



Standard for Quality Sober Living Homes

Baseline Standard for Committee Review and Comments

Revision draft October 1, 2011

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Introduction and Purpose

This Standard sets forth the minimum requirements that any quality sober living home must meet. These requirements are based on the combined experience of hundreds of sober living homes over decades of operation. The Standard is compatible with a wide variety of home organizational models.

The revised Standard for Quality Sober Living Homes will, when approved, apply to all sober living homes affiliated with the Sober Living Network through its recognized and affiliated Sober Living Coalitions. The Standard will be maintained by the Network Standards Committee and may be amended in a manner determined by the Network Board of Directors in consultation with its affiliated Coalitions.

Section 1: Safety, maintenance, appearance, space requirements

A good home is safe, well maintained, has suitable space for its residents and is in keeping with neighborhood standards.

1. The home's appearance must be neat, and the home and grounds maintained in a manner consistent with other homes in the neighborhood.
2. The home must be equipped and furnished in accordance with Coalition inspection guidelines.
3. The home must meet all health and safety standards established by the Coalition and included in their inspection guidelines.
4. Common areas must be adequate for the number of residents in the home, and must be freely accessible to all residents.
5. The home must, to the extent possible, not give any outward indication that it is a sober living home. Exceptions include signage for homes in commercial zones, homes which are located in commercial or similar structures and homes which are not in single family residential neighborhoods.
6. Garages, outbuildings and similar structures, temporary structures and common areas may not be used as sleeping quarters.
7. Bedroom occupancy must conform to Coalition guidelines.
8. Bedroom and dwelling occupancy may not exceed the dwelling's legal capacity as defined by the town or city's fire and safety codes applicable to all residences in the neighborhood.

9. If the city, town or comparable jurisdiction in which the home is located imposes occupancy limits or other requirements which do not apply equally to all dwellings in the neighborhood regardless of the type of household, violation of such limits is not construed as a violation of this Standard.
10. Homes are expected to be responsive to neighbors' complaints with respect to secondhand smoke. Smoking areas must not abut adjacent property or allow excessive smoke to enter neighboring homes or yards.
11. Coed homes must have separate bathrooms for each gender, provide clearly separated living quarters and otherwise be suitable for a mixed population.
12. Parent/Child homes must provide suitable, safe play areas for children.
13. Parent/Child homes must ensure adequate supervision of children whose parents are absent from the home.

Section 2: Admission requirements, forms, documentation, record keeping and reporting

Sober living homes are first and foremost families of people in recovery, living together for mutual support. Appropriate admission guidelines ensure that residents are compatible, and that they are united by a desire to further their recovery from addiction. The application and admission process supports full disclosure to potential residents about their rights and obligations, and establishes a mutual understanding of the recovery goals of the home.

1. Applicants admitted for residence must suffer from, and be in active recovery from, at least one treatable substance use disorder including alcoholism and/or drug addiction, regardless of other addictions or behavioral health conditions from which they may also suffer.
2. All applicants must be able to engage independently in major life activities including eating, dressing, bathing and other activities consistent with independent living.
3. Applicants must have the firm intention of remaining clean and sober, and of actively engaging in a program of recovery.
4. Applicants must be assessed for their ability to become part of a harmonious home environment, taking into consideration the needs of individual residents and the character of the existing resident family.
5. Minors may not be admitted as residents in any home which also houses residents over the age of 18, except for minor children of parents admitted as residents of approved parent/child homes
6. Applicants must be fully informed of all fees and charges for which they will be responsible
7. Homes must disclose refund policies to applicants in advance of acceptance into the home, and before accepting any applicant funds.
8. Applicants must be informed about policies regarding abstinence, toxicology testing, recovery participation and other requirements.
9. Applicants must receive a complete written set of house rules and other requirements of residence.

10. Applications must include the name and contact information for person(s) to be contacted in case of an emergency.
11. Applicants must be advised of house policies on medications, and must explicitly consent to such policies before being accepted as residents.
12. Residents must be informed that the home is a family unit, and that they do not have personal property rights in any specific portion of the home.
13. Applicants must be informed of their rights to avail themselves of Coalition grievance procedures, including contact information for designated Coalition staff.
14. The Coalition will review the home's application and intake documents as part of the inspection process. The Coalition reserves the right to disapprove or request modifications to documents based on policies it publishes and distributes to members. The Coalition will maintain a family of pre-approved intake and related documents for optional use by member homes.
15. Applicant and resident records are confidential documents, and must be treated as such. All such records must be maintained in a secure and locked location either on or off premises.
16. Records maintained electronically must not be accessible to residents or others, except for those explicitly delegated with the authority to view such information.

Section 3: Abstinence, enforcement, testing

The heart of the sober living experience is the process of learning how to live a life free from drugs and alcohol. Requirements in this section support the important aspects of enforcing abstinence and of managing relapse situations. Other requirements ensure that toxicology screening is conducted in a consistent and fair manner by competent and trained individuals.

