

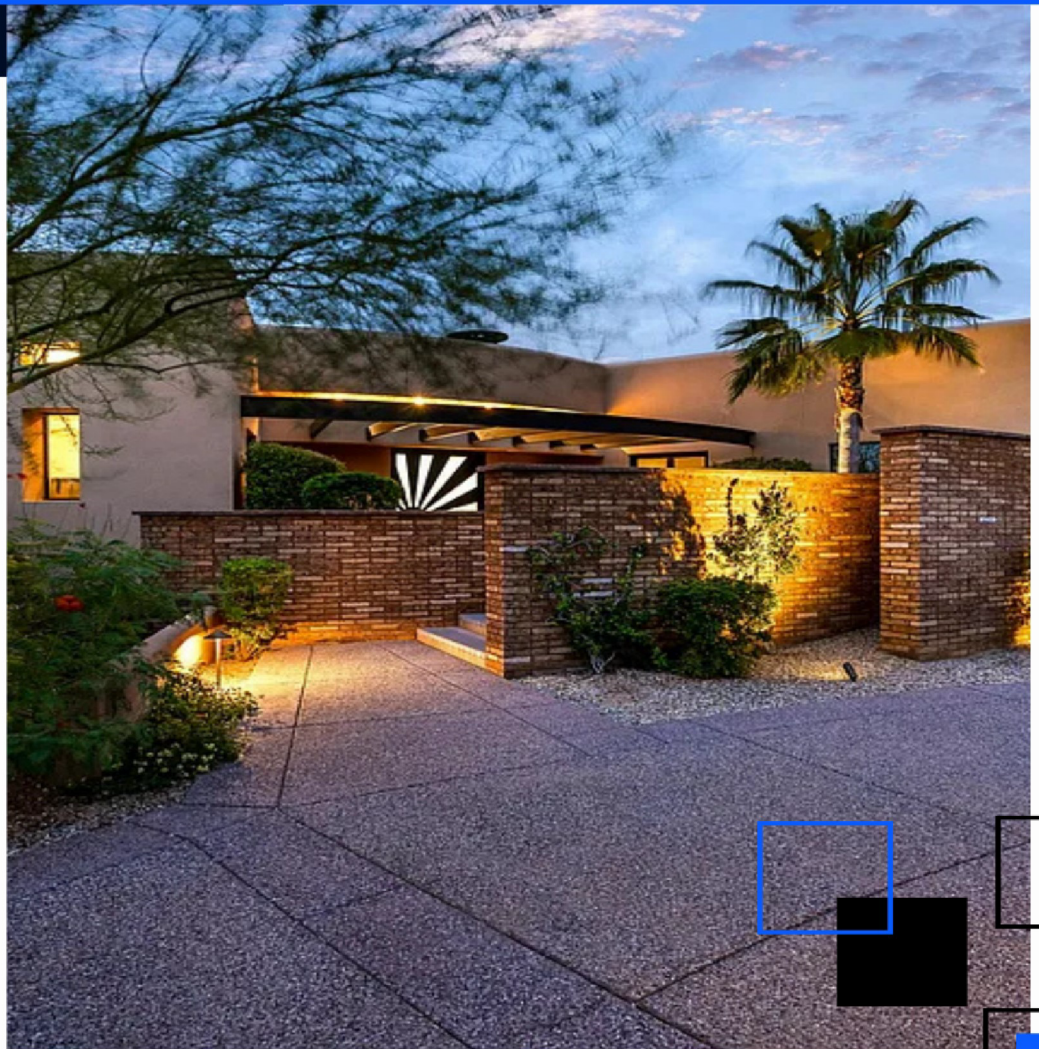


Sober Living Program

2025-2026

Policies & Procedures

PLUGGED IN
— R E C O V E R Y —



Mesa, AZ
Chandler, AZ
Scottsdale, AZ

(602) 919-4242
www.pluggedinrecovery.com

CODE OF ETHICS

As employees of Plugged In Recovery, we are committed to upholding the highest ethical standards in our work to support participants on their recovery journeys. Our Code of Ethics reflects our dedication to fostering a safe, respectful, and inclusive environment where every individual can thrive.

1. Integrity and Honesty
We will act with honesty and integrity in all interactions, maintaining transparency and accountability in our professional conduct.
2. Respect for Participants
We will treat all participants with dignity and respect, honoring their privacy, individuality, and unique recovery paths.
3. Confidentiality
We will protect the confidentiality of all participants, sharing information only as required by law or with appropriate consent.
4. Professional Boundaries
We will maintain appropriate professional boundaries with participants and colleagues, ensuring a supportive and ethical workplace.
5. Commitment to Recovery
We will support participants' recovery efforts through compassionate care, encouragement, and adherence to the program's policies and procedures.
6. Cultural Sensitivity
We will respect and embrace the diversity of participants, fostering an inclusive environment free from discrimination or bias.
7. Compliance with Laws and Policies
We will comply with all applicable laws, regulations, and organizational policies, reporting any violations promptly.
8. Continuous Improvement
We will commit to ongoing professional development, staying informed about best practices in recovery support and sober living management.
9. Zero Tolerance for Harmful Behaviors
We will not engage in or tolerate harassment, abuse, or any conduct that compromises the safety and well-being of participants or staff.
10. Advocacy and Support
We will advocate for the needs of participants, working to eliminate stigma and promote a culture of recovery in the broader community.

By adhering to this Code of Ethics, we affirm our commitment to the mission of Plugged In Recovery and to the success and well-being of those we serve.

Acknowledgment:

I acknowledge that I have read, understand, and agree to abide by the Code of Ethics for Plugged In Recovery employees.

Signature: _____

Date: _____

Attestation of Compliance

Organization Name: Plugged In Recovery

Location: Phoenix, Arizona

I, [Authorized Representative Name], as [Authorized Position/Title] of Plugged In Recovery, hereby attest that our organization is in full compliance with all applicable city, county, state, and federal requirements governing sober living homes in the Department of Health Services, in the State of Arizona.

This compliance includes, but is not limited to:

1. Adherence to all licensing and zoning regulations as mandated by the Department of Health Services.
2. Compliance with state-level requirements set forth by the Arizona Department of Health Services (ADHS) and other relevant agencies.
3. Meeting federal fair housing and Americans with Disabilities Act (ADA) standards for sober living facilities.
4. Compliance with any additional regulations or ordinances as outlined by Maricopa County.

Plugged In Recovery ensures that all policies, procedures, and operational practices align with the highest standards to provide safe, supportive, and legally compliant housing for individuals in recovery.

This attestation is made in good faith and to the best of my knowledge.

Signature:

Date:

Attestation of Compliance with the Federal Fair Housing Act & Non-Discrimination Policy

Organization Name: Plugged In Recovery

Office Location: 2921 S Eugene Circle Mesa, AZ

Attestation:

I, _____, as _____ of Plugged In Recovery, hereby attest that our organization fully complies with the provisions of the Federal Fair Housing Act (42 U.S.C. §§ 3601-3619) and upholds a strict non-discrimination policy in all aspects of our operations and services.

Specifically, we affirm that:

1. Fair Housing Compliance ○ Plugged In Recovery does not discriminate against any person based on race, color, religion, sex, disability, familial status, or national origin in the sale, rental, or provision of housing or related services.
 - All advertising, applications, and housing practices align with the Federal Fair Housing Act and relevant state and local housing laws.
2. Non-Discrimination Policy ○ Our organization ensures equal access to all programs, services, and accommodations, including reasonable accommodations for individuals with disabilities. ○ We have policies in place to prevent discriminatory practices in housing eligibility, treatment, or termination.
 - Training on non-discrimination and fair housing laws is provided to all employees and representatives of Plugged In Recovery to maintain compliance and awareness.
3. Americans with Disabilities Act (ADA) Compliance ○ We comply with all ADA requirements by providing reasonable accommodations and ensuring accessibility for individuals with disabilities.
4. Commitment to Equity and Inclusion ○ Plugged In Recovery fosters an inclusive and supportive environment, promoting diversity and equity among participants and staff.

Authorized Representative Signature:

Name: _____

Title: _____
Plugged In Recovery

Date: _____/_____/_____

Scope of Services

Plugged In Recovery provides a comprehensive range of recovery support services designed to uphold the highest standards of care, ethics, safety, and accountability. These services are delivered across our sober living homes to support individuals in their journey toward sustained sobriety and personal transformation.

1. Safe, Structured Sober Living Environments

Plugged In Recovery offers fully compliant, community-integrated sober living homes that are maintained to ensure physical safety, emotional support, and regulatory adherence. Each home is managed by a qualified House Manager who ensures daily operational integrity, enforces program rules, and provides participant oversight.

2. Participant Support and Accountability

Participants are expected to engage in structured recovery practices, including:

- Attendance at weekly house meetings.
- Participation in recovery-based meetings (e.g., AA/NA/SMART).
- Completion of House Meeting Forms for documentation and accountability.
- Adherence to Good Neighbor policies to promote community harmony.

3. Confidentiality and Rights Protections

Participant confidentiality is protected across verbal, written, and electronic communication, with policies and procedures in place to handle disclosure, consent, breach response, and record retention.

4. Staff Training & Emergency Readiness

Staff members are trained and certified in:

- CPR and First Aid
- Naloxone administration
- De-escalation and crisis intervention
- Annual safety drills, including fire and evacuation protocols

Emergency response procedures are documented and enforced, including EMS activation, incident reporting, and follow-up care protocols.

5. Health & Safety Monitoring

To maintain a safe environment, Plugged In Recovery conducts:

- Semi-annual safety inspections

- Fire drills
- Random and suspicion-based drug testing
- Hazardous item searches
- Strict medication storage protocols

These measures ensure homes remain compliant with Arizona code and are suitable for individuals in recovery.

6. Incident Management & Discharge Planning

In the event of relapse, medical emergencies, behavioral outbursts, or other significant incidents:

- A formal assessment is conducted.
- Recovery Re-Engagement Plans are developed when appropriate.
- Discharge is considered only when participant behavior poses significant risk or noncompliance persists.

Participants receive referrals and support during discharge planning, and written notifications are provided in compliance with AAC R9-12-1208.

7. Fair Housing and Non-Discrimination Compliance

Plugged In Recovery adheres to:

- The Federal Fair Housing Act
- ADA Accessibility Standards
- Arizona State Fair Housing and Non-Discrimination Laws

We provide equal access and reasonable accommodations to all qualified individuals regardless of race, sex, religion, disability, or other protected characteristics.

Mission Statement for Plugged In Recovery

At Plugged In Recovery, our mission is to provide a safe and structured environment that empowers individuals to rebuild their lives in recovery. We are committed to fostering accountability, integrity, and excellence in every aspect of our sober living homes.

Through compassionate support, community connection, and high-quality housing, we create a space where individuals can develop the skills, resilience, and confidence needed for long-term success. Our goal is to inspire personal growth, cultivate a sense of belonging, and support each participant in achieving a fulfilling, substance-free life.

We believe that recovery is a journey best traveled together, and we are dedicated to being a trusted partner in that journey.

Vision Statement for Plugged In Recovery

Our vision at Plugged In Recovery is to be a leader in transforming lives through exceptional sober living experiences, creating a world where recovery is accessible, sustainable, and celebrated.

We aspire to build a thriving community that inspires hope, fosters personal growth, and empowers individuals to reach their full potential. By setting the standard for excellence in recovery housing, we envision a future where every participant has the tools, support, and environment needed to achieve lasting sobriety and lead meaningful, purpose-driven lives.

At Plugged In Recovery, we are dedicated to shaping a brighter tomorrow, one recovery journey at a time.

Confidentiality Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is committed to protecting the confidentiality of all participants in compliance with the Arizona Administrative Code Title 9, Chapter 12, the Health Insurance Portability and Accountability Act (HIPAA), and 42 CFR Part 2. We uphold the highest standards to ensure the privacy and security of participant information and maintain trust in our recovery community.

This policy applies to all staff, volunteers, contractors, and anyone acting on behalf of Plugged In Recovery who may access or handle participant information.

Policy Statement

1. Scope ○ This policy applies to all forms of participant information, including verbal, written, and electronic records.
 - Confidential information includes personal, medical, financial, and other data that identifies a participant or pertains to their care.
2. Participant Rights ○ Participants have the right to know how their information is used, stored, and shared.
 - Participants must be provided with a written notice of their confidentiality rights upon admission.
 - Participants have the right to access their own records, request corrections, and revoke consent for the sharing of information.

3. Commitment to Non-Disclosure
 - Information about participants will only be disclosed with written consent, unless required by law.
 - All disclosures will follow the minimum necessary standard, sharing only the information needed for the specific purpose.
-

Procedures

1. Access Control

- Authorized Personnel: Only staff members with a legitimate business or therapeutic purpose will have access to participant records.
- Physical Security:
 - Paper records are stored in locked, secure filing cabinets.
 - Filing areas are accessible only to authorized staff members.
- Electronic Security:
 - Records are stored on password-protected, encrypted systems.
 - Staff must log out of systems when not in use.

2. Disclosure of Information

- Written Consent: Participants must sign a consent form specifying the information to be shared, the purpose of the disclosure, and the recipient(s).
- Exceptions to Consent Requirements: Disclosure without consent is permitted only when:
 - Required by a court order.
 - Necessary to address an immediate risk to health or safety.
 - Reporting is mandated for abuse, neglect, or exploitation.

3. Participant Consent Management

- Consent forms must include:
 - The specific information to be disclosed.
 - The intended recipient(s) and purpose.
 - The expiration date of the consent.
- Participants can revoke consent at any time by submitting a written request.

4. Retention and Disposal of Records

- Records will be maintained in accordance with Arizona Administrative Code Title 9, Chapter 12 and other applicable requirements.
- Records will be securely destroyed after the retention period, using shredding or other approved methods for physical records and data wiping for electronic files.

5. Training

- All staff members will receive training on confidentiality laws and policies upon hire and annually thereafter.
- Training includes the requirements of Title 9, Chapter 12, HIPAA, and 42 CFR Part 2.

6. Incident Reporting and Breach Response

- Any suspected or actual breach of confidentiality must be reported immediately to the Program Director.
- The Program Director will:
 - Investigate the breach.
 - Notify affected participants, if applicable.
 - Implement corrective actions, such as staff retraining or disciplinary measures.

7. Monitoring and Auditing

- Regular audits of record-keeping practices will be conducted to ensure compliance with confidentiality policies and applicable regulations.

Non-Retaliation Policy

Participants and staff members are encouraged to report concerns about confidentiality violations without fear of retaliation.

Good Neighbor Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

At Plugged In Recovery, we are committed to being a positive presence in the community by fostering respect, collaboration, and open communication with our neighbors. Our Good Neighbor Policy is designed to ensure that our participants, staff, and operations align with community standards and promote harmony in the neighborhood.

Policy Statement

We strive to:

1. Maintain a clean, safe, and welcoming property.
2. Respect the privacy, rights, and comfort of our neighbors.
3. Operate in a way that minimizes disruptions to the surrounding community.
4. Foster positive relationships through open communication and mutual understanding.

