

ORH LEVEL III DOCUMENT REVIEW CHECKLIST

The National Alliance of Recovery Residence (NARR) Quality Standards detail specific written policies and procedures that organizations must have to demonstrate quality. As the Ohio NARR affiliate, Ohio Recovery Housing (ORH) has discretion in implementing additional measures that enhance quality Recovery Housing across the state.

In light of Ohio legislative changes making Recovery Housing certification mandatory beginning January 1st, 2025, ORH has completed an exhaustive review of our required policies and procedures and implemented additional measures founded in the NARR Standards. All organizations, regardless of prior certification status, must review and revise their organization's policies and procedures to meet these updated measures. A full review of all organizational policies and procedures will be completed for all applications received on or after April 1st, 2024.

All organizations seeking certification by ORH are required to upload copies of the listed documents or equivalent for review with your application for certification. ORH will verify that the following elements are included in your documentation. If an element is missing, or is contradictory to the NARR Standards, ORH will make a recommendation for quality improvement.

You must address all recommendations for quality improvement within the timeframe provided by ORH in order for your application to remain current. All recommendations for quality improvement related to organizational policies must be addressed prior to scheduling the on-site review.

Your documents will also be reviewed as a package for clarity and consistency. You are highly encouraged to contact ORH with any questions and request assistance with your documentation before completing your application. During the on-site review, reviewers will ask questions about your organizations policies and procedures; and verify that the organization is implementing the practices as written in the documentation. If inconsistencies are noted between the policy and practice, ORH may request quality improvement activities, so your policies match your practice.

This checklist is designed as a tool to help organizations develop policies and procedures to achieve quality standards and is not an exhaustive list of the NARR Standards. Please contact ORH staff with any specific questions about your particular program and policies.

THIS DOCUMENT REVIEW CHECKLIST IS SPECIFIC TO LEVEL 3 POLICIES, IF YOUR POLCIES APPLY TO MULTIPLE LEVELS PLEASE USE THE MULTIPLE LEVELS DOCUMENT REVIEW CHECKLIST

1. Signed and Notarized Assurances (NARR 2,F,17.a-b)

All recovery housing operators are required to submit a hard copy of the signed and **notarized** assurances with each application. This must be completed by a representative of the organization authorized to sign documents.

- ☐ Assurances have been signed and notarized within the past six (6) months
- ☐ Assurances list **all** properties applying for certification (both new and/or those up for recertification)
- ☐ Assurances have been signed by the Executive Director, CEO, or individual with a similar role title

2. Signed Copy of NARR Code of Ethics (NARR 1,A,2.i)

All recovery housing operators are required to read and digitally sign the NARR Code of Ethics. It is the responsibility of the organization to uphold the NARR Code of Ethics with all staff, volunteers, and within each residence. Additionally, a representative of the organization authorized to sign documents must now read and digitally sign the ORH Agreements.

- ☐ Operator has **digitally** signed the NARR Code of Ethics in RHOADS
- ☐ Operator has **digitally** signed the ORH Agreements in RHOADS

3. House Ownership (NARR 1,A,2.c)

Organizations must indicate ownership status for each property. A property is considered “owned” if it is in the name of the organization applying for ORH certification. All other properties are considered leased (i.e. owned by an individual, separate business, or a local agency). For each leased property, you must provide a signed and dated letter from the owner authorizing use of the property as Recovery Housing.

☐ Operator has indicated on their application that all properties are owned by the organization

OR

☐ Operator has submitted a letter of authorization for each leased property (multiple properties owned by the same entity can be listed in one (1) letter of authorization)

4. Proof of Insurance (NARR 1,A,2.b)

ORH requires that you submit documentation that demonstrates that you have insurance. However, it is up to the individual operator to ensure that all their properties are covered, and that the insurance is appropriate for your operations.

