

United Alliance for Recovery Community Organizations (UARCO) Standards

Introduction

The UARCO Standards were created in 2021. The National Alliance for Recovery Residences Standard provided the model of the standards and the certification process for recovery community organizations (RCOs). Recovery community organizations are independent organizations that are led and governed by representatives of their local recovery community. RCOs provide recovery support services, recovery-focused activities, and recovery-focused community education and outreach programs. The recovery community organizations offer a safe and healthy recovery-focused environment for people suffering from a substance use disorder. The Standards have five core principles that are tailored to meet the social model of recovery while encompassing a recovery community organization's governance, infrastructure, operations, community engagement, and outcomes.

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A. Core Principle: We are Led and Governed by the Recovery Community		
1. Organization Infrastructure		
a. A written mission statement that encompasses serving substance use disorder and the recovery community.		R
b. A vision statement that aligns with UARCO's core principles.		R
c. Documentation of the organization's code of ethics policy and evidence that this document is signed by owners, staff, and volunteers.		R
d. A written policy that ensures the organization complies with state and federal nondiscrimination requirements.		R
e. Documentation that the recovery community organization is a legal business entity or non-profit organization (e.g. incorporation, LLC documents, business license, or IRS determination Letter).		R
f. Documentation that the legal business entity has minimum general liability insurance applicable to the support level the business provides.		R
g. Documentation of a risk management plan.	S	
h. Documentation of a recent annual report.	S	
2. Organization Governance		
a. If the organization is a non-profit, a minimum of 51% of the Board of directors self-identify as being a family member of or individual in recovery from a substance use disorder.		R
b. If the organization is a for-profit, there must be an advisory board with a minimum of 51% self-identifying as being a family member of or individual in recovery from a substance use disorder.		R
c. Organization is peer staffed with a minimum of 51% self-identifying as being a family member of or individual in recovery from a substance use disorder.		R
d. Written Bylaws that include method(s) for selecting and replacing members of the Board of Directors and/or Advisory Board.		R
e. Documentation and record-keeping of the Board of Directors/Advisory Board meeting agendas and minutes.		R
f. A written description of the Board of Directors/Advisory Board policies and practices to ensure community needs are addressed by the organization.		R
g. Representation on the board from diverse segments of the recovery community.		R

h. A conflict of interest policy.		R
i. Documentation of formal training in place for the Board of Directors/Advisory Committee.	S	
j. Copy of the organization's most recent strategic plan or long-term plan.	S	
3. Operations, Management and Systems		
a. Clearly written safety policy and procedures that address accountability for safety practices.		R
b. Clearly written confidentiality policy that addresses rights, responsibilities, rules, and accountability.		R
c. Policy and procedures that ensure background checks (due diligence practices) are conducted for staff and volunteers with direct contact with participants.		R
d. Emergency procedures that include: <ul style="list-style-type: none"> • Overdose policy and procedure. • Withdrawal procedure. • Intoxication procedure. • Medical emergency procedure. 		R
e. Human Resources records and policies to include: <ul style="list-style-type: none"> • Employment application. • Staff member job descriptions. • Employment eligibility documents. • Federal and state tax documents. • Employee handbook signature page. • Volunteer job descriptions if volunteers are utilized. • Documentation for disciplinary actions/policies. • A recurrence of use policy for staff, volunteers, and participants. • Conducts structured interviews with job applicants. • Provides new staff orientation to include organization history, mission, confidentiality, boundary setting, code of ethics, and code of conduct. 		R
f. Documentation of the most recent staff organizational chart. <ul style="list-style-type: none"> • Staff member job descriptions. • Staff member hierarchy. • Staff resumes. • Volunteer job descriptions if volunteers are utilized. 	S	
g. Drug testing policy and procedures that address: <ul style="list-style-type: none"> • Confidentiality and privacy. • Documentation of testing and results. • Addresses positive results. • Options for follow-up of positive results. 		R

