

SOBER LIVING ENVIRONMENT Presentation



WELCOME!

Longer Treatment = Improves Outcome

More Support = Improves Outcome

SOBER LIVING = IMPROVES OUTCOME!

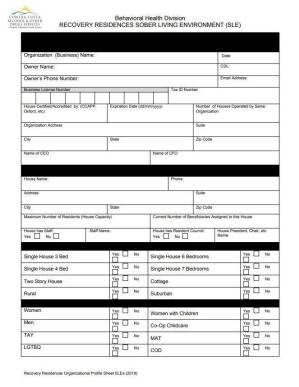
TREATMENT
WORKS.

RECOVERY IS
POSSIBLE!

FORMS

PRECOVERY RESIDENCE ORGANIZATIONAL PROFILE SHEET

Form:





- → Required Documentation.
- → Must be filled out and given to S4R/County.



MEMORANDUM OF UNDERSTANDING

S4R and S4H and Contra Costa County Recovery Residences agree:

- → Should a S4R/S4H Resident be evicted, S4R/S4H will maintain control of the scholarship-provided bed for a pre-paid time.
- → During that pre-paid time, should the Resident be required to pay a prorated amount to the Recovery Residence due to loss of the S4R/S4H scholarship, that S4R/S4H will be due a refund from the Recovery Residence.



S4H PARTICIPANT/RESIDENT REQUIREMENTSPayment Schedule



(Intensive Outpatient Program)

Grant for rent for up to 3 months. Grantee is expected to obtain employment.

Recovery Residence Grant Levels:

► 1st Month: 100%

2nd Month: 80%

3rd Month: 70%

ODF

(Outpatient Drug Free)

Grant for 30 days.

Recovery Residence Grant Levels:

► 1st Month: 100%



If an ODF Resident re-enters IOP and is employed, the Recovery Residence grant will begin at 80%.

S4H PARTICIPANT/RESIDENT REQUIREMENTSConsequences

To receive a grant participants must enroll in an Outpatient Drug Free (ODF) or and Intensive Outpatient Program (IOP). The consequences of missing treatment days are outlined below.



IOP

(Intensive Outpatient Program)

- Ist absence/month = Verbal Warning
- 2nd absence/month = Formal written warning and notice sent to treatment provider.
- OF RENT GRANT and notice sent to treatment provider. Grantee will have 24 hours to pay the prorated rent amount or be evicted.

ODF

(Outpatient Drug Free)

- Ist absence/month = Formal written warning and notice sent to treatment provider.
- 2nd absence/month = LOSS OF RENT GRANT and notice sent to treatment provider. Grantee will have 24 hours to pay the prorated rent amount or be evicted.

S4H PARTICIPANT/RESIDENT RULESImportant Notes

- If resident continues to not be in compliance with Treatment Program, their funding will cease.
- SLE's will be informed of resident's formal written warning.
- ▶ If a client is not in residential but enrolls in IOP, that program may make a referral and it will be the same as if referred by Residential Treatment.
- ► A client does not need to be in residential to get a referral, if they're enrolled in an IOP or ODF, that program may make a referral.



S4H FOLLOW-UP QUESTIONNAIRE

Residents will be asked to fill out a follow-up questionnaire to share their experiences with this program:

Topics covered in this survey include:

- Resident information
- Methods for maintaining recovery
- Experience with grant process
- Experience with SLE/Concerns?/Would they recommend SLE?



CCAPP

CCAPP FORMS

- Application for Certification
- Standards for Sober Living Environments



STANDARDS FOR SOBER LIVING ENVIRONMENTS

STANDARDS

Article 1: Physical Environment 2100

Article 2: Management 2200

Article 3: Record Keeping 2300

Article 4: House Rules 2400

Article 5: Residency Requirements 2500



ARCHITECTURAL ASPECTS OF RECOVERY-CONDUCIVE HOUSING

- (a) Sociopetality: Design should encourage residents to contact each other incidentally, informally, and without status barriers. Mundane contacts with each other during the course of the day are the medium for recovery in a well designed setting.
- (b) Communality: Space should be available for all residents to meet for community meetings, and to attend community events (parties, meals, holidays, celebrations).
- (c) Security: Entrance and exit must be controlled. This means that informal perimeter security and monitoring of the front door are necessary. Human security (people circulating through the facility) is far preferable to electronic security.
- (d) Durability and quality of furnishings: Only the highest quality fixtures, materials, appliances and furniture should be used. The extra investment in the beginning repays itself many times over.
- (e) (f) (g) Upkeep and appearance: Repair, maintenance, cleanliness, and attractiveness are critical elements in the life of the house. The upkeep and appearance of the house are a metaphor for the lives of the residents. This includes grounds and driveways surrounding the home.
- (h) (i) Personalization and comfort: Residents should feel the place is their own. This means allowing room for personal possessions, decorating one's own area, etc. (Reprinted with permission, "The architecture of recovery: Prospects for the Nineties for housing low-income people with alcohol and drug problems", Friedner D. Wittman, Clew Associates, presented April 10, 1992, at a Conference on Recovery-Conducive Affordable Housing Strategies, University of California, San Diego.)
- (j) Respect for neighbors: Good neighbor policies assure that the home and its residents are accepted as part of the community. This means that residents will be mindful of noise levels of conversations, designated smoking areas that will not affect the neighbors, and walking on sidewalks and paths to destinations.

