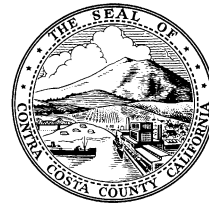


CONTRA COSTA COUNTY
ALCOHOL AND OTHER DRUG SERVICES
BEHAVIORAL HEALTH DIVISION

RECOVERY RESIDENCES GUIDELINES



APRIL 22, 2017

Contra Costa County Alcohol & Other Drug Services of the Behavioral Health Division would like to thank the Recovery Community & Partners for their participation in our Recovery Workgroup Initiative and the amount of time, research, input, dedication and passion they provided in developing these Guidelines for Contra Costa County. The Recovery Workgroup Initiative consisted of a group of self-identified peer leaders in our community committed to: (1) Changing public perceptions of recovery; (2) Promoting effective public policy change by establishing clear direction for Recovery Support Specialists (RSS) and Recovery Residences, and; (3) Demonstrating that Recovery Works! The Recovery Workgroup Initiative also included a component on support for the families of individuals suffering from substance use disorders (SUD).

4/22/2017

RECOVERY RESIDENCES: A DEFINITION

Also known as Sober Living Environments (SLE) are a safe, clean, sober, residential environment for individuals who have completed or are currently enrolled in Substance Use Disorder (SUD) treatment and are committed to sobriety that promotes individual recovery through positive peer group interactions among house members and staff. Sober living housing is affordable, alcohol and drug free and allows the house members or residents to continue to develop their individual recovery plan and to become self-supporting. In doing so, the SLE must co-exist in a respectful, lawful, non-threatening manner within residential communities in Contra Costa County (CCC). For the purposes of these Certification Guidelines, these types of environments shall be known as Recovery Residences.

PURPOSE

Alcohol and Other Drug Services (AODS) offer an array of treatment and recovery services in Contra Costa County. AODS works in collaboration with other County Departments including Probation, Courts, Homeless Program, etc., who rely on the integrity of the services provided. AODS is the entity responsible for monitoring the safety and the standards of all of the Department of Health Care Services (DHCS) certified Substance Use Disorder Treatment programs in the County. Once certified, Recovery Residences will also be monitored by AODS staff and in this way AODS can offer individuals referred to these facilities a safe haven from the influences of drugs and alcohol as they pursue their individual journey through long term recovery. In doing so, AODS seeks to address the following objectives: 1) Increase the safety of the community, 2) Support the integrity of properly operated houses, and 3) Further reduce stigma associated with individuals who suffer from SUD issues.

PERSPECTIVE

These guidelines are a minimum standard to which AODS will provide oversight and quality assurance through annual site visits, audits and annual reporting with contractual Recovery Residences. Contra Costa County (CCC) Recovery Residences must be certified pursuant to these guidelines prior to receiving county-based referrals or funds. The AODS System of Care shall implement these guidelines consistent with the individual personal rights of the residents and the community welfare.

CERTIFICATION

In addition, Recovery Residence providers who seek to enter this continuum of care through a contract with a county organization must comply with the requirements of these guidelines and become certified through the California Consortium of Addiction Programs and Professionals (CCAPP). These guidelines are the result of the combined experience of other counties and organizations that felt it important that a minimum set of standards are necessary for the operation of quality Recovery Residences. The standards are compatible with a wide variety of organizational models.

WHO MUST OBTAIN CERTIFICATION?

Any Recovery Residence operating in CCC that receives County referrals or funds must be currently certified by CCAPP, and shall have a current and valid certificate of compliance on file with the AODS Administration. Facilities not receiving County funds or referrals are exempt from the certification guidelines.

The certification guidelines apply to any person, firm, partnership, association, corporation, county, city, public agency, or other county governmental entity that operates, establishes, manages, conducts or maintains a facility providing twenty-four (24) hour a day Recovery Residences.

The certification guidelines do not prohibit an individual or business from operating a sober living environment that is not certified, but those facilities will not receive referrals or funding from the County.

CERTIFICATION OF EACH FACILITY

1. A Recovery Residence facility shall meet the certification guidelines for each physical building. Each certification is good only for the property listed on the certificate. The certificate will be submitted as part of the documentation required in the contract process;
2. Once certified, the facility will be placed in the California Recovery Resources and the responsible party will be asked to update and submit a weekly bed availability listing to Alcohol and Other Drugs Services where we will centralize system capacity;
3. Certification is good for one (1) year;
4. The Quality Assurance Unit may conduct a site inspection of the facility with or without advance notice during regular business hours, and upon presentation of proper identification, in order to determine compliance with the certification and operation guidelines;
5. All Recovery Residences must abide with all federal, state, city, and county laws and regulations;
6. Staff is mandated reporters of suspected child abuse/neglect and will make Child Protective Services (CPS) reports as necessary.

BUILDING AND GROUND REQUIREMENTS

Prior to certification, each sober living facility shall conform to all applicable local jurisdiction regulations as follows:

1. Conformance with all locally applicable zoning regulations;
2. Possession of all required local, county and state permits;
3. Conformance with applicable fire safety standards, including occupancy limit, and smoke and carbon monoxide detectors shall be installed in accordance with the local Fire Marshall regulations. An Emergency exit route and disaster plans should be clearly posted in common areas and reviewed annually.

Building and Grounds Requirements

- a. The facility shall be clean, safe, sanitary and in good repair at all times. It shall also be ADA compliant;
- b. Exit doors must be clearly marked and barriers to appropriate personal contact among residents should be eliminated. Appropriate locks shall be in placed on all doors and windows;
- c. The interior of the facility shall be free of flies and other insects;
- d. The facility shall provide for the safe disposal of contaminated water and chemicals used for cleaning purposes;

- e. Living areas in the facility shall be separate and secure. Permanent walls, floors, ceilings and doors shall enclose the facility's living, sleeping, bathing and toileting areas. This does not preclude the use of more than one building or the use of wing(s) of a building or floor(s) of a building in meeting this requirement;
- f. All residents shall be protected against safety hazards within the facility through provision of appropriate protective devices, including, but not limited to, non-slip material on rugs;
- g. All outdoor and indoor passageways, stairways, inclines, ramps, open porches, and other areas of potential hazard shall be kept free of obstructions;
- h. Permanent or portable storage space shall be available for storage of facility equipment and supplies. Facility equipment and supplies shall be stored in an appropriate space and shall not be stored in space designed for other activities;
- i. Every in-ground pool and every above-ground pool that cannot be emptied after each use shall have an operative pump and filtering system;
- j. If children reside in the Recovery Residence, then all areas shall provide safety for the children.

