds	\$275.00
13-20 beds	\$375.00
21-30 beds	\$475.00
31-40 beds	\$575.00
41-50 beds	\$675.00
51-60 beds	\$775.00
61-70 beds	\$875.00
71+ beds	\$1000.00

Multiple County Operation Fee: A supplemental inspection fee of \$50 per county of operation will be assessed. For example, if you operate in 3 different counties, a fee of \$100 would be added to your fee. If you operate in 5 counties, \$200 would be added to your fee. This fee covers the extra time and travel involved for inspecting your residences.

Certification Reinstatement Fee: Should a WVARR recovery residence lose its certification for any reason, the residence will be charged a \$250 reinstatement fee to become recertified.

Step 8: Complete Online Application in Certemy

After we receive payment of your fees, your organization may [submit an application](#). The organization responsible for the operations of the residence is the organization that must apply for certification. All dwellings operated by this organization must apply for the organization to become a WVARR Certified organization.

Each dwelling will have its own application; please submit policies and procedures that are specific to the population of people who live there and specific to the level of care provided within that particular dwelling.

These applications must be submitted online through the Certemy platform. You will be required to create an account and a professional profile in order to complete an application.

You must first speak with a Certification Reviewer to access Certemy and begin your application.

[Click here to watch a brief video overview of the Certemy platform and how to begin your application.](#)

For technical support when submitting your application (issues with the website) you can email support@certemy.com

For questions regarding the content on the application itself, you can email jennie@wvarr.org

The Certification Application will require you to upload copies of specific documentation. The documentation requested will vary depending on the level of housing that you operate, the target

population you serve, and the specific services you offer.

You will be required to upload the following documents into your initial application:

- **Recovery Environment Questionnaire**
- **NARR Code of Ethics**
- **Certificate of General Liability Insurance**
- **Insurance Billing Agreement/MOU with 3rd Party Payer**
- **Resident Intake Packet:**
 - **Resident Application/Evaluation**
 - **Release of Information**
 - **Statement of Resident Rights**
 - **House Rules / Code of Conduct**
 - **Resident Financial Agreement**
 - **Refund Policy**
 - **Personal Property Policy**
 - **Prohibited Items List and Search Policy**
 - **Drug Testing Policy**
 - **Relapse Policy**
 - **Grievance Policy**
 - **Good Neighbor Policy**
 - **Resident Agreement**
- **Medication Policies:**
 - **•Prescription Medication Policy**
 - **•Non-Prescription Medication Policy**
 - **•Safe Drug List**
 - **•MAT (Medication Assisted Treatment) Policy**
- **Emergency Policies:**
 - **Medical, Fire, Natural Disaster Policy & Procedure**
 - **Narcan Policy & Procedure**
 - **Overdose Policy & Procedure**
- **Communicable Disease Policy**
- **COVID-19 Policy**
- **EBT/SNAP documents**
- **Paid Work Agreement**
- **Staffing Policies:**
 - **Staffing Plan**
 - **Staff Job Descriptions**
 - **Confidentiality Policy**
 - **Staff Background Check policy***
- **Social Media Policies**

- **Sample Weekly Schedule of Activities**
- **Sex Offender Registry Compliance Policy***
- **Other documents as appropriate for your level of housing, target population, and specific services provided.**

**These policies are requirements outlined by WV Code 69-CSR-15.*

After you submit your application, a representative from WVARR will review it and any corresponding documents submitted with your application and inform you of the results of this review within 15 business days (about 3 weeks). WVARR will review all submitted documents and will use the documentation checklists to ensure that your submitted documents contain all required elements. WVARR staff will send you a formal communication if we have any questions or require you to submit additional documents with your application. You will receive a WVARR Application Report pertaining to your Administrative Domain Review and your documentation and may be required to make changes or updates based on our review before moving to the next phase of the process.

Once your application has been fully approved, we will schedule an interview (**Step 9**) with your organization. Following your interview, we will schedule the on-site visits for each residence you operate (**Step 10**). Based on information gathered during the interview and on-site visit, you may be required to make changes or modifications to the policies submitted in your original application.

If it is determined that your documents are incomplete or do not meet quality standards, you will be allowed an opportunity to make quality improvements (**Step 11**). A summary of these requirements will be sent to you in writing in your organization's Quality Improvement Plan (QIP). You will be required to make these modifications and improvements within a specific timeframe. If you are unable to make the improvements within the designated timeframe, your application will lapse and you will be required to restart the process.

Your organization **must respond** to this QIP communication with answers to questions, copies of any missing documents, and any necessary quality improvements within **20 business days** (about one month). If you do not respond to WVARR within the required time frame, your application will lapse. ***Your response must be complete and address all questions and quality improvement recommendations outlined in your QIP.***

WVARR will review the response provided by your organization within **10 business days** and determine if your organization adequately meets all compliance metrics required for certification.

Step 9: Video Call Interview

After your application has been reviewed and fully approved, representatives from WVARR will schedule an online, video (Zoom, Go-to-Meeting, or another online platform) interview with your organization. The interview will be performed by WVARR's Certification Review staff. The WVARR reviewers will be available to answer any questions about the quality standards or the review process. Official recommendations will be communicated to you by WVARR staff members at that time.

During the interview you should be prepared to:

- Describe your application and orientation process and how you screen residents.

- Describe how you keep track of resident payments.
- Answer questions about your program, the services you provide, and how you connect residents to outside recovery and community resources.
- Answer questions about how all of your policies are being implemented in practice.

Step 10: On-Site Interview & Dwelling Review

Following your interview, WVARR will schedule an on-site visit for **each** of the residences operated by your organization. In order to perform the on-site visit, the residence must be in operation for at least 60 days and have at least 60% occupancy. WVARR staff will travel on-site to all residences operated by your organization. WVARR staff will send you a ***Pre-Inspection Checklist*** prior to your On-Site Visit. We strongly encourage you to walk through the buildings with this checklist and the standards in mind before we visit your facilities.

Your inspection will be performed by two WVARR Certification Staff Reviewers. They will ensure that all important topic areas are covered, ensure all paperwork is complete, be available to answer any questions you have about the quality standards, and make any necessary technical recommendations. ***Your review process is not yet complete at this stage. Staff will not give you a certification determination at this time.***

The on-site visit will begin with an interview. You will be asked questions about how your program operates and how your organization's policies and procedures are implemented in practice. WVARR staff are encouraged to speak directly with available staff and residents.

The reviewers will then examine the physical dwelling. Although WVARR reviewers are not fire inspectors or building code inspectors, each residence is expected to comply with all relevant fire and building codes. Reviewers will be examining the recovery environment and ensuring the program meets [the NARR Quality Standards 3.0](#).

