

Virginia Association of Recovery Residences

WRITING GUIDE

Resident Intake Packet



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The *Resident Intake / Orientation Packet* writing guide is designed to help a recovery residence organization comply with the NARR and VARR standards as it relates to their Resident Intake and/or Orientation Packet. This packet goes by many names: Resident Intake Packet, Orientation Packet, Resident Agreements, Resident Handbook, etc. For the writing guide, we will refer to this as the *Resident Intake Packet*.

The resident intake packet is a set of policies, agreements and understandings between the resident and the recovery organization. This is reviewed and signed by both the resident and staff prior to the individual moving into the recovery residence.

Prior to officially moving into the recovery residence, the resident intake packet helps a new resident or applicant understand what the expectations are concerning the rules, responsibilities, medication protocols, financial fees, etc. Furthermore, they clearly address how a resident can expect to be treated, both when they follow and don't follow policy and procedure. The purpose is to fully inform the resident of what to expect before agreeing to terms and moving into the residence.

Formatting the Resident Intake Packet

- Resident intake packets should be easy to read and simple for a new resident to understand. Use direct language that takes into consideration all reading and education levels.
- Each major policy should have its own designated page with a required resident signature, date, and a staff signature at the bottom. For example, the *Medication Policy* will have its own designated page. In the writing guide, if there are two stars next to the policy name **【**】**, this identifies that the policy should have its own dedicated page, resident signature, and staff signature.
- Organize related policies together. For example [Financial Fees Policies, Refund Policy, Late Fee Policy] and [Medication, Drug Testing Policy, Recurrence of Use Policy]
- Stick with one font type.
- Keep font size simple: one size for headers/titles and one size for the body of the policy
- **Overall tone of resident intake packet** – Recovery organizations must promote meaningful activities that encourages a resident to work, school, or volunteer. Furthermore, they should encourage residents to participate in mutual aid and community supports.

The following checklist has the policies and procedures that are needed to meet the NARR Standards and VARR Standards at a minimum.

Resident Intake Packet Checklist

- Resident Agreement (S)
- Residents Rights & Rules (R)
- Non-Discrimination Policy (R)
- Refund Policy (R)
- Financial Fee Policy (R)
- Services Provided (R)
- Resident Work Policy (R)
- Good Neighbor Policy (R)
- Resident Smoking Policy (R)
- Social Media Policy (R)
- Grievance Policy (R)
- Data Collection Policy (R)
- Personal Property Policy (R)
- Recurrence of Use Policy (R)
- Medication Policy (R)
- MAT Policy (S)
- Drug Testing Policy (R)
- Search Policy (R)
- Contagious Disease Policy (R)
- Emergency Contact Information (R)
- Release of Information (S)
- Waiver of Liability (S)

(R) = Required

(S) = Suggested

Resident Intake / Orientation Packet

with reference from the NARR 3.0 Standards and VARR Standards

Below is a list of all the policies and procedures required in the *Resident Intake Packet*, and how they relate to the NARR 3.0 Standards & VARR Standards. They briefly describe the appropriate verbiage, what is needed, and why. This will help 1) an organization when drafting the *Resident Intake Packet* from scratch and will give a basic template of where to start and 2) an organization to review their existing policy and procedure for compliance with the NARR standards.

If there are two stars next to the policy name **[**]**, this identifies that the policy should have its own dedicated page, resident signature, and staff signature.

Resident Agreement (or cover page) (S) **

This is a brief overview of the recovery residence's expectations related to specific policies and essentially a 1-2 page summary of the whole Resident Intake Packet. It is used as the coversheet of the resident intake packet and signed last during the intake process. Examples of topics covered on a cover sheet include... *important rules, medication policies, drug testing, financial fees, recurrence of use, etc.* This is a good area to reaffirm that specific policies have been read and understood, which

may be signed a second time by a resident but more commonly they will sign their “initials”. Operators can choose what they include on this Resident Agreement (cover page).

Residents Rights & Rules – (R)NARR (1 B,5. a.)**

This is a list of rights and rules for the resident to understand and expect before moving into the residence. There should two clearly outline lists: 1) Resident Rules & 2) Resident Rights.