Bedrooms and Bathrooms

Adequate living space for each resident in the bedrooms and bathrooms shall be provided as follows:

- a. Bedrooms shall not be overcrowded. The definition of a bedroom for the purposes of this requirement is the definition contained in the Uniform Building Code. There should be a minimum of seventy (70) square feet for the first two (2) people and fifty (50) square feet for each additional person in bedrooms;
- b. Each resident shall have a closet and dresser space made available to him/her;
- c. Adequate bathing, hand washing and toilet facilities shall be provided with a maximum ratio of one (1) bathroom facility per six (6) residents. Space for each resident's toilet articles shall be provided;
- d. The bathrooms shall be clean, shall provide privacy, and shall contain basic toiletry items such as soap and toilet paper;
- e. All toilets, hand washing and bathing facilities shall be maintained in safe and sanitary operating conditions;
- f. The facility shall provide each resident with an individual bed maintained in good repair, equipped with good springs and a clean mattress. Bunk beds are not excluded provided they otherwise meet the requirements.

Fixtures, Furniture, Equipment and Supplies

- a. Heating and cooling units shall be sufficient to keep residents comfortable at all times, and shall be in working order;
- b. All window screens shall be in good repair and be free of insects, dirt and other debris;
- c. The facility shall provide lamps or lights as necessary in all rooms and other areas to ensure the safety of all persons in the facility;

- d. Hot water faucets used by residents for personal care shall meet the following requirements:
 - (i) Hot water delivered to plumbing fixtures used by the residents shall not be less than one hundred five (105) degrees Fahrenheit (forty point five (40.5) degrees Celsius) and not more than one hundred thirty (130) degrees Fahrenheit (fifty-four point four (54.4) degrees Celsius);
 - (ii) Taps delivering water at one hundred thirty-one (131) degrees Fahrenheit (fifty-four point nine (54.9) degrees Celsius) or above shall be prominently identified with warning signs;
- e. Stoves, refrigerators and cooking areas shall be kept clean and adequately maintained, and each resident shall have access to store and prepare food;
- f. Solid waste shall be stored, located and disposed in such a manner that it will not transmit communicable diseases, emit odors, create a nuisance, or provide a breeding place or food source for insects or rodents;
- g. All containers, including movable bins, used for storage of solid waste shall have tight fitting covers that are kept in place. The containers and covers shall be in good repair, leak proof and rodent proof;
- h. Trash containers, including movable bins, receiving putrescible waste shall be bagged and emptied at least once per week or more often if necessary to comply with subsection (f) above.

GOOD NEIGHBORHOOD POLICY REQUIREMENTS

The purpose of the Certification Guidelines is to promote safe and effective services for residents with substance use issues. Neighborhood support of an alcohol or drug recovery facility enhances the facility's ability to meet this goal.

To increase the likelihood that the residents of the facility are able to be integrated into the community with an improved quality of life, it is required that each facility shall adopt a good neighbor policy similar to the one described below.

Neighborhood Complaints

- The facility is in a better position if it has the first opportunity to respond to concerns;
- Each facility shall ensure that the neighboring residents are advised about whom to contact at the facility if they have complaints or questions, and how to get in contact with that person;
- Each facility shall develop a written protocol of procedures for staff to follow when a complaint is received;
- Each facility shall train the staff member(s) responsible for receiving complaints and questions to field complaints in a positive way;
- If a neighbor's complaint is legitimate, the facility shall address it with a commitment that steps will be taken immediately to prevent its happening again. The facility shall review its systems and/or staff to make changes or improvements as needed.

POLICIES AND PROCEDURES

Each Recovery Residence shall have a current Policies and Procedures Manual that sets forth the rules, regulations, expectations, and governance and grievance procedures of the house. Each house member shall receive a copy upon admission and be familiar with the policies and procedures contained in the Policy and Procedures Manual and will sign an agreement to abide by them while a member of the house. At a minimum, a House Policies and Procedures Manual shall contain the following:

I. Standards of Operation:

The Recovery Residence shall provide safe housing, free from alcohol and other drugs which, at a minimum, shall include the following components:

1. Residents shall be required to attend a weekly regular house meeting with house manager or designee. These meetings will be in a group setting with other residents of the Recovery Residence;
2. Residents will equally share regular housekeeping activities necessary **(or optional)** to maintain the residence such as: cooking, laundry, housecleaning, yard work, etc.;
3. Each Recovery Residence shall have a “common area” with adequate space for the proper number of residents to assemble for social and/or other group activities;
4. Each Recovery Residence shall have adequate personal space for each resident to be provided dignity, respect and appropriate privacy at all times, and the Recovery Residence will comply with applicable guidelines for the amount of square feet per resident and the number of residents per room;
5. Recovery Residence designee and house manager shall take appropriate measures to ensure that the personal property of each resident is secure;
6. The Recovery Residence shall establish and maintain a culture and environment that is welcoming, compassionate, and understanding of the diversity of those they serve;
7. All residents shall have access to the kitchen, refrigerator, stove, dining room, laundry facilities, restrooms, and showers to ensure basic needs are met;
8. The Recovery Residence shall post a written description of the procedural processes regarding chores, assignment of roommates, and primary house rules in a space that is accessible to all residents;
9. The Recovery Residence shall be a non-smoking residence. If the operator’s policy is to allow smoking on the property, a smoking area must be designated clearly in an outdoor space where smoke will not affect neighbors and is in compliance with any and all local smoking rules/ordinances. Any and all litter generated in a designated smoking area must be cleaned up daily;
10. Each Recovery Residence shall create an activity binder with opportunities for residents to engage in daily recreational, cultural, physical, and spiritual activities, either as an individual or with a group available in the community;
11. All Recovery Residence residents **MUST** be engaged in employment, treatment education, volunteer work, active job search (for a defined period), or other approved daily activities conducive to the recovery process;
12. Recovery Residence owners are responsible for ensuring neighborhood parking is in compliance with town/city ordinances and is **NOT** intrusive to neighbors.