During the on-site review you should be prepared to:

- **Tell the reviewers about your application process and have copies of any documents that you would share with potential residents available.**
- **Walk the reviewers through your orientation process and have copies of any documents that you would share with residents available, including an intake packet with updated policies and procedures.**
- **Show reviewers where required documents are kept in each of the residences.**
- **Explain how you keep track of resident payments and explain how residents may access a statement of account or get a receipt of their payments.**
- **Answer questions about your program, the services you provide, and how you connect residents to outside resources.**
- **Show the reviewers the property. WVARR will look at all common areas of the residence as well as resident rooms.**
- **Demonstrate that written policies and procedures are being implemented in practice.**

- **Demonstrate that the residence is clean, safe, and home-like. Reviewers should be able to see that residence chores are being completed and that maintenance requests are addressed.**
- **Be sure bedrooms meet space requirements (70 square feet for the first person and 50 square feet for each additional person).**
- **Demonstrate that the residence has required safety equipment (such as smoke detectors in each sleeping room, CO2 detectors in homes with gas appliances, and fire extinguishers with up-to-date inspection tags).**
- **Show that there is adequate food storage space for residents, including one full-sized refrigerator per 5 residents. (5:1)**
- **Show that there is one full bathroom (at least one Sink, one Shower and one Toilet) for every 6 residents.**
- **Demonstrate that residents have adequate storage space for personal belongings.**
- **Demonstrate how the physical environment of the residence contributes to a family-like environment in the home and facilitates the social model of recovery.**

Step 11: Implement Required Quality Improvements

After the on-site review, WVARR will provide you with an official Quality Improvement Plan within **15 business days**. Every organization that applies for certification will get a Quality Improvement Plan (QIP), even if all requirements are adequately met. Your QIP will include the suggestions discussed in the interview and at the on-site inspection and will list any changes or quality improvements necessary for your organization to become fully compliant with NARR and WVARR certification requirements.

You will be required to **respond** to your Quality Improvement Plan within **20 business days**. Acceptable responses to your organization's Quality Improvement Plan include:

- 1) Completing the required quality improvement activity and providing appropriate documentation that quality improvement activities have been implemented;
- 2) Completing all required quality improvement activity within your organization's current capacity and a timeline and detailed plan of how you are going to meet any additional requirements; or,
- 3) Providing WVARR with a written response detailing how your organization currently meets the national quality standards without engaging in the required quality improvement activity.

Your completed Quality Improvement Plan response should include a response to **each** item in the report. Please contact your certification reviewer if you have questions about acceptable responses.

If you do not respond to WVARR within the required timeframe, WVARR will make a certification determination based on the information we have available.

In some cases, WVARR may require a follow-up on-site review to verify quality improvement recommendations have been implemented. ***Any time an organization is required to remove beds from a residence, a second on-site review will be required.***

If a second review is required, WVARR your organization to pay a supplemental inspection fee of \$250.
You can avoid payment of this second fee by ensuring your property is ready for an on-site review at the time of our visit.

Step 12: Approval

Once WVARR has received a response from your organization concerning any required quality improvements, WVARR staff will make a certification determination. **WVARR staff will notify you within 15 business days about your certification determination.**

Your organization may be:

- (1) Fully approved for certification.
- (2) Provisionally approved for certification, with contingencies.
- (3) Placed on a Certification Hold, with optional technical support.
- (4) Be fully denied and eligible to re-apply in no less than 6-months, or other timeframe designated by WVARR

If your organization is fully approved for certification, you will receive a Certificate of Compliance for **each** WVARR-certified residence that you operate. ***Each Certificate of Compliance is required to be publicly displayed in the corresponding residence to which it applies.***

As required by West Virginia law, each Certificate of Compliance will include:

- The name of the residence;
- The business/ Organization name;
- The number of beds certified in that residence;
- The specific gender/ population served;
- The specific residence address;
- The type of certification (initial, renewal, reinstatement);
- The NARR Level of Care;
- The duration of certification for that residence;
- The date of issue and expiration date of the certification; and,
- The certificate number.

Step 13: Renewal

All initial WVARR Certifications will be good for one year. It is recommended that you apply for renewal of your certification three months prior to your certification expiring. This will allow for enough time to complete the entire process. ***If you do not complete the entire process prior to your certification expiring, your certification will lapse.***



NARR CODE OF ETHICS

All persons working in NARR Affiliate organizations, (recovery residence owners, operators, staff and volunteers) are expected to adhere to the following Code of Ethics:

It is the obligation of all recovery residence owners/operators and staff to value and respect each resident and to put each individual's recovery and needs at the forefront of all decision making. To meet this obligation, we adhere to the following principles:

1. Assess each potential resident's needs and determine whether the level of support available within the residence is appropriate. Provide assistance to the resident for referral in or outside of the residence.
2. Value diversity and non-discrimination.
3. Provide a safe, homelike environment that meets NARR Standards.
4. Maintain an alcohol- and illicit-drug-free environment.
5. Honor individuals' rights to choose their recovery paths within the parameters defined by the residence organization.
6. Protect the privacy and personal rights of each resident.
7. Provide consistent and uniformly applied rules.
8. Provide for the health, safety, and welfare of each resident.
9. Address each resident fairly in all situations.
10. Encourage residents to sustain relationships with professionals, recovery support service providers and allies.
11. Take appropriate action to stop intimidation, bullying, sexual harassment and/or otherwise threatening behavior of residents, staff, and visitors within the residence.
12. Take appropriate action to stop retribution, intimidation, or any negative consequences that could occur as the result of a grievance or complaint.
13. Provide consistent, fair practices for drug testing that promote the residents' recovery and the health and safety of the recovery environment and protect the privacy of resident information.
14. Provide an environment in which each resident's recovery needs are the primary factors in all decision making.
15. Promote the residence with marketing or advertising that is supported by accurate, open and honest claims.
16. Decline taking a primary role in the recovery plans of relatives, close friends, and/or business acquaintances.
17. Sustain transparency in operational and financial decisions.
18. Maintain clear personal and professional boundaries.
19. Operate within the residence's scope of service and within professional training and credentials.
20. Maintain an environment that promotes the peace and safety of the surrounding neighborhood and the community at large.

Final: July 2016

The Code of Ethics must be read and signed by all those associated with the operation of the recovery residence: recovery residence owners, operators, staff and volunteers.

Individuals subject to this code are obligated to report unethical practices according to the reporting rules set forth by the affiliate.

In signing the following, I affirm that I have read, understand and agree to abide by this Code of Ethics.

Name (print): _____ Date: _____

Signature: _____

Recovery Residence: _____ NARR Affiliate: _____

Final: July 2016

Assurances Preparation Checklist

A legal, binding, notarized document attesting that your organization meets all local, state, and federal laws, and codes will be submitted.

