Missouri Coalition of Recovery Support Providers
Missouri's Recovery Lifeline

NARR Standard 3.0

NARR was founded in 2011 by a group of organizations and individuals with vast experience in recovery housing from across the country. From the beginning, NARR has been committed to developing and maintaining a national standard for all levels of recovery housing. The term "recovery residence" denotes safe and healthy residential environments in which skills vital for sustaining recovery are learned and practiced in a home-like setting, based on Social Model principles. The Social Model is fundamental to all levels of recovery residences. Social Model philosophy promotes norms that reinforce healthy living skills and associated values, attitudes, and connection with self and community for sustaining recovery. NARR Standard 3.0 operationalizes the Social Model across four Domains, 10 Principles, 31 Standards and their individual rules. The Standard is tailored to each of NARR's four levels. Version 3 of the NARR Standard does not introduce any operational rules that are not already included in Version 2.Rather, it restates them in a more logical way that improves clarity and eliminates some redundant language.

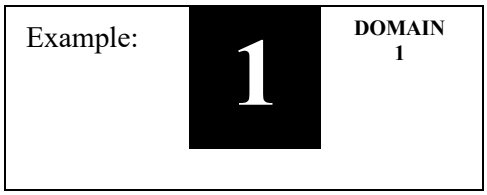
Outline of the Standard

Domain 1	***Administrative Operations***
Principle A.	Operate with integrity: Standards 1-4
Principle B.	Uphold residents' rights: Standards 5 and 6
Principle C.	Create a culture of empowerment where residents engage in governance and leadership: Standards 7 and 8
Principle D.	Develop staff abilities to apply the Social Model: Standards 9-13
Domain 2	***Physical Environment***
Principle E.	Provide a home-like environment: Standards 14 and 15
Principle F.	Promote a safe and healthy environment: Standards 16-19
Domain 3	***Recovery Support***
Principle G.	Facilitate active recovery and recovery community engagement: Standards 20-25
Principle H.	Model prosocial behaviors and relationship enhancement skills: Standard 26
Principle I.	Cultivate the resident's sense of belonging and responsibility for community: Standards 27-29
Domain 4	***Good Neighbor***
Principle J.	Be a good neighbor: Standards 30 and 31

Reference Guide

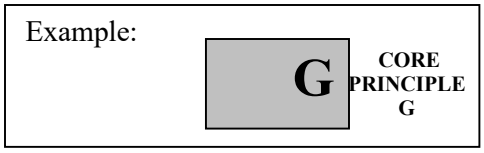
DOMAINS: Notice that there are four (4) **Domains**, the major sections of the document above labeled numerically 1-4: (These are the largest numbers on thedocument and are in white on a black background)

1. Administrative and Operational Domain
2. Physical Environment Domain
3. Recovery Support Domain
4. Good Neighbor Domain



CORE PRINCIPLES: Under each of the **4 Domains** are ten (10) **Core Principles** labeled alphabetically withcapital letters, A-J in black type with gray backgrounds:

- **A.** Operate with Integrity
- **B.** Uphold Residents' Rights
- **C.** Create a Culture of Empowerment Where Residents Engage in Governance and Leadership.
- **D.** Develop Staff Abilities to Apply the Social Model
- **E.** Provide a Home-like Environment
- **F.** Promote a Safe and Healthy Environment
- **G.** Facilitate Active Recovery and Recovery Community Engagement
- **H.** Model Prosocial Behaviors and Relationship Enhancement Skills
- **I.** Cultivate the Resident's Sense of Belonging and Responsibility for Community
- **J.** Be a Good Neighbor



STANDARDS: Under each of the **10 Core Principles** are the thirty-one (31) **Standards** labeled numerically from 1-31, in black print with white backgrounds.

SUBSECTIONS: And, finally, under each of the 31 Standards are indented subsections labeled alphabetically in lower-case letters from "a" to as many letters as are needed for each section.

For quick references to NARR Standards, you may find abbreviations such as the following helpful, or you may find others using them and want to be sure you are understanding the references:

2, F, 16., c.

"2, F, 16. C." is just shorthand for saying "We are referring to the Physical Environment Domain
"2" - Core Principle
"F" – Promote a Safe and Healthy Environment
"16" – Standard (Provide an alcohol and illicit drug free environment)
"c" – Subsection (Policy and procedures for drug screening and/or toxicology protocols)

TEST YOURSELF:

If you see a reference to "4, J, 30., b.", to what is it referring to?