II. Admission and Discharge

Each Recovery Residence shall:

1. Have a written admission procedure;
2. Have a written policy for discharge, grounds for discharge and discharge protocols that address the personal property of residents, referral to further services, cost of rent, and information sharing, if applicable. Testing positive in itself shall not be considered grounds for discharge;
3. Interview and assess each prospective resident by the House Manager to determine whether he or she is an appropriate fit;
4. If the prospective resident is referred from another source, the interviewer may contact that source as a means of gathering information about the suitability of the prospective resident and Releases of Information (HIPPA, 42-CFR, Part 2) may also be requested for this purpose;
5. If the prospective resident is currently involved with the criminal justice system (probation/parole), releases of information (42-CFR, Part 2) may also be requested by the interviewer;
6. Any/all prescription medications must be disclosed by the prospective resident and a seven (7) day minimum supply must be on hand prior to the resident moving into the Recovery Residence. Prospective residents CANNOT be denied services based on prescribed medications, including Suboxone, Methadone, etc.;
7. Copies of all policies, procedures, house rules and expectations shall be presented to the prospective resident during the interview process, and specific questions or concerns of the resident at this time should be recorded as a means of documenting their understanding of the rules and expectations;
8. Admission documentation shall be kept in a resident's file at the premises at all times;
9. Each admission is considered unique. Prior relapse situations shall not adversely affect the admission of the applicant into the Recovery Residence. The House Manager shall properly document discharge information on each resident;
10. Have a written policy for vacation time while living in a Recovery Residence. Specifically indicating the length of time the resident would be allowed to be away from the Residence.

III. Eligibility for Residency

Eligibility shall be determined through a formal interview process set forth by the Recovery Residence owner. At a minimum, prospective residents must be willing to comply with and meet the following criteria:

1. Residents must demonstrate being clean and sober by one or more of the following means:
 - a. Submit a negative urinalysis sample;
 - b. Be actively enrolled in an alcohol and other drug treatment program;
 - c. Mandated attendance to self-help meetings is prohibited. However, regular attendance at various self-help community groups including AA, NA, CA, etc. shall be strongly encouraged;

- d. If prospective resident is taking any prescribed medications, he/she must agree to comply in taking them as prescribed. Failure to comply will trigger a referral to the Recovery Support Specialist or Case Manager;
 - e. Resident wake up times are:
Monday through Friday: no later than 7:00 a.m.
Later wake up time will be allowed on one weekend day per week;
 - f. Client bed times are:
Children: 8:30 p.m. Monday-Friday, 9:30 p.m. on weekends;
All Others: no later than 11:00 p.m. Monday-Friday, 12:00 a.m. on weekends;
 - g. Employed clients may work any shift within a twenty-four (24) hour period without penalty;
 - h. A client's work schedule takes precedence over required house meetings; however, the house manager shall make an effort to inform the client of any decisions made or policy changes.
2. Residents must demonstrate employment (paid or volunteer), ability to pay, or making a good faith effort to do so (determined by the House Manager), be actively enrolled in a formal alcohol or other drug treatment program or be involved with community service work (volunteering) for a minimum of twenty (20) hours per week as acceptable by the House Manager, the resident's supervising officer, Case Manager or Recovery Support Specialist;
 3. Residents must be willing and demonstrate the ability to comply with all Recovery Residence rules, standards and procedures.

IV. House Rules

Recovery Residence rules must be clearly defined; any optional rules the Recovery Residence owner chooses to implement must be for the need of the residents, shall not be overly burdensome, and must be consistent across multiple residents. The following should be considered minimum mandatory standards for every Recovery Residence:

1. There shall be no consuming alcohol and/or other drugs by anyone on the property;
2. Alcohol and items containing alcohol shall not be brought onto the property for any reason;
3. Alcohol and other drug use may be grounds for dismissal. Upon being notified of possible alcohol and/or other drug use by a resident, the House Manager shall first do a warm hand off referral of the resident for detoxification services and/or to individuals responsible for coordinating his/her care. Further, a resident has the right to file a grievance if dismissed from the residence without being properly referred to detoxification services. **Note: The Recovery Residence House Manager is not responsible for the cost of detoxification services;**
4. Regular weekly attendance of house meetings shall be mandatory for all residents and it shall be the responsibility of management to ensure proper participation. Meetings should include an agenda, which should be kept in a binder including a brief summary of actions taken in the meeting and a sign in sheet;
5. House Managers in charge of an individual facility must be accessible to residents daily. The House Manager shall be clearly and easily identified and shall remain available at all times;

6. Each Recovery Residence shall have in its house rulebook a policy addressing visitation including hours, terms of contact, areas for visitation, visitor access, child visitation and monitoring, etc.

V. Confidentiality Policy

The Recovery Residence shall protect the privacy of individuals being served and will not disclose confidential information without express written consent except as required or permitted by law. The House Manager will maintain release forms for house members to authorize the release of information. The Recovery Residence shall also inform house members of the privacy of information disclosed in house meetings or other Recovery Residence activities. The House Manager shall remain knowledgeable of and obey all state and federal laws and regulations relating to confidentiality of records for the providers of services. Confidential information acquired during residency at the Recovery Residence shall be safeguarded from illegal or inappropriate use, access and disclosure, or from loss, unsecured maintenance of records or recording of an activity or presentation without appropriate releases. Required Consent to Disclose Confidential Forms will be provided to house members for the authorization to release information in compliance with Federal Law 42 CFR, Part 2. Resident records shall be kept in a locked cabinet, for which the House Manager shall be responsible to maintain up to date information. Sample form in Appendix I

VI. Sexual Harassment and Verbal Abuse Policy

The Recovery Residence will not tolerate any behavior that is abusive, harassing or intimidating toward House Manager, volunteers, residents or visitors and will be considered grounds for termination.