[You can download the required WVARR Assurances Document here. The Assurances will be signed in Certemy as part of the Pre-Application Phase.](#)

- The organization requesting certification with WVARR is a legally recognized entity within the state of West Virginia and meets all legal expectations of such entities: reporting, maintaining records, providing financial data, etc.
- The organization requesting certification with WVARR has a Federal Tax Identification Number, an Employee Identification Number (EIN) that is recognized by the Internal Revenue Service (IRS) of the United States Government.
- The organization requesting certification with WVARR has the State of West Virginia Incorporation Documents.
- The individual facilities to be listed with WVARR meet all federal, state, and local ordinances and building codes required for residential or institutional buildings.
- The facilities to be listed with WVARR are regularly inspected by official fire inspectors and meet all expectations of said inspectors, including documenting fire extinguisher inspections and recording fire drills (where required).
- The facilities to be listed with WVARR have electrical, mechanical, and structural components that are functioning and free from fire and safety hazards.
- The facilities to be listed with WVARR meet the expectations of all legally authorized inspection agencies (elevators, automated security systems, etc.), and management can produce documentation in support of such assertions upon request.
- The organization requesting certification with WVARR maintains an accounting system and annual budget adequate for effective program management and meeting mandated reporting requirements.
- The organization requesting certification with WVARR maintains appropriate record-keeping systems for employees and residents including any legally required criminal background checks.
- The organization requesting certification with WVARR assures that minutes from The Board of Directors Meetings are documented and kept on file.
- The organization that manages the facilities maintains appropriate homeowners/renters and general liability insurance specific to sober living programs and lists WVARR as an “additional insured”.
- The organization requesting certification with WVARR has policies and procedures that comply with applicable confidentiality laws.
- The organization that manages the facilities to be listed with WVARR attests that the residence meets local health, safety codes appropriate to the type of occupancy.

Application Review Checklist

This is a general checklist for what we are looking for when we review your application.

Administration and Operational Domain:

- Organization and operator's contact information (both)
- Recovery facility's information, level of support, capacity, and demographics for all homes
- Organization has an appropriate mission statement
- Organization has an appropriate vision statement
- Proof of adequate liability insurance coverage
- Organization has written permission from property owner to operate a recovery residence on the property
- Organization has signed the required WVARR Assurances document
- Organization has signed the WVARR Certification and Compliance Agreement
- Operator indicates that they have been operating for at least 60 days at 60% capacity
- Intake Packet with Resident Agreements: Operators are responsible for maintaining signed copies of each resident's signed Intake Packet (including signed Resident Agreements) in their resident files. WVARR will only require the blank forms used to be submitted in Certemy.
- Resident Application/evaluation: Operators are responsible for maintaining these in resident files. The blank form will be submitted in Certemy.
- Statement of Residents' Rights, including written references to Fair Housing Rights and a statement of Non-Discrimination (2.D)
- Organization describes an appropriate application and orientation process for determining resident needs prior to the resident moving in
- Resident Application has written space to collect Emergency Contact information (19.B)
- The organization has a voluntary Paid Work Agreement for residents that demonstrates labor is compensated consistent with minimum wage requirements (documented with pay stubs) and states paid work will not interfere with recovery programming.
- Paid work agreements for Peer Leaders and/ or other leadership staff (This should include any discounts or exchanges. For example, if you offer free rent to Peer Leaders or House Managers, this needs to be included in your Paid Work Agreements.)
- NARR Code of Ethics: The Code of Ethics must be signed by residence operators, staff, volunteers, and anyone else working within the residence (including peer leaders) or representing the residence.
- Program has a financial system that keeps track of resident payments (verification required)
- Refund Policy (must be signed prior to residents entering into a binding contract)
- Organization submitted their Insurance Billing Agreements with 3rd Party Payers: For example, submit a Memorandum of Understanding (MOU) with Licensed Behavioral Health Clinic (LBHC)
- Medication Policies: Prescription and Non-prescription, Safe Drug List and MAT policy
- Written policy that states that staff may not become involved in personal financial affairs of residents - including loaning money or borrowing money from residents (2.H)

- House Rules / Code of Conduct (for each residence and level of care)
- Organization has a plan for preventing and addressing recurrence of use or relapse
- Organization has a plan for addressing recurrence of use or relapse if it does occur
- Organization utilizes an updated Grievance Policy using the required WVARR policy template and form
- Organization utilizes the evidence-based Social Model of recovery and best-practices
- Staffing plan and staff job descriptions that ideally include staff with lived experience recovering from Substance Use Disorders
- Organization has a plan for ensuring staff's cultural competency and training
- Organization has policies that protect residents' confidentiality, including a Social Media release policy and form
- Organization utilizes the required WVARR Incident Reporting policy and form
- Organization has a process for ensuring that the home is free from alcohol or illicit drugs

Physical Environment Domain:

- The buildings are in good repair and create a home-like environment
- Organization has a process for ensuring that the home is free from alcohol or illicit drugs
- Dwelling has a **6:1 resident to full bathroom ratio** (combination of a shower, sink, and toilet)
- Sleeping rooms maintain **70 sq ft for the first bed and 50 sq ft per bed after that** and provide **adequate storage space** for personal belongings for every resident. **Fire egress in sleeping rooms.**
- The common areas of the house are large enough to accommodate meetings and shared meals
- Kitchens have a **5:1 resident to refrigerator ratio** for ample food storage
- Home Safety Inspection policy includes regular documented inspections of smoke detectors, carbon monoxide detectors, and fire extinguishers (with up-to-date inspection tags).
- Emergency Drills are documented (recommended but not required for level 1)
- Drug Testing Policy and Relapse Policy
- Personal Property Policy and Search Policy
- Communicable Disease Policy with Covid19 policy
- Evacuation maps are posted
- Emergency Policy includes Narcan Policy and Overdose Procedure
- Naloxone is supplied on every floor of each building to be certified

Recovery Support Domain:

- Recovery Environment Questions: There are 10 questions to answer on Certemy. Please answer completely with 3-4 sentences for each question.
- Organization incorporates recovery programming with emphasis on development of recovery capital
- Example Weekly Schedule of Activities, one for every phase of the program
- Organization has a plan to work with each resident individually to work towards recovery goals (i.e. recovery planning)
- Organization has a strategy for exit planning and for moving out
- Organization has a plan for encouraging resident leadership

- Organization utilizes the evidence-based Social Model of recovery and best practices
- Residents are linked to and encouraged to participate in mutual-aid meetings or equivalent support services in the community
- Residents are encouraged to participate in recovery activities and are connected to the larger recovery community
- Application is free from any language that promotes stigma or does not hold residents in continuous positive regard

Good Neighbor Domain:

- Good Neighbor Policy: Lists the operator's name and phone number to be distributed to neighbors with concerns or questions (should be included in the Resident Intake Packet and Orientation)
- Organization has policies relating to smoking, profanity, littering, and parking

Additional Required Policies:

- Confidentiality Policy with Social Media Release form
- Staff Background Check policy
- Sex Offender Registry Compliance Policy (Applies to both staff & residents)

Documentation Review

The NARR Quality Standard 3.0 version details specific written policies and procedures that organizations must implement in order to demonstrate quality. All organizations seeking certification by WVARR are required to provide copies of the listed documents or equivalent for review. WVARR will verify that the following elements are included in your documentation. If an element is missing, WVARR will request that you update your documentation accordingly. WVARR will not schedule an on-site review until all required documentation has been submitted and verified. During the on-site review, WVARR reviewers will ask questions about your organization's policies and procedures and verify that the organization is implementing the practices as stated in the documentation submitted by your organization.