Purpose: The intent of the Missouri Coalition of Recovery Support Providers, MCRSP, and Recovery Housing Quality Standards Peer ReviewProcess is to ascertain that the recovery housing at the indicated location meets minimum quality standards adopted by MCRSP and approved by the National Alliance for Recovery Residences. A MCRSP review team is to utilize this form to conduct their survey of the residence(s).

Process: Once the application for accreditation is approved and the required fees have been received, a review team will be assigned. The MCRSP Housing Director will schedule an on-site visit and provide the application and required documents to the lead and co-reviewers. The lead and co-reviewers are to review the application and required documentation prior to the on-site visit. This form is based on the MCRSP Housing Quality Standards, which identify areas for quality review. Each variable is to be assessed using the following scale:

1- Not Acceptable 2- Needs Improvement 3- Acceptable

1. **Not Acceptable**- If there are any items scored "1 - Not Acceptable," the home fails the MCRSP minimum housing quality standards.The reviewer will then discuss with the owner/designated individual the repairs noted that would be necessary to bring the home up to the standard. Once the home is up to standards the lead will contact the reviewer to reschedule for a site visit. Photographic evidence may be used instead of another site visit, depending on the deficiency.

2. **Needs Improvement** – Items scored with a "2 – Needs Improvement," the reviewer will discuss with the owner or designated contact the recommendations (this rating does not prevent you from receiving your MCRSP accreditation). Once these recommendations are completed, either via submitted documentation or pictures to reviewers to verify corrections have been made or a subsequent on-site visit, the rating will be changed to Acceptable.

3. **Acceptable-** If no items are scored as a "1 - Not Acceptable" nor "2 - Needs Improvement," the house passes the minimumMCRSP housing quality standards and will need no further review.

After completion of the site review, the lead reviewer submits this checklist with written comments and a recommendation with justification to accredit or not to accredit to the MCRSP Housing Task Force Chair and Chairperson of MCRSP. The co-reviewer is to submita written summary comment regarding the inspection for inclusion in the report. Peer reviewers must document concerns for any items receiving a ranking of 1 or 2 and make Quality Improvement Recommendations (QIR) for these items. QIRs will be based on the MCRSP quality standards and recommendations from literature and emerging best practices. Verification of any required QIRs must be noted in the report. The Chair of the MCRSP Housing Task Force and Chairperson of MCRSP must review recommendations, and a site cannot be publicized as in good standing with MCRSP until written notification of good standing is provided by MCRSP. **This standing is evaluated regularly and can be revoked by MCRSP**.

Domains, Core Principles and Standards

		LEVELS I II III * = required by state law ✓ = required R = Recommended	D Indicates Document Required	Criteria Met 1=NO 2=Needs Improve 3=YES	*Comments:*
1. Administrative and Operational					
A. Core Principle: Operate with Integrity					
1. Use mission and vision as guides for decision making					
a.	A written mission that reflects a commitment to those served and identifies the population served which, at a minimum, includes persons in recovery from a substance use disorder.	✓ ✓ ✓	**D**		
b.	A vision statement that is consistent with NARR's core principles	✓ ✓ ✓	**D**		
2. Adhere to legal and ethical codes and use best business practices					
a.	Documentation of legal business entity (e.g., incorporation, LLC Documents or business license *or any other required government documentation.*)	✓ ✓ ✓	**D**		
b.	Documentation that the owner/operator has current liability coverage and other insurance appropriate to the level of support.	✓ ✓ ✓	**D**		
c.	Written permission from the property owner of record (if the owner is other than the recovery residence operator) to operate a recovery residence on the property.	✓ ✓ ✓	**D**		
d.	A statement attesting to compliance with nondiscriminatory state and federal requirements.	✓ ✓ ✓	**D**		