1. The home must document its disciplinary processes for residents who test positive for prohibited substances or who are otherwise determined to be in violation of abstinence rules.
2. The home must have and uniformly enforce a written toxicology testing protocol.
3. The home must document the training given to residents or staff responsible for administering toxicology tests.

Section 4: Resident rights to quiet enjoyment of home and premises

Residents are a family, and entitled to the peaceful enjoyment of their home and property. Homes serving both men and women must meet additional requirements to ensure the privacy and safety of their residents. Resident rights to utilize common areas must be consistent with the family nature of the household.

1. Bedroom doors must not have locks, except that a manager in residence, living in a private room, may have a lockable door.
2. Access to bedrooms may be limited to the room's residents.
3. Parent/Child homes serving women with children must not permit adult males to reside in the home.
4. Homes serving parents with minor children must be suitable for such purposes.

5. Access to areas of the home permitted to some residents must be permitted to all residents, with exceptions for designated office and confidential records location as noted elsewhere herein.
6. An office for administrative activities and records storage may be maintained in the home, may be locked, and may be off limits to residents except with permission.
7. Businesses unrelated to or inconsistent with the private residential character of the home may not be operated on the home's premises.

Section 5: Inspections

Regular inspections are part of ensuring, for residents and the public, that your home meets the high standards expected. Cooperation is essential to the proper functioning of the inspection and quality assurance process. These requirements ensure the smooth functioning of the inspection process, and clarify the scope of Coalition inspections.

1. The home must comply with Coalition inspection procedures, including reasonable requests for inspection of the premises and business documents as described in the Coalition's inspection guidelines.
2. The home operator must cooperate with Coalition inspectors in their investigation of complaints involving the home, including providing access to premises, records and persons involved in the dispute.
3. Inspections may include review of remediation steps taken to resolve disputes with either residents or community members.
4. A single gender home may not convert to co-ed without a Coalition re-inspection and certification that the home is suitable for a co-ed population

Section 6: House rules

House rules are an important component of a safe and supportive recovery environment. Homes take a variety of structural approaches in this regard. The Standard does not specify what rules a home may adopt and enforce. Rather it specifies elements which must be present in house rules. Prohibitions include weapons, physical violence, threats of violence, abusive behavior or language. These requirements apply to house rules generally, regardless of the form of home organization or the resident community.

1. Abstinence is required of all residents. Abstinence requirements are not violated for certain medications taken as prescribed by physicians aware of the resident's substance use disorder, and where such medications are consistent with the home's published medication guidelines.
2. House rules must be based on respect for the dignity of the individual.
3. Threats, antisocial conduct, lewdness and behavior which violates the principle of respect for the individual must be strictly prohibited, and the prohibitions must be strictly enforced.
4. All residents must be actively involved in self-directed recovery program activities.

5. Rights of residents to avail themselves of Coalition grievance procedures must be posted in a common area and easily readable by residents.
6. Resident use of marijuana, even with a doctor's prescription, is not permitted. Coalitions may review and approve requests for individual exceptions to this requirement on a case-by-case basis, and may impose additional resident testing requirements in cases where a waiver is granted.
7. Policies on resident medications must be written, disclosed to residents and strictly followed.

Section 7: Resolution of disputes, grievance processes

Prompt and effective dispute resolution is an important characteristic of a good home. Formal grievance procedures should be posted. Unresolved disputes and disagreements are detrimental to the recovery character of a home, and damage relations with the community.

1. In the event a resident is asked to leave the home, all reasonable efforts must be made to find alternative lodging, exception for immediate danger to health, safety and welfare of residents or the community.
2. The home must make arrangements with relocated residents for removal of personal possessions on mutually agreeable terms.
3. The home operator must make every reasonable effort to resolve resident disputes amicably and fairly.
4. Disputes between residents and either providers or staff must be resolved quickly and fairly whenever possible. Disputes which cannot be resolved within the family must be referred to the Coalition grievance committee.
5. The home must make all reasonable efforts to resolve neighborhood complaints brought to its attention.

Section 8: Community relationships and good neighbor policies

Homes are expected to make a positive contribution to the life of the neighborhood. Homes which cause problems for neighbors are not providing their residents with the living skills that are an integral part of the sober living experience.

1. House rules must foster behavior among residents which is respectful of neighbors and the community.
2. Excessive neighborhood or community complaints are evidence of poor home management, and will be considered as possible grounds for termination of membership privileges.
3. Residents must be given the contact information of a responsible party representing the home, and instructed that the information must be provided to neighbors upon request.
4. A responsible party representing the home must respond to neighborhood complaints within 12 hours of receipt of a complaint, even if it is not possible to resolve the issue immediately.
5. Rules regarding noise, smoking, and loitering must be responsive to neighbors' reasonable complaints.

6. In neighborhoods where street parking is scarce, homes must have and enforce rules regarding parking courtesy such that residents do not monopolize parking in areas immediately adjacent to the home.