Certificate of Liability Insurance

Recovery Housing operators are required to have adequate insurance for each residence. A minimum \$1,000,000 liability policy is required. The certificate should indicate that there is a recovery program operated within the residence. Every property operated by your organization must be listed on the Certificate of Insurance and WVARR must be named as an "Additional Insured".

Insurance Billing Agreement/MOU with Third-Party Payer

If your organization or residence bills Medicaid or other 3rd party insurances for services (including Peer Recovery Support Services) provided at the residence, please attach any contracts, Memorandums of Understanding (MOU), and/or agreements with licensed providers that detail the relationship and expectations of each party.

Resident Intake Packet and Resident Agreements

Organizations are required to have an Intake Packet and Resident Agreement. Each resident is required to sign and date the Intake Packet policies and Resident Agreements during their orientation. The purpose of both the Intake Packet and Resident Agreement is to ensure that residents understand their obligations and expectations (including financial), as well as what they can expect from your organization. These documents ensure that the residents understand what services and supports the recovery residence will be providing to them as well as appropriate methods for ending the resident agreement, either by the resident or the operator. The Resident Financial Agreement should clearly state all financial terms and when program fees are due.

The **Resident Intake Packet** is broken down into separate policies for the resident to sign: (descriptions follow)

- Resident Application/Evaluation: Contains general personal information, including written disclosure of criminal justice involvement status, and Emergency Contact information
- Release of Information
- Statement of Resident Rights
- House Rules / Code of Conduct
- Resident Financial Agreement
- Refund Policy

- Personal Property Policy
- Prohibited Items List and Search Policy
- Drug Testing Policy
- Relapse Policy
- Grievance Policy and form
- Good Neighbor Policy
- Naloxone Policy and Overdose Procedure
- Resident Agreement

Resident Application / Evaluation

Certified recovery residences must have a written application or resident evaluation that records basic information and informs the application process for the recovery residence. This application is required to contain:

- Basic Resident Information (name, phone number, etc.)
- Emergency Contact information
- Basic Questions to determine if the resident will be an appropriate fit for the residence.
Examples include: When was the last time they were in clinical treatment and for how long? How long the resident has been in recovery? Do they have a sponsor? What is their employment history?
- Disclosure of Criminal Justice Involvement
- List of current symptoms and medications

Release of Information

An ROI must be signed for the resident's Emergency Contact and for any Probation or Parole Officer, lawyer, CPS Case Worker, etc. who will be receiving regular progress reports from the recovery program about the resident.

Statement of Resident Rights

A copy of the Resident Rights is required to be given to each resident when they move into the residence. The resident must sign and date when they have received it and the operator must maintain the signed copies in the resident file. Resident Rights must also be posted in a common area of each residence. Organizations may also include the statement of Resident Rights in a handbook or other collection of policies.

It is best practice to include the following in your statement of Resident Rights:

- Right to non-discrimination
- Right to Fair Housing, referencing the federal Fair Housing Act and/or ADA
- Right to vote in public elections
- Right to access healthcare
- Right to manage their own personal finances
- Right to a statement of a financial account and to receive receipts
- Rights pertaining to mail access

- Rights pertaining to visitors
 - Rights pertaining to phone usage
 - Rights pertaining to resident's personal property
 - Right to file a grievance (complaint) internally in accordance the residence's policy
 - Right to file a grievance (complaint) externally with WVARR or other designated authority
- Must be signed by the resident

House Rules / Code of Conduct

Organizations are required to have a list of house rules for residents. A copy must be provided to the resident upon move in, and a copy must be kept in a common area of the residence. Rules should include (at minimum):

- Prohibited use and possession of illicit drugs and alcohol
- List of other items that are prohibited in the home: Prohibited Items List
- Other rules as determined appropriate by the residence (including any good neighbor rules)

Resident Financial Agreement

- Must be signed and dated by the resident

Must contain the following information about deposits:

- Clearly states that deposits are not required

OR

- Clearly states the following about deposits:
 - The amount of the deposit.
 - The due date of the deposit.
 - If deposit is ever returned to resident and the timing of returning the deposit.

Must contain the following information about Program Fees:

- Contain information about any weekly or monthly fees that will be charged
- Clearly states the amount of fees or how fees will be calculated (if there is a sliding fee scale)
 - Clearly states when fees are due,

OR

- Clearly states that residents will not be paying fees and for how long they will be permitted to not pay fees.

Must contain the following information about potential Third Party Payers:

- The resident stay is completely self-pay

OR

- The resident is informed of the third-party payer, AND
- How long they may be able to get funding, AND

- If and how they can transition to self-pay if they are no longer eligible for funding.

Must contain the following information about any other fees:

- Information about any other fees that the resident is expected to pay such as utilities, household supplies, food costs etc.

Must contain:

- Written policy that states that staff may not become involved in personal financial affairs of residents - including loaning money or borrowing money from residents.

Refund Policy

- States clearly that there are no refunds offered with reasoning why

OR

- Under what circumstances refunds are issued, with a reference to COVID19
- How the resident can request a refund from the organization
- The time frame in which they will receive their refund.

Personal Property Policy:

- Contains information about what will happen to any resident belongings that are left in the home after the resident has vacated and the timeframe they have to pick up their belongings from the Recovery Residence property
- Outlines an appropriate procedure for any scenario where staff would hold on to personal property and for how long and a personal property form
- How personal property must be stored while at the program

Prohibited Items List and Search Policy:

- Must contain all items that are considered contraband like weapons or illicit drugs or any other items considered inappropriate to have while living in the recovery program
- Must contain a Prohibited Items List and a policy pertaining to searches of personal property, including who does the searches and how often they might happen; clearly states the procedure that staff will follow; and is signed by the resident in the Intake Packet

Drug Testing Policy

Recovery residences must have a written policy about drug tests. Best practices suggest randomly testing **at a minimum** of twice monthly and for any probable cause.

- The recovery residence does not engage in drug testing, **OR**,
- Policy describes drug tests are performed randomly.
- The resident will be informed of how the drug tests are paid for and if there are any circumstances where the resident may be required to pay for the test

- The resident will be informed of consequences for results of a positive drug screen or if they refuse the drug screen or what happens if they cannot produce a sample at the time requested.

Relapse Policy

- Information on how a recurrence of use is handled. If it is on a case-by-case basis this must be clearly stated.
- Reference to referring the resident to a higher level of care or another WVARR-certified facility
- If the resident's bed will be held while they are in SUD treatment, terms of this arrangement
- Procedure for contested UDS (We suggest sending off to a lab for confirmation.)

