



Kentucky Alliance of Recovery Residences

Phase Two Guide

Organization Policies and Procedures

Revised March 2025

Writing Guide

Organization Policies and Procedures

This writing guide for Organization Policies and Procedures is designed to help organizations create clear, well-structured documents that meet KYARR certification standards.

Many key policies—such as those related to safety, confidentiality, medication protocols, and grievance procedures—apply to both staff and residents. These policies should be written in a way that clearly communicates expectations, responsibilities, and procedures to all parties. Where necessary, certain policies may include sections or explanations tailored specifically for staff or for residents, but the goal is to promote transparency, consistency, and shared understanding throughout the organization.

Resident intake/orientation materials should remain clear and easy to understand, using plain language suitable for all reading levels. Each major policy should be appropriately titled and include space for the staff member's/resident's signature and date. Similarly, staff policies should be thorough and meet the standards set by KYARR, NARR, and applicable Kentucky Administrative Regulations, while also serving as a functional staff manual for onboarding and training.

This guide also serves as the checklist KYARR will use to review your organization's materials during the certification process.

Policy and Procedure Checklist

- Mission Statement & Vision Statement
- Resident Evaluation
- Resident Agreement
- House Rules and Resident Expectations
- Social Model of Recovery
- Recovery Planning
- Code of Ethics
- Resident Rights
- Non-Discrimination Policy
- Confidentiality Policy
 - Social Media Policy

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- Data Collection Policy
 - Good Neighbor Policy
 - Grievance Policy
 - Medication Policy
 - Drug Testing Policy
 - Contested Drug Screen Policy
 - Recurrence of Use/Relapse Policy
 - Personal Property Policy
 - Search Policy
 - Resident Work Policy
 - Dual Relationships Policy
 - Emergency Policy
 - Contagious Disease Policy
 - Staff Directory
 - Community Resources
 - Background Check Policy
 - Continuous Staff Development Policies
 - Critical Incident Report Policy
 - Walk-Through Policy
 - Staff Wellness/Self-Care Policy
 - Staff Roles & Responsibilities
 - Emergency Relocation Plan and Continuity of Operations Plan
 - Policies Specific to Priority Populations
 - Residences that house children
 - Couples

Required Policies

with references from the Kentucky Administrative Regulations (KAR), Kentucky Revised Statutes (KRS), NARR 3.0 Standards, & Additional KYARR Requirements

1. **Mission Statement**: *NARR (1, A, 1. a.)*

NARR (1, A, 1. 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.

Must identify the recovery organization's commitment to the population that is being served and, at a minimum, include "persons in recovery from a substance use disorder (SUD)."

- Recovery residence organizations serve a priority population of people with SUD. If your organization accepts people who do not have a SUD, your model would not meet the standard for certification.

2. **Vision Statement**: *NARR (1, A, 1. b.)*

NARR (1, A, 1. b.): A vision statement that is consistent with NARR's core principles.

Pertains to an individual recovery organization's vision. While a Mission Statement describes what an organization does, the Vision Statement outlines what an organization hopes to achieve. The vision statement must be consistent with NARR's Core Principles:

- Operate with integrity
- Uphold residents' rights
- Be recovery-oriented
- Use peers to staff and govern
- Create a healthy recovery environment
- Provide a home-like experience
- Inspire purpose, cultivate community, and be a good neighbor
- Promote health and safety

3. **Resident Evaluation** - *NARR (1, D, 11. a.) & Additional KYARR Requirements*

NARR (1, D, 11. 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.

Additional KYARR Requirements – KYARR requires residences to have a resident evaluation/interview process that:

- Collects basic resident information and demographics
- Consideration is given to whether level of support is appropriate to the applicant’s needs
 - Eg. Applicant is disabled or requires additional services
- Considers applicant’s length of time in recovery
 - Eg. Should the applicant be referred to a lower/higher level of recovery residence?