☐ Proof of Insurance contains the address of each property applying for certification

☐ Proof of Insurance is not expired

5. Resident Evaluation Process & Criteria (Formerly Resident Application) (NARR COE 1)

Certified recovery houses are required to have a written process for the evaluation of residents prior to move-in. If you have more than one (1) property and the Resident Evaluation Process and/or Criteria are house-specific, you must submit all variations for ORH review. This process needs to demonstrate that the home is considering the following prior to having the person enter the home:

☐ Collects Resident Name and Contact Information

☐ Organization has a process for collecting resident emergency contact information (this can be after the resident evaluation process takes place, and the resident is accepted into housing).

☐ Explains that the property is a Level III recovery home, where residents are supervised, but it is not a clinical treatment setting

☐ Examines a resident's willingness to participate in recovery planning

☐ Examines a resident's willingness to provide support to other residents

☐ Examines a resident's willingness to maintain a drug and alcohol-free living environment

☐ Process is clear that only individuals with substance use disorder are considered for move-in (other specialized populations may also be served if they also have a substance use disorder)

☐ Resident Evaluation is well written and easy to understand

6. Resident Agreement (NARR 1,A,3.a-d; 1,B,5.a; 1,C,7.d; 2,F,16.a)

Organizations are required to have a resident agreement. Each resident is required to sign and date the resident agreement prior to officially moving into the house. The purpose of the resident agreement is to ensure that residents understand their obligations, financial and otherwise, as well as understand what services and supports the recovery house will be providing to the resident. If you have more than one (1) property and the Resident Agreement varies by property, you must submit all Resident Agreement variations for ORH review. The resident agreement must contain the following elements:

☐ Has a signature line for the resident and operator to sign and date

☐ Information on the amount of advance payments or deposits

☐ Information on the amount of any weekly or monthly fees:

☐ Clearly states the amount of the resident fee

AND/OR

- ☐ Sliding Fee Scale used to calculate resident payments is clear and able to be fairly applied

AND/OR

- ☐ Provides details on any arrangements for subsidies or scholarships, and how long a resident is able to receive a subsidy or scholarship
- ☐ Information about when fee payments are due
 - ☐ Clearly states when fees are due

AND/OR

- ☐ Clearly states for how long residents may live in the house without payment of fees and under what circumstances the operator will begin to collect fees
- ☐ Information about any other fees that the resident is expected to pay (i.e. utilities, lost keys, activities, etc)
- ☐ Information about the organization's refund policy:
 - ☐ Operator does not charge resident fees

OR

- ☐ Agreement clearly states that refunds will not be offered

OR

- ☐ Describes under what circumstances a resident may receive a refund
- ☐ Describes how a resident may request a refund
- ☐ Information on how the **operator may notify the resident** that they are ending the Resident Agreement
- ☐ Information on how the **resident may notify the operator** that they are ending the Resident Agreement
- ☐ Information on what will happen if a resident leaves the property without notice or abandons their property
- ☐ Information on what will happen to any resident property that is left in the home after the resident has vacated the property
- ☐ Clear that the property is a recovery home and resident is expected to not use or possess illicit drugs, recreational cannabis, or alcohol
- ☐ Resident Agreement references that residents will abide by other required policies and procedures
- ☐ **Does not** contain requests for the resident to waive fair housing or landlord tenant rights
- ☐ **Does not** contain statements that residents must leave the recovery home after a specified amount of time, or that length of residency is determined arbitrarily or by a third-party payer
- ☐ **Does not** contain any statements that require residents to receive services from a specific organization to maintain their housing
- ☐ **Does not** require residents to make donations or participate in required fundraising activities in exchange for housing
- ☐ **Does not** contain requirements that residents turn over EBT or other benefits to the operator in exchange for housing
- ☐ Resident Agreement is clearly written and easy to understand

7. Resident Rights Statement (NARR 1,B,5.a)

A copy of the resident rights is required to be given to each resident when they move into the house and the resident must sign and date that they have received it. A copy must also be kept in a common area of each house. Your Statement of Residents Rights, at minimum, must contain the following rights:

- ☐ Statement of Resident Rights is signed by resident
- ☐ The right to receive a copy of the Resident Rights and Grievance Policy
- ☐ The right to exercise rights without reprisal, except that no right extends so far as to supersede health and safety considerations
- ☐ The right to file a grievance in accordance with house policy
- ☐ The right to be informed in writing of the rates charged by the recovery house, as well as any additional charges
- ☐ The right to consult with independent treatment specialist or legal counsel at one's own expense