Grievance Policy

It is best practice that operators handle minor concerns and complaints within the residence or within the context of a "resident panel" or mandatory community meeting. There **must** be an opportunity for a resident to file a formal written grievance or complaint within the residence. This policy must contain the following:

- Instructions on how a resident may submit a written grievance
- Names and contact information for the organization's person responsible for handling complaints
- A statement that at any time the resident may contact the owner/operator about the complaint
- A statement that someone at the residence will help the resident file a written complaint if they need help
- A statement that the resident may contact an outside entity about the complaint (WVARR, the organization's Board of Directors, etc.)
- Information on any required timelines and the steps that the organization will take to respond to the complaint
- Explanation of who WVARR is and what their role is, WVARR address, phone number and website information www.wvarr.org/file-a-complaint

Good Neighbor Policy

Organizations are required to have a written policy for addressing neighbor concerns. Each resident should be informed of this policy when they move into the residence.

- The name and contact information of someone that neighbors can contact if they have a concern
- A description of how the recovery residence informs neighbors of this contact person
- Any additional information about how the recovery residence is a good neighbor as appropriate for the residence This policy specifically addresses smoking, profanity, and parking issues.

Naloxone Policy:

- This needs to describe where the Naloxone is kept (out in the open where it is easy to see)
- Needs to have information detailing the proper use of Narcan according to the type (nasal spray, injectable or auto injectable) that you have in your residence
- Does not limit access to anyone available to use the lifesaving medication on someone overdosing

Overdose Procedure:

- Details every step that you want your residents and staff to take to save a life
- Must use the **WVARR Overdose Procedure** template included below

Resident Agreement

Certified recovery residences must have each resident sign an updated copy of the Resident Agreement and keep these in the resident files. This document must also contain the following:

- Clearly states the alcohol and illicit drug free nature of the housing
- What the resident can expect the recovery residence to provide (a safe, healthy environment for growth)
- Information about non-financial resident expectations, including:
 - Following House Rules or Code of Conduct (usually a separate document)
 - Program requirements such as house meetings, mutual aid meetings, Church Services (if a faith-based program), or any other required activities that are expected of the resident
 - Information on visiting hours, phone access, mail access, etc.
 - Information on how the operator or the resident may end the resident agreement
- The Resident Agreement **may not contain** statements that request a resident waive housing, landlord tenant, or other rights.

Medication Policies

Organizations are required to address the following **four** categories in their Medication Policies:

Prescription Medication Policy:

- What medications are allowed
- What medications are not allowed
- How medications must be stored
- How residents may access their medication
- Must not contain any indication that the residence dispenses medications (unless you have employed a person with these credentials)
- Do residents have to check medication in or if there is a medication log

Non-Prescription Medication Policy:

- What over-the-counter medications are allowed in the residence
- What over-the-counter medications are not allowed in the house
- How medications must be stored
- How residents may access their medication

Safe Drug List:

- List of medications residents are allowed to take without consulting staff

MAT (Medication Assisted Treatment) Policy

- What medications are allowed
- What medications are not allowed
- How medications must be stored and who has access to the medication
- How residents may access their medication, how to fill out medication logs
- Must not contain any indication that the residence dispenses medications (unless you have employed a person with these credentials)

Emergency Policies

Organizations are required to have policies relating to emergency circumstances including natural disasters and medical emergencies. These policies must contain the following elements:

Medical, Fire, Natural Disaster Emergency Policy

- What residents should do in the case of an emergency (including natural disasters relevant to region and location of your residence)
- Phone Numbers for whom residents should contact in case of an emergency
- The residence's plan for ensuring that all safety equipment is in good working order and the residence is free of safety hazards. Example: Up to date inspections of fire extinguishers Information on documented regular fire drills (required for NARR Levels II, III, IV)

Naloxone Policy:

- This needs to describe where the Naloxone is kept (out in the open where it is easy to see)
- Needs to have information detailing the proper use of Narcan according to the type (nasal spray, injectable or auto injectable) that you have in your residence
- Does not limit access to anyone available to use the lifesaving medication on someone overdosing

Overdose Procedure:

- Details every step that you want your residents and staff to take to save a life
- Must use the **WVARR Overdose Procedure** template included below

Communicable Disease Policy

Organizations are required to have a policy concerning communicable disease. This policy must contain the following elements:

- Residents are notified of what behaviors may increase the spread of infectious disease (example: handwashing, not sharing personal items such as razors)
- Residents are encouraged to take precautions for the spread of infectious disease
- Residence provides supplies needed for precautions (such as a first aid kit with gloves and bags)

Covid-19 Policy

Recovery residences are required to have policies and procedures in place regarding COVID-19.

- Written policy that outlines the residence's COVID-19 policy & procedures

EBT/SNAP Documents

To ensure that residents' SNAP/EBT state benefit cards are being handled in accordance with federal and state guidelines, we require operators to go through the appropriate channels to get prior authorization from the WV DHHR and USDA for use of residents' EBT/SNAP benefits. This will require that your residence be issued a Point of Sale (POS) machine and that funds be withdrawn two times a month.

EBT/SNAP Policy

If your organization uses residents' EBT/SNAP benefits, your policies must:

- State the reason you feel it is appropriate for your organization to use your residents EBT cards in writing
- State that three meals a day will be provided and snacks and drinks will be made available
- State that 50% of funds will be taken off the card on the 1st of the month and the other 50% will not be taken off the card until the 16th of the month
- State that residents may use their cards on any weekend passes
- State that the resident will receive their card immediately upon discharge (before leaving the building)
- State that if a resident leaves the program, funds will not be taken off the card after that day and time that they moved out
- State that any of the resident's dependent's benefits are maintained on a separate card

Letter of support from the WV DHHR:

Upload the letter of support that was issued to you by the WV DHHR to apply for your permit from the USDA which states that your organization is furthering the cause of Title XIX. (*You may apply to DHHR for this letter using the application provided by your certification reviewer.*)

OR

OHFLAC Licensure

USDA SNAP Permit

This permit will ensure issuance of a POS machine which will track the intake of EBT SNAP funds. Please keep in mind that these fund records can be compared at any time to your food cost receipts.

Attach your USDA SNAP Permit as issued by the USDA

Paid Work Agreements

A paid work agreement is required when residents work for the organization or receive a discount or benefit for work done. Paid work agreements are required if the resident performs work for an affiliated organization or another organization owned or operated by the residence or organization's owners, employees, or family members. All recovery residences are required to have a policy that addresses Paid Work Agreements. ***Recovery housing operators are responsible for ensuring that any Paid Work Agreements comply with local, state, and federal labor, tax, and employment laws, including those pertaining to minimum wage requirements.*** Paid Work Agreements must:

- State that residents are not permitted to work for or be employed by the recovery housing operator or associated entities, **OR**
- State that the paid work agreement is entered into voluntarily.
- State that paid work will be paid at a fair market rate (at least minimum wage) and in compliance

with all employment laws

- State that paid work will not interfere with the resident's recovery goals
- State that paid work will not infer special benefits on the resident other than the fair payment

Staffing Policies

Organizations are required to have policies that guide and inform employees. These include:

Staffing Plan

All Level II, III, and IV organizations are required to have a written staffing plan that provides information on how the residences will be appropriately staffed to provide the services and supports listed at the residence.