4. Resident Agreement: *NARR (1, A, 3. a.) & NARR (1, A, 3. d.) & NARR (1, A, 3. c.) & Additional KYARR Requirements*

NARR (1, A, 3. 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.

NARR (1, A, 3. 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

NARR (1, A, 3. d.): A policy and practice that residents be informed of payments from 3rd party payers for any fees paid on their behalf.

NARR (1, A, 3. c.): A policy and practice documenting that a resident is fully informed regarding refund policies prior to the individual entering into a binding agreement.

Additional KYARR Requirements: KYARR requires the Resident Agreement to be signed and dated by the resident prior to move in and inform the resident of:

- Deposit Information
 - Whether a deposit is required
 - Amount of deposit
 - When the deposit is due
 - Under what conditions the deposit will be returned
- Fee Information
 - Amount of fees
 - What fees cover

- KYARR is generally opposed to additional fees but, if fully explained and justified, KYARR will take additional fees under advisement.
 - When fees become due
 - Eg. If fees are not due for the first 30 days
 - Information on phased or tiered fee structure
 - Day, time, and place to pay fees
 - Forms of payment accepted
 - Policy on late payment of fees
 - Eg. Whether there is a late fee
 - Statement that residence utilizes an accounting system to track payments and residents are entitled to a statement of account upon request
 - Statement whether there is an electronic payment processing fee
- Scholarship/Subsidy Information
 - The agreement must clearly state whether residents receive any free rent/fees for a certain number of days, and whether scholarships or government assistance are available to help cover their fees.
- Refund Policy
 - KYARR prohibits recovery residences having a blanket “no refunds” policy. The policy may contain forfeiture of deposit for discharge with cause or resident vacating without notice. However, the policy must refund monies paid in advance within a reasonable period of time.
 - If monies were paid by a 3rd party payor, the monies will be returned to that 3rd party payor.
- The Resident Agreement may NOT contain:
 - Waiver of landlord/tenant’s rights
 - Fines
 - Requirement that the resident leaves after a specific period of time
 - Applicable to Levels 1-3 / Types P, M, S
 - Requirement to receive services from a specific provider
 - Applicable to Levels 1-3 / Types P, M, S
 - Requirement that the resident make donations to the organization
 - Requirement that the resident turn over their SNAP/EBT benefits or use a portion of their benefits for the residence

5. House Rules and Resident Expectations: *NARR (1, G, 16, a.) & NARR (1, G, 20. a.) & Additional KYARR Requirements*

NARR (1, G, 16. a.): Policy prohibits the use of alcohol and/or illicit drug use or seeking

NARR (1, G, 20. a.): Documentation that residents are encouraged to do at least one of the following:

- Work, go to school, or volunteer outside of the residence (Level 1, 2, and some 3s)
- Participate in mutual aid or caregiving (All Levels)

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- Participate in social, physical or creative activities (All Levels)
 - Participate in daily or weekly community activities (All Levels)
 - Participate in daily or weekly programming (Level 3's and 4's)

Additional KYARR Requirements: The House Rules and Resident Expectations are the backbone of the recovery residence's program. While most rules are reactive in nature, they should all be supportive of the social model of recovery. [A great article on the Social Model can be found here.](#)

KYARR requires, as a minimum, that the House Rules and Residence Expectations meet the above two NARR standards and include:

- Requirement that residents agree to not use or possess illicit substances, alcohol, medications not prescribed to them, misuse of their prescribed/Over the Counter (OTC) Medications, or possess drug paraphernalia on or off the premises
- Agreement to treat other residents with respect and support each other in their recovery
- Prohibition on entering into sexual or romantic relationships with one another (unless a preexisting relationship in a couples/family residence) or staff members
- Agreement to report any inappropriate behavior between residents with staff
- Agreement to participate in recovery planning
- Agreement to attend house meetings
- Information on curfews
- Policy on visitors
 - When visitors are allowed
 - Who can be a visitor
 - Where visitors may be on the property
- Rules on how to minimize disruption of other people in the neighborhood such as:
 - Rules on parking
 - Smoking areas
 - Congregating outside
 - Appropriate language
 - Cleanliness of the property
- Discharge Policy
 - In the event of someone being exited due to non-compliance, the operator must make every effort to secure alternative housing
- House Rules may NOT contain:
 - Consequences that are unreasonable or not supportive of recovery
 - Eg. Fines for breaking rules are considered unreasonable as they teach residents they can "buy their way out of trouble."
 - Eg. Discharging a resident for failing to make their bed (absent extenuating circumstances) as the punishment does not fit the crime.