This policy applies to all participants, staff, and visitors at Plugged In Recovery.

Procedures

1. Property Maintenance

- The property will be kept clean, well-maintained, and visually appealing.
- Regular inspections will be conducted to ensure the property complies with local ordinances and standards.
- Landscaping and exterior upkeep will be a priority to align with neighborhood aesthetics.

2. Noise Control

- Quiet hours will be observed daily from [insert time, e.g., 10:00 PM to 7:00 AM].
- Participants are expected to keep noise levels respectful at all times, including during outdoor activities.
- Amplified music or loud gatherings are prohibited without prior approval from management.

3. Parking and Traffic

- Participants and visitors must adhere to designated parking areas to avoid obstructing neighbors' access or violating local parking regulations.
- Excessive traffic to and from the home will be minimized to ensure neighborhood safety and comfort.

4. Participant Conduct

- Participants are expected to exhibit courteous and respectful behavior toward neighbors and members of the community.
- Loitering, littering, or engaging in disruptive activities near the property or in the neighborhood is strictly prohibited.

5. Communication with Neighbors

- A designated staff member will act as the neighborhood liaison to address concerns, answer questions, and maintain a positive relationship with the community.
 - Wade Muhlhauser (612) 505-5494
- Neighbors will be provided with contact information for the liaison to report concerns or feedback directly.

6. Conflict Resolution

- Any complaints or disputes from neighbors will be addressed promptly and professionally.
- The program director will investigate complaints, mediate issues, and implement corrective actions when necessary.
- Efforts will be made to resolve conflicts amicably and transparently.

7. Community Engagement

- Plugged In Recovery encourages participants to participate in community service activities, fostering goodwill and engagement in the local area.
- Staff will organize periodic neighborhood outreach efforts to strengthen community bonds.

8. Participant Orientation

- Upon admission, participants will be informed of the Good Neighbor Policy and their responsibilities as members of the community.
- Violations of the policy may result in corrective action, up to and including termination of residency.

Curfew Policies and Procedures

Plugged In Recovery enforces curfew policies to promote structure, accountability, and safety while ensuring compliance with all applicable regulations. Each sober living home within Plugged In Recovery will have a designated curfew schedule set by the organization. This schedule will be clearly communicated during participant orientation and outlined in the Participant Agreement, which every resident must review and sign before admission.

Curfew Compliance and Documentation

Curfew times for each house will be documented in the Participant Agreement specific to that location. Residents are required to strictly adhere to these curfew hours as a condition of their residency. Any modifications to curfew schedules will be communicated in writing by the House Manager, ensuring clarity and compliance with all residency agreements.

Curfew Exception Requests

Residents seeking an exception to their curfew must submit a formal request at least 24 hours in advance to the House Manager. The request must include the reason for the exception, supporting documentation if applicable, and the estimated time of return. Approval is granted on a case-by-case basis at the discretion of the House Manager, in accordance with Plugged In Recovery's policies and applicable state regulations.

Consequences for Curfew Violations

Failure to comply with curfew policies is a violation of the Participant Agreement and may result in disciplinary action, including:

- Verbal or written warnings for first-time or minor infractions.
- Increased supervision or restrictions for repeated violations.
- Temporary suspension of privileges for continued non-compliance.
- Mandatory review of residency status, which may lead to termination of residency for severe or repeated violations.

All curfew violations will be documented, and corrective actions will be enforced in accordance with Plugged In Recovery's house rules and the Arizona Administrative Code for Sober Living Homes (9 A.A.C. 12). House Managers will ensure that enforcement is consistent, nondiscriminatory, and aligned with best practices for maintaining a structured and safe recovery environment.

Service Level Variations Policy

Purpose

This policy outlines the variations in service levels across Plugged In Recovery sober living homes to ensure compliance with Arizona Administrative Code Title 9, Chapter 12, while maintaining transparency in the services offered at each location.

Scope

This policy applies to all residents, staff, and management of Plugged In Recovery sober living homes.

Policy Statement

Plugged In Recovery offers varying levels of services depending on the home's location, structure, and the needs of its residents. These services may extend beyond the core sober living home services defined in R9-12-205 of the Arizona Administrative Code and are designed to enhance residents' recovery experience while adhering to licensing and regulatory requirements.

Available Services

Each sober living home provides core services required by law, including:

- Safe, structured housing free of alcohol and illicit drugs.
- Resident orientation, including emergency evacuation procedures.
- Drug and alcohol testing, conducted per regulatory standards.
- Support in identifying and accessing recovery programs, employment resources, and community support services.

Depending on the specific home, additional optional services may be offered, including but not limited to:

- Transportation: Assistance with rides to recovery-related appointments, work, or other essential locations.
- Food: Meal support programs, shared grocery provisions, or structured meal planning.
- Group Outings: Organized recreational, cultural, or social activities designed to promote healthy community engagement.
- Other Services: Additional support programs that align with the needs of residents and the mission of Plugged In Recovery.

Resident Notification and Agreement

1. Pre-Admission Disclosure: Before a resident is admitted to a specific home, they will receive a Residency Agreement (as required by R9-12-202) that clearly outlines:
 - The standard services included in their residency.
 - Any additional services available at their assigned home.
 - Any fees associated with optional services.
2. Residents will not be required to participate in additional services as a condition of residency, per R9-12-203 (Resident Rights).

Compliance and Enforcement

1. All staff and managers must adhere to this policy to ensure fair, ethical, and legal service offerings across all homes.

2. Residents who have concerns regarding service availability, fees, or any aspect of their residency agreement may file a complaint following the procedure outlined in R9-12-203 (Resident Rights).
3. Any violation of this policy will be addressed through corrective action, and continued non-compliance may result in disciplinary measures or loss of licensure as determined by R9-12-107 (Denial, Revocation, or Suspension of a License).

Fee Structure Policy

1. Purpose: The purpose of this policy is to establish guidelines for setting, adjusting, and communicating fee structures for sober living homes in compliance with Arizona Administrative Code Title 9, Chapter 12.
2. Scope: This policy applies to all licensed sober living homes under the jurisdiction of the Arizona Department of Health Services and covers all participants residing in these homes.
3. Policy:
 - 3.1 Each sober living home may have a different fee structure based on the services provided and the level of accommodations offered.
 - 3.2 The Participant Agreement will specify the applicable fee structure for each resident.
 - 3.3 Any adjustments to fees will be communicated in writing at least 30 days in advance.
 - 3.4 Refund policies and payment schedules will be outlined in the Fees and Refund Policy section of the Participant Agreement.

4. Procedure

4.1 Determination of Fee Structure

- Each sober living home will establish a fee structure based on the scope of services, operational costs, and level of accommodations.
- Fees must be clearly outlined in the Participant Agreement and include all costs associated with residency, including base rent, service fees, and optional charges.

4.2 Communication of Fees

- A copy of the Participant Agreement, including the fee structure, must be provided to each resident before move-in.
- The resident or their representative must acknowledge and sign the agreement before occupancy.

4.3 Fee Adjustments

- The management of the sober living home must provide written notice to residents at least 30 days before any fee increase or adjustment.
- The notice must outline the reason for the adjustment and the effective date.
- Residents must sign an acknowledgment of receipt of the fee adjustment notice.

4.4 Payment Schedule

- Payment due dates and accepted payment methods will be specified in the Participant Agreement.
- Late payment penalties, if any, must be clearly outlined.

4.5 Refund Policy

- The Fees and Refund Policy section of the Participant Agreement will define conditions under which refunds will be issued.

4.6 Compliance and Record-Keeping

- Copies of all fee agreements, notices of fee adjustments, and payment records must be maintained in the resident's file.
- Management must ensure compliance with Arizona Administrative Code Title 9, Chapter 12 regarding fee policies.

Plugged In Recovery Transportation Policy and Procedure

Purpose: The purpose of this policy is to ensure the safe, efficient, and compliant transportation of residents in accordance with Arizona Administrative Code Title 9, Chapter 12, governing sober living homes.

Scope: This policy applies to all staff, residents, and volunteers who operate vehicles for the transportation of Plugged In Recovery residents.

Policy Plugged In Recovery shall provide or arrange transportation services for residents in a manner that prioritizes safety, compliance, and accessibility. All transportation services must comply with the applicable laws and regulations.

Procedures:

1. **Vehicle Requirements** ○ All vehicles used for resident transportation must be in good working condition and meet state safety requirements.
 - Each vehicle must have a seatbelt for every occupant.
 - If applicable, vehicles must be equipped with a first aid kit and naloxone.
2. **Driver Requirements** ○ All drivers must possess a valid driver's license and provide proof of a clean driving record. ○ Drivers must be at least 21 years old and must not have any DUI convictions within the past five years.
 - Drivers must complete a background check prior to transporting residents. ○ Drivers must undergo training in emergency procedures, including the use of naloxone. ○ Only authorized personnel designated by Plugged In Recovery are permitted to operate transportation vehicles.
3. **Resident Transportation Guidelines** ○ Residents must adhere to all vehicle safety rules, including wearing seatbelts at all times.
 - Residents under the influence of drugs or alcohol are not permitted in the vehicle.
 - Residents must follow the designated routes and schedules set by the facility. ○ If a resident experiences a medical emergency during transport, the driver must pull over safely and call 911.
4. **Scheduling and Documentation** ○ Transportation schedules must be documented and made available to residents. ○ All transportation requests must be approved in advance by the manager or designated staff member.
 - Logs must be maintained for all transportation services, including date, time, purpose, driver's name, and passengers.
5. **Emergency Procedures** ○ In the event of an accident, drivers must immediately contact emergency services and notify Plugged In Recovery management. ○ If a vehicle becomes inoperable, alternate transportation arrangements must be made promptly. ○ Any incidents during transportation must be documented and reported to management within 24 hours.
6. **Compliance and Review** ○ This policy shall be reviewed annually to ensure compliance with Arizona Administrative Code Title 9, Chapter 12. ○ Any updates to transportation laws or regulations must be incorporated into this policy immediately.

- Non-compliance with this policy by staff or residents may result in disciplinary action, including termination of transportation privileges.

Meeting Check-In Log Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery requires participants to attend weekly house meetings and provide documentation of their participation in recovery-related meetings. This policy ensures accountability, tracks engagement in recovery activities, and supports a structured and organized sober living environment.

Policy Statement

1. Participants are required to attend the weekly house meeting.
2. During the meeting, participants must complete the House Meeting Form, documenting the recovery meetings they attended throughout the week.
3. The completed forms will be collected and maintained through the online Plugged In Portal as part of the program's record-keeping.

This process supports participants' accountability and active participation in their recovery journey.

Procedures

1. Weekly House Meetings

- House meetings will be held at a designated time and place each week, communicated to all participants by the House Manager.
- Attendance at house meetings is mandatory unless excused in advance by the House Manager due to valid reasons (e.g., work obligations, medical appointments).

2. Completion of the House Meeting Form

- Each participant will be provided with a House Meeting Form at the start of the meeting.
- The form will include the following sections:
 - Participant's name and date.
 - A list of recovery meetings attended during the week (e.g., AA, NA, therapy sessions).
 - Date, time, and location of each meeting attended.
 - A brief reflection or takeaway from each meeting (optional).

- Participants must complete the form accurately and honestly before the end of the house meeting.

3. Collection and Review of Forms

- At the conclusion of the house meeting, the House Manager will collect all completed forms.
- The House Manager will review the forms for completeness and accuracy.

4. Logging Attendance

- The House Manager will maintain a Meeting Attendance Log, summarizing each participant's participation in recovery meetings and house meetings.
- The log will include:
 - Participant's name.
 - Dates of house meetings attended.
 - Recovery meetings documented on the House Meeting Form.
- This log will be updated weekly and stored securely to protect participant confidentiality.

5. Follow-Up on Non-Compliance

- If a participant fails to attend the house meeting or submit a completed House Meeting Form:
 - The House Manager will follow up with the participant to determine the reason for non-compliance.
 - Continued non-compliance may result in corrective action, as outlined in the Participant Agreement, which could include additional accountability measures or discussions with the Program Director.

6. Record Retention

- Completed House Meeting Forms and the Meeting Attendance Log will be retained in a secure location for the duration of the participant's stay and in accordance with organizational record retention policies.

7. Encouragement of Meeting Participation

- Staff will encourage participants to engage in a variety of recovery-related meetings that align with their individual recovery goals.
- Suggestions for additional meeting opportunities will be discussed during house meetings as needed.

Naloxone Training Policy and Procedure

Plugged In Recovery is committed to ensuring the safety and well-being of all participants, staff, and visitors by preparing staff to respond effectively to opioid-related overdoses. This policy mandates that all staff members complete and maintain valid and current naloxone training certification to equip them with the knowledge and skills necessary to administer naloxone in emergency situations.

Policy Statement

1. All staff members are required to complete naloxone training provided by an approved organization or program.
2. Staff must hold a valid and current naloxone training certification at all times during their employment.
3. This policy aligns with state and federal regulations and aims to reduce the risk of opioid overdose fatalities within the sober living environment.

Procedures

1. Initial Training

- All new staff members must complete naloxone training within 30 days of hire.
- Training must be conducted by an approved organization, such as the Arizona Department of Health Services (ADHS), a local health department, or a certified naloxone training provider.
- Training will include:
 - Recognizing the signs and symptoms of an opioid overdose.
 - Proper administration of naloxone (nasal spray or injectable).
 - Post-administration care and emergency response protocols.
 - Understanding legal protections under Arizona's Good Samaritan laws.

2. Certification Maintenance

- Staff members must maintain a valid naloxone training certification and renew it as required by the certifying organization.
- Refresher training will be provided annually or as required by state guidelines.

3. On-Site Naloxone Storage and Availability

- Naloxone kits will be stored in easily accessible locations on the property, such as the staff office or a designated emergency supply area.
- All kits will be clearly labeled and regularly checked to ensure they are stocked and within expiration dates.
- A log of naloxone inventory and expiration dates will be maintained by the House Manager.

4. Documentation and Record-Keeping

- Copies of staff naloxone training certifications will be maintained in personnel files.
- Training completion and renewal dates will be tracked to ensure compliance with this policy.

5. Emergency Response Procedure

- In the event of a suspected opioid overdose:
 1. Call 911 immediately.
 2. Administer naloxone according to training guidelines.
 3. Monitor the individual and provide support until emergency medical personnel arrive.
 4. Complete an Incident Report documenting the overdose, naloxone administration, and actions taken.

6. Non-Compliance

- Staff members who fail to complete or maintain naloxone certification within the specified time frame may face disciplinary action, up to and including termination.

7. Ongoing Education and Support

- Educational materials about naloxone use and opioid overdose prevention will be made available to staff and participants.
- Periodic updates on naloxone administration protocols and best practices will be shared during staff meetings or training sessions.

Enforcement

The Program Director is responsible for enforcing this policy, ensuring staff compliance, and maintaining proper naloxone inventory and documentation.