VII. Weapons, Alcohol, Illegal Drugs and Illegal Activity Policy

The Recovery Residence strictly prohibits on its property the possession, and/or use of firearms, other weapons, illegal drugs, illegal activities and acts or threats of violence. Such acts shall be reported to the local law enforcement agencies immediately. Residents will be terminated from the house for such offenses. House Managers found to have violated the policy may face immediate termination. Each Recovery Residence shall have a written policy addressing weapons, alcohol and other drug use, relapse, and illegal activity by residents.

VIII. Prescribed Medication Policy

Each facility shall have a written policy regarding the use and storage of resident's prescribed medications. Medications must be properly secured and in a locked container. The policy concerning the storage of medications does not apply to those medications, such as an asthma inhaler, to which medical necessity requires the resident to have immediate access. The Recovery Residence shall not dispense medication, but must ensure it is securely stored by the resident. The House Manager is authorized to conduct random medication quantity counts.

IX. Drug and Alcohol Testing Protocol

1. Each residence shall have a written policy addressing the policies and procedures of specimen collection and shall maintain appropriate urinalysis equipment and/or access to an outside drug and alcohol testing service so that all residents may be tested at random to protect the safety and integrity of the house and its residents;
2. A referring criminal justice agency: Parole, Probation or the Courts may impose and provide drug and alcohol testing to the residents referred by the Courts and/or Probation;
3. Positive drug tests of residents shall be reported immediately to the probation officer/parole agent, court agency, Recovery Support Specialist or Case Manager, in accordance with the requirement of the referring agency, as applicable;
4. The cost of the testing may be either:
 - a. Assumed by the Recovery Residence;
 - b. At the client's expense;
 - c. Included in the monthly residents fee;
 - d. Or other arrangements previously identified in writing;
5. All residents will be tested at random to protect the safety and integrity of the facility and the residents. Testing shall occur at intake and no less than one time per month. A testing log shall be kept in a master file and all testing results maintained in the resident's file. Testing based on suspicion and/or due cause is encouraged. If regular testing consists of a dip panel and a resident fails the test, it is possible to prove deficiency of the test by sending results to the laboratory at the cost of the resident. While the House Manager waits for the results from the laboratory, the resident shall not be discharged. The resident will be discharged should the laboratory test confirm the positive result;
6. Drug testing standards shall be contained either in a resident handbook or part of the intake agreement, and residents shall sign acknowledgement of receiving notification of what to expect;
7. Each facility shall have a written policy identifying how many positive tests are allowed before discharge. This information shall be contained in the agency's intake agreement or resident handbook;
8. The facility shall specify the criteria for re-admission of individuals who may have relapsed.

X. Documentation/Record Keeping

Each House Manager shall keep a record of all residents as follows:

1. A resident's date of birth, emergency contact information, pertinent emergency medical information, list of current medications and pharmacy where prescriptions are on file, employer or school contact information and any releases of information that are deemed necessary by the House Manager. Incidents of negative behavior as well as contacts with the Recovery Support Specialist should also be documented. A resident sign in/out sheet should be placed near the main entrance/exit of the residence;
2. Each House Manager shall keep clear records of rent/expenses paid and provide each resident with a receipt each and every month, or as appropriate, when rent/expenses are paid;

3. The Recovery Residence shall have clear policies concerning curfew, prescribed medication, urinalysis monitoring, visitation, rent/expense payments, disposal of medications, relapse, resident/consumer conduct and expectations, and resident departures from those requirements shall be documented;
4. Each Recovery Residence shall have a specific policy addressing relapse and the actions taken by the House Manager to address an incident of relapse.

XI. Incident Report Policy

The House Manager will complete an internal incident report for all incidents involving house residents. The incident report shall be completed within seventy-two (72) hours of occurrence of an on-site incident.

1. The incident report will provide a detailed description of the event including the date, time, location, individuals involved, and action taken;
2. The House Manager responsible for completing the report will sign it and record the date and time it was completed;
3. All incident reports will be stored in a single, separate file and reported to the Recovery Support Specialist;
4. The House Manager or his/her designee will be responsible for reviewing incident reports, and all incidents will be evaluated to determine opportunities to improve. Incidents involving criminal activity or the need for emergency services (i.e.: fire, 911, violence, or serious injury) shall be reported to the Case Manager, Recovery Support Specialist, Probation Officer, or Parole Agent, within seventy-two (72) hours. Reports shall be made for all incidents including:
 - Any violation of client rights, including but not limited to, allegations of abuse;
 - Neglect and exploitation;
 - Accidents and injuries;
 - Illegal or violent behavior;
 - Fire;
 - Medical emergencies;
 - Psychiatric emergencies;
 - Suicide attempt by an active house member (on or off site);
 - Medical or psychiatric emergencies that result in admission to an inpatient unit of a medical or psychiatric facility;
 - Release of confidential information without house member's consent;
 - Any other significant disruptions or rules violations (site specific).

XII. Client Grievance Policy

Each Recovery Residence must have a written grievance procedure. Each resident will receive a copy of the grievance procedure within forty-eight (48) hours of admission to the residence. The House Manager will explain the grievance procedure clearly and, after this explanation and review, both the resident and the House Manager will sign the grievance procedure acknowledgment form which will be maintained in the resident's files. Copies of the grievance forms are to be readily available to resident. The House Manager will provide necessary help and materials in order for the grievance form to be complete and appropriately submitted. If grievance is made, the following may occur:

1. CCAP will evaluate the grievance thoroughly and objectively, obtaining additional information as needed and will copy Alcohol & Other Drug Services (AODS);
2. CCAP will provide a response to the house member within fourteen (14) business days of receiving the grievance and will copy AODS;
3. CCAP will provide technical assistance and mediate unresolved grievances when appropriate;
4. All grievances will be filed and documented, including the final disposition, and keep record of it in a central file;
5. AODS will not restrict or discourage, or will not interfere with resident communication with an attorney or other organizations for the purpose of filing or pursuing a grievance;
6. AODS will adhere to these standards to protect the welfare of the residents, the House Manager and the community at large.