e.	Operator attests that claims made in marketing materials and advertising will be honest and substantiated and that it does not employ any of the following: • False or misleading statements or unfounded claims or exaggerations; • Testimonials that do not reflect the real opinion of the involved individual; • Price claims that are misleading; • Therapeutic strategies for which licensure and/or counseling certifications are required but not applicable at the site; or • Misleading representation of outcomes.	✓	✓	✓	**D**		
f.	Policy and procedures that ensure that appropriate background checks (due diligence practices) are conducted for all staff who will have direct and regular interaction with residents.	*	*	*	**D**		
g.	Policy and procedures that ensure the following conditions are met if the residence provider employs, contracts with or enters into a paid work agreement with residents: • Paid work arrangements are completely voluntary. • Residents do not suffer consequences for declining work. • Residents who accept paid work are not treated more favorably than residents who do not. • All qualified residents are given equal opportunity for available work. • Paid work for the operator or staff does not impair participating residents' progress towards their recovery goals. • The paid work is treated the same as any other employment situation. • Wages are commensurate with marketplace value and at least minimum wage. • The arrangements are viewed by a majority of the residents as fair. • Paid work does not confer special privileges on residents doing the work. • Work relationships do not negatively affect the recovery environment or morale of the home. • Unsatisfactory work relationships are terminated without recriminations that can impair recovery.	✓	✓	✓	**D**		

h.	Staff must never become involved in residents' personal financial affairs, including lending or borrowing money, or other transactions involving property or services, except that the operator may make agreements with residents with respect to payment of fees.	✓	✓	✓	**D**		
i.	A policy and practice that provider has a code of ethics that is aligned with the MCRSP/NARR code of ethics. There is evidence that this document is read and signed by all those associated with the operation of the recovery residence, to include owners, operators, staff and volunteers.	✓	✓	✓	**D**		
j.	Signed MCRSP Assurance Form and Compliance Agreement be submitted at the time of accreditation and re-accreditation.	✓	✓	✓	**D**		
3. Be financially honest and forthright							
a.	Prior to the initial acceptance of any funds, the operator must inform applicants of all fees and charges for which they will be, or could potentially be, responsible. This information needs to be in writing and signed by the applicant.	✓	✓	✓	**D**		
b.	Use of an accounting system which documents all resident financial transactions such as fees, payments and deposits. • Ability to produce clear statements of a resident's financial dealings with the operator within reasonable timeframes. • Accurate recording of all resident charges and payments. • Payments made by 3rd party payers are noted	✓	✓	✓			
c.	A policy and practice documenting that a resident is fully informed regarding refund policies prior to the individual entering into a binding agreement.	✓	✓	✓	**D**		
d.	A policy and practice that residents be informed of payments from 3rd party payers for any fees paid on their behalf.	✓	✓	✓	**D**		

4. Collect data for continuous quality improvement

a.	Policies and procedures regarding collection of resident's information. At a minimum data collection will • Protect individual's identity. • Be used for continuous quality improvement and • be part of day-to-day operations and regularly reviewed by staff and residents (where appropriate).	✓	✓	✓	**D**		

B. Core Principle: Uphold Residents' Rights

5. Communicate rights and requirements before agreements are signed

a.	Documentation of a process that requires a written agreement prior to committing to terms that includes the following: • Resident rights • Financial obligations, and agreements • Services provided • Recovery goals • Relapse policies • Policies regarding removal of personal property left in the residence *Upon signing, placed in file*	✓	✓	✓	**D**		

6. Protect resident information

a.	Policies and procedures that keep residents' records secure, with assess limited to authorized staff.	✓	✓	✓	**D**		
b.	Policies and procedures that comply with applicable confidentiality laws.	✓	✓	✓	**D**		
c.	Policies and procedures, including social media**,** protecting resident and community privacy and confidentiality.	✓	✓	✓	**D**		

C. Core Principle: Create a culture of empowerment where residents engage in governance and leadership

7. Involve residents in governance

a.	Evidence that some rules are made by the residents that the residents (not the staff) implement.	✓	✓	R			
b.	Grievance policy and procedures, including the right to take unresolved grievances to the operator's oversight organization. *Shall be reviewed with residents, staff and* volunteers upon entry or hire. Grievance Policy as well as the MCRSP grievance policy is to be posted in the common areas.	✓	✓	✓	**D**		