CPR Training Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is committed to maintaining the health and safety of its participants, staff, and visitors by ensuring all staff members are trained and certified in cardiopulmonary resuscitation (CPR). This policy mandates that every staff member holds a valid and current CPR certification, enabling them to respond effectively in emergencies.

Policy Statement

1. All staff members are required to complete and maintain valid CPR certification through an accredited provider such as the American Heart Association (AHA), American Red Cross, or a similar recognized organization.
2. CPR training must be completed within the first 30 days of hire.
3. Certifications must remain current throughout the duration of employment.

Procedures

1. Initial Training Requirements

- Newly hired staff members must complete CPR training within 30 days of their start date.
- Training must include:
 - Basic life support techniques. ◦ Adult, child, and infant CPR.
 - Use of an automated external defibrillator (AED). ◦ Emergency response protocols.

2. Certification Renewal

- Staff members must renew their CPR certification before it expires.
- The Program Director will track certification expiration dates and notify staff members of renewal deadlines.
- Plugged In Recovery may provide opportunities for staff to complete renewal training onsite or recommend approved local providers.

3. Documentation and Record-Keeping

- Copies of CPR certifications will be kept in each staff member's personnel file.
- A training log will track the completion and expiration dates of certifications for all employees.

4. Emergency Response Preparedness

- Staff are required to review emergency response protocols during initial and annual training sessions.
- CPR equipment, such as pocket masks and gloves, will be available in designated areas of the property.
- AED devices, if available, will be inspected regularly to ensure they are functional and accessible.

5. Non-Compliance

- Staff members who fail to complete CPR training or maintain current certification may be subject to disciplinary action, up to and including suspension or termination.

6. Training Providers

- Approved training providers include but are not limited to:
 - American Heart Association (AHA).
 - American Red Cross.
 - National Safety Council.
 - Local healthcare or emergency response organizations offering accredited CPR training.

7. Ongoing Education

- Staff will receive periodic updates on CPR techniques, best practices, and any changes to guidelines as part of their professional development.

Participant and Community Safety

- Staff will use their CPR training to respond appropriately to medical emergencies, ensuring the safety of participants and visitors until professional medical assistance arrives.

Enforcement

The Program Director is responsible for enforcing this policy, ensuring compliance, and maintaining accurate training records.

Safety Self-Assessment Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is committed to providing a safe and healthy environment for all participants and staff. To ensure compliance with safety regulations and maintain suitability for sober living participants, semi-annual safety and health inspections will be conducted on all homes. These inspections will identify potential hazards, ensure compliance with applicable codes and standards, and maintain the overall quality of the sober living environment.

Policy Statement

1. Semi-annual safety self-assessments will be conducted on all properties to ensure they are compliant with safety and health standards.
2. Inspections will be conducted by designated staff members trained in safety and health protocols.
3. Identified hazards or non-compliance issues will be addressed promptly to ensure the continued safety and suitability of the living environment.

Procedures

1. Scheduling Inspections

- Safety and health self-assessments will be conducted twice a year, in January and July.
- Additional inspections may be scheduled if significant changes occur on the property (e.g., renovations, new participants, or reported issues).

2. Inspection Checklist

- A standardized Safety and Health Inspection Checklist will be used during each assessment. The checklist will include, but is not limited to:
 - Fire safety: Smoke detectors, fire extinguishers, and emergency exits.
 - Electrical safety: Proper wiring, functioning outlets, and absence of exposed wires.
 - General cleanliness: Ensuring common areas, bathrooms, and kitchens are clean and sanitary.
 - Structural integrity: Checking for water leaks, mold, or structural damage.
 - Pest control: Ensuring the home is free of pests.
 - Security measures: Locks on doors and windows, adequate exterior lighting.
 - Compliance with local codes: Zoning, health, and safety regulations.

3. Conducting the Inspection

- Inspections will be carried out by the House Manager or Program Director, or by a designated safety officer.
- Each area of the home will be thoroughly assessed using the checklist.
- Participants may be asked to participate by reporting any safety concerns or issues in their rooms or common areas.

4. Documentation

- The findings of each inspection will be documented in a Safety and Health Inspection Report, which includes:
 - Date of the inspection.
 - Names of the individuals conducting the inspection.
 - Detailed findings, including any hazards or non-compliance issues.
 - Recommendations for corrective actions.

5. Corrective Actions

- Any hazards or non-compliance issues identified during the inspection will be addressed promptly.
- A timeline for corrective actions will be established, prioritizing high-risk issues.
- The House Manager will oversee the completion of corrective actions and document the resolutions in the inspection report.

6. Review and Approval

- Completed inspection reports and documentation of corrective actions will be reviewed and approved by the Program Director.
- Reports will be stored securely and made available during audits or upon request by regulatory authorities.

7. Participant Communication

- Participants will be informed of the inspection schedule and its purpose in advance.
- Findings and updates on corrective actions will be communicated to participants as needed to ensure transparency and cooperation.

Training

- Staff responsible for conducting inspections will receive training on safety and health standards, inspection procedures, and effective hazard mitigation strategies.

Non-Compliance

- Failure to complete inspections or address identified hazards in a timely manner will result in a review by senior management and may lead to disciplinary action for responsible staff.
-

Safety_and_Health_Inspection_Checklist

Inspection Area	Checklist Item	Pass/Fail	Comments/Notes
Fire Safety	Check all smoke detectors for functionality		
Fire Safety	Inspect fire extinguishers for proper placement and expiration		
Fire Safety	Ensure emergency exits are accessible and clearly marked		
Electrical Safety	Inspect for proper wiring and absence of exposed wires		
Electrical Safety	Test outlets to ensure they are functioning properly		
Electrical Safety	Check for signs of overloaded circuits		
General Cleanliness	Ensure common areas are clean and free of clutter		
General Cleanliness	Inspect bathrooms for cleanliness and proper sanitation		
General Cleanliness	Check kitchens for cleanliness and proper food storage		
Structural Integrity	Inspect for water leaks in ceilings, walls, and plumbing		
Structural Integrity	Check for signs of mold or mildew		
Structural Integrity	Inspect for structural damage (cracks, sagging, etc.)		
Pest Control	Ensure the home is free of pests or signs of infestation		
Security Measures	Inspect locks on all doors and windows for proper functioning		
Security Measures	Ensure adequate exterior lighting for security purposes		
Compliance with Local Codes	Verify compliance with local zoning, health, and safety regulations		

Staffing Leadership Policy and Procedure

Policy Overview

Plugged In Recovery is committed to maintaining a safe and supportive sober living environment by employing qualified and dedicated staff to oversee operations, ensure compliance, and support participants. Leadership will be responsible for implementing policies, managing day-to-day operations, and fostering an environment of trust, accountability, and respect.

Policy Statement

All staff members will be selected and trained based on their ability to uphold the organization's mission and values. Leadership will focus on creating a structured, recovery-focused environment while maintaining compliance with local, state, and federal regulations.

Leadership Roles and Responsibilities

Program Director

- Primary Responsibilities:
 - Oversee the overall operation and compliance of the sober living home.
 - Ensure that the home adheres to local, state, and federal regulations.
 - Develop and implement policies, procedures, and operational protocols.
 - Supervise and evaluate staff performance, ensuring alignment with organizational standards.

House Manager

- Primary Responsibilities:
 - Manage daily operations of the sober living home, including participant oversight and house maintenance.
 - Conduct participant check-ins and enforce house rules and agreements.
 - Ensure all safety and health protocols are followed, including emergency preparedness.
 - Maintain accurate records, including attendance, incident reports, and UA test logs.
 - Facilitate weekly house meetings and address participant concerns.
 - Administer and facilitate urinalysis (UA) testing for participants as required by program policies.

Staff Training

1. Initial Training
 - All staff members must complete an onboarding program that includes:
 - Overview of Plugged In Recovery's mission, values, and policies.
 - Training on safety, confidentiality, and emergency procedures.
2. Ongoing Training
 - Staff will complete annual training in the following areas:
 - CPR and First Aid Certification.
 - Naloxone administration.
 - Crisis intervention and de-escalation techniques.
 - Updates to state and federal regulations affecting sober living homes.

Procedures

1. Recruitment and Hiring

- Leadership positions will be filled through a structured recruitment process that includes interviews and verification of prior experience and skills.

2. Supervision and Accountability

- The Program Director will conduct regular staff meetings to address concerns, provide updates, and foster collaboration.

- Staff performance will be reviewed annually, with opportunities for feedback and professional development.
- Any policy violations or performance issues will be addressed promptly through a corrective action plan.

3. Communication

- Open and transparent communication will be maintained between staff and participants.
- Leadership will provide participants with clear guidelines for escalating concerns or reporting grievances.

4. Emergency Leadership Protocol

- In the absence of the Program Director, the House Manager will assume temporary leadership responsibilities.
- Emergency contact information for leadership staff will be provided to all participants.

Job Description: Program Director

Job Overview

The Program Director is responsible for the overall operation, compliance, and management of Plugged In Recovery sober living homes. This role involves implementing policies, supervising staff, maintaining safety standards, and ensuring the smooth and effective operation of the sober living program to provide a supportive recovery environment for participants.

Key Responsibilities

1. Program Oversight
 - Ensure the sober living homes comply with local, state, and federal regulations.
 - Develop and implement operational policies, procedures, and best practices.
 - Oversee participant admissions, orientation, and compliance with house rules.
2. Staff Supervision
 - Supervise and evaluate the performance of the House Manager(s).
 - Conduct regular staff meetings to provide updates, address concerns, and foster collaboration.
 - Organize staff training programs, including CPR, naloxone administration, and other required certifications.
3. Compliance and Safety
 - Ensure all safety protocols and emergency procedures are implemented and adhered to.
 - Conduct semi-annual safety and health inspections of the homes and oversee corrective actions.
 - Maintain documentation to ensure compliance with all regulations.
4. Participant Support
 - Address participant concerns or grievances in a fair and timely manner.
 - Oversee the enforcement of house rules and agreements while promoting a supportive environment.

5. Administrative Duties
 - Maintain accurate records, including participant attendance, incident reports, and UA test logs.
 - Prepare and submit required reports to management or regulatory bodies.
 - Oversee budgets, resource allocation, and general program operations.
 6. Community Relations
 - Act as the primary point of contact for community inquiries and concerns.
 - Foster positive relationships with neighboring participants and organizations.
-

Job Description: House Manager

Position Title: House Manager

Reports To: Program Director

Employment Status: Full-Time/Part-Time

Job Overview

The House Manager is responsible for the daily operations and oversight of Plugged In Recovery sober living homes. This role includes supervising participants, ensuring compliance with house rules, maintaining a clean and safe living environment, and supporting participants on their recovery journey.

Key Responsibilities

1. Daily Operations
 - Manage the day-to-day functioning of the sober living home, including cleaning schedules and general maintenance.
 - Ensure the home is clean, organized, and free of safety hazards.
 - Conduct participant check-ins to ensure adherence to program rules and agreements.
2. Participant Oversight
 - Facilitate weekly house meetings and address participant concerns.
 - Administer and facilitate urinalysis (UA) testing as required by program policies.
 - Document and enforce house rules, addressing violations appropriately.
3. Record Keeping
 - Maintain accurate records of participant attendance, incident reports, and UA test logs.
 - Report any issues, concerns, or incidents to the Program Director in a timely manner.
4. Safety and Emergency Preparedness
 - Conduct routine inspections of the home to identify and address safety concerns.
 - Ensure all emergency protocols are followed, including fire safety and first aid.
5. Participant Support
 - Provide participants with encouragement and guidance while fostering a supportive and structured environment.
 - Address minor disputes or concerns among participants and mediate issues effectively.

6. Communication
 - Serve as the primary contact for participants regarding house operations.
 - Maintain open and clear communication with the Program Director.

Manager Qualifications and Responsibilities

Purpose

To ensure the manager of the sober living home meets specific qualifications and is accountable for the effective daily operation of the facility in compliance with Plugged In Recovery standards and regulatory requirements.

Policy

Plugged In Recovery will ensure that the manager of the sober living home meets all qualifications and responsibilities outlined in this policy. The manager will uphold the highest standards of safety, accountability, and professionalism in overseeing the operation of the sober living home.

Procedure

I. Manager Qualifications

1. Age Requirement
 - The manager must be at least 21 years of age.
2. Sobriety Requirement
 - The manager must be sober and have maintained sobriety for a minimum of one year.
3. Residency Requirement
 - The manager must reside on the premises of only one sober living home operated by Plugged In Recovery.
4. CPR Training
 - The manager must have documentation of current training in cardiopulmonary resuscitation (CPR).
5. Naloxone Training
 - The manager must have documentation of current naloxone (Narcan) administration certification to ensure readiness to respond to opioid-related emergencies

II. Manager Responsibilities

1. Daily Operation ○ The manager is responsible for the daily operation of the sober living home, including maintaining a safe and supportive environment for participants.
2. Policy Enforcement ○ The manager will enforce all policies and procedures, house rules, and other requirements of the sober living home established by Plugged In Recovery.
3. Service Oversight ○ The manager will oversee all services provided by or at the sober living home, ensuring they meet the needs of participants and comply with Plugged In Recovery standards and regulatory requirements.

III. Accountability to Plugged In Recovery

1. Direct Supervision ○ The manager is directly accountable to Plugged In Recovery for fulfilling all responsibilities outlined in this policy.
2. Regular Communication ○ The manager will maintain regular communication with Plugged In Recovery, providing updates on operations, participant concerns, and any incidents requiring attention.
3. Documentation and Reporting ○ The manager will maintain records of all training, certifications, incidents, and operational activities and report them to Plugged In Recovery as required.

IV. Compliance and Verification

1. Qualifications Documentation ○ Plugged In Recovery will verify and maintain documentation of the manager's qualifications, including:
 - Proof of age.
 - Documentation of one year of sobriety.
 - Proof of residency at the sober living home. ▪ Current CPR certification.
2. Performance Review ○ Plugged In Recovery will conduct periodic reviews of the manager's performance to ensure compliance with this policy.
3. Training Updates ○ Plugged In Recovery will ensure the manager completes any required training or recertifications in a timely manner.

Fire Drill Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is committed to ensuring the safety and preparedness of all participants and staff in the event of a fire. Regular fire drills will be conducted every six months to familiarize participants and staff with emergency procedures and ensure that evacuation plans are effective. All drills will be logged for documentation and compliance purposes.

Policy Statement

1. Fire drills will be conducted semi-annually at each sober living home.
 2. All participants and staff are required to participate in the fire drill.
 3. Drills will be documented in the Fire Drill Log, including date, time, and performance evaluation.
-

Procedures

1. Scheduling Fire Drills

- The House Manager will schedule fire drills every six months (e.g., January and July).
- Participants will not be informed of the exact date and time of the drill to simulate a real emergency scenario.

2. Preparation

- Ensure all participants are familiar with the fire evacuation plan during orientation and periodic reminders at house meetings.
- Review the evacuation routes, designated meeting points, and fire safety equipment locations (e.g., fire extinguishers and alarms).
- Check that all fire safety equipment is operational before conducting the drill.