XIII. House Manager Requirements

Overall supervision for each residence must be adequate for the number of people residing in the house, and appropriate House Managers must be accessible to an on-call basis twenty-four (24) hours a day, seven (7) days a week. In addition, the House Managers are expected to have the following qualifications and responsibilities:

1. House Managers must have a minimum of two (2) years of sobriety (if in recovery), be CPR and First Aid certified, possess adequate crisis intervention skills and to be trained in cultural competence;
2. At a minimum, House Managers are responsible for the safety of the premises and those who reside there. Additional responsibilities include: collection of rent (if appropriate), documentation and maintenance of records, upholding house rules, and supervising residents as needed, ensuring that property is maintained inside and out, enforcing adherence to parking restrictions, smoking rules, etc.;
3. If more than one manager is appointed as a House Manager, shift notes should be kept as a means of documenting incidents, should they occur.

XIV. Code of Conduct

1. There shall be no willful engagement in any act that can be shown to be harmful to the interest of the Recovery Residence or its residents. This may result in termination;
2. Recovery Residences shall not permit any House Manager to enter into a business relationship with any resident or their family. They shall not employ a resident while he/she is living in the Recovery Residence;

3. House Managers, residents and/or volunteers shall not engage in any conduct of a criminal or disruptive nature that would discredit the Recovery Residence, its residents, the County of Contra Costa or the State of California;
4. A violation of professional conduct may result in disciplinary action against the House Manager up to and including discharge from the residence, depending on the severity of the infraction;
5. All disciplinary actions will be handled on an individual basis and the discipline rendered will take into consideration the overall work history, the nature of the offense and consideration of the extenuating circumstances, if any;
6. House Managers shall conduct themselves in a professional manner at all times, and adhere to all policies and procedures including ethical and personal standards. House Managers are also expected to treat consumers/residents, volunteers, neighbors and guests with respect both on and off premises.

XV. Conflict of Interest Statement

No volunteer, agent, or participant is to attempt to secure privileges or advantages from anyone in the residence.

XVI. Continuity Policy

In the event that the Recovery Residence is no longer able to continue its service, residents will be referred to other community agencies that can continue housing or rehabilitative support prior to the date of discontinuing service.

INVOLUNTARY DISCHARGES

Each resident, upon admission, will develop a *Relapse Plan*, which at a minimum shall include a list of individuals or family members whom the resident can contact and where the resident can go in case of a discharge.

Involuntary discharges may be based on inappropriate behaviors exhibited by the resident. The House Manager will document all the referrals provided to appropriate care, and will provide support until discharge takes place. The Case Manager or Recovery Support Specialists shall be contacted immediately.

Examples of inappropriate behavior that constitute grounds for immediate discharge:

- Violence threats of client residents and staff;
- Drug and/or alcohol use on property;
- Behavior that destroys house property;
- Engaging in sexual activity or exhibiting sexual behavior/gestures on premises;
- Continued drug or alcohol use.

RELAPSES

Random testing or breathalyzer will be initiated with an individual and/or all house residents as long as the testing is not intended to target specific individuals.

Actions to be taken:

- If positive, refer and transport client to detox site and hold bed for client's length of stay in detox;
- After completion of detox, detox provider will assess for possible residential placement or return to recovery residence if the bed is still available;
- If no bed is available at detox, the House Manager calls family/friends listed in *Relapse Plan* and makes arrangements for transportation and pick up. Pending ASAM Intake Placement Assessment with the Access Line, the bed at the Recovery Residence will be held for five (5) days;
- If regular testing consists of the dip panel and a resident fails the test, it is possible to confirm the test by sending results to the laboratory. The cost will be covered by the resident and not the operator. While the House Manager waits for the results from the laboratory, the resident shall not be discharged. The resident will be discharged should the laboratory test confirm the positive result.

RESIDENT BELONGINGS

Recovery residences will not dispose of a resident's belongings for a period of no less than thirty (30) days after a client is discharged. During that time period, the House Manager will make reasonable attempts to contact the resident to arrange for the disposition of the client's property.

VISITORS

Recovery residences shall have a written visitation policy. The following are the minimum requirements:

1. All visitors shall sign in and out of the facility, using their full names;
2. Visits should be scheduled to occur on weekends; with accommodations during the week for clients with Children Family Services (CFS) involvement;
3. There shall be designated visiting areas, which shall be located in the common living areas of the facility, and which shall be available to all residents for meetings and receiving and entertaining guests. The bedrooms and garages shall be off limits;
4. Visitors shall NOT be permitted on the premises while intoxicated;
5. Visitors shall not be left alone in the facility at any time.

Children visiting the facility

Procedures for children visiting the Recovery Residence shall include:

1. Specific hours for visitation;
2. The type of supervision required, and;
3. Restriction of children to the common areas.

CURFEW

The facility shall have a curfew for residents starting no later than 11:00 p.m. on weeknights and 12:00 a.m. on weekends and ending no earlier than 6:00 a.m. on any day. Allowable exceptions may include residents who work during these hours and residents who have prior approval of the facility's staff, the Health Care Agency, or the resident's Probation Officer or Parole Officer.

RESIDENT INTERACTION – SINGLE GENDER FACILITIES

Contra Costa County requires single gender facilities. The rules and regulations for single gender facilities shall include, but need not necessarily be limited to the following:

1. Residents shall wear appropriate attire when in shared areas of the facility and in the presence of other residents, staff or visitors;
2. Sexual harassment of residents or staff is prohibited. Sexual harassment policies, procedures and rights shall be posted in the facility along with the name and telephone number of a contact person;
3. Staff shall not engage in behavior with any resident that leads to a romantic or sexual relationship while the resident is residing at the facility.