- An organization chart of the staff involved in running the recovery residence
- Details on how staff are supervised
- Details on what the organization will do if a staff member is out or a position is vacant
- Details on any required staff training or development

Staff Job Descriptions

All Level II, III, IV organizations are required to have job descriptions for the staff working in the residence. Job Descriptions must contain the following:

- Position Title
- Who the person reports to
- Job duties
- Required education or training
- Required credential requirements

Confidentiality Policy

- Written policy that states that the operator and any staff will keep resident information private and confidential, where the resident files are kept, and when such information might be released
- A Social Media Release form for any resident to sign in case the organization would take a photo or video of the resident for any marketing or promotional purposes

Staff Background Check Policy

Recovery residences in West Virginia are required to have a staff background check policy. This policy should include how and when background checks are administered and any exclusions from hiring. Operators are required to maintain documentation to verify that staff background checks have been and continue to be conducted.

- Written policy that outlines the home's background policies and procedures

Social Media Policy

- Policy that addresses resident confidentiality in the context of social media (Facebook, Twitter, Instagram, etc.) posts, and a corresponding Social Media Release Form

Sample of Weekly Schedule of Activities

Organizations are required to have a weekly schedule of activities. Please submit a sample schedule. This schedule should include:

- Formal recovery-oriented events, meetings, and activities
- Formal Life Skills development activities and trainings (Life Skills are required for Level III or IV and are recommended for Level II)

Sex Offender Registry Policy

Recovery residences must have a policy that states that residents and staff are required to comply with all West Virginia Sex Offender Registry requirements. Operators must maintain documentation to verify that all residents and staff comply with these requirements. WVARR may request proof or verification of compliance.

- Written policy that states that residents and staff must comply with all West Virginia Sex Offender Registry requirements.
- Documentation verifying that all residents and staff comply with all West Virginia Sex Offender Registry requirements

Additional Required Policies:

WVARR requires written policies or procedures that address the following topics:

- Confidentiality Policy with Social Media Release form
- Staff Background Check policy
- Sex Offender Registry Compliance Policy (Applies to both staff & residents)

WVARR Sample Interview Questions

Our staff members will all be present to ask questions and take notes. Please be prepared to talk about the following during your interview:

1. Tell us about your application process and have the Application and/or Phone Call Resident Evaluation form that you use during the application process available.
2. Walk us through your orientation process and have copies of any documents that you would share with residents ready to share with us, including your full Resident Intake Packet.
3. Explain where required policies are kept in your homes.
4. Produce a Resident Financial statement, receipt, or be able to explain to us how a resident may request these items.
5. Explain how resident concerns or grievances are handled.
6. Answer questions about your recovery program and the support services you provide.
7. Detail how you are connecting the residents to the recovery community.
8. Explain how you maintain a clean, safe, and homelike environment. How are residents engaged to feel like this is their home?
9. Walk me through a typical day in the life of a resident? What do they do with their day?

WVARR PRE-INSPECTION CHECKLIST.

Please make sure your home is fully prepared prior to the inspection date.

HEALTH REVIEW

Every place in the home/site must be in good repair, clean, well maintained, and free of pest infestation. Piles of newspapers, clothes or other stored materials could create a fire hazard. Below are the principal items to look for:

1. Any signs of roach or other pest infestation problems?
2. Kitchen and appliances clean and well maintained? Is there at least 1 refrigerator for every: 5 residents.
3. Is adequate and clean food storage space provided?
4. Are any piles of newspapers, clothes or other stored materials creating a fire or safety hazard?
5. Are bathrooms clean and orderly? Do six (6) or fewer residents share a full bathroom? A full bathroom includes a sink, shower, and toilet.
6. Are the furniture and furnishings clean and of reasonable quality?
7. Do all sleeping rooms provide all residents with adequate space to store their belongings?

SAFETY REVIEW

1. Are there smoke detectors on each level, hallway, all sleeping rooms, and outside of the kitchen? (on the ceiling or within 2 feet of the ceiling)
2. Is there a fire extinguisher 6 to 8 feet from the stove and 4 to 6 feet from the floor and on each level?
3. Are carbon monoxide detectors installed in appropriate places within 3 feet from the floor (if you have gas appliances or gas heat)?
4. Are there at least two properly identified exits in case of emergencies?
5. Is the property address on the front of the house clearly visible from the street?
6. Are the home/site address, emergency and utility phone numbers posted in a central location?
7. Is smoking prohibited in areas that could be considered a fire hazard or a problem for neighbors?
8. Do smoking areas have approved safety disposal containers for smoking materials?
9. Are there any electric outlets or extension cords that could be considered a fire hazard?
10. Is Narcan easily located and available on all floors of the residence?
11. Do the home and any other permanent structures meet local building and safety codes?
(Indicate management verification or visual appearance as observed by the inspector.)
12. Are the house/site and grounds well kept, and consistent with the quality of the neighborhood?

MANAGEMENT AND DOCUMENT REVIEW

- Does the house/resident leader have the basic skills to manage this residence?
- Is there a clear and concise description of the operation of the home/dwelling?
- Are there clear acceptance criteria for all applicants?
- Is there an Intake Packet and Resident Agreement signed by each resident?
- Do the House Rules cover key issues? Are the *most recent* policies and procedures available in a public space?
- Do the residents have a significant role in the daily functioning of the home?
- Is the recovery residence Grievance Policy with the WVARR contact information posted in a location where residents can see and read it and submit a grievance if necessary?
- Does management provide daily recovery programming at this recovery residence?
- Does the home have liability coverage (minimum of \$1,000,000) with WVARR as an additional insured?
- . Have all management and house leaders signed the NARR Code of Ethics?

Dwelling Inspection Checklist

This is a checklist of what we look for as we inspect your facilities:

EXTERIOR SPACE (NARR 18.A, 14A)

- There is no interior furniture being used as outdoor furniture
- Residents are parking their cars in permitted areas
- Property is smoke-free or there is a designated space for smoking outside
- The yard is free from garbage and other debris
- The entrances and exits are in good condition and safe. Residents are not locked in or locked out

FURNITURE (NARR 15, 14.B, 14.A)

- The furniture in the house is in good condition (examples: free from holes and stains, no missing cushions)
- The furniture is typical of a residential house, as opposed to an institution (example: sofas and armchairs vs. folding chairs)
- Furniture and other items are used for intended purpose

CLEANLINESS (NARR 14.A)

- House chores appear to be followed (examples include the following)
- Common areas are free from excessive clutter, dust and dirt
- Bathrooms have been recently cleaned, showers, tubs and sinks are clean and free from mildew
- Food is stored in designated areas, food waste is disposed of appropriately
- Dishes are clean and stored appropriately
- Interior paint is well maintained (example: walls are free from large holes and stains)
- Carpet, rugs and other flooring is in good condition (example: free from stains, excessive wear)
- House has adequate cleaning supplies to engage in frequent cleaning of high touch surfaces
- Each sink has supplies appropriate for handwashing (soap, clean towels)