3. Conducting the Drill

- At the scheduled time, activate the fire alarm or simulate a fire emergency to initiate the drill.
- Direct participants to evacuate the building following the designated evacuation route.
- Ensure all participants and staff gather at the designated meeting point outside the home.
- Perform a headcount to confirm that everyone has evacuated safely.
- Review the evacuation process with participants, noting any challenges or areas for improvement.

4. Documentation

- The House Manager will complete the Fire Drill Log, which must include:
 - Date and time of the drill.

- Number of participants and staff involved.
 - Any issues or delays encountered during the drill.
 - Recommendations for improving evacuation procedures.
- Fire Drill Logs will be retained in the safety compliance file for inspection and review.

5. Follow-Up

- Address any issues identified during the drill with appropriate corrective actions.
- Update evacuation plans or protocols as needed to improve safety and efficiency.

Participant and Staff Training

- All participants and staff will receive training on fire safety and evacuation procedures during orientation.
- Fire evacuation plans will be reviewed during house meetings at least once every six months.

Non-Compliance

- Failure to participate in fire drills may result in disciplinary action for participants and staff, as outlined in the house rules and employment policies.

Sober Living Home Evacuation Drill Checklist

Home Name: _____
Date of Drill: _____
Time of Drill: _____
Drill Conducted By: _____

Evacuation Drill Checklist

- Reviewed Emergency Exits
 - Showed all participants the location of emergency exits.
- Verified Fire Extinguishers
 - Confirmed fire extinguisher is charged and properly tagged.
- Verified Naloxone Supply
 - Checked that naloxone is stocked and not expired.
- Verified First Aid Kit

- Confirmed the first aid kit is fully stocked and all supplies are within expiration dates. •
Showed Muster Point
- Identified and reviewed the designated muster point with all participants.
- Reviewed EMS Policy and Procedure
- Explained and reviewed the Emergency Medical Services (EMS) policy and procedure posted in the home.

Participants Present:

(Number of Participants Present) _____

Comments or Notes:

(Use this space to note any issues or observations during the drill.)

Acknowledgment

Manager Signature: _____

Date: _____

Record Retention

This form will be filed and retained for compliance and future reference in the Evacuation Drill Log.

Notification of Participant Incidents

Purpose

To establish a clear process for notifying emergency contacts, representatives, or designated individuals about significant incidents involving participants, including death, illness, injury, or other circumstances, in compliance with state regulations.

Policy

The manager will promptly notify the appropriate parties of significant incidents involving participants, including emergencies, non-compliance, or other relevant situations, to ensure transparency and compliance with legal requirements.

Procedure

I. Notification to Emergency Contacts

1. Circumstances Requiring Notification ○ Within one calendar day, the manager will notify a participant's emergency contact, representative, or family member if:

- The participant has passed away.
 - The participant experiences an illness or injury requiring immediate intervention by emergency medical services or treatment by a healthcare provider.
- Within seven calendar days, the manager will notify the emergency contact, representative, or family member if the manager determines that the participant:
 - Is incapable of handling their financial affairs.
 - Is not complying with the residency agreement.
- 2. Method of Notification ○ Notifications will be made by phone or email to ensure timely communication. ○ A record of the notification, including the date, time, and method, will be documented in the participant's file.

II. Notification to the Department

1. Participant Death ○ If a participant's death occurs and is required to be reported under A.R.S. § 11593, the manager will notify the Department within one working day using the Department-provided reporting format.
2. Documentation ○ Ensure that all required information is accurately completed in the report. ○ Retain a copy of the submitted report for compliance records.

III. Documentation and Record Keeping

1. Incident Reporting ○ Maintain a detailed incident report for any illness, injury, or death, including:
 - Date and time of the incident.
 - Description of the incident.
 - Actions taken by staff or emergency responders.
 - Notification details (who was contacted, when, and how).
2. Participant File ○ File all related documents, including incident reports and notification records, in the participant's file.

Review and Compliance

The manager will regularly review incident records and notifications to ensure adherence to this policy and compliance with state regulations. Any discrepancies or delays in reporting will be addressed with corrective action.

Acknowledgment:

This policy will be reviewed annually and updated as needed to reflect any changes in regulations or procedures.

Emergency Medical Services (EMS) Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is committed to ensuring the health and safety of all sober living participants and staff. In the event of a medical emergency, this policy provides clear guidelines for contacting Emergency Medical Services (EMS) and managing the situation effectively and efficiently while prioritizing the safety and well-being of all involved.

Policy Statement

1. Staff will respond promptly and appropriately to all medical emergencies.
2. EMS will be contacted in any situation where immediate medical assistance is required.
3. Staff will follow standardized procedures to ensure the safety of participants and maintain accurate documentation of the incident.

Procedures

1. Recognizing a Medical Emergency

A medical emergency includes, but is not limited to:

- Loss of consciousness.
- Difficulty breathing.
- Signs of an overdose (e.g., unresponsiveness, shallow breathing, or blue lips).
- Severe bleeding or injury.
- Seizures or unresponsiveness.
- Signs of a heart attack or stroke.

2. Immediate Response

- Assess the situation to determine the severity of the medical emergency.
- Do not move the individual unless it is unsafe to leave them in their current location.
- Provide first aid or CPR if trained and it is safe to do so.

3. Contacting EMS

- Call 911 immediately and provide the following information:

- Location of the emergency (address of the home).
 - Nature of the medical emergency.
 - Number of individuals involved.
 - Any known medical conditions or information about the individual (if available).
- Stay on the phone with the 911 operator until instructed to hang up.

4. Naloxone Administration (If applicable for suspected opioid overdose)

- If an opioid overdose is suspected:
 - Administer naloxone (nasal spray or injection) according to training.
 - Continue monitoring the individual and provide rescue breaths if necessary.
 - Inform EMS that naloxone was administered and provide details.

5. Notifying Leadership

- Notify the House Manager and/or Program Director immediately after contacting EMS.
- Provide details of the situation, including the individual(s) involved and actions taken.

6. Managing the Scene

- Ensure the area is safe and clear of hazards.
- Keep bystanders away from the individual to maintain their privacy.
- Reassure the individual (if conscious) and remain with them until EMS arrives.

7. After EMS Arrival

- Provide EMS personnel with all relevant information about the situation and the individual's condition.
- Assist EMS as needed to ensure smooth and efficient care.

8. Documentation

- Complete an Incident Report immediately following the emergency. The report should include:
 - Date, time, and location of the incident.
 - Description of the medical emergency.
 - Actions taken by staff, including first aid or naloxone administration.
 - Outcome of the emergency, including the arrival of EMS and participant's status.
- Submit the Incident Report to the Program Director for review and recordkeeping.

9. Follow-Up

- Check in with the individual involved in the emergency (if applicable) after their medical needs have been addressed.
- Provide support and resources as needed for recovery or ongoing medical care.
- Review the incident with staff to identify any areas for improvement in the response process.

Training

- All staff will receive initial and annual training on emergency response protocols, including first aid, CPR, and naloxone administration.

Confidentiality

- All medical emergencies will be handled with the utmost confidentiality. Information about the incident will only be shared with authorized personnel.

Non-Compliance

- Failure to follow this policy and procedure may result in disciplinary action, up to and including termination of employment.

Hardship Scholarship Assessment Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is committed to supporting individuals who demonstrate financial hardship and a genuine commitment to their recovery journey. The Hardship Scholarship Assessment Policy outlines the process for assessing and awarding scholarships to eligible participants, ensuring fairness, transparency, and alignment with organizational resources.

Policy Statement

1. Hardship scholarships may be awarded to individuals who demonstrate financial need and a commitment to the sober living program.
2. Scholarships will be assessed and awarded based on predefined criteria, the availability of funds, and the discretion of the Program Director or designated committee.
3. All applications will be reviewed in a confidential and equitable manner.

Procedures

1. Eligibility Criteria

To be eligible for a hardship scholarship, applicants must:

- Be an active or prospective participant in the Plugged In Recovery sober living program.
- Demonstrate financial hardship that impacts their ability to pay program fees.
- Show a commitment to recovery and adherence to house rules and program requirements.
- Provide any supporting documentation requested during the application process.

2. Application Process

- Step 1: Submit Application
 - Applicants must complete the Hardship Scholarship Application Form, which includes:
 - Personal information.
 - Description of financial hardship.
 - Explanation of their recovery goals and how the scholarship will support their journey.
 - A list of any financial resources they have (e.g., income, support from family, other aid).
 - Submit the application to the Program Director or designated staff member.
- Step 2: Provide Supporting Documentation
 - Applicants may be required to provide documentation, such as:
 - Proof of income or unemployment.
 - Bank statements.
 - Proof of other financial obligations or hardships (e.g., medical bills, housing costs).

3. Assessment Process

- Step 1: Initial Review
 - The Program Director or designated committee will review the application and supporting documentation to verify eligibility.
- Step 2: Financial Assessment
 - Assess the applicant's financial situation to determine the level of need.
 - Evaluate the availability of hardship scholarship funds at the time of application.
- Step 3: Recovery Commitment Evaluation
 - Consider the applicant's commitment to recovery, including participation in meetings, adherence to program rules, and overall engagement.
- Step 4: Decision Making
 - A decision will be made based on the information provided, the applicant's demonstrated need, and the program's available resources.

4. Notification

- Applicants will be notified of the decision within [Insert Timeframe, e.g., 7-10 business days] after submitting their application.

- Approved applicants will receive details about the scholarship amount, duration, and any conditions or requirements tied to the scholarship.

5. Scholarship Terms and Conditions

- Scholarships may cover all or part of the participant's program fees.
- Recipients must:
 - Maintain compliance with house rules and program requirements.
 - Continue demonstrating a commitment to recovery. ◦ Report any changes in their financial situation that could impact scholarship eligibility.
- Failure to meet these conditions may result in the withdrawal of the scholarship.

6. Record Keeping

- All applications, supporting documentation, and decisions will be kept on file for recordkeeping and auditing purposes.
- Scholarship records will be handled with confidentiality and only accessible to authorized staff.

Follow-Up and Review

- Scholarship recipients may be subject to periodic reviews to ensure continued eligibility.
- Reviews will include a reassessment of financial need, program compliance, and recovery progress.

Non-Discrimination Statement

Hardship scholarships are awarded based on financial need and recovery commitment. Plugged In Recovery does not discriminate based on race, color, religion, gender, national origin, disability, or any other protected characteristic.

Hardship Scholarship Application Form:

Hardship Scholarship Application Form

Applicant's Full Name

Enter your full legal name

Date of Application

Enter the date you are submitting the application

Phone Number

Provide your primary contact number

Email Address

Provide your primary email address

Current Address

Provide your current residential address

Are you a current or prospective participant? (Current/Prospective)

Indicate if you are currently participating in the program or applying as a prospective participant

Hardship Scholarship Application Form:

Hardship Scholarship Application Form

Describe your financial hardship (attach supporting documents if applicable)

Provide a detailed explanation of your financial hardship

What are your recovery goals?

Describe your short-term and long-term recovery goals

How will this scholarship support your recovery?

Explain how receiving this scholarship will help you achieve your recovery goals

List any current sources of financial support (e.g., income, family, other aid)

List all sources of financial support you currently have

Monthly Income (if applicable)

Enter your total monthly income (if applicable)

Monthly Expenses (if applicable)

Enter your total monthly expenses (if applicable)

Hardship Scholarship Application Form:

Hardship Scholarship Application Form

Have you applied for other scholarships or aid? (Yes/No)

Indicate whether you have applied for other forms of financial aid

If Yes, please provide details

If applicable, include details of other financial aid applications

Supporting Documents Attached (Yes/No)

Indicate if you are attaching supporting documents such as proof of income or expenses

Applicant's Signature

Sign your name to certify the accuracy of the information provided

Date of Submission

Enter the date you are submitting the application

Hazardous Items Search Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is committed to maintaining a safe and secure living environment for all participants. To ensure safety, the organization reserves the right to conduct searches for hazardous items in common areas, living spaces, and personal belongings when deemed necessary. This policy establishes clear guidelines for conducting such searches while respecting participants' rights and dignity.

Policy Statement

1. Searches for hazardous items may be conducted when there is reasonable suspicion that prohibited or dangerous items are present on the property.
2. Searches will be performed to ensure the safety of participants, staff, and visitors.
3. All searches will be conducted in a respectful, non-discriminatory, and minimally invasive manner.

Definition of Hazardous Items

Hazardous items include, but are not limited to:

- Weapons (e.g., firearms, knives, or other dangerous tools).
- Illegal drugs or paraphernalia.
- Explosives or flammable materials.
- Items prohibited by house rules (e.g., alcohol, vaping devices).

Procedures

1. Reasonable Suspicion

- Searches will only be conducted if there is a legitimate concern or reasonable suspicion that hazardous items are present.
- Reasonable suspicion may arise from:
 - Observation of prohibited behavior. ○ Reports from other participants or staff.
 - Discovery of related items or evidence.

2. Authorization

- All searches must be authorized by the Program Director or House Manager.
- If the Program Director is unavailable, the House Manager may proceed with the search and report findings immediately after.

3. Participant Notification

- Participants will be informed of the search policy during orientation and as part of the Participant Agreement.
- Participants may be notified prior to a search unless doing so would compromise safety.

4. Conducting the Search

- Searches will be conducted by at least two staff members to ensure transparency.
- Areas subject to search include:
 - Common areas (e.g., living room, kitchen, bathrooms).
 - Participant living spaces (e.g., bedrooms, closets).
 - Personal belongings (e.g., bags, lockers, vehicles, if on the premises).
- Staff must respect participants' privacy by limiting the scope of the search to hazardous items.

5. Seizure of Hazardous Items

- Any hazardous items found during a search will be documented and confiscated.
- Illegal items (e.g., drugs, weapons) will be turned over to law enforcement.
- Prohibited items (e.g., alcohol) will be disposed of appropriately.

6. Documentation

- All searches must be documented in a Search Report, including:
 - Date, time, and location of the search.
 - Reason for the search (include details of reasonable suspicion).
 - Items found (if any).
 - Actions taken (e.g., confiscation, notification of authorities).
 - Names of staff members conducting the search.
- The Search Report will be submitted to the Program Director and retained in the safety records.

7. Participant Follow-Up

- Participants involved in a search will be informed of the findings and any actions taken.
- If prohibited items are found, appropriate disciplinary actions will follow, in line with house rules and the Participant Agreement.

- Participants have the right to be present during the search of their personal belongings unless doing so compromises safety.
 - Searches will be conducted respectfully, and unnecessary handling of personal items will be avoided.
 - Any disputes regarding a search can be addressed through the grievance procedure outlined in the Participant Agreement.
-

Medication Storage and Use Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is committed to maintaining a safe and supportive environment for all participants. To ensure the proper use and storage of medications, this policy establishes guidelines for secure storage, responsible use, and compliance with prescribed instructions. The goal is to promote the health and safety of participants while preventing misuse or unauthorized access to medications.