c.	Verification that written resident's rights and requirements (e.g., residence rules and grievance process) are posted or otherwise available in common areas.	✓	✓	✓			
d.	Policies and procedures that promote resident-driven length of stay.	✓	✓	✓			
e.	Evidence that residents have opportunities to be heard in the governance of the residence; however, decision making remains with the operator.		✓	✓			
8. Promote resident involvement in a developmental approach to recovery							
a.	Peer support interactions among residents are facilitated to expand responsibilities for personal and community recovery	R	✓	✓			
b.	Written responsibilities, role descriptions, guidelines and/or feedback for residence leaders.	R	✓	✓	**D**		
c.	Evidence that residents' recovery progress and challenges are recognized, and strengths are celebrated.		✓	✓			
D. Core Principle: Develop Staff Abilities to Apply the Social Model							
9. Staff model and teach recovery skills and behaviors							
a.	Evidence that management supports staff members maintaining self-care.		✓	✓			
b.	Evidence that staff are supported in maintaining appropriate boundaries according to a code of conduct which includes an alcohol and drug free workplace		✓	✓			
c.	Evidence that staff are encouraged to have a network of support		✓	✓			
d.	Evidence that staff are expected to model genuineness, empathy, respect, support, and unconditional positive regard		✓	✓			
10. Ensure potential and current staff are trained or credentialed appropriate to the residence level							
a.	Policies that value individuals chosen for leadership roles who are versed and trained in the Social Model of recovery and best practices of the profession.		✓	✓			
b.	Policies and procedures for acceptance and verification of certification(s) when appropriate.		✓	✓			
c.	Staffing plan that demonstrates continuous development for all staff.		R	✓			

11. Staff are culturally responsive and competent							
a.	Policies and procedures that serve the priority population, which at a minimum include persons in recovery from substance use but may also include other demographic criteria.		✓	✓	**D**		
b.	Cultural responsiveness and competence training or certification are provided.		✓	✓			
12. All staff positions are guided by written job descriptions that reflect recovery							
a.	Job descriptions include position responsibilities and certification/licensure and/or lived experience credential requirements.		✓	✓	**D**		
b.	Job descriptions require staff to facilitate access to local community-based resources.		✓	✓	**D**		
c.	Job descriptions include staff responsibilities, eligibility, and knowledge, skills and abilities needed to deliver services. Ideally, eligibility to deliver services includes lived experience recovering from substance use disorders and the ability to reflect recovery principles.		✓	✓	**D**		
13. Provide Social Model-Oriented Supervision of Staff							
a.	Policies and procedures for ongoing performance development of staff appropriate to staff roles and residence level.		✓	✓	**D**		
b.	Evidence that management and supervisory staff acknowledge staff achievements and professional development.		R	✓			
c.	Evidence that supervisors (including top management) create a positive, productive work environment for staff.		✓	✓			

		LEVELS I II III * = required by state law ✓ = required R = Recommended			D Indicates Document Required	Criteria Met 1=NO 2=Needs Improve 3=YES	*Comments:*
2. Physical Environment							
E. The residence is comfortable, inviting, and meets residents' needs							
14. The residence is comfortable, inviting, and meets residents' needs							
a.	Verification that the residence is in good repair, clean, and well maintained. The average temperature in the livable areas in the residence is between 65-79 degrees.	✓	✓	✓			
b.	Verification that furnishings are typical of those in single family homes or apartments as opposed to institutional settings.	✓	✓	✓			
c.	Verification that entrances and exits are home-like vs. institutional or clinical. “Acceptable fire exit” means that the building must have minimally two operational exterior entrance/exits doors and functional windows from bedrooms on second and third floors for proper exit in case of fire; doors & windows must be free from obstructions. All basement bedrooms must have one exterior egress. All emergency escape and rescue egresses will be based on local housing codes. “Obstructions” means that the exit is not usable due to conditions such as debris, storage, or broke lock. Fire exits must be clearly marked.	✓	✓	✓			
d.	Verification of 50+ sq. ft per bed per sleeping room. Each bedroom will have a working window if fire exits are unavailable.	✓	✓	✓			
e.	Verification that there is a minimum of one sink, toilet and shower per six residents. Bathrooms are clean; have hot and cold running water; and fully functional plumbing.	✓	✓	✓			
f.	Verification that each resident has personal item storage which will include a dresser; hanging area; and reasonable storage space per bed.	✓	✓	✓			

