

## Peer Run Recovery Residence Continuum of Care Model in Vermont

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March 1, 2020

The following are suggested policies in Vermont Recovery Residences:

1. All paths to recovery will be welcomed and embraced with no minimum number of activities or “meetings” required, but an *Individualized Treatment Plan* will be set up and supported utilizing the *peer 5-stages of change* and *positive reinforcement* techniques (see *Peer Run Recovery House Continuum of Care Model Training*).
2. One 30-minute recovery coaching session per week for residents.
3. One weekly house meeting in which residents briefly share how their week has been and house issues and logistics are discussed.
4. If peers, staff members will share from their own personal experience when appropriate.
5. Recovery residence representatives will be trained using the *Peer Run Recovery House Continuum of Care Model Training* and use these basic techniques to provide support to both the residence and individual residents as well as help prepare and maintain the resident’s *individualized treatment plan*.
6. No “work” hours for any resident, or volunteer hours for those with a disability. Some level of community involvement can be implemented at the request of the resident.
7. No “cap” or length of stay requirements.
8. 6 and 7 above will create more housing for those that are dually diagnosed and are not eligible for CRT. While at the residence, the resident can wait for a housing voucher.
9. Residents must be self-supporting in their payment to the residence.
10. All prescription medication must be prescribed by a licensed medical professional and kept in a lock box. Residents must submit to medication checks upon suspicion of abuse or diversion. If there is evidence of abuse or diversion the resident will be asked to sign a release with their provider and the provider will then be notified and left address the medication issue. If the medication count, or ROI is refused, the resident can be asked to leave on a case to case basis.
11. No limit on returning to residence after relapses, with the exception of a harm to the resident, the other residents, or the community (see *Standard Procedure for Relapses at a Recovery Residence*)
12. Regular UA’s and breathalyzers upon suspicion and at random.
13. Random room searches under suspicion.
14. Narcan, fentanyl test strips, and sharps containers on-sight. Each new resident will be trained to administer Narcan upon entry into the residence.
15. Peer support from a staff member, or other Recovery Coach, will be provided in the form of Recovery Coaching sessions for one year after resident’s transition from a residence.

### NARR CODE OF ETHICS

Operators and staff of residences certified as meeting NARR standards shall value and respect each resident and put each individual’s recovery strengths and needs at the forefront of all decision making. To meet this obligation, we adhere to the following principles:

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

19. Operate within the residence's scope of service and within professional training and credentials.
20. Maintain an environment that promotes the peace and safety of the surrounding neighborhood and the community at large.