FEE SCHEDULE

1. The facility shall have a written fee schedule that is provided to all residents and posted at the facility;
2. The current fee schedule shall be provided to AODS;
3. At the time of acceptance and admission into the facility, each resident shall be informed of the exact fees required, and fee payment policies and procedures;
4. The facility may establish a reasonable and appropriate fee, to be approved in advance by AODS, for any drug or alcohol testing conducted by the facility;
5. The resident shall be informed of all items that are provided by the facility and which personal items residents must provide themselves;
6. Residents shall not be charged a relapse or re-entry fee.

DELINQUENT PAYMENTS AND PAYMENT PLANS

1. The facility shall have a written policy regarding delinquent payments and payment plans.
2. If a resident has not paid the amount due, the decision whether to discharge the resident, extend a grace period or make a payment plan arrangement is at the discretion of the Agency Director, or Recovery Residence owner.

ADVANCE PAYMENT OF FEES AND REPAYMENT OF FEES

The facility shall have a written policy regarding refunds for advance payment of fees and repayment of fees.

RECEIPT FOR FEES

A resident shall be given a signed receipt at the time of payment of any fees.

MONITORING OF CERTIFIED FACILITIES

1. The AODS Quality Assurance (QA) Team will monitor and review each certified facility, at least annually, in order to determine continued compliance with certification guidelines;
2. The AODS QA Team and/or other criminal justice entity may conduct a site inspection of the facility, with or without advance notice and upon presentation of proper identification, in order to determine compliance with the certification guidelines. The AODS QA Team will not access individual files of residents who have not been referred by the criminal justice system or through AODS contractual agreements without informed consent, court order or application of any exception to 42CFR, Part 2;
3. The AODS QA Team may conduct private interviews with staff and residents and inspect the facility;
4. After completion of the monitoring inspection, the AODS QA Team will prepare a written report for the House Manager and Recovery Residence Owner. A copy will be maintained in the AODS Administration office;
5. If the inspection reveals deficiencies in the facility, a written notice of all deficiencies shall be mailed to the AODS QA Manager within twenty (20) days of the completion of the monitoring review report;
6. The notice of deficiency shall specify:
 - The section numbers of the certification guidelines or code section of each statute or regulation which has been violated;
 - any expected corrections for each deficiency;
 - the date by which corrections shall be completed;
7. The Recovery Residence Owner or his/her designee must provide the AODS QA Manager with a written response within ten (10) days from the date of the notice of deficiency in which compliance corrective actions taken are demonstrated. Continuation of the contract with AODS may be contingent until deficiencies are corrected.

FISCAL PROVISIONS

Residents must demonstrate employment (paid or volunteer), ability to pay, or make a good faith effort to do so (determined by the House Manager), be actively enrolled in an certified Outpatient Substance Use Disorder treatment program, or be involved with community service work for a minimum of twenty (20) hours per week as acceptable by the House Manager and the resident's supervising officer (if applicable).

Residents must be admitted through a screening process. It is the responsibility of the House Manager to assist the client to obtain benefits that can support their stay in the residence. Those benefits include: Social Security (SS), Social Security Insurance (SSI), food stamps, Medi-Cal, General Assistance (GA), etc.

If the resident was transferred from a SUD Residential Facility, they are likely to already have applied for benefits. However, any other resident with a subsidy through a county contract not referred by a residential treatment facility shall apply for benefits immediately, no later than three (3) days from admission into the Recovery Residence. Clients who are connected to outpatient treatment, unable to work, and do not have other income sources, may receive a scholarship through a county contract, if applicable, for the first thirty (30) days.

During each day, all residents shall be actively involved in outpatient treatment, education, employment, looking for work, counseling, volunteering or other activities appropriate to the treatment and recovery process.

SUPPORTING THE ROAD TO RECOVERY: COUNTY SCHOLARSHIP PROGRAM

Generally, these residents shall be expected to participate in intensive or regular outpatient treatment while living in a Recovery Residence. Residents who complete treatment may remain in the Recovery Residence, but will be expected to pay their fair share of rent.

The scholarship program consists of the following four (4) levels:

LEVEL 4		If resident still in treatment, has kept employment and benefits ten percent (10%)
LEVEL 3		Resident is employed- if still in treatment twenty percent (20%)
LEVEL 2		Resident has benefits- scholarship = sixty-seven percent (67%) of share of rent, resident thirty-three percent (33%)
LEVEL 1	No Benefits, unemployed & actively attending Outpatient Tx= one hundred percent (100%) cost of share of rent- first thirty (30) days	

LEVEL 1

Level 1, County will cover one hundred percent (100%) during the first thirty (30) days while the resident applies for benefits, if no source of income (no employment and no benefits). Share of rent will apply until gainfully employed; otherwise, Level 2 applies.

LEVEL 2.

In Level 2, the resident will be employable and have benefits. If the client remains in SUD treatment, the County will follow HUD guidelines based on the thirty-three percent (33%) of their net income towards their share of the cost of rent, with the County contributing sixty-seven percent (67%).

LEVEL 3.

If the resident is still in treatment and employed, the County will contribute twenty percent (20%) towards their share of the cost of rent.

LEVEL 4

The resident is almost completing SUD treatment, has kept employment and benefits, the County will contribute ten percent (10%) towards their share of the cost of rent.

The typical length of a treatment episode in Outpatient Program is six (6) months.

All residents who are able to work are required to obtain gainful employment within the first thirty (30) days of their stay, or as soon as reasonably possible.

Residents who are able to work, but are unsuccessful in gaining employment, shall be referred to vocational services/resources in the community.

Employed clients pay thirty-three percent (33%) of their net income towards the cost of their fair share of rent, not to exceed the total cost of the bed per month.

Residents who are mentally or physically unable to work are expected to participate in other productive activities during the day, such as school, training or volunteer work.

If the resident has enrolled in a community college and is waiting for financial aid, a financial assessment will be conducted to capture available benefits. The scholarship program will supply the difference from the rent until financial aid is received.