<p>h. Policy and procedures for banning someone from the property including:</p> <ul style="list-style-type: none"> • Timeframes for bans. • Compliance with local laws. • Letter templates – examples of communications for banning someone. 		R
<p>i. Grievance policy and procedures that address:</p> <ul style="list-style-type: none"> • Ensuring that complaints from participants, neighbors, staff, family members, and volunteers are addressed in a timely and thorough manner. • Ensuring that all complaints and their dispositions are documented and clearly communicated to staff, volunteers, and participants. 		R
<p>j. Financial policies and procedures that meet the following criteria:</p> <ul style="list-style-type: none"> • Include a written refund policy. • Include use of an accounting system that documents financial transactions such as fees received, third-party funds received, payments made, deposits, and withdrawals. • Include written service contracts that inform participants of all fees and charges for which they are, or could potentially be, responsible. • Include financial and internal controls policy. • Develop an annual budget, produce financial reports monthly, review the budget at least quarterly, and revise as needed. • Include policies for reporting financial information to the Board of Directors and to third parties that may require it. 		R
<p>k. Procedures for ensuring that program participants who enter into paid work agreements with Agency meet the following criteria:</p> <ul style="list-style-type: none"> • The arrangement is completely voluntary. • Participant does not receive consequences for declining. • Participant is not treated more favorably than other participants for accepting work. • All qualified participants are given equal opportunity for available work. • Participant and organization paid work agreement does not interfere with progress toward their recovery goals. • Wages are commensurate with marketplace value. • Unsatisfactory work relationships are terminated without recrimination that can impair recovery. 		R
<p>l. Appropriate technology for maintaining the confidentiality of record-keeping, financial records, and participant information (hardware and software) that meets the following criteria:</p> <ul style="list-style-type: none"> • Physical records are stored in a locked cabinet. • Electronic records are stored in a secure manner accessible only by authorized individuals. 		R

m. Methods to address, process, make decisions, and document confidentiality and ethical dilemmas.		R
n. Procedures for emergency evacuation of the building that includes: <ul style="list-style-type: none"> • Posted exit maps and signs. • Rally points. • Verification that all have exited the building. 		R

B. Core Principle: Our Support is Based on Recovery from Substance Use Disorders

1. Staff Development

a. Commitment to recruiting staff who reflect the cultural identities, life experiences, and pathways to the recovery of the peers being served.		R
b. Conduct cultural competency training for all staff and volunteers appropriate to the population(s) served.		R
c. Provide confidentiality and boundary training for all staff/volunteers. Ensure supervision and mentoring to help staff prevent boundary-related conflicts and provide support when it happens.		R
d. Staff development and training in applying the social model of recovery that includes: <ul style="list-style-type: none"> • Training in core competencies of peer services and recovery community organizations. • Training in mandatory reporting. • Ongoing performance support and training. 		R
e. Regularly scheduled supervision to provide support, enhance job performance, build skills, and foster staff retention.		R
f. Peer leadership development that shows a selection and orientation process to ensure retention and ongoing skill development. Developments include: <ul style="list-style-type: none"> • Written criteria and guidelines that explain expectations. • Ethics training. • Self-care training and activities. • Staff training plan for each staff. • Celebrates staff and staff goals. 		R
g. Ongoing staff training for a return to use/relapse/intoxication procedure, naloxone, mandatory reporting, and fire/evacuation drills including: <ul style="list-style-type: none"> • Intoxication procedures for participants and staff. • Recurrence of use procedures to encourage safety and re-engagement with recovery services. 		R