Additional Level 3/Type S Requirements: *NARR (3, G, 24. a.)*

NARR (3, G, 24. a.): Provide structured scheduled, curriculum-driven and/or otherwise defined support services and life skills development. Trained staff (peer and clinical) provide learning opportunities.

Additional Level 4/Type C Requirements: *NARR (3, G, 25. a.)*

NARR (3, G, 25. a.): Evidence that the program’s weekly schedule includes clinical services

6. Social Model of Recovery: *NARR (1, C, 7. d.) & NARR (1, C, 7. e.) & NARR (3, G, 23. b.) & KRS 222.500(7) & Additional KYARR Requirements*

NARR (1, C, 7. d.): Policies and procedures that promote resident driven length of stay

NARR (3, C, 7. e.): Evidence that residents have opportunities to be heard in the governance of the residence; however, decision making remains with the operator (Levels 1-3)

NARR (3, F, 16. e.): Policies and procedures that encourage residents to take responsibility for their own and other residents’ safety and health

NARR (3, G, 23. 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

KRS 222.500(7): “Resident-driven length of stay” means the amount of time an individual is allowed to stay at a recovery residence as determined by the individual resident based upon his or her recovery needs and not by a third-party payor.

Additional KYARR Requirements: The applicability the NARR standard around resident driven length of stay is required for Levels 1 and 2 but is subject to state requirement for Levels 3 and 4. KYARR defines this standard to require a written policy promoting resident-driven length of stay for levels 1-3.

Additional Requirements for Level 4/Type C: *KRS 222.506(3)(b) & 908 KAR 1:410 & Additional KYARR Requirements*

KRS 222.506(3)(b): The recovery residence has not required or otherwise induced a resident to receive services from a specific provider unless the recovery residence is operated by or is a direct subsidiary of the provider and the services are provided as part of a continuum of care that can be shown by the recovery residence operator to include step-down facilities with resident-driven length of stay or referral thereof

908 KAR 1:410:

1. The recovery residence can demonstrate resident driven length of stay or referral to another recovery residence with resident driven length of stay
2. Referral may be demonstrated by either:
 - a. The entity owns additional recovery residences with resident driven length of stay; or
 - b. The recovery residence employs written policies around:
 - i. Educating clients on the importance of stepping down to a recovery residence with resident driven length of stay;
 - ii. Developing relationships with recovery residences that have resident driven length of stay;
 - c. Assisting clients in making contact with recovery residences that have resident driven length of stay; or
 - d. Providing transportation for discharging clients to recovery residences with resident driven length of stay.

Additional KYARR Requirements: For Level 4/Type C residences, KYARR requires a written policy that demonstrates a formal discharge planning process that includes referral to a step down recovery residence with resident driven length of stay.

7. Recovery Planning: *NARR (3, G, 21)*

NARR (1, G, 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

Additional KYARR Requirements: Each resident in the program should have written short and long term recovery goals, a plan on how to execute them, and are updated and addressed on a regularly scheduled basis not to exceed 30 days.

8. KYARR Code of Ethics: *NARR (1, A, 2. i.), 908 KAR 1:410, and KYARR Requirement*

NARR (1, A, 2. i.) – A policy and practice that provider has a code of ethics that is aligned with the NARR code of ethics. There is evidence that this document is read and signed by all those associated with the operation of the residence, to include owners, operators, staff and volunteers.