CONTRA COSTA COUNTY BEHAVIORAL HEALTH DIVISION
ALCOHOL AND OTHER DRUG SERVICES

**RECOVERY RESIDENCES STANDARDS
CHECKLIST**

Policies & Procedures- The Manual of Operations Include:					
Y	N	Rules	Y	N	House Manager Job Description
Y	N	Drug Testing	Y	N	Protocol for Organizing Personal and Financial Documentation
Y	N	House Expectations of Residents	Y	N	Governance
Y	N	Grievance Procedures	Y	N	Discharges/Termination
Y	N	Confidentiality Procedures	Y	N	Readmission Procedures
Y	N	Prescriptions Procedures	Y	N	Medication Assisted Treatment
Y	N	Relapse Action Plan	Y	N	House Rules clearly indicate no alcohol or drug use allowed
Standards of Operation					
Y	N	Residents are required to attend regular house meetings	Y	N	House environment is welcoming and understanding of those they serve
Y	N	Meetings have agendas and a record of each meeting is kept organized in a binder	Y	N	All residents have equal access to house responsibility positions in governance
Y	N	Residents equally participate in house chores	Y	N	All residents have access to the kitchen, refrigerator, stove and oven, laundry facilities, restroom and shower
Y	N	Each resident's personal property is secure	Y	N	House is a non-smoking residence
Y	N	House has an established "A Good Neighbor Policy" with direct neighbors of the residence. Policy is written, visible and enforced	Y	N	Has a policy to allow smoking on the property, in a clearly designated outdoor space where smoke will not affect the neighbors and is in compliance with any/all local smoking rules/ordinances
Y	N	The house offers residents opportunities to engage in daily recreational, cultural, physical and spiritual activities, either as an individual or group	Y	N	The designated smoking area is litter free and to be cleaned daily as part of a chore schedule

Y	N	All residents are engaged in employment, treatment, education, volunteer work and/or actively job searching for a defined period, or other approved daily activities conducive to the recovery process	Y	N	Has a written description of the procedural processes regarding chores, assignment of roommates, and primary house rules in a place that is accessible to all residents
Physical Structure					
Y	N	The Residential structure, maintenance, and landscaping should be kept in a manner equal to, or better than, the surrounding neighborhood	Y	N	There must be no evidence of insect infestation, bedbugs, cockroaches, or rodents
Y	N	There are no holes in the walls or broken items, furnishings or fixtures	Y	N	There is working heat in all living areas
Y	N	Has water heater	Y	N	One (1) large room for in house meetings
Y	N	Smoke detectors shall be installed in each bedroom	Y	N	Clean, functional and unbroken furniture must be present with no major stains, rips or tears that would bring the furniture to a below average standard
Y	N	Sleeping areas must include a bed for each person	Y	N	Sleeping areas must include a closet, dresser or drawer space for each person
Y	N	Bedrooms are the only rooms to be used as sleeping areas	Y	N	Bedrooms used as sleeping areas may not be used for any other purposes
Y	N	No room may be enclosed within another unfinished room (including garage)	Y	N	Each room shall have a door and at least one (1) working window for fire escape purposes
Y	N	Bathrooms shall have no mold or other visible health hazard	Y	N	Each room may have no more beds than is reasonable for the size
Y	N	Dining Room tables and chairs must be suitable for family meals for a minimum of four (4) people	Y	N	Kitchen and Dining Tables are kept clear from frequent use
Y	N	Space must be provided for dry food storage for all residents	Y	N	Five (5) cubic feet of cold food storage per person (one (1) large refrigerator for four (4) people) must be provided
Y	N	Adequate hot water for dish washing and showering must be provided	Y	N	Stove must be clean and free from grease accumulation
Safety					
Y	N	Windows are in working order, unblocked and no bars are allowed	Y	N	Charged fire extinguishers shall be installed as prescribed
Y	N	Working smoke detectors are installed as directed	Y	N	Carbon monoxide detector is installed if gas appliances or fireplace are used
Y	N	Emergency contact numbers, house phone number and address are posted	Y	N	A First Aid Kit complete with scissors and tweezers is present
Management					
Y	N	Management monitors safety and sobriety of residents	Y	N	Gas, Electric, Water, Sewer and Garbage must be provided and paid for by management

Y	N	Management has not had, and agrees not to have, dual relationships with residents- Unacceptable	Y	N	Plumbing and electrical requests are responded to and addressed within twenty-four (24) hours
Y	N	Maintenance requests are responded to and addressed within one month	Y	N	Waste and unused items are dealt with properly
Y	N	Record of signed house rules and resident agreement are kept for at least two (2) years post discharge	Y	N	Drug and alcohol testing must be conducted and documentation completed
Y	N	All records should be kept confidential and protected by either lock or password	Y	N	

GLOSSARY

The following general definitions shall apply to terminology used in these guidelines, except where specifically noted otherwise;

DHCS: Refers to the California Department of Health Care Services, and is the sole state agency responsible for oversight of non-medical drug and alcohol treatment services.

ADULT FACILITY: Refers to a residential alcohol or drug abuse recovery or treatment facility that is designed to serve adults.

ALCOHOLICS ANONYMOUS (A.A.): Usually abbreviated AA is the twelve (12)-step recovery program that has helped many people stop the use of alcohol. The original program was focused on spirituality having an impact on changing a person’s life, but depending on the program, these twelve (12) steps may be altered for the audience. AA is completely confidential, and it is assumed that all participants will remain anonymous.

APPLICANT: Refers to an individual who has applied for certification for a particular staff position within a facility, or to a director who has applied for the certification of a particular facility, depending on the context in which the term is used.

APPLICATION FOR CERTIFICATION: Refers to any and all forms and attachments submitted by an individual seeking certification for a particular staff position, or submitted by an individual seeking certification for a particular Recovery Residence facility.

CCAPP: Refers to California Consortium of Addiction Programs and Professionals, an organization which certifies Recovery Residences as well as Certified Alcohol and Drug Abuse Counselors.