g.	Verification that each resident has food storage space. Hand washing facilities include hot and cold water, soap, and hand drying means are readily accessible to residents and staff. All appliances (refrigerator, stove and microwave) for food storage and preparation are clean and in safe and good operating condition. A family size refrigerator of minimum of 18 cubic ft is available for every six residents. Fresh water is available to individuals at all times. Food preparation areas and utensils are cleaned and sanitized after use and are kept in good repair. If the program provides meals to residents, consideration is given to the food habits, personal, cultural, and religious preferences and medical needs of individuals served, including provisions for special diets for medical reasons.	✓	✓	✓			
h.	Verification that laundry services are accessible to all residents.	✓	✓	✓			
i.	Verification that all appliances are in safe, working condition.	✓	✓	✓			
15. The living space is conducive to building community							
a.	Verification that a meeting space is large enough to accommodate all residents.	✓	✓	✓			
b.	Verification that a comfortable group area provides space for small group activities and socializing	✓	✓	✓			
c.	Verification that kitchen and dining area(s) are large enough to accommodate all residents sharing meals together.	✓	✓	✓			
d.	Verification that entertainment or recreational areas and/or furnishings promoting social engagement are provided.	✓	✓	✓			
F. Core Principle: Promote a Safe and Healthy Environment							
16. Provide an alcohol and illicit drug free environment							
a.	Policy prohibits the use of alcohol and/or illicit drug use or seeking for staff or residents.	✓	✓	✓	**D**		
b.	Policy lists prohibited items and states procedures for associated searches by staff	✓	✓	✓	**D**		
c.	Policy and procedures for drug screening and/or toxicology protocols.	✓	✓	✓	**D**		

d.	Policy and procedures that address residents' prescription and non-prescription medication usage and storage consistent with the residence's level and with relevant state law.	✓	✓	✓	**D**		
e.	Policies and procedures that encourage residents to take responsibility for their own and other residents' safety and health.	✓	✓	✓	**D**		
17. Promote Home Safety							
a.	Operator will attest that electrical, mechanical, and structural components of the property are functional and free of fire and safety hazards.	✓	✓	✓	**D**		
b.	Operator will attest that the residence meets local health and safety codes appropriate to the type of occupancy (e.g., single family or other) OR provide documentation from a government agency or credentialed inspector attesting to the property meeting health and safety standards.	✓	✓	✓	**D**		
c.	Verification that the residence has a safety inspection policy requiring periodic verification of • Functional smoke detectors in all bedroom spaces and elsewhere as code demands, • Functional carbon monoxide detectors, if residence has gas HVAC, hot water or appliances • Functional fire extinguishers placed in plain sight and/or clearly marked locations, • Regular, documented inspections of smoke detectors, carbon monoxide detectors and fire extinguishers, • Fire and other emergency evacuation drills take place on at least a quarterly basis and are documented (not required for Level I Residences). • A first aid kit must be readily accessible and adequately stocked	✓	✓	✓			
d.	Verification of Electrical Safety. To qualify, there must be working electrical outlets, and lighting in every room. Extension cords from room to room are not acceptable and are a safety hazard. The home must be free of electrical hazards such as exposed wires, missing cover plates, cracked outlets, or light fixture hanging from electrical wiring without other firm support or fixture. The home must have working electricity to qualify.	✓	✓	✓			

e.	Verification of Plumbing. "Major leaks" means that main water drains and feed pipes (often located in the basement) are seriously leaking, any leaks causing standing water. Or any raw sewage conditions.	✓	✓	✓			
f.	Verification of Ceiling Conditions. "Unsound or hazardous" means the presence of serious defects that are either a potential for structural collapse or that large cracks or holes allow significant drafts to enter the residence. The condition includes severe bulging or buckling; large holes; missing parts; falling or in danger of falling; loose surface materials (other than paper or paint).	✓	✓	✓			
g.	Verification of Wall Conditions. "Unsound or hazardous" includes serious defects such that the structural safety of the building is threatened, such as severe buckling, bulging or leaning; damaged or loose structural members; large holes; air infiltration. Rate needs improvement or acceptable on walls that are basically sound but have some nonhazardous defects, including: small or shallow holes; cracks; loose or missing parts; unpainted surfaces; peeling paint, depending on severity of defects.	✓	✓	✓			
h.	Verification of Floor Conditions. "Unsound or hazardous" means the presence of serious defects that present a potential for structural collapse or other threats to safety (e.g., tripping) or large cracks or holes that allow substantial drafts from below the floor. The condition includes severe buckling or major movements under walking stress; damaged or missing parts. Rate needs improvement for floors that are basically sound but have some nonhazardous defects, including heavily worn or damage floor surface (for example, scratches or gouges in surface, missing portions of tile or linoleum, previous water damage).	✓	✓	✓			
i.	Verification of Interior Stairs. "Loose, broken, or missing steps" should not be acceptable if they present a serious risk of tripping or falling. A handrail is required for staircases with multiple steps. Halls and stairs must be free of tripping hazards.	✓	✓	✓			