Non-Discrimination Policy - (R) NARR (2, F,16 d.)

This policy should reaffirm an operator’s commitment to nondiscriminatory practices. It needs to include a statement attesting to compliance with nondiscriminatory state and federal requirements.

Refund Policy - (R) NARR (1 A,3. c.)**

This policy must state and inform the resident of the organization’s procedure on refunds. It should simply state the organization’s stance on refunds and/or no refunds. If an organization does allow refunds, it must outline when and how refunds are issued.

Financial Fees Policy - (R) NARR (1 A,3. a.), (1 A,3. b.), & (1 A,3. d.)**

This policy must inform the “*applicant of all fees and charges for which they will be, or potentially could be, responsible for*”.

- Must outline the costs of bed fees, including any administrative or processing fees due upon intake. Additionally, if applicable, it must outline any additional fees the resident may incur
- Must clearly state when fees are due, when fees are considered late and what occurs if fees are late
- Must state the “*use of an accounting system*” and evidence of this system and process for accurately documenting all financial transactions.
- Must have language related to “*producing clear statements of a resident’s financial dealings with the operator within reasonable timeframes*”. If a resident request a financial state, what is that timeframe needed to produce it for them?
- Must state informing the resident of any “*third party payers for any fees paid on their behalf*”. Sometimes a third party will pay fees on a resident’s behalf; when this occurs that resident needs to be notified of such payment.

Services Provided Policy – (R)- NARR (1,B,5.a.)**

This policy may standalone or be couple with a financial fee policy. It needs to clearly state what services a resident can expect to receive for what they’re paying.

Resident Work Policy - (R)- NARR (1, A. 2. g.) & (1, A,2. h.) **

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 allows a resident to cut the grass in exchange for compensation”. This ensures the resident is treated fairly and paid fair wages when doing “paid work”. The policy must state the following:

- 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.

Good Neighbor Policy – (R) - NARR (4, J,30. a.), (4, J,30. b.), (4, J,30. c.), (4, J,31. a.) & (4, J,31. b.)**

There is a *Good Neighbor Policy* in both the *Organization Policy & Procedure*, as well as the *Resident Intake Packet (Handbook)*:

- For residents, it needs to outline the procedure for providing neighbors with a point of contact for the organization when requested
- Orientation on how to greet and interact with neighbors
- Address smoking, loitering, noise, offensive language, parking, and cleanliness of property (a residence must have designated smoking and parking areas)

Resident Smoking Policy – (R) - NARR (2, F,18. a.)

Policy regarding smoke-free living environment and/or designated smoking area outside of the residence. An operator may also use this policy to address vaping and other tobacco product use inside the residence. This can be incorporated into the *Residents Rights & Rules and/or Good Neighbor Policy*.

Social Media Policy - (R) - NARR (1, B,6. C.)**

A policy addressing the use of social media by residents. It must address protecting other residents' privacy and confidentiality, as well as community privacy and confidentiality.

- Include verbiage associated with being “mindful and respectful” on social media platforms as it could be a “reflection of the [recovery organization's name]

Grievance Policy – (R) - NARR (1, C,7. b.), (1, C,7. c.)**

Adapt VARR's Grievance Policy and Grievance Form (Additionally, the Grievance Policy and Form is posted inside the recovery residence) - this is the process by which a resident can file a Grievance for review by VARR.

Data Collection Policy – (R) - NARR (1, A,4. a.)**

This policy needs to inform residents that data is collected on a resident's information. Data collection can simply be name, date of birth, age, ethnicity, etc. or it can be related to digital data collection platforms being utilized.