h. Conducts peer leader supervision to ensure retention, proper training, and periodic check-ins.		R
i. Ensures that staff has a variety of training opportunities to better serve those in their community.		R
j. Conducts scheduled staff meetings with maintained minutes and agendas.		R
k. Provides a staff recruitment plan.	S	
2. Peer Support		
a. Policies and practices to provide linguistically appropriate peer supports.		R
b. Policies and procedures that specify organizational rules regarding peer boundaries, e.g. no dating peers we serve, no lending money to peers.		R
c. Promotes the peer workforce in the community.		R
d. Promotes health with access to community support, and peer support.		R
e. Provides a home-like environment that inspires self-purpose with meaningful activities, peer connection, and encouragement to participate.		R
f. Provides a schedule and/or curriculum of recovery and skills-building supports throughout the day.		R
g. Evidence that the organization provides peer recovery support services that include: <ul style="list-style-type: none"> • Evidence-based practices. • Recovery planning. • Recovery development. • Recovery capital assessing, supporting, and building. 		R
h. Ensures the delivery of individualized peer supports that have a measurable impact that can be sustained over time.		R
i. Evidence that a social model of recovery peer support is being facilitated that include: <ul style="list-style-type: none"> • Community gatherings, recreational events, and/or social events. • Recovery mutual aid groups. 		R
j. Evidence that life skills, behavior change, and relationship enhancement skills are facilitated through: <ul style="list-style-type: none"> • Recovery mutual aid groups. • Individual recovery coach sessions. • Connection to local resources. • Individual recovery coach sessions. • Connection to local resources. 		R

k. Evidence that recovery-related support groups are hosted to support a broad spectrum of individuals that include: <ul style="list-style-type: none"> • Family members. • People who have experienced grief and/or trauma. • People who choose multiple pathways of recovery. 		R
3. Uphold Participant's Rights		
a. Clearly posted rules for conduct on the organization's property.		R
b. Clearly posted participant rights and responsibilities that are easily accessible in common areas which may include entrances, group meeting rooms, and/or offices.		R
c. Evidence of encouraging and engaging participant's in a manner supportive of various pathways of recovery to promote a person's right to choose their own pathway.		R
d. Evidence that a participant's recovery path is self-directed.		R
e. Policy and procedures that align with diversity, equity, and inclusivity that are compliant with state and federal law.		R
f. Evidence that peers are informed of confidentiality laws and the organization's policies and practices regarding privacy and confidentiality.		R
h. Policy and procedures related to retention and disposal of abandoned personal property that includes: <ul style="list-style-type: none"> • A timeframe for retention of belongs before disposal. • Process for disposing of items, e.g. thrown in the trash, donated. 		R
h. Documentation that drug testing policies and procedures are for purposes of accountability and recovery support.		R

C. Core Principle: We Value Community Engagement		
1. Physical Domain		
a. Organization is located in a space that is open and accessible to the general public.		R
b. Organization is well maintained, clean, structurally safe, and promotes a comfortable, inviting, and welcoming environment.		R

c. Policies and procedures are posted in a common area which includes entrances, group facilitating rooms, and offices. Required documents include: <ul style="list-style-type: none"> • Grievance policy. • Blank grievance form. • Non-discrimination policy. • Participant rules. • Participant rights and responsibilities. • Code of Ethics. • Emergency contact information. 		R
d. Office space is available for staff members, interns, and/or volunteers that: <ul style="list-style-type: none"> • Is accessible to the public and participants. • Includes private office space. • Allows for privacy, e.g. soundproof space. 		R
e. Provides a designated recovery-related group room that is aesthetically pleasing with comfortable furniture for a minimum of 15 participants.		R
f. There is a designated community lounge area and/or kitchen that includes: <ul style="list-style-type: none"> • Refrigerator. • Kitchen appliances including refrigerator and sink. • Dishes, eating utensils. • Storage space for food and related items. 		R
g. Appliances, interior/exterior lights, and central air units are in safe working condition.		R
h. To the extent possible, or as required by law, the physical building is handicap accessible.	S	
i. Interior and exterior decor is culturally inviting to promote social interaction and engagement.		R
j. Restrooms are accessible, in working order, and are inclusive of all gender identities.		R
k. Entertainment or recreation areas promote social engagement.	S	
2. Promote Health and Safety		
a. Requires and maintains an alcohol and illicit drug-free environment.		R
b. Mechanical, electrical, and structural components of the physical building are maintained in a safe condition.		R