Policy Statement

1. Plugged In Recovery will provide secure, locked storage for medications upon request.
2. Medications must not be stored in common areas of the house.
3. All medications are to be taken only as prescribed by a licensed healthcare provider.
4. Participants are responsible for managing their medications in a safe and compliant manner.

Procedures

1. Medication Storage

- Locked Storage:
 - A locked medication storage area will be available to participants upon request. ◦ All participants must provide a list of their medications to the House Manager for documentation purposes.
- Personal Storage:
 - Participants who choose to store their medications in their personal spaces must ensure they are secured and out of reach of others. ◦ Medications must not be left unattended or accessible in shared areas of the home.

2. Prohibited Storage Areas

- Medications must not be stored in:
 - Common areas, such as the kitchen, living room, or shared bathrooms.
 - Open or unsecured containers where others can access them.

3. Use of Medications

- Participants are required to:

- Take medications only as prescribed by a licensed healthcare provider. ○ Follow the prescribed dosage and schedule.
- Refrain from sharing or distributing medications to others.
- Missed Doses or Concerns:
 - Participants who miss doses or have concerns about their medications should contact their healthcare provider immediately.

4. Documentation and Accountability

- Participants who use the locked storage option must disclose:
 - Names of medications.
 - Dosages.
 - Prescribed frequency of use.
- The House Manager will not administer or distribute medications but will provide the locked storage for participant use.

5. Inspections and Safety Checks

- The House Manager may conduct periodic checks of the locked storage to ensure compliance with this policy.
- Any medications found in common areas will be removed and returned to the participant with a reminder of the policy.

6. Medication Disposal

- Expired or unused medications must be disposed of properly.
- Participants are encouraged to:
 - Use medication take-back programs or authorized drop-off sites. ○ Contact the House Manager for assistance in finding disposal resources if needed.

7. Non-Compliance

- Participants found storing medications in common areas or misusing medications may face the following actions:
 - Verbal or written warnings. ○ Mandatory meetings with the House Manager or Program Director to address concerns. ○ Possible termination from the program for repeated violations.

Participant Education

- All participants will be informed of this policy during orientation.
 - Educational materials on safe medication storage and use will be provided as part of the onboarding process.
-

Emergency Situations

- In case of a medical emergency related to medication (e.g., overdose or adverse reaction), staff will immediately contact Emergency Medical Services (EMS) and follow the Emergency Medical Services Policy and Procedure.

Drug Testing Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is a CLIA-waived program committed to maintaining a safe, supportive, and drug-free environment for all participants. In accordance with CLIA standards and state compliance requirements, we utilize the BTNX Inc. 12-Panel Urine Drug Test Cup (CLIA-waived) to conduct regular drug screenings. This policy outlines procedures for test administration, documentation, and the handling of results to ensure accountability and consistency in our sober living homes.

Policy Statement

1. All residents may be subject to drug testing throughout their stay at Plugged In Recovery.
 2. Testing will be conducted randomly, routinely, or based on reasonable suspicion of substance use.
 3. Test results are confidential and will be used solely to support recovery and maintain a safe sober living environment.
 4. All test results will be documented and stored in compliance with CLIA guidelines and program policy.
-

Procedures

1. Types of Drug Testing

- Random Testing:
 - Participants may be selected at random for testing without prior notice.
- Reasonable Suspicion Testing:
 - Testing will be conducted if staff observes behaviors or signs consistent with substance use.
- Routine Testing: ○ Regular drug tests may be scheduled as part of the program's structure.
- Follow-Up Testing:
 - Participants who have previously tested positive may be subject to additional follow-up testing.

The following substances are tested using the BTNX Inc. 12-panel CLIA-waived urine drug test cups:

2. Heroin Metabolite (HMO): 1000 ng/mL
3. Cocaine (COC): 100 ng/mL
4. Amphetamine (AMP): 500 ng/mL
5. Methamphetamine (MET): 500 ng/mL
6. Marijuana (THC): 50 ng/mL
7. EDDP (Methadone Metabolite): 100 ng/mL
8. Methadone (MTD): 300 ng/mL
9. Morphine (MOP): 300 ng/mL
10. Oxycodone (OXY): 100 ng/mL
11. Benzodiazepines (BZO): 300 ng/mL
12. Fentanyl (FYL): 10 ng/mL
13. Buprenorphine (BUP): 10 ng/mL

14. *Test Administration*

- Authorized Staff:
 - Drug tests will be administered by the House Manager or designated staff member trained in administering urinalysis (UA) tests.
- Collection Process:
 - Participants will provide a urine sample in a designated, private, and supervised area to ensure integrity.
 - Staff will follow proper chain-of-custody procedures to prevent tampering or contamination.
- Test Types:
 - Standard drug test panels may include common substances such as alcohol, marijuana, cocaine, opioids, amphetamines, and benzodiazepines. Additional substances may be tested as needed.

15. *Documentation*

- Drug Test Log:
 - A Drug Test Log will be maintained to document:
 - Participant's name.
 - Date and time of the test.
 - Reason for testing (random, routine, suspicion, or follow-up). (positive/negative).
 - All test results are logged directly into the resident's secure file in Sobriety Hub for tracking and compliance audits.
 - Confidentiality:
 - All test results will be stored securely and only accessible to authorized staff.
-

16. *Positive Test Results*

- If a participant tests positive for a prohibited substance:
 - The participant will be notified privately and given an opportunity to discuss the result.
 - A confirmatory test may be conducted to rule out false positives.
 - The House Manager will document the results and inform the Program Director.
- Follow-Up Actions:
 - A participant with a positive result may be required to:
 - Attend a meeting with the House Manager or Program Director.
 - Develop a Recovery Re-Engagement Plan to address the relapse.
 - Undergo increased testing or monitoring as part of their recovery plan.
 - Repeated or serious violations may result in termination from the program.

17. *Refusal to Test*

- Participants who refuse to submit to a drug test may be treated as if they tested positive and subject to the same follow-up actions.

18. *Appeals Process*

- Participants who dispute a positive test result may request a confirmatory test at their own expense.
- Appeals must be submitted in writing to the Program Director within 24 hours of being notified of the result.

Participant Education

- All participants will be informed of the drug testing policy during orientation.
- Participants will sign a Drug Testing Acknowledgment Form to confirm their understanding and agreement to comply with this policy.

Confidentiality

- Drug test results will be treated as confidential and used only for the purpose of supporting the participant's recovery and maintaining a drug-free environment.

Non-Compliance

- Participants who fail to comply with the drug testing policy may face consequences, including additional monitoring, suspension, or termination from the program.

Recovery Re-Engagement Plan:

Recovery Reengagement Plan Form

Participant's Full Name

Enter the full legal name of the participant.

Date of Incident

Provide the date of the relapse or incident.

Nature of Relapse or Incident

Briefly describe the nature of the relapse or incident.

Temporary Stay Away from the House

Participants are required to take a temporary 24-72 hour period away from the house. Enter the start and end dates for this period.

Medical Clearance Requirement

If applicable, attach documentation showing medical clearance based on the nature of the relapse.

Participant's Plan for Reengagement

Describe the steps the participant will take to reengage with their recovery program and ensure compliance with house rules.

Support and Resources Needed

List any support or resources the participant needs to aid their recovery (e.g., counseling, increased meetings, etc.).

House Manager's Notes

House Manager should document observations, support provided, and any additional actions required.

Participant's Signature

The participant must sign to acknowledge and agree to the reengagement plan.

Recovery Re-Engagement Plan:

Recovery Reengagement Plan Form

House Manager's Signature

The House Manager must sign to confirm the agreement and plan.

Date of Submission

Enter the date the form is completed and submitted.

Re-Occurrence of Use Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is committed to supporting participants through their recovery journey while maintaining a safe and supportive environment for all participants. This policy outlines the procedures for addressing re-occurrences of substance use, emphasizing individualized support and assessment of potential risks to the participant and the program. Decisions regarding continued participation or termination will prioritize the safety and well-being of all individuals involved.

Policy Statement

1. Re-occurrences of substance use will be addressed on a case-by-case basis, with decisions focused on the participant's safety, commitment to recovery, and impact on the sober living community.
2. Termination from the program will occur only if the participant poses a significant threat to themselves, others, or the integrity of the program.
3. Participants will be provided with opportunities for re-engagement and support before termination is considered, whenever possible.

Procedures

1. Identification of Re-Occurrence

- A re-occurrence of substance use may be identified through:
 - Drug testing (positive results).
 - Observations by staff or peers (e.g., behavioral changes or signs of use).
 - Participant self-reporting.

2. Immediate Response

- Participant Safety:
 - Staff will assess the participant's immediate physical and mental health.
 - If the participant is in medical distress, Emergency Medical Services (EMS) will be contacted immediately.
- Temporary Stay Away from the House:
 - Participants will be required to take a 24-72 hour period away from the house to ensure stability and to allow time for further assessment.
 - Participants must secure alternate accommodations during this time.

3. Assessment of Risk and Commitment

- The House Manager and/or Program Director will conduct a formal assessment, including:
 - The nature and severity of the substance use.
 - The participant's willingness to re-engage with their recovery program.
 - Any potential risks the participant poses to themselves or the program (e.g., disruptive behavior, influence on other participants).

4. Recovery Re-Engagement Plan

- Participants who demonstrate a willingness to re-commit to recovery will be required to complete a Recovery Re-Engagement Plan, which may include:
 - Increased accountability measures (e.g., frequent drug testing). ◦
 Attending additional recovery meetings or counseling sessions.
 - Securing medical clearance if applicable. ◦ Developing a plan to prevent future re-occurrences.

5. Termination of Program Participation

- Termination from the program will only be considered if:
 - The participant poses a direct and significant threat to themselves or others. ◦
 The participant's behavior jeopardizes the safety, integrity, or therapeutic environment of the program.
- The Program Director will make the final decision regarding termination.
- Terminated participants will be provided with referrals to alternative resources or programs to support their recovery.

6. Documentation

- All incidents of substance use and actions taken must be documented in an Incident Report and retained in the participant's file. Documentation should include:
 - Details of the substance use incident.
 - Risk assessment findings. ◦ Steps taken to support the participant. ◦
 Final outcomes (e.g., re-engagement plan or termination).

Non-Discrimination

- All participants will be treated with respect and fairness regardless of the circumstances. This policy will be applied consistently and without bias.

Discharge Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is committed to ensuring the safety, dignity, and well-being of all participants. Discharge from the program will be considered when it is deemed necessary for the participant's well-being, the safety of others, or the integrity of the program. This policy outlines the procedures for discharge and emphasizes the organization's commitment to providing or attempting to provide adequate resources for treatment options, alternative housing, and other necessary support.

Policy Statement

1. Discharge decisions will be made with careful consideration of the participant's situation and the safety of the sober living community.
2. Participants will be included in the discharge planning process, and a plan of action will be developed to support their continued recovery.
3. Plugged In Recovery will provide or attempt to provide resources and referrals for treatment options, alternative housing, or other necessary support.

Procedures

1. Grounds for Discharge

Discharge may occur under the following circumstances:

- Repeated or severe violations of house rules or policies.
- Behavior that poses a significant risk to the safety of the participant or others.
- Non-compliance with a Recovery Re-Engagement Plan following a re-occurrence of substance use.
- Persistent refusal to participate in the sober living program or follow guidelines.

2. Discharge Decision

- The Program Director, in consultation with the House Manager, will assess the situation and determine whether discharge is necessary.
- Factors considered will include:
 - The nature and severity of the issue.
 - The participant's willingness and ability to address the issue.
 - The impact of the participant's behavior on the sober living community.

3. Notification of Discharge

- The participant will be informed of the discharge decision in a private meeting with the House Manager and/or Program Director.
- The reasons for discharge and any relevant documentation will be reviewed with the participant.

4. Discharge Planning

- A Plan of Action will be developed with the participant, which may include:

- Referrals to treatment programs, detox centers, or outpatient services.
 - Assistance in identifying alternative housing options (e.g., other sober living homes or temporary housing).
 - Provision of resources for employment assistance, counseling, or other needs.
 - A list of local resources, including contact information, will be provided to the participant.
-

5. Immediate or Emergency Discharge

- In cases where the participant poses an immediate threat to themselves or others, they may be required to leave the house immediately.
 - Staff will assist the participant in securing temporary accommodations if possible, and provide a follow-up plan for continued support.
-

6. Documentation

- All discharge actions must be documented in a Discharge Report, which includes:
 - Participant's name and date of discharge.
 - Reason for discharge.
 - Summary of the discharge meeting and any agreements made.
 - Referrals or resources provided.
 - The Discharge Report will be retained in the participant's file.
-

Resources Provided

Plugged In Recovery will attempt to provide participants with access to:

- Local detox and treatment centers.
 - Alternative sober living homes or housing options.
 - Counseling and mental health services.
 - Employment and financial assistance resources.
-

Follow-Up

- Whenever possible, Plugged In Recovery will follow up with discharged participants to ensure they have connected with the resources provided and offer additional support if needed.
-

Non-Discrimination

- The discharge process will be conducted with fairness and respect, and all participants will be treated equally regardless of their circumstances.

Discharge Report:

Discharge Report Form

Participant's Full Name

Enter the full legal name of the participant.

Date of Discharge

Enter the date the discharge is being completed.

Reason for Discharge

Provide a detailed explanation of the reason for the discharge.

Participant's Plan of Action

Document the participant's plan for recovery, including treatment referrals, alternative housing arrangements, and other support systems.

Resources Provided

List any resources provided to the participant, such as referrals to treatment centers, counseling services, or housing assistance.

Summary of Discharge Meeting

Provide a summary of the discussion held with the participant regarding the discharge, including any agreements made.

Follow-Up Plan

Outline any planned follow-ups to ensure the participant connects with resources and support.

Staff Comments or Notes

Include any additional notes or observations from staff regarding the discharge process.

Participant's Signature

The participant must sign to acknowledge the discharge and receipt of resources provided.

Discharge Report:

Discharge Report Form

Staff Signature

The staff member overseeing the discharge must sign to confirm the process.

Date of Submission

Enter the date the form is completed and submitted.

Responding to a Resident's Loss of Sobriety or Sudden Intense Behavior

Purpose

To provide clear guidelines for responding to a resident's loss of sobriety or sudden, intense, or out-of-control behavior to ensure the safety and well-being of all residents and staff.

Policy

The licensee or manager will respond promptly and effectively to incidents involving a resident's loss of sobriety or disruptive behavior. The goal is to protect the resident, others, and property while facilitating appropriate interventions and support.

Procedure

I. Responding to a Resident's Loss of Sobriety

1. Immediate Assessment
 - Remove the resident from shared spaces to a private area to reduce disruption.
 - Assess the resident's physical and emotional condition for immediate health concerns (e.g., overdose, medical distress).
 - Call emergency medical services (EMS) if necessary.
2. Notification
 - Notify relevant staff, such as the house manager or clinical team.
 - Inform the resident's emergency contact as appropriate, per privacy policies.
3. Support and Guidance
 - Offer the resident emotional support and provide resources for re-engagement in recovery, such as scheduling a meeting with a counselor or recovery coach.
 - Collaborate on a Recovery Re-engagement Plan, if applicable.
4. Documentation
 - Record the incident in the resident's file, noting the date, time, and actions taken.