908 KAR 1:410: Entities required by KRS 222.502 to obtain certification as a recovery residence shall submit...a signed Recovery Housing Code of Ethics.

KYARR Requirement: KYARR has incorporated additional ethical requirements found in adjacent professional fields and relevant legal issues inherent to our state.

Adopt the KYARR Code of Ethics. All staff and formal volunteers must sign this document. The Code of Ethics should be reviewed and signed during new hire training. It should also be reviewed with new residents at orientation. This document will be provided by KYARR staff. The KYARR Code of Ethics should be incorporated into your personnel policies handbook and should also be displayed in each of your houses and/or community areas. KYARR has a version of the Code of the Ethics that is suitable for posting in your residences.

9. Resident Rights: *NARR (1, B, 5. a.) and KYARR Requirement*

NARR (1, B, 5. a.): Documentation of a process that requires a written agreement prior to committing to terms that includes the following:

- Resident Rights

KYARR Requirement: KYARR requires that operators and residents sign and adopt the KYARR Resident Rights. The Resident Rights must be posted in each residence.

10. Nondiscrimination Policy: *NARR (1, A, 2. d.)*

NARR (1, A, 2. d.): A statement attesting to compliance with nondiscriminatory state and federal requirements.

This policy should reaffirm an operator's commitment to nondiscriminatory practices.

1. It needs to include a statement attesting to compliance with nondiscriminatory state and federal requirements.
2. Kentucky law prohibits discrimination on the basis of race, color, national origin, religion, sex, age over 40, disability, and familial status.
3. Some local governments in Kentucky may include other protected classes of individuals.

11. Confidentiality Policy: *NARR (1, B, 6.) & NARR (1, A, 4. a.) & Additional KYARR Requirements*

NARR (1, B, 6.): Protect resident information

- a. Policies and procedures that keep residents' records secure, with limited access limited to authorized staff
- b. Policies and procedures that comply with applicable confidentiality laws.

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- c. Policies and procedures, including social media, protecting resident and community privacy and confidentiality.

NARR (1. A. 4. 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)

Additional KYARR Requirements: This policy explains how the operator safeguards each resident’s personal information and outlines how residents are expected to respect the privacy of others. It ensures that resident records are kept secure and can only be accessed by authorized staff. The Confidentiality Policy must include the following:

- A statement that attests to compliance with “applicable confidentiality laws”
- Protects resident and community “privacy and confidentiality”
- Describe how resident records are stored and secured
- Describes how staff/residents should treat information about other staff/residents
 - Confidentiality should be maintained in and out of the residence
 - Eg. Residents and staff should not reveal personal information about other residents in the program
- Social Media Policy
 - It should address protecting resident and community privacy and confidentiality
 - Include verbiage that addresses being “mindful and respectful” on social media platforms as both residents and staff are ambassadors of the recovery residence
 - For residents – it’s important to note the confidentiality of other residents in their use of social media
- Should outline how residents will be notified if any of their personal information and/or records are breached, leaked or compromised. This should include a process timeline.
- KYARR Guidance
 - While many recovery residences are not covered by HIPAA, it is best practices to operate as though they are
- Data Collection Policy
 - The purpose of this policy is two-fold. Firstly, it is to inform the residents that data will be collected. Secondly, it recognizes the importance of data and outcomes collection in quality improvement for the recovery residence. Non-identifying outcomes and recovery capital data may also be shared with the affiliate.

12. Good Neighbor Policy: *NARR (4, J, 30. – 31.)*

NARR (4, J, 30. – 31.): 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.
- b. Policies and procedures that require the responsible person(s) to respond to neighbor's concerns.
- 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:
 - i. Smoking
 - ii. Loitering
 - iii. Lewd or offensive language
 - iv. Cleanliness of property
- b. Parking courtesy rules are documented.