SAFETY (NARR 19.D, 17.C, 14.i, 14.A)

- Any external buildings (such as sheds and garages) are in good repair

- There are no overloaded electrical outlets
- Extension cords are used appropriately (example: not being used to bring electricity from one room to another or running over a common walking space)
- The pathway out of the house in case of emergency is either obvious, or there are evacuation maps and exit signs posted (All Levels must post signs and maps)
- Overdose Procedure is posted and Naloxone is kept in the house easily seen and available to the residents on every floor
- There is nothing obstructing a resident from evacuating the building in case of an emergency (such as windows that have been sealed shut, or exterior doors that require a key to exit)
- All cooking appliances are stored appropriately
- Light switches, electrical outlets, vents, etc. have appropriate covers
- Ceilings are in good condition with no leaks, holes or other signs of disrepair
- There are no loose or missing tiles in the bathrooms
- Flooring is in good condition and free from trip hazards (examples: torn or loose carpet, no missing floorboards, no missing transition strips, etc.)
- House has hot water, heat in the winter and AC in the summer, and all electrical systems working

LIVING ROOMS/ COMMON SPACE (NARR 22.a, 19.A, 15, 14.A, 7.A)

- Residents are able to use the common areas when they would like for informal activities and daily living
- There is a space can comfortably hold a house meeting with everyone in the house present
- Space is able to be used and appropriate for entertainment and informal activities
- Resident handbook/binder or postings are in a common space. Resource directories are also in common space

KITCHEN AND DINING (NARR 15, 14.G, 14.A)

- Each resident has dry food storage space, cabinets are utilized
- There is at least one refrigerator for every five residents
- Appliances are in good condition and work appropriately
- Residents may use kitchens to prepare meals and snacks when they want
- If there are gas appliances, there is a carbon monoxide detector in the kitchen
- A recently inspected fire extinguisher is in plain sight or in a clearly marked location

- Residents store food in kitchen and dining areas, as opposed to in individual rooms

BATHROOM (NARR 14.E, 14.A)

- There is at least one sink, shower, and toilet per six residents
- Bathroom fixtures are in good working condition and are clean

LAUNDRY (NARR 14.h, 14.A)

- A washer and dryer are provided for resident use If a dryer is provided it is vented outside

OR

- Residents are able to access a local laundromat (laundromat is affordable and transportation is available)

SLEEPING ROOMS (NARR 14.F, 14.D, 14.A)

- Square foot requirement: at least 70 square feet for first resident and 50 square feet for each additional resident.
- Each bedroom must have a smoke detector and a Fire Egress (for rooms on first and second floor). *There must be a window that opens large enough for a firefighter to get in or someone to get out. For rooms in the basement or third floor, refer to certificate of occupancy from Fire Marshal.*
- Each person has a bed.
- Each person has adequate storage space for personal belongings.

<Insert Company Letterhead>

Grievance Policy Template

As a participant of _____ *(Program Name)* _____, you have rights and responsibilities. You are responsible for abiding by the rules of the program, and _____ *(Program Name)* _____ is responsible for providing you with a safe and supportive illicit drug and alcohol-free recovery environment for you to grow and find a new way of life. If at any time you feel our program is not providing you with a safe and supportive environment, you have the right to file a grievance and have it addressed in a timely and appropriate manner.

Recovery Residence Grievance Policy

To file a grievance at _____ *(Residence Name)* _____ these steps must be followed:

Residents shall be informed of Resident Rights and responsibilities during intake, have knowledge of the grievance system, be assured that they could file a grievance at any time, and be knowledgeable of where the notice of grievance is located and where the forms are. They should be offered help filing a grievance if needed.

- Residents are encouraged to discuss any problems in a resident panel or community meeting. If this method of talking out the issue is not sufficient, the resident will address the complaint with the House Manager or Resident Leader. The resident and House Manager will try to find a resolution.
- If the resident is not satisfied with the results of this meeting, the resident has the right to file a formal written complaint. They have the right to ask for help from any staff member. This will be filed with _____ *(Admin staff)* and an appointment will be made within 72 hours. After this discussion with staff, the decisions made at this point will be submitted to the resident in writing within 48 hours. The resident will be sent a written notice of the grievance outcome and steps for appealing the outcome.
- In the instance where the decision maker is the subject of a grievance, decision making authority shall be delegated to _____ *(insert responsible party's name/position/ information to contact Board of Directors, etc.)*.
- The resident has the right to contact, make a complaint and/or appeal the internal residence grievance determination by submitting a formal grievance to the West Virginia Alliance of Recovery Residences, the organization responsible for certification of recovery residences in WV:

WVARR 1116 Smith St #414 Charleston, WV 25301

(304) 989-0792

info@wvarr.org

<https://wvarr.org/file-a-complaint/>

No one shall face retribution or retaliation for filing a complaint.

Resident Name: _____

Resident Signature: _____

Date: _____

Witness Name: _____

Witness Signature: _____

Date: _____

<Insert Company Letterhead>

Grievance Procedure Form

Residents shall be informed of their rights and responsibilities during intake, have knowledge of the grievance system, be assured that they could file grievance at any time, and be knowledgeable of where the notice of grievance is located and where the grievance forms are. They should be offered help to fill out this form if needed.

Grievance or Complaint:

Outcome from speaking with House Manager or recovery program staff:

This form will be reviewed and returned within **72 hours**.

In the instance where the decision maker is the subject of a grievance, decision making authority shall be delegated to _____ (*insert responsible party's name/position/ information to contact Board of Directors, etc.*).

The resident has the right to contact, make a complaint and/or appeal the internal residence grievance determination by submitting a formal grievance to the **West Virginia Alliance of Recovery Residences**, the organization responsible for certification of recovery residences in WV:

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<https://wvarr.org/file-a-complaint/>

No one shall face retribution or retaliation for filing a complaint.

Resident Signature _____ Date _____

Witness Signature _____ Date _____

<Insert Company Letterhead>

WVARR Incident Reporting Policy and Procedure

All WVARR- certified residences and organizations are required to report all major incidents. **A major incident is defined as:**

- Any emergency or urgent situation that has a significant impact which demands a response beyond routine incident management.

A major incident also includes, but is not limited to:

- Any owner, staff, or volunteer of the organization violating the signed Code of Ethics.
- Any owner, staff, or volunteer of the organization whose actions either directly or indirectly affect a participant or resident.

If a major incident occurs, it is the responsibility of the WVARR-certified residence or organization to report the major incident within 5 calendar days of the incident using the designated WVARR Incident Reporting Form. The incident form and summary of the incident will be sent to executive director of WVARR. The executive director will review the incident report and forward it to the Standards and Ethics Committee for further review if necessary. WVARR will keep record of all major incidents and maintain a file of each major incident reported from each certified residence or organization.