- This policy must state and address “*Protecting an individual's identity*” and “*regularly reviewed by staff for continuous quality improvement*”
- Must comply with “applicable confidentiality laws”

- Protects resident and community “privacy and confidentiality”
- Should inform residents that they will be notified if any of their personal information and/or records are breached, leaked or compromised

Personal Property Policy – (R) - NARR (1, B,5. a.)**

This policy must address the “*removal of personal belongings that were left in or around the residence*” by a former resident. This policy must state:

- How long an operator will hold personal belongings before discarding
- How personal belongings will be discarded, i.e. donated to a charity, discarded in trash
 - Personal belongings should never be donated to other residents
 - Personal belongings should be kept secure, free of potential theft

Recurrence of Use (Relapse) Policy – (R) - NARR (1, B,5. a.)**

This policy should outline how an organization will respond to a recurrence of use by a resident. This policy must inform the resident of what outcome(s) they could expect if they have a recurrence of use. The following are some questions that should be reviewed and considered as an operator when developing this policy:

- Generally, how do we respond to a recurrence of use?
- Do we have a zero-tolerance policy towards a recurrence of use?
- Do we give second chances? If so, what does that look like?
- Do we engage residents that have a recurrence of use?
- What are some different options I can provide to a resident who has a recurrence of use?
- Do we consider the circumstances and behaviors surrounding the recurrence of use when making a decision on how to respond?

Medication Policy – (R) - NARR (2, F,16. d.)**

This policy needs to address the resident’s “*prescription and non-prescription medication usage and storage*” consistent with relevant support level and state law.

- Must address “*misuse of medication*” and “*drug seeking behavior*”
- Must have a blank list for a resident to fill out the medication they are prescribed
- Address how medications left behind will be disposed of
- Address how long medications left behind will be held for any resident who leaves
- Must outline how medication is stored and monitored
- Must outline process and notification protocols for a resident who is adjusting or terminating a medication.
- **MAT Policy – ****

Though not in the NARR Standards, it is a NARR best practice. VARR asks operators to have a MAT Policy, also known as Medication Assisted Treatment. This will correlate with the *Medication Policy* and how individuals engaging in MAT are cared for.

- “This might include adapting perceptions, policies, and procedures, and gaining a better understanding of different medications. With intention, these changes can work to advance the safety and recovery of all residents”
- **NARR MAT Best Practices - https://narronline.org/wp-content/uploads/2024/05/2019-Supporting-MAT_MAR-in-Recovery-Residences.pdf**
- ***Up until 2024, the MAT Policy was a suggested policy separate of the Medication Policy. With the understanding that MAT consists of a diagnosis and a appropriate

prescribed medication, VARR does recognize a strong Medication policy as addressing MAT. Operators may still use two separate policies for Medication and MAT at their discretion.

Drug Testing Policy – (R) - NARR (2, F,16. a.), (2, F,16. c.)**

This policy must address residents that the recovery residence organization “*prohibits the use of alcohol and/or illicit drug use or seeking*”. This policy must also inform the resident of the procedures involved to drug screening and/or toxicology protocols and what a resident should expect.

- Address time frames given to a resident to produce a drug-screen when asked to
- Address what methods of drug-screening will be utilized: instant urine screens, dip stick, oral swab test, lab screening, etc.
- Address who will administer drug screens
- Address when drug screens will need to be performed

Search Policy – (R) - NARR (2, F,16. b.)**

This policy needs to inform a resident of when, why and how a search of their personal property and/or persons may occur.

- Must include a list of prohibited items, ex: weapons, pornography, drugs, paraphernalia, etc.
- Must state who in the organization is allowed to search personal property
- Must outline the procedure for any searches performed

Contagious Disease Policy – (R) - NARR (2, F,18. b.)

This is a policy regarding exposure to bodily fluids and contagious disease. Examples include Hep. C, HIV, COVID and other transmissible diseases protocol.

- This policy should emphasize the importance of cleanliness; both personal hygiene and cleanliness of the residence
- Policy should inform residents about shared living and respecting confidentiality around other residents and their medical history
- Policy should outline procedure for any exposure to bodily fluids and transmissible disease

Emergency Contact Information – (R) - NARR (2, F,19. b.)

A resident’s emergency contact information should be collected during the intake process. This information should include name, relationship to resident and contact information.

- Must have at least one emergency contact, but at least two is best

Release of Information – (S)**

Although not listed in the NARR Standards, this is a common best practice for recovery residence operators for referral details, family, court, doctors, and legal communication. This will help an operator relay information about a resident without any barriers.

- It’s important to remember that a resident has final say regarding who their information is released to, with exception to extenuating medical and legal matters

Waiver of Liability – (S)**

There will be a signed agreement that an organization will not be held liable for injuries, property damage, etc.