The Good Neighbor Policy should address these issues from both a staff and resident perspective, eg., when a neighbor has a complaint, how should it be dealt with by staff and residents? How should staff orient residents on how to greet and interact with neighbors? What are the specific rules concerning smoking, congregating, language and cleanliness of the property? Where are the residents supposed to park to minimize issues with the neighbors?

13. Grievance Policy – NARR (1, C, 7. b.) and KYARR Requirement

NARR (1, C, 7. b.): Grievance policy and procedures, including the right to take unresolved grievances to the operator's oversight organization.

Additional KYARR Requirements: KYARR requires recovery residences to adopt our external grievance policy as well as maintain an internal grievance policy. This internal grievance policy should include:

- Promote handling of a grievance at the local level, if possible (Example: Between residents as supported by the social model, with lower level staff at house meeting, etc.).
- Instructions on how a resident may submit a written grievance.
- Names and contact information for the organization's person responsible for handling grievances.
- Statement that a resident may contact the owner/operator about the grievance at any time.
- Statement that someone at the residence will help the resident file a written grievance if they need help.
- Statement that the resident may contact an outside entity about the grievance (KYARR or the Ombudsmen).
- Information on the steps the organization will take in response to the grievance including relevant timelines.
- Both the KYARR and internal grievance policy must be posted in each residence.
 - Grievance forms must be accessible to the residents at all times

14. Medication Policy: *NARR (2, F,16. d.) & Additional KYARR Requirements*

NARR (2, F,16. 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.

Additional KYARR Requirements: KYARR requires that this policy address the following:

- Policy must address both prescription and Over the Counter medications
- Must inform residents what medications are allowed or prohibited at the residence
- Must require medications to be kept in a secure manner as determined by the operator to include, at a minimum, medications not being left out in plain sight
 - Best practices is to provide a lock box to residents
- Informs residents of the steps the residence will take to deter medication diversion and abuse
 - For staff:
 - Informs staff procedures for performing pill counts
 - Statement that staff may not be involved in the administration of medications or holding of medications unless licensed or credentialed to do so
- Medication Assisted Treatment/Medications for Opiate Use Disorder Policy
 - Informs residents what forms of MAT/MOUD are allowed or not allowed in the residence

15. Drug Testing Policy: *NARR (2, F, 16. c.) & Additional KYARR Requirements*

NARR (2, F, 16. c.): Policy and procedures for drug screening and/or toxicology protocols.

Additional KYARR Requirements: KYARR requires that this policy inform residents and staff of the following:

- How often they may be tested (eg. Scheduled, random, upon suspicion)
- Who is financially responsible for testing
- How long a resident or staff member has to produce a sample
- Protocol for failure to produce
- Protocol for positive result/failed test (See Relapse/Recurrence of Use Policy)

16. Contested Drug Screen Policy: *NARR (2, F, 16. c.) and Additional KYARR Requirements*

NARR (2, F, 16. c.): Policy and procedures for drug screening and/or toxicology protocols.

Additional KYARR Requirements: KYARR requires a written policy that addresses the treatment of a resident or staff member and protocols for when a resident or staff member contests the results of a drug screen. Sometimes a resident will contest a drug screen on grounds that are valid (i.e. false positive) and

sometimes they don't. Either way, there needs to be a policy in place for what occurs when a drug screen is contested.

- What options are provided for a contested drug screen? (Eg. Re-take drug screen, lab confirmation at resident/staff expense, hair follicle test, etc.)
- While a drug screen's results are being contested, how will a resident be treated until the results are finalized? (Eg. Adherence to property restriction, loss of privileges, etc.)

17. Recurrence of Use/Relapse Policy: *NARR (1, B, 5. a.) and Additional KYARR Requirements*

NARR (1, B, 5. a.): Documentation of a process that requires a written agreement prior to committing to terms that includes the following:

- Relapse Policy

Additional KYARR Requirements: KYARR defines this standard as requiring a written policy outlining how an organization will respond to any recurrence of use by a resident or staff member. Elements to consider:

- This policy must include a statement indicating a practice that, if the resident is not allowed to remain at the residence, that the operator will offer transportation to a safe location or higher level of care.
- Automatic discharge policies are typically ineffective due to various ways recurrences come to light. Consider a person centric approach to dealing with a resident or staff member who experiences a recurrence of use that may involve increased accountability over automatic discharge where appropriate and will not create an unsafe environment for the other residents.