- ☐ The right to a full explanation regarding the loss or restriction of housing privileges and the methods to reinstate privileges
- ☐ The right to request and receive in a timely manner a written receipt for any payments made or statement of Account that details any expenses, charges and payments made
- ☐ Resident Rights Statement is well written and easy to understand

8. Grievance Policy (NARR 1,C,7.b)

It is best practice that operators allow residents to handle minor concerns and complaints within the house. However, there must be an opportunity for a resident to file a formal written grievance or complaint. This policy must contain the following elements:

- ☐ Information on how a resident may submit a written grievance
- ☐ The names and contact information for the organization's person responsible for handling the grievance
- ☐ A statement that the resident may contact the owner/operator about a grievance
- ☐ A statement that the resident may ask for help in filing a grievance
- ☐ Any information on timelines, including when the resident may hear a response about the grievance
- ☐ Information on the steps that the organization will take to respond to the grievance
- ☐ A statement that the resident may contact ORH with a concern
- ☐ Contact Information for ORH including:
Complaint Form link: <https://rroads.orh.ai/complaint/>
Phone Number: 614-453-5133 and/or website: www.ohiorecoveryhousing.org
- ☐ References other appropriate entities that may assist residents with reporting grievances (i.e. county board, funding agencies or your board of directors)
- ☐ Contact information for those entities is included
- ☐ The Grievance Policy is well written and easy to understand

9. Medication Policy (NARR 2,F,16.d)

All organizations with Level III properties are required to have a Medication Policy containing the following elements:

- ☐ Requires that any residents with an approved medication requiring a prescription must have a valid prescription from a health care provider
- ☐ Requires that residents disclose any approved scheduled-substance prescriptions that they may be taking to the operator, either prior to move-in or immediately once they are prescribed a new medication
- ☐ Requires that approved scheduled-substance prescription medications are to be kept in a locked location
- ☐ Describes how residents may access their medication (i.e. resident's may self-access their lockboxes or staff provides access to locked cabinet, etc)
- ☐ Describes that approved scheduled-substance prescriptions are
 - ☐ To be observed by staff and logged as residents take their own medication (**staff does not administer**)
 - AND/OR
 - ☐ Coordination with treatment provider concerning medication that is a scheduled-substance
- ☐ Describes what will happen if it is discovered that scheduled-substance prescription medication is reported to be missing or being misused
- ☐ Describes the organization's policy concerning non-prescription medication (OTC) medications
- ☐ Policy is well written and easy to understand

10. Medical Cannabis Policy (NARR 2,F,16.d)

Operators that allow the use of medically recommended cannabis by residents must have a Medical Cannabis Policy. If you have more than one (1) property and the Medical Cannabis Policy varies by house, you must submit all policy variations for ORH review. **This policy is not required if you do not allow Medical Cannabis in the home, but you must clearly state in your other documentation (such as your Code of Conduct or Resident Agreement) that Medical Cannabis is not permitted).** The policy, at minimum, must contain the following elements:

- ☐ Operator has indicated on their application that they do not allow Medical Cannabis use
- ☐ Operator clearly states they do not allow medical cannabis use in Organizations Policies

OR

- ☐ Requires that any residents using medical cannabis have a valid medical recommendation from a medical provider
- ☐ Requires that residents disclose any medical recommendation of medical cannabis to the operator either upon move in or immediately upon recommendation
- ☐ Requires that any medically recommended medical cannabis in all forms are to be kept in a locked location
- ☐ Describes what will happen if it is discovered that medical cannabis is reported to be missing or misused
- ☐ Describes that medically recommended medical cannabis:
 - ☐ Be observed by staff and logged as residents take their own medication (**staff does not administer**)
- AND/OR
 - ☐ Coordination with treatment provider concerning medical cannabis that is medically recommended
- ☐ Medical Cannabis Policy is well written and easy to understand