II. Responding to Sudden, Intense, or Out-of-Control Behavior

1. De-escalation
 - Remain calm and use non-threatening language to engage the resident.
 - Encourage the resident to move to a private space away from others to minimize escalation.
 2. Ensure Safety
 - If the resident poses a threat to themselves or others, contact emergency services immediately.
 - Remove other residents from the immediate area to prevent harm.
 3. Contact Emergency Services
 - If de-escalation fails or the resident's behavior is dangerous, call 911 for professional intervention.
 4. Follow-Up
 - Once the situation is under control, meet with the resident to review their behavior and determine next steps, which may include additional counseling, mediation, or referral to a higher level of care.
 5. Documentation
 - Complete an incident report with detailed notes on the behavior, actions taken, and any follow-up measures.
-

Review and Evaluation

The licensee or manager will review all incidents to evaluate response effectiveness and make improvements to procedures if necessary. Staff will be trained on these procedures annually and as needed following incidents.

Termination of Participant Residency

Purpose

To establish clear guidelines and procedures for terminating the residency of participants in a sober living home while ensuring compliance with state regulations and transparency in communication.

Policy

The manager may terminate a participant's residency under specific circumstances, following proper notice and documentation. All terminations will prioritize the safety and well-being of participants and ensure clarity regarding fees, charges, and deposits.

Procedure

I. Conditions for Termination of Residency

1. Immediate Termination Without Notice ○ Residency may be terminated without notice if the participant exhibits behavior that poses an immediate threat to the health and safety of the participant or others in the sober living home.
 2. Termination With Seven-Calendar-Day Written Notice ○ Residency may be terminated with seven-calendar-day written notice for:
 - Nonpayment of fees, charges, or deposit.
 - Violations under the conditions specified in subsection (B)(3).
 3. Termination With 14-Calendar-Day Written Notice ○ Residency may be terminated with 14-calendar-day written notice for any other reason not covered above.
-

II. Requirements for Written Notice of Termination

The manager shall provide a written notice of termination that includes the following:

1. Date of Notice ○ Clearly state the date the notice is issued.
2. Reason for Termination ○ Provide a detailed explanation of the reason for terminating residency.
3. Scope of Services ○ If termination is due to the participant needing more support than the sober living home can provide, include a description of why the home cannot meet the participant's needs.

4. Refund Policy ○ Outline the policy for refunding fees, charges, or deposits.
5. Disposition of Fees, Charges, and Deposits ○ Clearly state how fees, charges, or deposits will be handled upon termination.

III. Procedure for Issuing Termination Notice

1. Preparation ○ Draft a written notice of termination that includes all required elements.
 - Ensure the notice is signed and dated by the manager.
2. Delivery ○ Provide the notice directly to the participant. If direct delivery is not possible, send the notice via certified mail.
 - Document the delivery method and date in the participant's file.
3. Documentation ○ Retain a copy of the termination notice in the participant's file. ○ Record the circumstances and any related incidents leading to the termination.

IV. Handling of Fees, Charges, and Deposits

1. Refund Policy ○ Follow the home's refund policy for unused fees or deposits. ○ Clearly communicate the refund amount and expected timeframe to the participant.
2. Disposition of Funds ○ Document how fees, charges, and deposits are allocated or refunded. ○ Retain records of transactions for compliance purposes.

Review and Compliance

- The manager will ensure all terminations follow this policy and applicable regulations.
- Any disputes or appeals regarding termination will be reviewed and addressed promptly.

Acknowledgment:

This policy will be reviewed annually and updated as necessary to reflect changes in regulations or operational practices.

Grievance Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is committed to providing a safe, respectful, and supportive environment for all participants and staff. This grievance policy establishes a structured process for addressing concerns, complaints, or disputes raised by participants regarding their experiences within the program. The goal is to resolve grievances promptly, fairly, and transparently while fostering trust and accountability.

Policy Statement

1. Participants have the right to express concerns or complaints without fear of retaliation or discrimination.
2. All grievances will be addressed in a timely, fair, and respectful manner.
3. A clear process will be followed to ensure transparency and accountability in resolving grievances.

Procedures

1. Filing a Grievance

- Step 1: Written Grievance Submission ○ Participants must submit a written grievance using the Grievance Form provided by the program.
 - The form should include:
 - Participant's name and date of submission.
 - A detailed description of the grievance, including dates, individuals involved, and specific concerns.
 - Any steps already taken to address the issue.
 - Grievances can be submitted to the House Manager or Program Director.

2. Acknowledgment of Grievance

- The staff member receiving the grievance will acknowledge receipt within 48 hours, either verbally or in writing.
- The participant will be informed of the next steps and the timeline for resolution.

3. Grievance Review and Investigation

- Step 1: Review ○ The Program Director (or a designated staff member) will review the grievance to determine its validity and gather relevant information.
- Step 2: Investigation ○ The Program Director may:
 - Interview the participant and any individuals involved.
 - Review documentation or evidence related to the grievance.

- Investigations will be conducted confidentially to protect all parties.

4. Resolution Process

- Step 1: Decision ○ A decision will be made within 7-10 business days of receiving the grievance unless extenuating circumstances require additional time.
 - The participant will be informed of the decision and any actions to be taken.
- Step 2: Implementation ○ If the grievance is upheld, appropriate corrective actions will be implemented. ○ Actions may include policy updates, staff training, or other remedies to address the issue.

5. Appeals Process

- If the participant is not satisfied with the resolution, they may submit a written appeal to the Program Director within 5 business days of receiving the decision.
- The appeal will be reviewed by an impartial third party (e.g., a senior staff member or advisory board).
- A final decision will be communicated to the participant within 7 business days of receiving the appeal.

Confidentiality

- All grievances will be handled with the utmost confidentiality.
- Information about the grievance will only be shared with those directly involved in the review and resolution process.

Non-Retaliation

- Participants will not face retaliation or discrimination for filing a grievance.
- Any staff member found retaliating against a participant will face disciplinary action.

Documentation

- All grievances, investigations, and resolutions will be documented and retained in program records for future reference and accountability.

Participant Education

- The grievance policy will be reviewed with participants during orientation.

- Copies of the grievance policy and form will be made available to all participants upon request.

Grievance Form

Participant's Full Name

Enter your full legal name.

Date of Submission

Provide the date you are submitting this grievance.

Description of Grievance

Provide a detailed description of the grievance. Include specific dates, individuals involved, and any relevant details.

Steps Taken to Resolve the Issue

List any actions you have already taken to address the issue, including discussions with staff or participants.

Desired Resolution

Describe what outcome or resolution you are seeking.

Additional Comments or Notes

Include any additional information that you believe is relevant to this grievance.

Participant's Signature

Sign here to confirm the information provided is accurate to the best of your knowledge.

Date Signed

Provide the date you signed this form.

Paid-to-Work Participants Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery recognizes the value of offering participants opportunities to contribute to the program while supporting their recovery journey. This policy outlines the terms and conditions under which a participant serving as a House Manager or any other paid to work position can receive a fee credit in exchange for fulfilling specific duties. The goal is to ensure clarity, fairness, and accountability in these arrangements.

Policy Statement

1. Participants serving as House Managers, or any other paid to work position, may be offered a fee credit in exchange for completing their assigned duties.
2. The amount and terms of the fee credit will be agreed upon in writing between the House Manager participant and the Program Director.
3. All duties and expectations must be fulfilled as outlined in the position's job description to qualify for the fee credit.

Procedures

1. Eligibility

- Participants must demonstrate the following to be eligible for the House Manager role:
 - Strong leadership and organizational skills.
 - A commitment to their recovery and adherence to house rules.
 - A history of positive engagement within the sober living home.

2. Agreement on Rent Credit

- The Program Director and House Manager participant will discuss and agree on the following:
 - The specific amount of fee credit to be applied.
 - The duties and responsibilities expected of the House Manager.
 - The time period covered by the agreement (e.g., monthly).
- A Paid-to-Work Agreement Form will be signed by both parties, detailing the terms and conditions.

3. House Manager Duties

- Duties of the House Manager include, but are not limited to:
 - Managing daily operations of the sober living home, including enforcing house rules.
 - Conducting participant check-ins and facilitating weekly house meetings. ◦ Administering and documenting urinalysis (UA) tests as required. ◦ Ensuring the home is clean, organized, and free of safety hazards. ◦ Addressing participant concerns and escalating issues to the Program Director as needed.
- Additional duties may be assigned as agreed upon in the Paid-to-Work Agreement.

4. Performance Evaluation

- The Program Director will evaluate the House Manager's performance on a regular basis to ensure duties are being fulfilled.
- The evaluation may include:
 - Feedback from participants. ◦ Review of completed tasks and documentation (e.g., UA logs, incident reports). ◦ Observations from staff or the Program Director.

5. Fee Credit Application

- Fee credits will be applied to the participant's account based on their agreement and fulfillment of duties.
- If the House Manager fails to complete their duties as outlined, the fee credit may be reduced or withheld for that period.

6. Termination or Adjustment of Agreement

- The Paid-to-Work Agreement may be adjusted or terminated under the following circumstances:
 - The participant chooses to step down from the role. ◦ The participant fails to fulfill the duties and expectations outlined in the agreement. ◦ The Program Director determines the role is no longer needed or the arrangement is no longer beneficial.
- Any changes to the agreement will be documented and signed by both parties.

Documentation

- A Paid-to-Work Agreement Form will be completed and signed at the start of the arrangement.
- Performance evaluations and any changes to the agreement will be documented and retained in the participant's file.

Non-Discrimination

- All participants will have equal opportunity to apply for the House Manager role, and decisions will be based on merit and the participant's ability to fulfill the duties.
-

Paid to Work Agreement:

Paid-To-Work Agreement Form

Participant's Full Name

Enter the full legal name of the participant.

Start Date of Agreement

Enter the date this agreement becomes effective.

End Date of Agreement (if applicable)

Enter the date this agreement ends, if applicable.

Agreed Fee Credit Amount

Enter the agreed-upon fee credit amount to be applied.

Duties and Responsibilities

List the specific duties and responsibilities the participant will perform as part of this agreement (e.g., managing daily operations, conducting UA tests, etc.).

Evaluation and Performance Terms

Describe how the participant's performance will be evaluated and how it impacts the fee credit.

Termination Clause

Detail the conditions under which this agreement may be terminated (e.g., failure to fulfill duties, participant's request to step down).

Signatures

Both the participant and Program Director must sign to acknowledge and agree to the terms.

Date Signed

Provide the date both parties sign this agreement.

Maintenance Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is committed to maintaining a clean, safe, and functional living environment for all participants. This policy establishes procedures for addressing maintenance needs, identifying and resolving issues, and ensuring all facilities meet safety and operational standards.

Policy Statement

1. Regular maintenance will be conducted to ensure the safety, cleanliness, and functionality of the home.
2. Participants and staff are responsible for reporting maintenance issues promptly.
3. Maintenance requests will be addressed in a timely manner, with priority given to safetycritical concerns.

Procedures

1. Reporting Maintenance Issues

- Participant Responsibilities:
 - Participants must report any maintenance issues immediately to the House Manager.
 - Maintenance issues can be reported verbally or through a written Maintenance Request Form.
- House Manager Responsibilities:
 - Log all reported maintenance issues, including the date, time, and nature of the problem.
 - Prioritize reported issues based on urgency and potential safety risks.

2. Routine Inspections

- The House Manager will conduct regular inspections of the property, including:
 - Common areas (kitchen, bathrooms, living spaces).
 - Participant rooms (if consent is provided).
 - Exterior areas (yard, parking, etc.).
- Inspections will be documented, and any identified issues will be logged and addressed.

3. Classification of Maintenance Issues

- Emergency Issues:
 - Issues that pose immediate danger to participants or the property, such as:
 - Gas leaks, electrical hazards, plumbing failures (e.g., burst pipes), or structural damage.

- Response Time: Emergency issues will be addressed immediately.
- High-Priority Issues:
 - Issues that significantly affect the quality of living, such as:
 - Broken appliances, heating/air conditioning problems, or pest infestations.
 - Response Time: High-priority issues will be addressed within 24-48 hours.
- Routine Issues:
 - Minor repairs or maintenance tasks, such as:
 - Light bulb replacements, minor plumbing issues, or general wear and tear.
 - Response Time: Routine issues will be addressed within 5-7 business days.

4. Resolution of Maintenance Issues

- The House Manager will coordinate with maintenance personnel, contractors, or service providers as needed.
- Participants will be informed of the timeline for resolving the issue.
- Once resolved, the House Manager will confirm the repair and update the maintenance log.

5. Preventative Maintenance

- Regular preventative maintenance will be conducted, including:
 - HVAC system checks.
 - Smoke detector and fire extinguisher inspections.
 - Plumbing and electrical system inspections.
 - Pest control treatments as needed.

6. Documentation

- A Maintenance Log will be maintained by the House Manager, including:
 - Date and description of the issue.
 - Action taken to resolve the issue.
 - Date of resolution.
- The log will be reviewed periodically by the Program Director to ensure timely and effective maintenance.

Participant Expectations

- Participants are expected to:
 - Report maintenance issues promptly.
 - Maintain cleanliness in personal and common areas.
 - Cooperate with maintenance personnel and staff during repairs.

Non-Compliance

- Failure to report maintenance issues or misuse of property may result in disciplinary action as outlined in the Participant Agreement.

Maintenance Form:

Maintenance Request Form

Participant's Full Name

Enter your full legal name.

Date of Request

Provide the date you are submitting this maintenance request.

Description of Issue

Describe the maintenance issue in detail, including its location within the home.

Urgency of Issue

Indicate whether the issue is an emergency, high priority, or routine.

Additional Notes

Include any additional information that may help resolve the issue.

Participant's Signature

Sign here to confirm the accuracy of the information provided.

Date Signed

Provide the date you signed this form.

House Manager's Notes

For use by the House Manager to document follow-up actions and resolution timeline.

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is committed to providing a safe, supportive, and recovery-focused environment for all participants. This policy outlines the screening procedures for applicants to ensure they meet the program's eligibility criteria and align with its goals. The program prioritizes creating a safe space for recovery while addressing individual needs and potential risks.

Policy Statement

1. Applicants must meet the program's eligibility requirements, including a primary diagnosis of substance abuse.
2. Applicants who are registered sex offenders will not be accepted into the program.
3. Background checks may be required to determine suitability for participation.
4. Applicants may be deferred if deemed unfit for the program based on the screening process.

Procedures

1. Eligibility Criteria

Applicants must meet the following criteria:

- A primary diagnosis of substance abuse.
- A commitment to recovery and willingness to participate in program rules and activities.
- No history of violent or disruptive behavior that would pose a threat to others.
- Applicants who are registered sex offenders are not eligible for the program.