18. Personal Property Policy: *NARR (1, B, 5. a.) & Additional KYARR Requirements*

NARR (1, B, 5. a.): Documentation of a process that requires a written agreement prior to committing to terms that includes the following:

- Policies regarding removal of personal property left in the residence

Additional KYARR Requirements: KYARR requires this policy to clearly explain what will happen to a resident's belongings if they are left behind after the resident has moved out, including how long the items will be stored before action is taken.

19. Search Policy: *NARR (2, F, 16. b.) & Additional KYARR Requirements*

NARR (2, F, 16. b.): Policy lists prohibited items and states procedures for associated searches by staff

Additional KYARR Requirements: This policy must inform residents what items are prohibited at the residence and inform them how and when their belongings may be searched. Policy must also inform residents what will happen to the prohibited items if confiscated.

- Best practice is to have two staff members conduct searches (when available).

20. Organization / Resident Work Policy: *NARR (1, A. 2. g.)*

NARR (1, A. 2. 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:

- Work performed by a resident must be completely voluntary.
- If work is refused there must be no consequences for declining.
- Residents who accept work are not treated more favorably than other residents.
- 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.

First, an operator needs to determine if they are willing to enter into paid work arrangements with a resident. If the answer is no, then this policy should simply state that the operator “doesn’t enter into work agreements with residents.”

If the operator enters into agreements with residents to do paid work, there are standards an operator must uphold. An example of a paid work agreement may be “an operator hires a resident to perform carpentry work in exchange for compensation.” This ensures the resident is treated fairly and paid fair wages when doing “paid work.”

There are standard chores that residents must perform on a regular basis to maintain a recovery residence. Recovery programs are not expected to pay residents for performing regular upkeep activities that anyone would have to perform if they had their own apartment, such as cleaning the house or mowing the yard. These things are part of everyday living that everyone must do and support the social model of recovery.

However, if a program runs a lawn care business, a roofing business, a thrift store, or any other business and/or regularly offers the labor of residents to others in the community in exchange for money, the

residents must be compensated for this work and there must be clear policies and procedures as discussed above to protect the residents. Residents may not be used as free labor.

Any type of volunteer or work program will be closely reviewed to determine whether it is truly voluntary or if it functions as a work program that requires payment for services. Recovery residence operators should be aware that misclassifying work as volunteer activity can lead to serious legal and ethical issues.

21. Dual Relationships Policy: *NARR (1, A, 2. h.) and Additional KYARR Requirements*

NARR (1, A, 2. h.): Staff must never become involved in resident's personal financial affairs, including lending or borrowing money, or other transactions involving property or services, expect that the operator may make agreements with residents with respect to payment of fees.

Additional KYARR Requirements: Operators must have a policy prohibiting dual relationships that, at a minimum, prohibit staff becoming involved in the personal financial affairs of residents. This policy may also refer back to the Code of Ethics as it relates to romantic relationships between staff and residents.

22. General Emergency Policies: *NARR (2, F, 19. a, - d.), NARR (2, F, 17, c), KYARR Requirement*

NARR (2, F, 19. a. - c.): 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.
- c. Documentation that residents are oriented to emergency procedures.
- d. Verification that Naloxone is accessible at each location and appropriate individuals are knowledgeable and trained in its use.

NARR (2, F, 17. 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 regularly and are documented (not required for Level I Residences).