11. Addressing Neighbor Concerns (Formerly Good Neighbor Policy) (NARR 4,J,30)

Organizations are required to have a written policy for addressing neighbor concerns. Each resident should be informed of this policy when they move into the house. This policy must contain the following elements:

- ☐ The name and contact information of a person that neighbors can contact with concerns
- ☐ Information on what residents should do if a resident is approached by a neighbor with a concern
- ☐ Information on how the organization will respond to a concern made by a neighbor
- ☐ The Addressing Neighbor Concerns policy is well written and easy to understand

12. Emergency Policy (NARR 2,F,19.a,c-d)

You are required to have emergency procedures that apply to all properties. If you have more than one (1) property, the Emergency Policy submitted to ORH must contain information for all properties. Property-specific information and Staff Emergency contact information must be posted in each property and will be reviewed during onsite visit. This policy must contain the following elements:

- ☐ Describes what residents should do in case of a fire, which includes evacuating the building and a meeting location to speak to emergency personnel
- ☐ Describes what residents should do in case of a carbon monoxide alert in the home
- ☐ Describes what residents should do in the case of a suspected overdose, including where Ohio Board of Pharmacy approved overdose reversal medication (such as naloxone) is in the house and to contact emergency personnel
- ☐ Instructs that residents are to be referred for medical treatment immediately if they are showing signs of medical distress
- ☐ Includes a staff name and phone number for the residents to contact after emergency personnel are contacted to notify them of the emergency

- ☐ Includes instructions to contact 9-8-8 or other mental health hotline for a suspected mental health crisis
- ☐ Includes instructions to contact law enforcement in response to violence or severe threats of violence
- ☐ Plan for ensuring all safety equipment is in good working order and the house is free of safety hazards
- ☐ Instructions for what the staff or house leaders are to do in the event of an emergency in the home
- ☐ Describes what steps staff members should take if the property needs evacuated, including where to meet residents and how to communicate to emergency responders which residents may still be inside the building
- ☐ The Emergency Policy is well written and easy to understand

13. Communicable Disease Policy (NARR 2,F,18.b)

You are required to have a policy concerning communicable disease. This policy must contain the following elements:

- ☐ Residents are notified of what behaviors may increase the risk of spreading infectious diseases
- ☐ Residents are encouraged to take precautions for the spread of infectious diseases, including handwashing, regular cleaning of the common areas, and not sharing personal items or eating utensils
- ☐ Information on how to dispose of biohazardous materials, such as sharps used for insulin or other prescribed medications
- ☐ Communicable Disease Policy is well written and easy to understand

14. Code of Conduct/House Rules (NARR Standards per element)

Organizations are required to have a list of house rules for residents. A copy must be provided to the resident upon move-in, and a copy must be kept in a common area of the house. If you have more than one (1) property and the Code of Conduct varies by house, you must submit all policy variations for ORH review. The Code of Conduct, at minimum, must include the following elements:

- ☐ Residents agree not to use or possess illicit substances, recreational cannabis, or alcohol on or off the property (2,F,16.a)
- ☐ Residents agree to not have drug-related paraphernalia in the home (2,F,16.b)
- ☐ Residents agree not to possess firearms or other items designed to be weapons on the property (2,F,16.b)
- ☐ Residents agree to treat each other with respect and support each other in their recovery (1,C,8.a)
- ☐ Residents agree not to enter into sexual, romantic, or similar relationships with any staff member, volunteer, or any person with leadership responsibilities within the organization (1,D,9.b)
- ☐ Clearly states expectations on sexual or romantic relationships between residents (within the same home and/or with residents at a separate recovery housing property)
- ☐ Residents agree to report any inappropriate behavior between residents, or between residents and staff or individuals with leadership positions to the director or other appropriate role (1,D,9.b)
- ☐ Includes what time the residents agree to be at home, and how to request permission for exceptions such as employment or other reasons (1,C,8.a)
- ☐ Residents agree not to smoke and/or vape indoors and only smoke in designated smoking areas (2,F,18.a)
- ☐ Residents agree to attend house meetings (3,I,27.e)
- ☐ Residents agree to uphold all other home policies and procedures (1,C,8.a)
- ☐ Residents agree to engage in recovery planning (resident-driven setting and attaining recovery goals) (3,G,21.a-b)
- ☐ Describes how violations of the Code of Conduct are to be addressed (1,C,8.a)
- ☐ All elements of the Code of Conduct support a recovery environment, as opposed to being in place simply for the purpose of convenience of staff or leaders (NARR COE 7 and 9)
- ☐ Contains references to immediate termination of residency **only** in instances where there is an immediate risk to health and safety (1,C,7.d)
- ☐ **Does not** contain additional requests for fee payments that are not included in the Resident Agreement (1,B,5.a)
- ☐ Expectations on how residents handle personal information they learn about other residents (1,B,6.c)