j.	Verification of Windows. Windows must be in working condition, free of broken glass or missing panes. Windows must lock or be nailed shut; as long as it is not an alternative fire exit.	✓	✓	✓			
k.	Verification of Other Interior Hazards. May include broken glass, protruding nails, broken bathroom fixtures with sharp edges, standing water, raw sewage, etc.	✓	✓	✓			
l.	Verification of Exterior Safety Conditions. Ensure residence has proper exterior lighting, yard is maintained properly and grass does not exceed city ordinances, walkways are clear of obstruction and tripping hazards, trash and garbage are contained in covered trash cans or dumpsters, with no excessive accumulation present.	✓	✓	✓			
m.	Plumbing - "Major leaks" means that main water drains and feed pipes (often located in the basement) are seriously leaking, any leaks causing standing water. Or any raw sewage conditions.	✓	✓	✓			
18. Promote Health							
a.	Policy regarding smoke-free living environment and/or designated smoking area outside of the residence.	✓	✓	✓	**D**		
b.	Policy regarding exposure to bodily fluids and contagious disease.	✓	✓	✓	**D**		
19. Plan for emergencies including intoxication, withdrawal and overdose							
a.	Verification that emergency numbers, procedures (including overdose and other emergency responses) and evacuation maps are posted in conspicuous locations.	✓	✓	✓			
b.	Documentation that emergency contact information is collected from residents.	✓	✓	✓	**D**		
c.	Documentation that residents are oriented to emergency procedures.	✓	✓	✓	**D**		
d.	Verification that Naloxone is accessible at each location, and appropriate staff, resident, or individuals are knowledgeable and trained in its use.	✓	✓	✓	**D**		

		LEVELS I II III * = required by state law ✓ = required R = Recommended	D Indicates Document Required	Criteria Met 1=NO 2=Needs Improve 3=YES	*Comments:*

3. Recovery Support

G. Core Principle: Facilitate Active Recovery and Recovery Community Engagement

20. Promote meaningful activities

a.	Documentation that residents are encouraged to do at least one of the following: • Work, go to school, or volunteer outside of the residence • Participate in mutual aid or caregiving • Participate in social, physical or creative activities • Participate in daily or weekly community activities • Participate in daily or weekly programming (Level 3)	✓	✓	✓	**D**		

21. Engage residents in recovery planning and development of recovery capital

a.	Evidence that each resident develops and participates in individualized recovery planning that includes an exit plan/strategy.	✓	✓	✓			
b.	Evidence that residents increase recovery capital through such things as recovery support and community service, work/employment, etc.	✓	✓	✓			
c.	Written criteria and guidelines explain expectations for peer leadership and mentoring roles.	✓	✓	✓	**D**		

22. Promote access to community supports

a.	Resource directories, written or electronic, are made available to residents.	✓	✓	✓			
b.	Staff and/or resident leaders educate residents about local community-based resources	✓	✓	✓			