SPACE

- (a) Space should be adequate to accommodate each individual comfortably and with dignity and respect.
- (b) Each home shall have a living room area with adequate space for participants to assemble for social or other group activities.
- (c) Each home shall have a dining area suitably furnished for group or individual meal service.
- (d) Sleeping rooms shall be adequate to provide a bed and private space for each resident. These areas shall not be used for any other purposes.
- (e) Bathrooms shall be conveniently located and sufficient to provide adequate facilities for health, hygiene and privacy for each resident.
- (f) Kitchen facilities shall provide cooking and storage space to meet the needs of the home and its residents.
- (g) Personal storage should be provided for each resident.

FIRE SAFETY

The following minimum fire prevention requirements shall be followed:

- (a) There shall be no smoking in bedrooms;
- (b) Smoking is allowed outside only and smoking materials shall be disposed of safely;
- (c) There shall be no accumulation of clothing, newspapers, or cartons in the living/sleeping areas;
- (d) Stoves and cooking areas shall be kept clean of grease accumulation;
- (e) Furniture and drapes are treated with fire retardant materials
- (f) Smoke detectors fire extinguishers, and CO2 detectors shall be installed;
- (g) Exit doors shall be clearly marked and readily available;
- (h) Fire drills from sleeping areas should be encouraged;
- (i) Buildings with 2nd floor shall have emergency fire ladders clearly marked.

HEALTH STANDARDS

The following minimum health maintenance measures shall be followed:

- (a) There shall be adequate space for food storage;
- (b) All food shall be stored in covered containers, or properly wrapped;
- (c) Perishable items shall be refrigerated and adequate refrigeration in good repair shall be available;
- (d) All dishes and cooking implements shall be washed upon use;
- (e) There shall be adequate hot water for dishwashing;
- (f) Bathroom space shall be adequate for number of residents;
- (g) Bathrooms shall be kept clean on a daily basis;
- (h) Bathrooms shall provide personal privacy;
- (i) There is a policy for drug testing.

MANAGEMENT

MANAGERS RESPONSIBILITY

The person in charge of the facility shall be clearly identified to all residents and on the premises

- (a). This should be an individual or designated individual within the group. This person shall be responsible for the maintenance and safety of the building.
- (b) If the person is designated, the lines of authority must be clearly defined.
- (c) The manager should be the keeper of the "good neighbor" policy and liability insurance and copies should be available and visible in the home.

STAFFING

(a) – (f) Staffing may or may not be necessary depending on the nature of the housing. At a minimum, someone must be responsible for the safety of the building, someone must be available to maintain records, to collect rent, and to register and check-out residents, and to maintain rules of the house. The resident group may choose to have other staff available such as cooks, grounds keepers, etc. Staff shall not provide any direction to the residents but shall be available for appropriate management of the physical plant.

RECORD KEEPING CCAPP

RESIDENT RECORDS

- (a) The manager in charge of the residency shall maintain formal records. Records fill several important roles: they allow management to track the person served and provide a sense of order. The following record keeping standards are applicable to SLE:
- (b) Personal Data Form: Biographical personal data that provides an identification profile and emergency contact. Personal data requirements should be consistent with the organization's record and profile data requirements. Length of sobriety, prior recovery experience, and source of referral are appropriate.
- (c) Resident Log: This is a continuing record of residents as they enter and exit residency. The log includes referral into the home and circumstances of exit. Management thus has available a quick review of residents registered in a given year, along with the number of people moving out and why.
- (d) Resident Fee Payment Record: This record indicates the amount of resident fee due, and the date and amount of actual payment. (e) Sign-in, Sign-out Sheets: For the safety of the residents and in case of emergency, the designated person must know the location of each resident. Sign-in and Sign-out sheets are available and in a prominent place in the home.

HOUSE RULES

CCAPP

- (a) The rules of the house must be clearly defined. Optional rules will depend on the needs of the population to be served, should not be over burdensome, and must be consistent with residency needs.
- (b) No drinking of alcohol or items containing alcohol or using illegal drugs at any time.
- (c) No alcohol, items containing alcohol or illegal drugs shall be brought onto the premises at any time.
- (d) Rent must be paid on time.
- (e) Mandatory attendance at a weekly house meeting.
- (f) A policy on drug testing is available and equally applies to all residents and staff if utilized.

RESIDENCY REQUIREMENTS

- (a) The residency requirements must be clearly defined and at a minimum should include:
- (b) A desire to live a clean and sober lifestyle.
- (c) Completion of a formal alcohol or drug recovery program, or documented stability in a self-help group.
- (d) A willingness to abide by all the house rules;
- (e) A signed residential agreement on file for each resident.

FINAL NOTES

PLEASE KEEP IN MIND

You have ONE YEAR to become certified!

Compliance is DUE by January 1st, 2020

If a SLE is not certified by January 1st, 2020 S4R will no longer be able to make referrals to that house.

- Profile Sheet
- Memorandum of Understanding
- ► S4H Participant/Resident Rules
- S4H Follow-Up Questionnaire
- CCAPP Standards for SLE's
- CCAPP Forms



SUMMARY

ANY QUESTIONS?

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THANK YOU for your time!



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