- ☐ Expectations on posting about the Recovery Home and/or other residents on social media (1,B,6.c)
- ☐ Code of Conduct is well written and easy to understand

15. Paid Work Agreement (NARR 1,A,2.g)

A paid work agreement is where a resident either works for the organization or receives a discount on rent or other form of payment for performing work for the organization. Paid work agreements also apply if the resident performs work for an affiliated organization, or an organization owned or operated by the same owners, employees or family members. Recovery housing operators are also responsible for ensuring that any paid work agreements are in compliance with local, state and federal labor, tax and employment laws. **This policy is not required if you do not offer paid work agreements, but you must clearly state this in your other documentation (such as your Code of Conduct or Resident Agreement).** Organizations that offer Paid Work Agreements, must have a written agreement that contains the following elements:

- ☐ Operator has indicated on their application that they do not hire residents to work for them
 - ☐ Operator clearly states they do not hire residents or offer Paid Work Agreements in Organization's Policies
- OR**
- ☐ A statement that paid work is entered into voluntarily
 - ☐ A statement that paid work is paid at fair market rate and in compliance with all employment laws
 - ☐ A statement that paid work will not interfere with recovery goals
 - ☐ A statement that paid work will not infer special benefits on the resident other than the fair payment
 - ☐ The Paid Work Agreement is well written and easy to understand

16. Drug Screening (NARR 2,F,16.c)

Recovery homes must have a process to ensure appropriate drug screening for residents. This screening may take place at an outside entity with an appropriate release of information with the recovery home. You are required to have a Drug or Substance-Use Screening Policy that contains the following elements:

- ☐ Requires drug screening upon moving into the home
- ☐ Requires random drug screening to occur on a regular basis
- ☐ Requires that screenings are to occur based on suspicion of use of substances
- ☐ Describes what will happen if a drug screen reveals substance use
- ☐ Describes what will occur if a resident refuses a drug screening
- ☐ Describes how drug screens are paid for and if there are any circumstances when residents must pay for the screening
- ☐ Drug Screening Policy is well written and easy to understand

17. Privacy Policy (NARR 1,B,6.a-c)

You must have a policy that describes how the house will keep resident information private and confidential. This policy must contain the following elements:

- ☐ Describes how the organization ensures only authorized staff and leaders have access to resident information
- ☐ Describes how staff, volunteers, and other leaders will keep resident records secure (paper records must be stored in a locked location, digital records must be stored on a password protected computer)
- ☐ Describes under what circumstances the organization will share information about residents
- ☐ Policy is clear about what can be posted or shared on social media other websites
- ☐ Privacy Policy is well written and easy to understand

18. Staff & Leadership Code of Conduct (NARR 1,A,2.d,h-i; 1,D,9.b,d; 3,H,26.a-b)

All Level III organizations are required to have a code of conduct for staff that applies to all staff, volunteers and resident leaders at the organization. This code of conduct must contain, at minimum, the following elements:

- ☐ A statement that prohibits entering sexual or romantic relationships with residents
- ☐ A statement that prohibits behaviors or activities that could be perceived as harassment or threats to residents, other staff members, volunteers, neighbors, or others
- ☐ A statement that prohibits staff or leaders lending or borrowing money or other items of value from residents
- ☐ A statement that prohibits use of, possession of, or being under the influence of illicit substances, recreational cannabis, or alcohol while at work or actively representing the organization
- ☐ A statement that prohibits being directly involved in financial affairs of residents
 - ☐ **This includes** co-signing on loans, co-owners of bank accounts, being a payee for residents, etc
 - ☐ **This does not include** working with residents on budgeting
- ☐ A requirement to report any inappropriate relationships, treatment of residents, or other issues to senior members of staff
- ☐ Expectations around modeling recovery principals and holding residents in continuous positive regard
- ☐ Expectations that all staff, volunteers, and employed residents will adhere to the NARR Code of Ethics
- ☐ Staff and Leadership Code of Conduct includes references to Privacy Policy
- ☐ Staff and Leadership Code of Conduct is well written and easy to understand

19. Recurrence of Substance Use Policy (NARR 1,B,5.a)

You are required to have a Recurrence of Substance Use Policy that must contain the following elements:

- ☐ Requires that any recurrence of substance use be addressed immediately after any medical needs are addressed and appropriately documented
- ☐ Requires that residents are provided with information about additional services and supports
- ☐ Recurrence of Substance Use Policy is well written and easy to understand

20. Incident Report Policy (NARR 1,A,4.a)

Organizations should have internal procedures in place for handling incidents in the recovery home. If a grievance is brought to the attention of ORH, you may be required to provide records for Incident Reports when applicable. You are required to have an Incident Report Policy in place that contains the following elements:

- ☐ Requires that the following incidents be reported to senior staff and documented:
 - ☐ Overdose
 - ☐ Sexual or physical harassment or assault
 - ☐ Resident serious injury or death
 - ☐ Visitor serious injury or death
 - ☐ Anytime emergency response personnel are called to the house
- ☐ Requires reporting documenting the details of the incident
- ☐ Requires reporting documenting the organization's response to the incident
- ☐ Requires reporting documenting the steps the organization can take to prevent future incidents
- ☐ Incident Reporting Policy is well written and easy to understand

21. Visitor Policy (NARR 2,F,16.e)

You are required to have a Visitor Policy in place for all Recovery Homes. If you have more than one (1) property and the Visitor Policy varies by house, you must submit all policy variations for ORH review. At minimum, the policy must contain the following elements:

- ☐ Describes what visitors are permitted to visit the house and when they can visit
- ☐ Describes that visitors are only permitted when the person they are visiting is at the home

- ☐ Describes what areas of the home that they are permitted to visit
- ☐ Describes that visitors are not allowed to possess or be under the influence of illicit substances, medical or recreational cannabis, or alcohol
- ☐ Describes that visitors may be asked to leave if they engage in inappropriate behavior
- ☐ Visitor Policy is well written and easy to understand

22. Staffing Information & Job Descriptions (NARR 1,D,12.a-c; 2,F,17.a-c)

All Level III homes must have paid staff present when any residents are present. You must have a written agreement and/or job description with any direct staff. Description and/or agreements may be with staff, volunteers, or resident leaders. Responsibilities may be covered by multiple positions. The following elements must be covered in these descriptions and/or agreements:

Responsibilities that may be covered by staff, volunteers, and/or resident leaders:

- ☐ A responsibility to check safety equipment and ensure it is good working order
- ☐ A responsibility to check the home periodically for physical safety hazards such as overloaded electrical outlets, ensuring egresses are not blocked, etc.
- ☐ A responsibility to orient new residents to the home and ensure that all policies and procedures are explained to new residents
- ☐ A responsibility to check in with residents on a daily basis
- ☐ A responsibility to ensure that house meetings happen weekly and that all residents attend
- ☐ A responsibility to help monitor residents for any potential warning signs concerning recurrence of symptoms and refer them for more support
- ☐ A responsibility to meet with residents at least weekly to discuss and document their recovery plans
- ☐ A responsibility to respond to neighbor concerns
- ☐ Includes the position title and who the person reports to (unless the description is for the Executive Director or CEO)
- ☐ Includes that the person is expected to model recovery principles and prosocial behavior
- ☐ All job descriptions and/or agreements contain a signature line to be signed by person responsible for role

Responsibilities that must be covered by PAID staff:

- ☐ A responsibility to be available in case any resident needs additional support or has a question
- ☐ A responsibility to assist with filing and/or reviewing resident grievances
- ☐ A responsibility to respond to incidents at the recovery home, ensure an appropriate response, and document the incident appropriately
- ☐ A responsibility to respond when residents are not upholding the Code of Conduct
- ☐ Assignment descriptions are clear that paid staff are expected to be onsite whenever residents are present, and duties include at minimum:
 - ☐ Ensure the house is free from alcohol and illicit substances
 - ☐ Ensure residents are following the Code of Conduct
 - ☐ Ensure there are no prohibited items in the home
 - ☐ Ensure that residents are accounted for, and additional support needs are met

23. Camera Policy (NARR 1,B,6.c; 3,H,26.b)

If interior cameras are used on the property, you must have a written policy that addresses their use. If you have more than one (1) property and camera use varies by house, you must submit all policy variations for ORH review. The policy must contain the following elements:

- ☐ Operator has indicated on their application that the property is not monitored by any security cameras

OR

- ☐ Residents are informed that security cameras are in use

- ☐ Residents are informed of the placement of cameras
- ☐ Describes that cameras are only to be reviewed by authorized staff and feeds are protected from unauthorized viewing
- ☐ Describes that camera footage may only be viewed for a defined reason for resident safety, and not used for consistent monitoring of residents
- ☐ Describes clearly that camera feeds are not to be used to monitor residents in real time
- ☐ Describes how long camera footage will be retained
- ☐ Camera Policy is well written and easy to understand

24. Other General Application & Policy Information

The application contains short-answer and yes/no questions – this information is collected to help ORH staff better understand the recovery housing organization when reviewing policies and procedures. Some organizations may decide to develop recovery housing policies beyond the ORH required policy list. You may submit any additional recovery housing policies for ORH review and ORH staff will provide optional recommendations based on the NARR Standards. There are also certain elements that are not permitted to be included in your organization's documentation, policies, or procedures. ORH staff will review your application and all policies for the following:

- ☐ Operator has verified Organization Information and Details in RHOADS
- ☐ Operator has provided the following information in RHOADS:
 - ☐ Mission Statement
 - ☐ Vision Statement
 - ☐ Resident Eligibility for Housing
 - ☐ Verified use of ORH Outcomes Tool or uses other method for continuous quality improvement (required for L3)
 - ☐ Provided Information for the ORH Housing Locator (optional)
- ☐ Answers indicated in the RHOADS Organization Details do not conflict with organizational policies or practice (i.e. answers "NO" to children in the home, but policies or onsite visit indicates children live in the home)
- ☐ Operator has verified all Dwelling Details
- ☐ All properties in RHOADS match the properties listed on submitted ORH Assurances
- ☐ Organization has a process for collecting resident emergency contact information (may be contained in Resident Evaluation) (2,F,19.b)
- ☐ All fees and charges that are mentioned in the organization's policies are included in the Resident Agreement
- ☐ There are no policies that conflict with one another (1,B,5.a)
- ☐ Policies are clearly written and able to be understood
- ☐ All documents are free from requirements that residents waive landlord tenant or fair housing rights (1,B,5.a; 1,C,7.d)
- ☐ All documents are free from requirements or suggestions that residents turn over their paychecks, benefit cards, bank accounts, or other similar items to the operator (Operators with formal agreements with ODJFS may work within the terms of their ODJFS agreements) (1,A,2.h-i)
- ☐ All documents are free from requirements or suggestions that residents make additional donations to the organization (1,A,2.h-i)
- ☐ All documents are free from references to inappropriate punishments for not following house rules – such as threatening eviction or immediate discharge for reasons other than placing the health and safety of other residents in the house at risk (3,H,26.a)
- ☐ All documents are free from language that indicates policies or practices that are not trauma informed or indicates that the organization does not treat residents with respect or positive regard (3,H,26.b)

**This is not an application for certification. In order to access the application process, you must register for the Recovery Housing Operator and Affiliate Data System (RHOADS) portal on the ORH website:
www.ohiorecoveryhousing.org or login to your existing RHOADS account.**