If a major incident is **not** reported by a certified residence or organization, or if the timing and/ or nature of unreported incidents are deemed out of the ordinary, the following procedure will occur:

- The WVARR staff will investigate the incident.
- WVARR will require a written explanation from the certified residence or organization about their failure to report the incident.
- If a WVARR-certified residence or organization is found to be negligent or at fault after an investigation into a nonreported incident, these findings will be reported to the WVARR Standards and Ethics Committee for review and consideration of sanctions.

Sanctions for Nonreported Incidents:

- The residence or organization will receive a written warning from WVARR.
- The residence or organization will be placed on a 30-day probationary period. The owner or director will be required to participate in weekly check-ins with WVARR staff to ensure no further incidents occur.
- The WVARR Standards and Ethics Committee may consider possible suspension or termination of the residence or organization's certification status for a period of time deemed appropriate by the Committee.

West Virginia Alliance of Recovery Residences

CONFIDENTIAL INCIDENT REPORT

Notice: The information contained in this report is confidential. You are hereby notified that dissemination, distribution, or copying of this document is strictly prohibited, unless authorized by the West Virginia Alliance of Recovery Residences. When completing this document, the person who witnessed the incident or was involved in the incident is to complete Sections I-V of this report. Any additional individuals who witnessed or were involved in the incident should complete the Additional Witness Account Section.

Section I. Identifying Information

Reporting Party Name: _____

Date of Incident: _____ Time of Incident: _____

Address of Incident: _____

Section II. Type Of Incident

Check All That Apply:

SAFETY AND SECURITY

- 1. Abuse/ Neglect/ Exploitation
- 2. Verbal Aggression/Threats of Violence
- 3. Physical Aggression/Violence
- 4. Trespassing
- 5. Bomb Threat
- 6. Property Damage/Vandalism
- 7. Sexual Battery
- 8. Theft/Loss
- 9. Harassment
- 10. Weapon on Premises
- 11. Hazardous Material Exposure/Spill

- 17. Overdose or Suspected Overdose
- 18. Self-injurious Behavior/Suicide Attempt
- 19. Psychosis
- 20. Legal Hold (e.g. Involuntary Commitment)
- 21. Homicide
- 22. Medication error or Diversion of Medication

MEDICAL AND PSYCHIATRIC

- 12. Client Injury/Fall
- 13. Client Death
- 14. Contraband/Drug Use
- 15. Seizure/Syncope
- 16. Other Medical Emergency

ADMINISTRATIVE

- 23. Discharge – Administrative
- 24. Discharge-elopement
- 25. Discharge - Recurrence of Use
- 26. Employee Injury
- 27. Employee Misconduct/Suspension
- 28. Stigmatizing Media Coverage
- 29. Vehicular Accident/Damage
- 30. Other _____

Section III.
Level of Severity:

Critical/Immediate
Incident Report &
Attention required

Serious
Incident Report &
Attention required

Not Serious
Incident Report Only

Section IV. Individuals Involved (Please check appropriate box)

First Name	Last Name	Participant	Witness

Section V. Description of Incident

Give Detailed Account (Who, What, When, Where, Why, How)

Review and Signature of Staff Member(s) Completing Sections I-IV

Print Name	Signature	Position	Date	Time

Section VI. Investigation, Action, Follow Up

A. Findings from Investigation of Incident

B. Recommendations and Actions

C. Follow-Up

Section VII. Additional Witness Account of Incident

(Please make as many copies as needed to ensure that all witnesses provide their account of the incident.)

Identifying Information

Reporting Party Name:

Staff Member Client Other

Description of Incident

Give Detailed Account – (Who, What, When, Where, Why, How) – Add pages if necessary

Review and Signature of Witness Completing Addendum

Print Name	Signature	Position	Date	Time

Insert Company Letterhead>

WVARR NALOXONE POLICY

WVARR requires that naloxone be kept in every building operated by each WVARR certified organization, including _____.

WVARR requires that every floor of each certified dwelling have naloxone kept within sight and available to the residents living there. Access to naloxone will never be denied to a resident of a WVARR certified home. There are many ways to obtain additional naloxone. WVARR staff are trained to train the staff of your organization on proper naloxone use and, if necessary, can obtain naloxone. WV has a standing order for naloxone at every pharmacy; the cost is \$0-5 per dose for Medicaid recipients, and it is available again every 30 days. If the naloxone is used within that 30-day window, all you need to do to get another one sooner than the 30-day mark is report to the pharmacy that it was used.

WVARR requires that this naloxone policy and overdose procedure be used in your organization. During resident intake or orientation, each new resident of a WVARR certified dwelling will watch a video on proper naloxone administration: [WV Peers naloxone training video](#).

We sincerely hope that the naloxone will be available should a medical emergency occur and that lives may be saved by implementing this policy.

You cannot recover if you are dead. Everyone deserves a chance to recover.

WVARR OVERDOSE PROCEDURE

STEP 1: CALL FOR HELP (CALL 911)

If you find someone unconscious, call 911 immediately.

AN OPIOID OVERDOSE NEEDS IMMEDIATE MEDICAL ATTENTION. An essential step is to get someone with medical expertise to see the patient as soon as possible, so if no EMS or other trained personnel are on the scene, dial 911 immediately. All you have to say is: "Someone is not breathing."

Be sure to give a clear address and/or description of your location.

STEP 2 : CHECK FOR SIGNS OF AN OPIOID OVERDOSE. RUB STERNUM WITH KNUCKLES.

<ul style="list-style-type: none">• Face is extremely pale and/or clammy to the touch• Body is limp• Fingernails or lips have a blue or purple cast• The patient is vomiting or making gurgling noises• He or she cannot be awakened from sleep by a sternum rub with knuckles or is unable to speak• Breathing is very slow or stopped, low is less than 6x/minute• Heartbeat is very slow or stopped	<ul style="list-style-type: none">• Opioid Over-Medication:• Unusual sleepiness or drowsiness• Mental confusion, slurred speech, intoxicated behavior• Slow or shallow breathing• Pinpoint pupils• Slow heartbeat, low blood pressure• Difficulty waking the person from sleep by shouting "Hey, are you ok?"
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STEP 3 : ADMINISTER NALOXONE IMMEDIATELY

Most patients respond by returning to spontaneous breathing, with minimal withdrawal symptoms. The response generally occurs within 3 to 5 minutes of naloxone administration. (Rescue breathing should continue while waiting for the naloxone to take effect. Chest compressions if there is no heartbeat.) If the person does not revive, after 3 minutes of rescue breathing/CPR administer another dose of naloxone.

STEP 4 : WHEN EMS ARRIVES, TURN OVER CONTROL OF THE SITUATION TO THEM.

Naloxone will continue to work for 30 to 90 minutes, but after that time, overdose symptoms may return. Therefore, it is essential to get the person to an emergency department or other source of medical care as quickly as possible, even if he or she revives after the initial dose of naloxone and seems to feel better.