2. Application Process

- Step 1: Initial Application
 - Applicants must complete the Participant Application Form and submit it to the program.
 - The application will include questions about the applicant's history, recovery goals, and any prior treatment.
- Step 2: Interview
 - Applicants will participate in an interview with the Program Director or designated staff to assess their suitability for the program.
- Step 3: Documentation
 - Applicants may be asked to provide supporting documentation, such as:
 - Proof of primary diagnosis of substance abuse (e.g., from a healthcare provider).

- References from previous programs, treatment centers, or sober living homes.

3. Background Check

- Background checks may be conducted to verify information provided in the application.
- Checks will include:
 - Criminal history to confirm no sex offense registration or violent criminal behavior.
- Results of the background check will remain confidential and only be used to assess program eligibility.

4. Screening and Assessment

- The Program Director or designated staff will review the application, interview notes, and any supporting documentation to assess the applicant's suitability.
- Factors considered during the assessment:
 - History of substance use and recovery goals.
 - Potential risks to the safety and well-being of the sober living community.
 - Alignment with program rules and expectations.

5. Acceptance or Deferral

- Acceptance:
 - Applicants deemed suitable for the program will be notified of their acceptance and provided with onboarding materials.
- Deferral:
 - Applicants deemed unfit for the program will be deferred. Reasons for deferral may include:
 - Behavioral concerns that pose a threat to the program's safety or integrity.
 - Inability to commit to program rules or requirements.
 - Deferred applicants may be referred to alternative programs or resources that better fit their needs.

6. Documentation

- All application materials, interview notes, and background check results will be documented and stored securely.
 - Applicants will be notified of the decision in writing, including reasons for deferral if applicable.
-

Participant Rights

- Applicants have the right to a fair and respectful screening process.
- Applicants may appeal a deferral decision by submitting a written request to the Program Director within 5 business days.

Confidentiality

- All information collected during the screening process will be kept confidential and used only for determining program eligibility.

Non-Discrimination

- Plugged In Recovery does not discriminate based on race, gender, religion, or any other protected characteristic. Decisions are based solely on the applicant's alignment with program eligibility criteria and safety considerations.

Participant Orientation Policy and Procedure

Purpose

To provide a structured and comprehensive orientation process to familiarize new participants with the sober living home's premises, policies, and expectations, ensuring a supportive and well-informed environment for recovery.

Policy

Each new participant will participate in an orientation conducted by the manager or designated staff member within 24 hours of moving in. The orientation will cover all key aspects of living in the sober living home, ensuring the participant understands their rights, responsibilities, and the house policies.

Procedure

I. Orientation to the Premises

1. Tour of the Home
 - Conduct a guided tour of the sober living home, including bedrooms, bathrooms, common areas, kitchen, laundry facilities, and outdoor spaces.
 - Identify emergency exits, first aid supplies, and fire extinguishers.

2. Room Assignment ○ Show the participant to their assigned room and provide information on storage, bedding, and any shared space expectations.

Orientation Topics

1. Emergency Preparedness ○ Provide a tour showing the location of all exits and the evacuation route in case of an emergency.
 - Identify the location of the first-aid kit as required by R9-12-206(1).
2. Kitchen Use ○ Demonstrate the operation of kitchen appliances, including the stove, oven, microwave, and refrigerator.
 - Explain the proper use of food storage areas to ensure cleanliness and hygiene.
 - Provide instructions on the removal and disposal of garbage and refuse.
3. Laundry Facilities ○ Show the participant how to operate the washing machine and dryer. ○ Discuss proper use, including sorting laundry, adding detergent, and safe operation of the machines.
4. House Meetings ○ Inform the participant of the dates, times, and locations of house meetings.
5. Prohibited Items ○ Clearly state the prohibition of alcohol and illicit drugs on the premises.
 - Review the consequences of violating this rule.
6. House Rules and Requirements ○ Discuss specific participant requirements, including but not limited to:
 - Curfews
 - Smoking policies
 - Visitor guidelines
 - Signing in and out procedures
 - Meal preparation schedules
 - Chore assignments and schedules○ Review additional house rules as applicable.

II. Participant's Rights and Responsibilities

1. Review of Rights ○ Provide the participant with a written document outlining their rights, including privacy, access to support, and grievance procedures.
 - Discuss how these rights are protected within the home.
 2. Responsibilities ○ Explain the participant's responsibilities, including adherence to house rules, mutual respect, participation in recovery activities, and financial obligations.
-

III. Prohibition of Alcohol and Illicit Drugs

1. Clear Communication ○ Emphasize the strict prohibition of alcohol and illicit drugs on the premises. ○ Explain the consequences of violating this rule, including potential dismissal from the home.
2. Agreement ○ Have the participant sign a house rules agreement acknowledging their understanding of this policy.

IV. Services Offered or Coordinated

1. Overview of Services ○ Provide an overview of services offered by the sober living home, such as peer support, recovery meetings, and wellness activities. ○ Outline any coordinated services, such as counseling, job placement assistance, or referrals to external resources.

V. Drug and Alcohol Testing Practices

1. Testing Policy ○ Explain the home's drug and alcohol testing practices, including frequency, procedures, and confidentiality.
 - Inform the participant of the consequences of a positive test.
2. Participant Agreement ○ Have the participant sign an acknowledgment of the testing policy and their agreement to comply.

VI. Expectations About Food Preparation and Chores

1. Kitchen Orientation ○ Show the participant where food, utensils, and kitchen equipment are stored. ○ Explain the shared responsibility for food preparation, meal planning, and cleanup.
2. Chore Assignments ○ Introduce the house chore schedule and assign the participant their initial task. ○ Explain how chores are rotated and the importance of maintaining cleanliness and shared responsibilities.

Follow-Up and Documentation

1. Checklist Completion ○ Use an orientation checklist to ensure all topics are covered during the session.
 - Have the participant initial each completed section of the checklist.
2. Participant Acknowledgment ○ Obtain the participant's signature on a document confirming their orientation and understanding of the policies and procedures.

3. Record Keeping ○ File the completed orientation checklist and acknowledgment form in the participant's file for reference.

Review

The manager will periodically review the orientation process to ensure it remains comprehensive and effective, updating materials as needed.

Participant Orientation Checklist

Participant Name: _____

Date of Orientation: _____

Conducted By: _____

Orientation Topics

Initial each item upon completion to confirm understanding.

1. Emergency Preparedness ○ Location of all exits from the sober living home.
 - Route to evacuate the sober living home in case of an emergency.
 2. First-Aid Kit ○ Location of the first-aid kit as required in R9-12-206(1).
 3. Kitchen Use ○ Operation of kitchen appliances (stove, oven, microwave, refrigerator, etc.). ○ Proper use of food storage areas.
 - Procedures for the removal and disposal of garbage and refuse.
 4. Laundry Facilities ○ Operation of the washing machine and dryer.
 5. House Meetings ○ Dates, times, and locations of house meetings.
 6. Prohibited Items ○ Prohibition of the possession of alcohol or illicit drugs at the sober living home.
 7. Participant Requirements and House Rules ○ Curfews.
 - Smoking policies. ○ Visitor guidelines. ○ Signing in and out procedures. ○ Meal preparation schedule. ○ Chore schedule.
 - Other house rules as applicable.
 8. Regulatory Requirements ○ Review and discussion of requirements related to R9-12-201(B)(2)(a)(iii).
 9. Additional Information ○ Information required according to R9-12-201(B)(3)(n).
-

Participant Acknowledgment:

I acknowledge that I have received and understood the orientation to the sober living home and its premises as outlined above.

Participant Signature: _____ Date: _____

Staff Acknowledgment:

I confirm that the above orientation topics were reviewed with the participant.

Staff Signature: _____

Date: _____

Checklist Filing:

This completed checklist will be filed in the participant's record for reference and compliance verification.

Secure Storage for Participant Medications and Personal Belongings

Purpose

To ensure participants have access to a secure storage location for medications, valuables, or other personal belongings, protecting their privacy and deterring misappropriation by others.

Policy

Each participant will be provided with a lockable or secure storage location for their medications, valuables, and personal belongings. This storage will be accessible only by the participant and the manager and will be maintained in proper working condition.

Procedure

1. Provision of Secure Storage ○ Upon admission, each participant will be issued a lockbox for secure storage of medications, valuables, and personal belongings.
2. Access Control ○ Participants are the primary custodians of their lockbox. ○ The manager will maintain a master key or override access to ensure availability in case of emergencies or operational needs.
3. Participant Responsibilities ○ Participants are responsible for maintaining the lockbox in good condition. ○ Participants must report any issues, such as lost keys or damage, to the manager immediately.
4. Manager Responsibilities ○ Ensure all lockboxes are in proper working condition before issuing them. ○ Keep a record of issued lockboxes, including participant names and deposit status. ○ Conduct periodic inspections to verify lockboxes are being used appropriately without accessing the contents.
5. Return ○ When a participant vacates the sober living home or no longer requires the lockbox, they must return the lockbox and key in proper working condition.

Lockbox Agreement Format:

Participant Name: _____
Date: _____ Manager
Name: _____

Terms and Conditions:

1. I acknowledge receipt of a lockbox and key for storing medications, valuables, and personal belongings.
2. I agree to maintain the lockbox and key in proper working condition.
3. I will return the lockbox and key upon vacating the sober living home or when no longer required.

Participant Signature: _____ Date: _____

Manager Signature: _____

Date: _____

Record-Keeping:

- A copy of the signed Lockbox Agreement will be retained in the participant's file.
- The deposit transaction and refund status will be documented in the financial records.

Facility Maintenance and Safety Standards

1. Hazard-Free Environment
 - Regularly inspect the home to identify and address any conditions or situations that could cause physical injury to participants or others.
 - Promptly repair or remove hazardous items, such as broken furniture, uneven flooring, or unstable fixtures.
2. Personal Hygiene Supplies
 - Ensure that participants have access to equipment and supplies for personal hygiene, such as soap, towels, toilet paper, and cleaning supplies.
 - Restock supplies regularly and ensure they are easily accessible.
3. Cleanliness
 - Maintain the home free from accumulations of dirt, garbage, and rubbish.
 - Establish a daily and weekly cleaning schedule for common areas, bedrooms, bathrooms, and kitchens.
 - Assign specific cleaning tasks to participants as part of their responsibilities.
4. Pest Control
 - Implement a pest control program, including regular inspections and treatments by licensed pest control professionals.
 - Encourage participants to store food properly and dispose of waste promptly to minimize the presence of insects or vermin.

II. Electrical and Appliance Safety

1. Inspection of Electrical Equipment
 - Regularly inspect appliances, lights, and other devices for frayed or spliced electrical cords.
 - Remove and replace any equipment with damaged cords to prevent electrical hazards.
2. Safe Use of Electrical Cords
 - Prohibit the use of electrical cords, including extension cords, under rugs or carpeting, over nails, or running from one room to another.
 - Provide sufficient power outlets and surge protectors to minimize the need for extension cords.

III. Documentation and Compliance

1. Inspection Logs ○ Maintain a log of regular facility inspections, noting any issues identified and the actions taken to address them.
2. Participant Guidelines ○ Include safety and cleanliness expectations in the participant handbook and review these during orientation.
3. Incident Reporting ○ Document any safety-related incidents and follow up with corrective actions to prevent recurrence.

Review and Training

The licensee or manager will conduct periodic reviews of safety and cleanliness protocols and ensure staff and participants are trained on maintaining a safe and hygienic environment.

Updates will be made to the policy as needed to comply with regulations and improve living conditions.

Tracking Resident Outcomes Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery is committed to supporting participants' long-term recovery and success. To evaluate the effectiveness of the program and support continuous improvement, the organization will track and document participant outcomes, including discharge details, length of sobriety, employment status, and other relevant metrics. This policy outlines the procedures for collecting, maintaining, and analyzing outcome data.

Policy Statement

1. Participant outcomes will be tracked to measure the program's impact and ensure alignment with its mission.
2. Outcome metrics will include, but are not limited to, discharge details, length of sobriety, and employment rates.
3. All data collected will be handled confidentially and used solely for program evaluation and improvement.

Procedures

1. Outcome Metrics to Be Tracked

The following metrics will be tracked for each participant:

- Discharge Details:
 - Reason for discharge (e.g., completion of program, voluntary exit, or termination).
 - Participant's housing or treatment plan post-discharge.
- Length of Sobriety:
 - The duration of sobriety upon entering and exiting the program.
 - Relapse incidents (if applicable).
- Employment Rates:
 - Employment status at entry, during participation, and upon discharge.
 - Job placement or progress toward educational/vocational goals.
- Other Metrics (if applicable):
 - Participation in recovery-related activities (e.g., meetings, therapy). ○ Engagement in community service or volunteer work.

2. Data Collection

- Initial Intake:
 - Participant data will be collected during the intake process, including:
 - Sobriety date.
 - Employment status and history.
 - Recovery goals and baseline metrics.
- During Participation:
 - Monthly check-ins will document progress, including:
 - Updates on employment, sobriety, and engagement in recovery activities. ▪
Any incidents or milestones achieved.
- Upon Discharge:
 - Discharge interviews will collect information about the participant's:
 - Reason for discharge.
 - Sobriety status and plans for maintaining recovery.
 - Employment status or educational progress.
 - Housing arrangements or post-program support plans.

3. Data Management and Storage

- All data will be recorded in a secure database or file system.
- Participant identifiers will be anonymized when data is used for program evaluation or reporting.
- Access to participant data will be restricted to authorized staff.

4. Outcome Analysis

- Data will be reviewed quarterly by the Program Director to identify trends and areas for improvement.
- Metrics such as average length of sobriety, discharge reasons, and employment rates will be analyzed.
- Program adjustments or enhancements will be implemented based on findings.

5. Reporting and Feedback

- Outcome data may be shared with stakeholders, funders, or regulatory agencies as required, in aggregate and anonymized form.
- Participants may be invited to provide feedback on their experiences and outcomes through voluntary surveys.

Participant Confidentiality

- All information collected will be handled in compliance with confidentiality policies and applicable laws.

- Data will only be shared in aggregate form unless explicit consent is provided by the participant.

Continuous Improvement

- The outcome tracking process will be reviewed annually to ensure it aligns with program goals and best practices.
- Feedback from participants, staff, and stakeholders will be incorporated to enhance tracking and program effectiveness.

Participant Rights

- Participants have the right to access their own outcome data upon request.
- Participation in surveys or feedback activities is voluntary and will not impact their standing in the program.

Personal Information Collection Policy and Procedure

Plugged In Recovery Sober Living Home

Policy Overview

Plugged In Recovery collects, maintains, and secures personal information from participants to support their recovery journey, comply with legal requirements, and evaluate program effectiveness. This policy outlines the procedures for collecting, managing, and securely storing participant information, as well as guidelines for retaining and disposing of records after program discharge.

