



## Statutory Requirements:

- **S. 397.487 (Voluntary certification of recovery residences) states:**

*All owners, directors, and chief financial officers of an applicant recovery residence are subject to level 2 background screening as provided under chapter 435. A recovery residence is ineligible for certification, and a credentialing entity shall deny a recovery residence's application, if any owner, director, or chief financial officer has been found guilty of, or has entered a plea of guilty or nolo contendere to, regardless of adjudication, any offense listed in s. 435.04(2) unless the department has issued an exemption under s. 397.4872. In accordance with s.435.04, the department shall notify the credentialing agency of an owner's, director's, or chief financial officer's eligibility based on the results of his or her background screening.*

- **S. 397.4871 (Recovery Residence Administrators certification) states:**

*All applicants are subject to level 2 background screening as provided under chapter 435. An applicant is ineligible, and a credentialing entity shall deny the application, if the applicant has been found guilty of, or has entered a plea of guilty or nolo contendere to, regardless of adjudication, any offense listed in s. 435.04(2) unless the department has issued an exemption under s. 397.4872. In accordance with s. 435.04, the department shall notify the credentialing agency of the applicant's eligibility based on the results of his or her background screening.*

**FARR is not the agency** responsible for processing and/or support of this mandatory background screening. All applications for a Level 2 background check must be sought directly through the Background Screening Clearing House. Those seeking a Level 2 Background Screening should visit the Department of Children and Families webpage dedicated to the procedure and use The Clearing House DCF/FARR **OCA# 09504796Z** when processing:

<http://www.dcf.state.fl.us/programs/backgroundscreening/>

Please reference [F.S. 397.4872](#) for further information regarding exemption; publication. Individual exemptions to staff disqualification or administrator ineligibility may be requested if a recovery residence deems the decision will benefit the program. Requests for exemptions must be submitted in writing to the department within 20 days after the denial by the credentialing entity and must include a justification for the exemption.

A 12-month grandfathering period from **April 1 2016-March 31, 2017** is provided to all owners and financial officers in order to facilitate this transition. Effective March 31, 2017, FARR will require all individuals who are mandated by Florida Statutes 397.487 and 397.4871 to upload evidence of successful completion of a level 2 background screening through the Portal on the FARR Website. **On that date**, any certified program who has failed to demonstrate compliance with this criteria as established by the state will be subject to immediate suspension and/or revocation of certification.

**NARR Quality Standard 5** reads **“Operate with Prudence”** as evidenced by:



***.04 Policies and procedures that ensure that background checks are conducted on all staff, including volunteers that have direct and regular interaction with residents***

FARR requires each operator to identify and evidence their internal policy, procedure and protocol for conducting background screenings on staff and volunteers who have contact with residents as a component of the documentation phase of the Voluntary Certification application. FARR refrains from prescribing a “one size fits all” approach to background screenings. Upon submission, FARR Certification and Compliance Administrators as well as FARR Field Assessors review the submitted policy and procedure and, when appropriate, consult the provider regarding any necessary enhancements.

**NARR Quality Standard 8** reads “**Support Housing Choice**” as evidenced by:

**.01 Applicant screening policies and procedures provide current residents a voice in the acceptance of new members.**

FARR requires applicants for Voluntary Certification to identify and evidence an internal policy, procedure and protocol for screening potential residents. This screening should, at a minimum, seek to identify the applicant is a candidate for inclusion in the priority population served by the community and that the support level offered meets the applicant’s needs. In some instances, this policy and procedure may include a protocol be established for resident background screenings. FARR relies on providers to determine whether resident background screenings be included in the programs policy and procedure, reserving the right to further consult providers should the identified priority population suggest the need for a resident background screening protocol.

Any program that choose to admit a registered sex offender must reflect compliance with state and federal requirements for this priority population. Any program that accepts persons who are under the Department of Corrections supervision must evidence compliance with state and/or federal requirements for this priority population.

All programs must comply with NARR Quality Standard 8.01 evidencing policies and procedures that empower the peers to voice **support for** and/ or **concerns with** acceptance of a new member in their community.