CAPACITY: Refers to the maximum number of persons authorized to reside in a certified Recovery Residence at any one time.

CERTIFICATE OF COMPLIANCE: Refers to the certificate awarded to a facility that has met the certification qualifications established in these guidelines.

CERTIFIED RECOVERY RESIDENCE: Refers to a Recovery Residence that complies with these guidelines and has chosen to be certified according to these guidelines.

COMPLAINT: Refers to a formal or informal negative allegation regarding a possible violation of the certification guidelines and may include, but not be limited to, criminal activity, resident safety, good neighbor policy, zoning issues, and staff or resident use or sale of drugs.

CONVICTION: Refers to a final judgment on a verdict or finding of guilt, a plea of guilty or a plea of *nolo contendere* for all felony or misdemeanor cases.

COUNTY: Refers to Contra Costa County.

COUNTY REFERRAL: Refers to a person who is directed to a treatment facility or Recovery Residence by any court, County department or other county provider. The referral may still be under the supervision of the court, County department or agency.

DAY: Refers to a calendar day unless otherwise specified.

DEFICIENCY: Refers to failure to comply with certification guidelines and may be cause for denial of certification or notice of sanction.

DIRECTOR/FACILITY ADMINISTRATOR: Refers to the individual responsible for the overall management of a Recovery Residence.

FACILITY: Refers to a certified Recovery Residence, and includes those facilities that accept County funds.

GOOD NEIGHBOR POLICY: Refers to the assurance that all certified Recovery Residences operate in a manner that does not alienate the community.

CONTRA COSTA COUNTY BEHAVIORAL HEALTH ALCOHOL AND OTHER DRUGS (CCCBH AODS) ADMINISTRATION: Refers to the operating Division's unit responsible for Recovery Residence certification and compliance.

MANDATORY TRAININGS/MEETINGS: Refers to scheduled trainings/meetings convened by CCCBH AODS and/or Contra Costa County Probation Department.

NA: Narcotic Anonymous. A **Narcotics Anonymous** group is any meeting of two or more recovering addicts who meet regularly at a specific time and place for the purpose of recovery from the disease of addiction. All **Narcotics Anonymous** groups are bound by the principles of the Twelve (12) Steps and Twelve (12) Traditions of **NA**.

POSITIVE TEST: Refers to a resident's positive test result from the use of alcohol, drugs, or non-prescribed medications/narcotic pain killers.

PREMISES: Refers to the land, building, or other structures included in the certification issued for a Recovery Residence.

PROGRESS REPORT: Refers to the written or oral indications of a resident's overall progress in the Recovery Residence in which he or she is participating as a result of a court order or condition of probation.

QUALITY ASSURANCE (QA) TEAM: AODS Administration staff directly responsible for ensuring that Recovery Residence standards are met.

RELAPSE: Refers to an instance or period during which a resident uses drugs and/or alcohol during or following participation in a substance use disorder treatment program.

RESIDENT: Refers to an individual who resides in a certified Recovery Residence.

RESIDENTIAL: Refers to a live-in substance use disorder treatment facility.

REVOCAION OF CERTIFICATION: Refers to a disciplinary action recommended by the Alcohol and Other Drugs Administration and imposed upon a Recovery Residence following non-compliance with these certification guidelines. In an emergency that jeopardizes public safety and/or the safety of the residents, the AODS Administration may revoke certification subject to further review. When revocation occurs, all County-referred residents are removed from the Recovery Residence and may not accept further County referrals until the revocation is lifted.

SANCTION: Refers to a disciplinary action designed to secure enforcement of the Recovery Residence certification guidelines through the imposition of a penalty for a violation of the guidelines.

RECOVERY RESIDENCE CERTIFICATION COORDINATOR: Refers to the Contra Costa County Behavioral Health SUD System of Care Administrator, or his/her designee, responsible for the overall management and coordination of the certification program.

RECOVERY RESIDENCE: Refers to a facility that offers an alcohol-free and drug-free residence for individuals, during or following participation in a substance use disorder treatment program, without any on-site drug or alcohol treatment services. A certified Recovery Residence is one that complies with these certification guidelines.

SUSPENSION OF CERTIFICATION: Refers to a disciplinary action taken by the SUD System of Care Administrator to rescind certification for a specific period of time pursuant to these guidelines, during which time the facility may not receive any referrals from any court, County department or agency. Residents of the Recovery Residence prior to the suspension may remain in the Recovery Residence.

UNUSUAL OCCURANCE: Refers to any event or situation that has occurred at the Recovery Residence facility that may have caused, or has the potential to cause, physical or psychological harm to individuals who are receiving services from the Recovery Residence facility. This definition also applies to visitors.

PREPARING YOUR APPLICATION PACKAGE

To ensure proper processing of your application to the California Consortium of Addiction Programs and Professionals (CCAPP), make sure you have enclosed the following, filled out completely and signed with a check for the appropriate amount.

- ★ Application for Certification
- ★ Site Visit Form and Fee
- ★ Copy of Standards of Operation
- ★ Copy of Admission and discharge
- ★ Copy of Eligibility for Residency
- ★ Copy of House Rules
- ★ Copy of Confidentiality Policy
- ★ Copy of Sexual Harassment and Verbal Abuse Policy
- ★ Copy of Weapons, Alcohol, Illegal Drugs and Illegal Activity Policy
- ★ Copy of Prescribed Medication Policy
- ★ Copy of Drug and Alcohol Testing Protocol
- ★ Copy of Your Testing Log
- ★ Copy of Your Relapse Policy
- ★ Copy of Documentation/Record Keeping
- ★ Copy of Incident Report Policy
- ★ Copy of Grievance Policy and Procedures
- ★ Copy of Manager's Requirements (Job Description)
- ★ Copy of Code of Conduct
- ★ Copy of Conflict of Interest Statement
- ★ Physical Environment of the Recovery Residence
- ★ Copy of Continuity Policy
- ★ Building Permits and Fire Clearance, if any
- ★ Article of Incorporation, if any

APPENDIX I

Consent to Disclose Confidential Information

USE our SAMPLE