Policy Statement

1. Personal information will be collected only as necessary to support participants' recovery and program operations.
 2. All collected information will be handled confidentially and securely.
 3. Participant records will be retained for 12 months after discharge from the program, after which they will be securely disposed of.
-

Procedures

1. Information Collected

Plugged In Recovery may collect the following types of personal information from participants:

- Contact details (e.g., name, phone number, email, address).
 - Emergency contact information.
 - Sobriety-related data (e.g., sobriety date, recovery goals).
 - Medical information (e.g., medication details, allergies, treatment history).
 - Employment and financial information (if applicable).
 - Other information as required for program operations or compliance purposes.
-

2. Collection Process

- Initial Intake:
 - Personal information will be collected during the intake process using the Participant Application Form and other relevant documents.
 - Updates During Participation:
 - Personal information may be updated as needed during the participant's stay in the program (e.g., changes to emergency contacts or employment status).
-

3. Storage of Information

- Participant records will be stored in a secure location, either in locked physical filing cabinets or on secure digital platforms with restricted access.
 - Only authorized staff members will have access to participant records.
-

4. Confidentiality

- Personal information will be used solely for the purpose of supporting the participant's recovery and program management.
 - Information will not be shared with third parties without the participant's explicit consent, except as required by law.
-

5. Retention and Disposal

- Retention Period:
 - Participant records will be retained for 12 months following discharge from the program.
- Secure Disposal:

- After the 12-month retention period, records will be securely disposed of to protect participant confidentiality. ○ Physical records will be shredded, and digital records will be permanently deleted.

6. Access to Personal Information

- Participants have the right to access their personal information upon written request.
- Requests will be processed within 10 business days.

Participant Rights

- Participants will be informed of this policy during orientation.
- Participants have the right to:
 - Know what personal information is being collected and why. ○ Access their records and request corrections if needed. ○ Be assured that their information will be handled securely and confidentially.

Non-Compliance

- Failure to adhere to this policy by staff may result in disciplinary action, up to and including termination.
-

Participant Agreements

Purpose

To establish clear guidelines for accepting participants into the sober living home and ensuring a comprehensive Participant Agreement is completed and maintained in compliance with regulatory requirements and Plugged In Recovery policies.

Policy

Plugged In Recovery will ensure that all participants meet the eligibility criteria for residency and that a detailed Participant Agreement is completed before or at the time of acceptance. This agreement will outline the terms of participation, responsibilities, services provided, and the rights of both the participant and Plugged In Recovery.

Procedure

I. Participant Eligibility

1. Proof of Sobriety ○ Within three calendar days before or at the time of acceptance, the individual requesting to become a participant shall provide proof of sobriety to the manager.
 2. Eligibility Criteria ○ The manager shall not accept or retain an individual as a participant if the individual:
 1. Is not at least 18 years of age.
 2. Cannot provide proof of sobriety.
 3. Needs more support to maintain sobriety than is within the scope of services offered by the sober living home.
-

II. Participant Agreement

1. Completion of Agreement ○ Before or at the time of acceptance, the manager will ensure a documented Participant Agreement is completed and includes the following:
 1. Participant Information
 - Name.
 - Emergency contact name and phone number.
 2. Participant History
 - Length of sobriety.
 - History of previous recovery activities.

- Source of referral to the sober living home, if applicable.
- 3. Terms of Occupancy
 - Date of occupancy or expected date of occupancy.
 - Participant responsibilities.
 - Responsibilities of the sober living home.
- 4. Loss of Sobriety
 - Consequences of a loss of sobriety.
- 5. Room Description
 - A description of the participant's assigned room.
- 6. Services
 - A list of services provided by the sober living home.
 - A list of additional services available for an extra fee and the associated charges.
- 7. Fees and Refund Policy
 - The fees charged for residency and services.
 - The policy for refunding fees, charges, or deposits.
- 8. Termination Policies
 - Policies and procedures for the participant to terminate residency.
 - Policies and procedures for Plugged In Recovery to terminate residency.
- 9. Participant Rights
 - The participant's right to file a complaint and the process for doing so.
 - A statement of the participant's rights and expectations, including:
 - Compliance with the Participant Agreement.
 - Maintaining sobriety.
 - Participation in activities supporting life skills, independent living, and recovery.
 - A statement prohibiting Plugged In Recovery from requiring participants to relinquish public assistance benefits.
- 10. Notification of Emergency Contacts
 - Procedures for notifying emergency contacts in cases of death, injury, illness, or other significant events.
- 11. Ownership and Management Information
 - Contact details for the individual or organization controlling the sober living home.
- 2. Signatures ○ The agreement must be signed and dated by both the participant and the manager.
- 3. Distribution and Record Maintenance ○ The participant will receive a copy of the signed agreement and participant rights. ○ The original agreement will be maintained in the participant's record.

III. Residency Termination

1. Immediate Termination Without Notice ○ If the participant exhibits behavior that poses an immediate threat to the health and safety of the participant or others, the manager may terminate residency without notice.
2. Seven-Day Written Notice ○ A seven-calendar-day notice may be issued for:
 - Nonpayment of fees, charges, or deposit.
 - Conditions specified in subsection (I)(2)(3).
3. Fourteen-Day Written Notice ○ A fourteen-calendar-day notice may be issued for any other reason.
4. Content of Termination Notice ○ The written notice of termination shall include:
 1. Date of the notice.
 2. Reason for termination.
 3. Description of why the sober living home cannot meet the participant's needs, if applicable.
 4. Refund policy for fees, charges, or deposits.
 5. Disposition of the participant's fees, charges, and deposits.

Participant Rights:

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14. A statement that a resident is expected to:
 - a. Comply with the terms of the residency agreement and requirements established for residents according to R9-12-201(B)(2)(a)(iii) or R9-12-201(B)(3)(j);
 - b. Maintain sobriety; and
 - c. Participate in activities to improve life skills, support independent living, and promote recovery:
 - i. Such as a treatment program, a self-help group, or another program to support sobriety and recovery; and
 - ii. That may include job training, school, or looking for a job;
 15. A statement that a sober living home may not require an individual to relinquish the individual's public assistance benefits, such as medical assistance, case assistance, or supplemental nutrition assistance program benefits, as a condition of residency;
 16. A statement that a sober living home must notify a family member or other emergency contact of the individual, according to R9-12-201(E)(1), if the individual:
 - a. Dies while a resident of the sober living home,
 - b. Has an illness or injury that requires immediate intervention by an emergency medical services provider or treatment by a health care provider,
 - c. Appears to be incapable of handling financial affairs, or
 - d. Is not complying with the residency agreement;
 17. The name and contact information for the individual or business organization controlling the sober living home;
 18. The signature of the individual and the date signed; and
 19. The manager's signature and date signed.
- D. A manager shall:**
1. Before or at the time of an individual's acceptance by a sober living home, provide to the resident or resident's representative a copy of:
 - a. The residency agreement in subsection (C), and
 - b. Resident's rights; and
 2. Maintain the original of the residency agreement in subsection (C) in the resident's record.
- E. A manager may terminate residency of a resident as follows:**
1. Without notice, if the resident exhibits behavior that is an immediate threat to the health and safety of the resident or other individuals in a sober living home;
 2. With a seven-calendar-day written notice of termination of residency:
 - a. For nonpayment of fees, charges, or deposit; or
 - b. Under the conditions in subsection (B)(3); or
 3. With a 14-calendar-day written notice of termination of residency, for any other reason.
- F. A manager shall ensure that a written notice of termination of residency includes:**
1. The date of notice;
 2. The reason for termination of residency;
 3. If termination of residency is because the resident needs more support to maintain sobriety than is within the scope of services for the sober living home, a description of why the sober living home cannot meet the resident's needs;
 4. The policy for refunding fees, charges, or deposits; and
 5. The deposition of a resident's fees, charges, and deposits.

Historical Note

New Section made by final rulemaking at 25 A.A.R. 1419, effective July 1, 2019 (Supp. 19-2).

R9-12-203. Resident Rights

- A.** A manager shall ensure that:

1. A resident is not subjected to:
 - a. Abuse,
 - b. Exploitation,
 - c. Coercion,
 - d. Manipulation,
 - e. Sexual abuse,
 - f. Sexual assault, or
 - g. Retaliation for submitting a complaint to the Department or another entity; and
 2. A resident or the resident's representative is informed of and given the opportunity to ask questions about:
 - a. The residency agreement,
 - b. The costs associated with residency,
 - c. The resident's rights and responsibilities,
 - d. The prohibition of the possession of alcohol or illicit drugs at the sober living home,
 - e. Drug and alcohol testing and other assessments of sobriety,
 - f. The consequences of loss of sobriety, and
 - g. The complaint process.
- B. A resident has the following rights:**
1. Not to be discriminated against based on race, national origin, religion, gender, sexual orientation, age, disability, marital status, or diagnosis;
 2. To receive services that support the resident's sobriety, including, if applicable, continuing to receive medication-assisted treatment while a resident;
 3. To have a secure place to store personal belongings, medications, or other personal items to deter misappropriation by another individual;
 4. To be able to gain access to the sober living home at any time while a resident;
 5. To have access to all areas of the sober living home's premises, except for:
 - a. The bedrooms and secure storage locations of other residents,
 - b. The bedroom and secure storage locations of the manager or other staff, and
 - c. Areas of the sober living home used as the manager's office or for storage of records or supplies for assessment of sobriety;
 6. To have access to meals prepared in the sober living home;
 7. To review, upon written request, the resident's own record; and
 8. To receive assistance in locating another place to live if the resident's record indicates that the resident:
 - a. No longer needs the services of a sober living home, or
 - b. Needs more services and support to maintain sobriety than the sober living home is authorized to provide.

Historical Note

New Section made by final rulemaking at 25 A.A.R. 1419, effective July 1, 2019 (Supp. 19-2).

R9-12-204. Resident Records

- A.** A manager shall ensure that a resident record is established and maintained for each resident that includes:
1. The original of the residency agreement in R9-12-202(C);
 2. The date the resident received orientation to the sober living home, as required by R9-12-205(A);
 3. A copy of each drug and alcohol test performed on the resident by an independent testing facility, including the date of the test and the test result;

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4. Any other assessments of sobriety performed on the resident, including:
 - a. The date of the assessment,
 - b. A description of the assessment,
 - c. The result of the assessment, and
 - d. The name of the individual conducting the assessment;
 5. Documentation of the resident's attendance at and participation in treatment, self-help groups, and other supports that promote recovery, including:
 - a. The name or a description of the support towards recovery, and
 - b. The date of the resident's attendance;
 6. A current list of medications taken by the resident and the resident's medical conditions;
 7. An account of monies received from the resident and any expenditures made specific to the resident;
 8. Documentation of any complaints made by or about the resident and the outcome of each complaint;
 9. Documentation of any notification made according to R9-12-201(E) about the resident; and
 10. If applicable, documentation related to termination of residency, including:
 - a. Whether termination of residency was initiated by the resident or the sober living home,
 - b. The reason for termination of residency,
 - c. Any assistance the resident received in locating another place to live, and
 - d. The date the residency ended.
- B.** A licensee shall ensure that a resident's record is:
1. Protected from loss, damage, or unauthorized use;
 2. Available for review by the resident or the resident's representative, within 24 hours after a request; and
 3. Maintained for at least 12 months after the termination of residency.
- Historical Note**
New Section made by final rulemaking at 25 A.A.R. 1419, effective July 1, 2019 (Supp. 19-2).
- R9-12-205. Sober Living Home Services**
- A.** Within 24 hours after an individual becomes a resident of a sober living home, a licensee shall ensure that the resident receives orientation to the sober living home and premises, according to policies and procedures, that includes:
1. The location of all exits from the sober living home and the route to evacuate the sober living home in case of an emergency;
 2. The location of the first-aid kit required in R9-12-206(1);
 3. The use of the kitchen of the sober living home, including:
 - a. Operation of the appliances,
 - b. Use of food storage areas, and
 - c. Removal of garbage and refuse;
 4. The use of the washing machine and dryer;
 5. The dates, time, and location of house meetings;
 6. The prohibition of the possession of alcohol or illicit drugs at the sober living home;
 7. Review and discussion of specific resident requirements, as applicable, such as curfews, smoking, visitors, signing in or out of the sober living home, meal preparation schedule, chore schedule, or other house rules;
 8. Review and discussion of requirements related to R9-12-201(B)(2)(a)(iii); and
 9. The information required according to R9-12-201(B)(3)(n).
- B.** A manager shall:
1. Conduct drug and alcohol testing according to policies and procedures;
 2. Assist a resident to identify and participate in programs to support sobriety and recovery;
 3. Provide to a resident information about community resources, such as nearby bus routes, grocery stores, department stores, other places to obtain food or other personal items, schools, libraries or other locations providing access to computers, or other locations providing items or services a resident may need.
- Historical Note**
New Section made by final rulemaking at 25 A.A.R. 1419, effective July 1, 2019 (Supp. 19-2).
- R9-12-206. Emergency and Safety Standards**
A manager shall ensure that:
1. A first aid kit is available at a sober living home sufficient to meet the needs of residents;
 2. Naloxone is available and accessible to the manager, staff, and residents of the sober living home;
 3. A smoke detector and, if there is a gas line in the sober living home, a carbon monoxide detector are installed in:
 - a. A bedroom used by a resident,
 - b. A hallway in a sober living home, and
 - c. A sober living home's kitchen;
 4. The smoke detector and, if applicable, carbon monoxide detector in subsection (3) are:
 - a. Either battery operated or, if hard-wired into the electrical system of the sober living home, have a back-up battery; and
 - b. In working order;
 5. A fire extinguisher that is labeled as rated at least 1A-10-BC by the Underwriters Laboratories:
 - a. Is maintained in the sober living home's kitchen;
 - b. If a disposable fire extinguisher, is replaced when its indicator reaches the red zone; and
 - c. If a rechargeable fire extinguisher:
 - i. Is serviced at least once every 12 months, and
 - ii. Has a tag attached to the fire extinguisher that specifies the date of the last servicing and the identification of the person who serviced the fire extinguisher;
 6. An evacuation path is conspicuously posted on each hallway of each floor of the sober living home;
 7. A written evacuation plan is maintained and available for use by the manager, any other staff of the sober living home, and any resident in a sober living home;
 8. An evacuation drill is conducted at least once every six months; and
 9. A record of an evacuation drill required in subsection (8) is maintained for at least 12 months after the date of the evacuation drill.
- Historical Note**
New Section made by final rulemaking at 25 A.A.R. 1419, effective July 1, 2019 (Supp. 19-2).
- R9-12-207. Environmental and Physical Plant Requirements**
- A.** A licensee shall ensure that a sober living home:
1. Is free of any plumbing, electrical, ventilation, mechanical, chemical, or structural hazard that may result in physical injury or illness to an individual or jeopardize the health or safety of a resident;
 2. Has a kitchen for use by the manager and residents of the sober living home;
 3. Has a living room accessible at all times to a resident;

R9 12 201 B3M

A residents sudden intense out of control behavior

Scope of Services

207 B 1

Maintain free of a condition

Itemize orientation document points