d. There is periodic naloxone training on-site for staff, volunteers, participants, and the local community and:		R
<ul style="list-style-type: none"> • Accessible Naloxone throughout the location. • All staff and participants are informed where naloxone is kept. • Posted naloxone administration signs. 		
e. Policy and procedures regarding exposure to contagious disease and bodily fluids include:		R
<ul style="list-style-type: none"> • COVID-19 policy and procedures. • Bloodborne pathogens policy and procedures. 		
f. Verification that weather-related emergency preparation, plans, and training are in place in case of a long-term outage. These plans include:	S	
<ul style="list-style-type: none"> • Reserve supplies. • Food & water. • Light sources. 		
g. Emergency exit/evacuation plans that include:		R
<ul style="list-style-type: none"> • Posted fire exit signs. • Accessible fire suppressants. • Periodic fire and hazardous weather drills. 		
h. Verification that fire safety procedures are met that include:		R
<ul style="list-style-type: none"> • Functional smoke detectors throughout the building. • Functional fire extinguishers are in plain sight throughout the building. • Regular checks of smoke detectors, and fire extinguishers. • Fire and other types of emergency drills take place regularly. 		
i. Provides any safety equipment or PPE gear needed to perform job duties.		R
j. Collects emergency contact information for staff, volunteers, and community members.		R
3. Promote Involvement, Engagement, and Consultation		
a. Organization promotes community engagement through events, planned outreach, activities, training, resource directories, and community service.		R
b. Makes routine efforts to contact individuals, families, and broader populations to increase and enhance communication regarding SUD treatment and recovery in the community, including educational facilities, civic organizations, local institutions, and correctional facilities.		R
c. Engages in community outreach to educate the community and reduce the stigma of addiction.		R

d. Marketing, advertising, and outreach policies and procedures honestly and accurately characterize the organization and its services and do not employ the following: <ul style="list-style-type: none"> • Misleading, exaggerated, or false statements. • Testimonials that do not reflect the real opinion of an individual. • Price claims that are misleading. • Misleading representation of outcomes. 		R
e. Organization delivers consultation services with people in recovery, their families, friends, and recovery allies.		R
f. Organization conducts periodic community assessments to determine community needs.		R
g. Materials are available in languages that are appropriate for the community served.		R
h. Organization participates in advocacy efforts for addiction solutions.		R

D. Core Principle: We are Good Members of the Local Community		
1. Infrastructure and Operations		
a. Policies and procedures in place that address local community complaints and are handled in a timely fashion.		R
b. Evidence that the organization has stakeholders in the community.		R
c. Organization has policies and procedures to address its public image that include: <ul style="list-style-type: none"> • Use of non-stigmatizing language. • Guidelines for social media communications. • Guidelines to speak with the press and other media. • Guidelines for representing the organization at private or public events. 		R
d. Establishes positive working relationships with local media organizations.	S	
e. Verification that volunteer opportunities for participants and community members are available inside and outside the recovery center.		R
f. Has rules for conduct on the organization's premises involving: <ul style="list-style-type: none"> • Smoking areas. • Loitering. • Offensive language. • Cleanliness of property. • Parking. 		R

F. Core Principle: We are Outcomes-Focused

1. Infrastructure and Operations

a. Policies and procedures that ensure documented data tracking that includes: <ul style="list-style-type: none">• Program evaluations from participants.• Evaluations from staff.• Formal and informal data collection.• Surveys.		R
b. Organization employs evidence-based practices.		R
c. Data-driven quality assessment and performance improvement processes that ensure safety, effectiveness, and equitable peer recovery support.		R
d. Approved data platforms are used to track qualitative and quantitative outcomes.		R
e. Conducts focus groups for ongoing improvement in programming.		R
f. Data collected are appropriately secured to prevent unauthorized access.		R