Section 9: Ethical behavior, business practices

Ethical behavior toward residents and with the public is essential to maintaining the trust and confidence placed in your home. Residents in positions of authority, paid staff and provider representatives who have contact with residents have a special duty to conduct themselves with integrity and professionalism. All homes must sign and abide by a Code of Ethics. Homes must carry adequate insurance of the proper type, and must meet their financial reporting obligations to staff and contractors.

1. All staff with resident contact must be abstinent on premises and during work hours
2. The home is required to comply with local ordinances applicable to all comparable dwellings in the same neighborhood.
3. Staff who are in recovery must be and remain abstinent at all times, even if not a resident in the home.
4. Staff found to have violated abstinence regulations may not remain in positions of authority or responsibility in the home.
5. The home is required to comply with its Coalition code of ethics, and to be cooperative in Ethics Committee inquiries
6. Advertising and promotional material must not misrepresent physical accommodations, services offered or fees charged.
7. The home may not advertise that it provides treatment or other services for which a license is required, or the equivalent of such services.
8. Staff must never become involved in residents' personal financial affairs, including lending or borrowing money, or other transactions involving property or services, except that the home may make agreements with residents with respect to payment of fees.
9. Applications for new and renewal Coalition membership must be complete and truthful.
10. All staff is subject to toxicology testing on demand if requested to submit to testing by a Coalition officer. This requirement extends to any provider personnel who have regular resident contact.
11. Refunds consistent with the terms of a resident agreement must be provided within 10 business days, and preferably upon discharge.
12. The home must comply with reasonable requests by former residents to retrieve possessions left at the home. Personal possessions may not be retained to offset unpaid resident financial obligations.
13. Staff may not involve residents in outside business interests, except that information about opportunities for paid employment may be provided.
14. The home operator must, within 10 business days, inform the Coalition of any legal proceedings lodged against the home or against anyone in a position of responsibility or authority over

residents if such proceedings relate to or may reasonably affect the operation of the home.
When in doubt, disclose.

15. No staff member may be sexually or romantically involved with a resident.
16. Violence or threats of violence by staff members against residents are not permitted under any circumstances, either on or away from the property.
17. Home must maintain insurance of the correct type and with minimum stipulated coverage
18. Homes must furnish individuals who are compensated for services, whether as employees or contractors, with Federal and state tax reporting forms within 30 days of the end of each year.

Section 10: Activities and services

Activities should promote recovery and facilitate mutual recovery support among residents. Homes are encouraged to provide a variety of opportunities to engage in life-affirming recovery activities inside and outside the home. However, such activities should be voluntary on the part of residents to encourage independent living skills.

1. Home may not operate treatment programs for which a license is required. Homes affiliated with or under common ownership of organizations providing licensed treatment or mental health services may be Coalition members, provided that such licensed services are not provided in the home.
2. Weekly family meetings of residents are permitted and encouraged.
3. Residents may not engage in a trade or business based in the home which is not permitted in the neighborhood
4. Homes must ensure that residents are actively engaged in their self-determined programs of recovery.
5. Homes may promote activities inside and outside the home, provided that such services do not alter the family nature of the home.

Section 11: Training

It is important that all persons in positions of authority or responsibility in the home, whether they are residents, alumni, non-residents or persons affiliated with the provider organization, receive proper training. The Network provides regular training workshops at locations throughout Southern California to ensure that requirements can be met.

1. Homes must comply with Network training requirements. Regardless of the minimum requirements in place, it is strongly advised that anyone in a position of responsibility or authority in the home receives Network training.
2. When member or home staff changes such that Network training requirements are no longer met, the home must ensure that replacement staff receives required training.
3. The home must ensure that all staff, including resident staff, who administer toxicology tests are trained in the proper administration of such tests, and must document that such training was provided.

Section 12: Coalition participation, additional requirements, revision of this Standard

Good homes are active participants in their local Coalitions. Local Coalition rules dictate the majority of members' requirements and duties. Coalitions also have standards, which complement those detailed herein. Network and Coalition standards change from time to time. Homes may request waivers from some standards, under a formal process administered by the Coalition.

1. A member home must comply with meeting attendance, financial and other requirements established by their Coalition.
2. A member home may appeal adverse Coalition decisions against it to the Network Standards Committee if a home believes that the relevant Coalition regulation is in conflict with Network policy.
3. Homes may petition their Coalition for waivers from elements of this Standard, with certain exceptions.
4. Waiver requests must be in writing, must state the specific requirement or prohibition from which a waiver is requested, must clearly state the reasons for the waiver, and the amount of time for which the waiver is requested.
5. Waivers may not be granted from requirements for abstinence, abstinence verification, participation in resident-directed programs of recovery from addiction, behavioral and certain other requirements. Coalitions maintain and will provide detailed information about the waiver process.
6. Coalitions may impose additional requirements on their member homes, provided those requirements do not conflict with the requirements and prohibitions in this Standard.
7. Homes outside areas with existing, Network-affiliated coalitions may make independent application directly to the Network for membership.
8. This Standard is subject to change, and may be amended according to procedures established by the Sober Living Network in consultation with its affiliated Coalitions.