23. Provide mutually beneficial peer recovery support							
a.	A weekly schedule details recovery support services, events and activities.		✓	✓	**D**		
b.	Evidence that resident-to-resident peer support is facilitated: • Evidence that residents are taught to think of themselves as peer supporters for others in recovery • Evidence that residents are encouraged to practice peer support interactions with other residents.	✓	✓	✓			
24. Provide recovery support and life skills development services							
a.	Provide structured scheduled, curriculum-driven, and/or otherwise defined support services and life skills development. Trained staff (peer and clinical) provide learning opportunities.			✓	**D**		
b.	Ongoing performance support and training are provided for staff.			✓			
25. Provide clinical services in accordance with state law							
This standard is not applicable to Level I, II, III							
H. Core Principle: Model Prosocial Behaviors and Relationship Enhancement Skills							
26. Maintain a respectful environment							
a.	Evidence that staff and residents model genuineness, empathy and positive regard.	R	✓	✓			
b.	Evidence that trauma informed, or resilience-promoting practices are a priority.	R	R	✓			
c.	Evidence that mechanisms exist for residents to inform and help guide operations and advocate for community- building.	✓	✓	✓			
I. Core Principle: Cultivate the Resident's Sense of Belonging and Responsibility for Community							
27. Sustain a "functionally equivalent family" within the residence by meeting at least 50% of the following:							
a.	Residents are involved in food preparation.	✓	✓	✓			
b.	Residents have a voice in determining with whom they live.	✓	✓	✓			
c.	Residents help maintain and clean the home (chores, etc.).	✓	✓	✓			

d.	Residents share in household expenses.	✓	✓	✓			
e.	Community or residence meetings are held at least once a week.	✓	✓	✓			
f.	Residents have access to common areas of the home.	✓	✓	✓			

28. Foster ethical, peer-based mutually supportive relationships among residents and staff

a.	Engagement in informal activities is encouraged.	✓	✓	✓			
b.	Engagement in formal activities is required.			✓			
c.	Community gatherings, recreational events and/or other social activities occur periodically.	✓	✓	✓			
d.	Transition (e.g., entry, phase movement and exit) rituals promote residents' sense of belonging and confer progressive status and increasing opportunities within the recovery living environment and community.	✓	✓	✓			

29. Connect residents to the local community

a.	Residents are linked to mutual aid, recovery activities and recovery advocacy opportunities.	✓	✓	✓			
b.	Residents find and sustain relationships with one or more recovery mentors or mutual aid sponsors.	R	✓	✓			
c.	Residents attend mutual aid meetings or equivalent support services in the community.	R	✓	✓			
d.	Documentation that residents are formally linked with the community such as job search, education, family services, health and/or housing programs.	R	✓	✓			
e.	Documentation that resident and staff engage in community relations and interactions to promote kinship with other recovery communities and goodwill for recovery services.	R	✓	✓			
f	Residents are encouraged to sustain relationships inside the residence and with others in the external recovery community	✓	✓	✓			

		LEVELS I II III * = required by state law ✓ = required R = Recommended			D Indicates Document Required	Criteria Met 1=NO 2=Needs Improve 3=YES	*Comments:*
4. Good Neighbor							
J. Core Principle: Be a Good Neighbor							
30. Be responsive to neighbor concerns							
a.	Policies and procedures provide neighbors with the responsible person's contact information upon request.	✓	✓	✓	**D**		
b.	Policies and procedures that require the responsible person(s) to respond to neighbor's concerns.	✓	✓	✓	**D**		
c.	Resident and staff orientations include how to greet and interact with neighbors and/or concerned parties.	✓	✓	✓			
31. Have courtesy rules							
a.	Preemptive policies address common complaints regarding at least: • Smoking • Loitering • Lewd or offensive language • Cleanliness of the property	✓	✓	✓	**D**		
b.	Parking courtesy rules are documented.	✓	✓	✓	**D**		

Quality Improvement Recommendations

for Items with a Score of 1 or 2

Name of House_____

(Please use additional sheets if needed)

1- Not Acceptable (Must be addressed prior to accreditation),

2- Needs Improvement (Recommendation, will not impact accreditation)

Item Number	Score	QIR Recommendation *(Please be specific of location and floor)*

Corrections Report

for Quality Improvement Recommendations Identified for

Name of House_____

(Please use additional sheets if needed)

Item Number	Score	QIR Recommendation Correction Verification *(Please be specific to method and date of verification for each item)*

Reviewers' Recommendation to MCRSP Housing Task Force

Co-Reviewer Comments: (Insert Comments for co-reviewer)

Co-Reviewer Signature:

_____

Date: _____

Lead Reviewer Comments and Recommendation to MCRSP Housing Task Force

Lead Reviewer Comments: *(Insert Comments from lead reviewer)*

Lead Reviewer Signature: _____

Date: _____

Recommended for site to be recognized in good standing the MCRSP.

_____ YES	_____ Yes, ***with*** Quality Improvement Corrections	_____ NO