KYARR Requirement: KYARR requires the following three policies:

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- 1) A written policy that informs staff and residents of what they should do and who they should call in the event of the following emergencies (operators may include additional events):
 - Overdose
 - Written policy that includes the following information:
 - Verification that unexpired Naloxone is accessible and Naloxone Administration Procedure is posted in conspicuous location on each floor of the residence
 - How staff orients new residents on the location and use of Naloxone in an emergency
 - Informs staff how they should respond in an overdose:
 - What are the protocols for when an active overdose is occurring?
 - What are the protocols for how a resident is treated after an overdose?
 - Who is the overdose reported to? (Eg. Staff, emergency contact, KYARR, etc.)
 - Fire
 - Tornado
 - Flood
 - Medical Emergency
 - Power Outage
 - 2) A written policy on scheduled inspections of fire safety equipment that are conducted at least monthly.
 - 3) A written policy on scheduled evacuation drills to be conducted at least quarterly for housing levels 1-3. Level 4/type C recovery residences should conduct drills monthly since the residence turnover is usually greater in such houses.

23. Contagious Disease Policy: *NARR (2, F, 18. b.) & Additional KYARR Requirements*

NARR (2, F, 18. b.): Policy regarding exposure to bodily fluids and contagious disease.

Additional KYARR Requirements: KYARR requires that this policy inform residents of the following:

- What behaviors may increase the risk or spread of infectious disease
- What behaviors may deter the risk for spread of infectious disease
- Policy must contain information on how to dispose of biohazardous materials and spills
- Where supplies are located to clean up spills and who to contact if supplies need to be restocked

24. Staff Directory: *Additional KYARR Requirement*

Additional KYARR Requirement: KYARR requires recovery residences provide a staff directory that includes contact information and staff titles.

25. Community Resources: *NARR (3, G, 22. a. – b.)*

NARR (3, G, 22. a. – b.): 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

Resource directories, written or electronic, are made available to residents.

- Resource lists can be quite lengthy. For this list, include the major resources your organization uses (the foundation of your organization’s resource directory) so that staff and residents can be familiar with them. This resource list will be displayed in the physical recovery residence or made available electronically.
 - Examples may include (this list is not exhaustive):
 - SNAP
 - Medical Insurance
 - Primary Care Physician Offices
 - Social Security Office
 - ID/Drivers License Locations
 - Food Pantries
 - Staffing Agencies
 - Mutual Aid Meetings (AA, NA, CR, etc.)
- Staff and/or resident leaders educate residents about local community-based resources

26. Staff Background Check Policy: *NARR (1, A, 2. f.) and 908 KAR 1:410*

NARR (1, A, 2. 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.

908 KAR 1:410: Section 7. Background Checks

- (1) All staff of a recovery residence who have job duties that involve providing services to a client, or who may have one-on-one contact with a client shall:
 - (a) Have a criminal record check performed upon initial hire through the Administrative Office of the Courts or the Kentucky State Policy; and
 - (b) Not have a criminal conviction, plea of guilty, release from incarceration due to expiration of sentence, or be under any level of probation or parole supervision other than administrative as defined in Kentucky Corrections Policies and Procedures (CPP) 27-12-01 for a minimum of five (5) years for a:
 1. Sex crimes as specified in KRS 17.500;
 2. Criminal offense against a minor as specified in KRS 17.500;
 3. Felony offense related to health care fraud, neglect, physical abuse, sexual abuse, or exploitation of a child or adult; or

4. Violent offense as specified in KRS 439.3401

- (2) A recovery residence that houses individuals under the age of eighteen (18) shall not employ anyone listed on the central registry established by 922 KAR 1:470.
- (3) A recovery residence shall perform annual criminal records checks as described in this subsection on a random sample of at least twenty-five (25) percent of all personnel.

Recovery residence organizations should incorporate these rules into their staff policies and procedures. There should be evidence in personnel records that background checks have been conducted, including background checks on significant volunteers who also meet the definition of providing services to a client or having one-on-one contact with clients.

27. Policies on Continuous Staff Development: *NARR (1, D, 10, c.) & NARR (1, D, 13. b.) & NARR (3, H, 26. b.) & NARR (3, G, 24. b.) & Additional KYARR Requirements*

NARR (1, D, 10. c.): Staffing plan that demonstrates continuous development for all staff.

