



Dear Future INARR Associate,

Enclosed is the INARR Associate Packet you requested. Please review the materials, complete the required application form, and return it, along with your application fee, to:

INARR
1431 N. Delaware St.
Indianapolis, IN 46202

We are delighted that you wish to become a part of the state organization and that you wish to be recognized for meeting nationally-recognized standards for recovery houses. Once you have applied, you will have access to resources to assist you in your quest to prepare for becoming accredited. You may request a mentor, and you will have opportunities to access input from other accredited operations from around the state.

The benefits to joining INARR are numerous and are explained in the enclosed materials. By way of summary, you will gain a “credential,” resources, training opportunities, marketing opportunities, and a network of competent professionals upon whom you can call for assistance and camaraderie.

Once you have completed the application process, been inspected, and been approved, you will be able to promote your recovery residence(s) as “recognized as meeting the standards of Indiana Affiliation of Recovery Residences and the National Alliance of Recovery Residences.” You are likely to be looked upon more favorably for grants, and you will gain credibility with the public.

Once you have been approved as a recognized Associate, there will be many opportunities to actively participate in INARR and to contribute to special projects, and more depending on your interest. You will be eligible for Associate rates at training sessions and conferences as well.

Please review all of the materials enclosed. Don’t hesitate to call if you have questions or want further clarifications. We look forward to welcoming you to the organization.

Sincerely,

Larry J. Blue
Director – INARR
lblue@mhai.net
317-638-3501

Section A: Organizational/Administrative Standards: General Policies and Procedures

A1. Name of Provider Organization: The legal entity that owns/operates the recovery residence.

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A1.1 If the operator is not the owner of record of the residence, is there written permission from the owner to operate a recovery residence on the property?* [NARR 5.03] _____ Yes _____ No

A2. Provider Address: List the address where the provider wishes to receive official mail.

Address	
Address	
City	
State	
Zip code	
Type of Dwelling	<input type="checkbox"/> House <input type="checkbox"/> Duplex / Four-plex <input type="checkbox"/> Apartment <input type="checkbox"/> Dorm <input type="checkbox"/> Commercial property <input type="checkbox"/> Other

A3. Person who will be present at the Peer Review:

List the individual who is authorized by the provider organization to be the representative of record.

Last Name, First Name	
Title	
Phone number	

A4. Please provide your mission statement. [NARR 1.01]

A5. Do you agree to abide by NARR's Code of Ethics? [NARR 2.00]

Yes No (Please explain: _____)

A5a. NARR Code of Ethics is shared with residents by: (please check all that apply)

- It is posted /displayed in the house
- It is distributed to residents, staff and volunteers
- It is kept in a binder or folder in a place that is easy to access by residents and staff

* Not required for L1 and L2

A6. What type of accounting system is used to document resident financial transactions, such as fees, payments and deposits? [NARR 3.01]

- None
- Accounting software
- A handwritten bookkeeping ledger system
- Other _____

A7. Is the accounting system identified above capable of generating a resident's payment invoices and receipts? [NARR 2.04, 3.04] Yes No

A8. Are residents allowed to enter into paid work agreements with any of the following? [NARR 3.05]

- Owner/operator
- Individuals who are employed by the residence
- Contractors of the recovery residence
- Volunteers of the recovery residence
- Other residents
- None of the above

A9. If paid work agreements are allowed, are there policies and procedures that ensure any of the following? [NARR 3.05]

Choose all that apply.

- Not applicable. No paid work agreements are allowed.
- 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.
- Paid work for the operator does not impair resident's 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.

A10. What is your relapse policy? [NARR 25.01]

- Zero-tolerance approach. Documented usage of predefined substance(s) results in the resident moving out of the RR, no exceptions.
- Intervention approach. Documented usage of predefined substance(s) results in a intervention response which most often includes requiring the resident to move out of the RR.
- Other _____

A11. What are your policies around hazardous or prohibited items? *Choose only those that apply.*

- None.
- Hazardous items (e.g. syringes) are prohibited.
- Staff have the ability to search for hazardous items.
- Residents, volunteers and staff are required to report hazardous items.
- Other _____

A12. What procedures are used to collect, evaluate and report accurate process and outcomes data for continuous quality improvement? [NARR 4.02] *(Please inform the applicant of the INARR Outcomes Database at this time).*

A13. Alumni are invited or encouraged to participate in current recovery residence roles or activities: [NARR 10.02]

Yes No

A14. Residents are encouraged or expected to have recovery plans, which: [NARR 10.01 18.01, 27.3] *Choose only those that apply.*

- Are person-driven, meaning residents participate in the development of their own plan
- Promote life skills development by holistically assessing a resident's strengths, needs and/or priorities
- Include an exit plan, meaning residents identify how they will support and bolster their recovery if and when they move out or are required to leave recovery residence services.
- Include a lifelong plan, meaning it looks beyond the program timelines

A15. What process(es) are in place that ensures resident voices can be heard? [NARR 12.01, 12.02 & 12.03]

Check only those that apply.

- None
- Grievance process
- Resident council
- Alumni or peer council
- Residents can make some decisions or rules that govern their resident community
- Other _____

A16. How are peer staff and/or peer leaders used in meaningful ways? [NARR 13.01, 13.02, 13.03, 26.02]

Choose only those that apply. Add others as needed to be more complete.

- No peer leadership. Seeking variance.
- Resident's responsibilities increase with their length of stay or progress in their recovery
- Staffing or leadership plan that formally includes a peer component
- Written job description and/or contracts for peer staff and leadership
- Other _____

A17. Does the staffing or leadership plan include current residents, and where possible former residents that model recovery principles? [NARR 14.01] Yes No

A18. In general, how are residents made aware of community resources, events and activities? [NARR 19.02]

Resource directories Resource Binder Bulletin Board Other

A19. Resident Schedules and Staffing Plans*

Please indicate "Yes" or "No" in the checkboxes to the right of each question.	Yes	No	N/A
Is a weekly schedule of recovery support services posted? [NARR 21.01]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is a weekly schedule of recovery-oriented presentations, group exercises and activities posted? [NARR 21.02]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there a weekly schedule of formal life skills development services or classes posted? [NARR 22.01]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there a weekly schedule of clinical services posted? [NARR 23.01]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For the above services that were checked with a "Yes", is there a staffing plan that corresponds with the delivery of these services?

Yes No [NARR 21.03, 22.02, 23.02]

A20. What types of activities are hosted by the recovery residence, its alumni or its residents where members of the local recovery community are invited to attend? [NARR 30.02] *Choose only those that apply.*

- None
- Mutual aid (e.g. 12 Step) meetings
- Celebrations
- Recreation activities

* Not required for L1 and L2

Service work projects

Other _____

A21. How are residents encouraged to find a recovery mentor or mutual aid sponsor: [NARR 30.04] Choose only those that apply.

From the greater recovery community

From a pool of alumni or volunteers

From a pool of staff

Not encouraged to have a mentor or sponsor

Other _____

A22. How are residents connected with other recovery organizations/groups? [NARR 30.01 & 30.06] Choose only those that apply.

Mutual aid societies (e.g. 12 Step Fellowships)

Peer-led Recovery Community Organizations

Recovery Community Centers

Recovery Ministries

Recovery advocacy organizations

Other _____

Please indicate the Level that most closely resembles your House.

Level One

Level Two

Level Three

Level Four