NARR (1, D, 13. b.): Evidence that management and supervisory staff acknowledge staff achievements and professional development.

NARR (3, H, 26. b.): Evidence that trauma informed or resilience-promoting practices are a priority.

NARR (3, G, 24. b.): Ongoing performance support and training are provided for staff.

Additional KYARR Requirements: In order to meet certification standards, a recovery residence must have written policies around:

- Scheduled trainings for staff
 - Upon hiring and for continuing education
 - Training topics should include (not an exhaustive list):
 - Staff Policy and Procedure Manual
 - Trauma informed care
 - Social Model of Recovery
 - Ethics
 - Conflict resolution
 - Cultural Competency
- Formal, scheduled performance reviews of staff
 - Policy should state how often the reviews are completed and what metrics are used for evaluation
 - Please submit a blank copy of your organization's staff review form
- Staff Meetings
 - This policy should indicate that staff meetings are conducted at least weekly and the topics they will cover.

28. Critical Incident Reporting Policy: *KYARR Requirement*

KYARR Requirement: Requires a written policy that the organization will report to KYARR within 24 hours any event involving:

- Any serious injury requiring inpatient hospitalization
- Death of a staff member, formal volunteer, or resident
- Overdose of a staff member, formal volunteer, or resident
- Auto accident involving organization's vehicle
- Suspension or revocation of license/certification of any staff member

29. Walkthrough Policy: *NARR (2, F, 17. a.) and Additional KYARR Requirement*

NARR (2, F, 17. a.): Operator will attest that electrical, mechanical, and structural components of the property are functional and free of fire and safety hazards.

Additional KYARR Requirement: Requires a written policy on scheduled walkthroughs, to be conducted at least weekly, of each property by staff to check for:

- Safety Hazards
- Needed Repairs

30. Staff Wellness/Self-Care Policy: *NARR (1, D, 13. c.) and KYARR Requirement*

NARR (1, D, 13. c.): Evidence that supervisors (including top management) create a positive, productive work environment for staff.

KYARR Requirement: A written policy describing how leadership provides on-going support of staff to promote mental wellbeing and efforts to combat burnout.

31. Staff Roles and Responsibilities: *NARR (1, D, 12. a. – c.) & Additional KYARR Requirements*

NARR (1, D, 12. a. – c.): 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.
- b. Job descriptions require staff to facilitate access to local community-based resources.
- 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.

Additional KYARR Requirements: Provide job descriptions for staff members and formal volunteers that meet all the above stated criteria.

Additional Requirements for Level 3/Type S and Level 4/Type C: Job descriptions must include credentialed staff.

Additional Requirements for Level 4/Type C: KYARR requires Level 4/Type C residences to have a written policy ensuring that each residence has non-resident staff who are awake and on duty 24 hours a day.

32. Emergency Relocation Plan and Continuity of Operations Plan: 908 KAR 1:410

908: KAR 1:410: A copy of the emergency preparedness plan for the recovery residence that includes:

3. An emergency relocation plan that specifies where residents may live temporarily; and
4. A continuity of operations plan

The Kentucky Administrative Regulations require recovery residences provide a written plan to the certifying organization outlining where, in the event of an emergency, residents will be able to temporarily stay. Eg. A flood renders the house uninhabitable and residents need to be housed elsewhere. Several examples of how this plan could be evidenced is by committing to pay for a hotel for the residents, formal memorandum of understanding with another operator to utilize spare beds, or a written policy that in event of the need for temporary housing, the operator will transport to the local shelter.

The KAR also require a continuity of operations plan. This is a plan for what will happen with the residence should the operating organization/party cease to exist. The purpose being that the residents do not find themselves out of on the street. This could be evidenced by transfer of the residence to another operator (pending any lease/ownership issues), operations passing to a family member, etc.)

Please see relevant writing guides for Policies Specific to Priority Populations