

Steps To Achieve Certification Compliance

Per FS.397.487 a Certified Recovery Residences must be actively managed by a Certified Recovery residences Administrator CRRA. A CRRA may not actively manage more than 50 residents at any given time unless written justification is provided to, and approved by, the credentialing entity as to how the administrator is able to effectively and appropriately respond to the needs of the residents, to maintain residence standards, and to meet the residence certification requirements of this section. However, a certified recovery residence administrator may not actively manage more than 100 residents at any given time. www.FLCertificationboard.org



Application/Payment: Application for FARR Certification begins by visiting our website to complete registration at https://farronline.info/home. The online application will walk you through completion of the program, staff and location(s) sections and requires electronic execution of the FARR Certification & Compliance Agreement. Within five (5) business days, you be contacted by the FARR Certification Administrator to complete the initial phone interview and immediately following this, an invoice for application and certification fess will be forwarded along with payment instructions. You will then have ten business (10) days to remit payment or your application for Certification will be Withdrawn you will need to reapply at a later date.



<u>Background Clearance:</u> Per FS.397.487 All owners, directors, and chief financial officers are required to submit for Level II Background Clearance. Once your screening is initiated you will receive an email from FARR with your LIVE SCAN Form for fingerprinting at the nearest LIVE SCAN provider. **ORI: EDCFGN10Z and OCA: 09504796Z**



<u>Compliance Documentation</u>: FARR will request by email all compliance documentation applicable for your NARR Support Level. **PLEASE NOTE**: Field Assessors do not schedule onsite visits until your program documentation has been found to be in compliance with NARR Quality Standards, Code of Ethics and all other requirements established by Florida s. 397.487. All documentation must be uploaded through the portal.



<u>Onsite Assessment:</u> Once all documentation has been found to be in compliance, a FARR Field Assessor will schedule the onsite compliance assessment. Each location operated by your program must meet compliance measures to achieve FARR Certification. We recommend Applicant programs conduct a "pre-assessment walk through" of each location to identify and correct any potential problems areas. Reassessment visits may necessitate additional fees.



<u>Compliance Review.</u> The Certification Administrator will review your application and the Field Assessor Report and may require approval by the FARR Compliance Committee before a Certificate of Compliance may be issued. Application, Documentation, Correspondence to and from Certification Staff and Onsite Assessment Reports are utilized when making final determinations.



<u>Core Trainings</u>: Owners, staff, and House Parents are required to complete mandatory FARR Trainings in order to remain in compliance. These training curriculums are available through <u>www.farronline.org/trainings</u> FARR Certified Recovery Residence staff are provided ninety (90) days from the issuance of a Certificate of Compliance to complete core trainings. Failure to complete core training curriculums within the allotted time may result in suspension and/or revocation of certification.

Торіс	MINIMUM REQUIREMENT			
	Please review the <u>Candidate Guide</u> : <u>Application Process</u> and the following CRRA standards and eligibility requirements for application. For the most current application and exam fees, please see the <u>Fee Schedule</u> posted on FCB's website.			
DCF Level 2 Background	Statute requires all applicants to pass a Level 2 Background Screening that is conducted thru the Department of Children and Families. FCB will initiate background checks for individuals seeking the CRRA credential.			
Screening	Regardless of if you have been previously approved for a FCB credential or DCF Level 2 Background, you must complete and return the <i>Clearinghouse Applicant Request Form</i> and <i>Privacy Policy Form</i> .			
Formal Education	High School Diploma or General Equivalency Degree. High School Diplomas or General Equivalence Degrees must be eligible for acceptance by colleges or universities holding nationally recognized accreditation through the United States Department of Education and/or Council on Higher Education Accreditation (CHEA).			
Content Specific Training	 Recovery Residence Operations and Administration: 20 hours Maintaining the Physical Residence: 20 hours Resident Screening and Admission: 10 hours Resident Recovery Support: 30 hours Legal, Professional and Ethical Responsibilities: 20 hours Eligible training must be taken from an FCB Approved Education Provider within the last 10 years (no time limit on college coursework taken as part of a degree program). FCB Eligible Training Guidelines and Providers are listed online on FCB's website www.flcertificationboard.org under Education & Training. Recommended training topics for each domain are listed at the end of this document. Content specific training and supporting documentation is submitted to the FCB by the applicant. Applicants must complete (1) the FCB Training Verification Form and (2) attach approved supporting documentation for each entry listed on the Form. 			
Related Work Experience	1,000 hours of work and/or volunteer experience providing related recovery residence administrator, manager or closely aligned residential management services within a recovery residence setting. Work and/or volunteer experience must be directly related to the core competencies of the credential and must have occurred within the last 5 years.			
On-the-Job Supervision	 10 hours of on-the-job supervision of the applicant's performance of related recovery residence administrator, manager, or residential management services within a recovery residence setting. Of the 10 hours, a minimum of 2 hours of supervision must be provided and documented in each of the following categories. 1. Recovery Residence Operations and Administration 2. Maintaining the Physical Residence 3. Resident Screening and Admission 4. Resident Recovery Support 5. Legal, Professional and Ethical Responsibilities 			

Торіс	Minimum Requirement
	For certification purposes, the FCB benchmarks reasonable and achievable supervision at the rate of 3 hours per week/156 hours per year.
	Supervision for the CRRA focuses on client interaction and improving a CRRA's skill set to effectively serve their client base. Eligible supervision can be individual, one-on-one supervision and/or observation of skills OR group supervision/case staffings.
	At least 50% of the hours of supervision must be individual, one-on-one supervision and/or observation of skills. No more than 50% of the required hours of supervision may be in a group setting.
	Qualified supervisors include the applicant's immediate supervisor or any other agency supervisors, trainers, mentors, quality assurance staff, officer or director of the agency/residential facility, and any other agency management or leadership staff assigned by the employer to provide supervision for certification purposes. If the applicant is working in a non-paid, volunteer capacity, the individual responsible for overseeing the applicant's volunteer staff is a qualified supervisor.
	Eligible on-the-job supervision occurred within the last 5 years.
Cross-Over Work Experience and On-the-Job Supervision	 An applicant for the CRRA may use experience from one of the following cross-over positions: Up to 500 hours as a CRSS. Remaining hours must be spent providing CRRA-level services in the domains of Recovery Residence Operations and Administration, Maintaining the Physical Residence, and Resident Screening and Admission. Up to 500 hours as a CRPS. Remaining hours must be spent providing CRRA-level services in the domains of Recovery Residence Operations and Administration, Maintaining the Physical Residence, and Resident Screening and Admission. No work hours as a BHT or other credential can be applied towards the CRRA application. On-the-Job Supervision hours can only be applied for the percentage of work experience approved.
Recommendations	Three (3) professional letters of recommendation for certification.
Please review the <u>Co</u>	andidate Guide: Examination and Credential Award and the following CRRA exam requirements.
Exam	Certified Recovery Residence Administrator Exam
Please review the <u>Co</u>	andidate Guide: Credential Maintenance and Renewal and the following CRRA requirements.
Continuing Education	10 hours per year. Training content must be related to at least one of the CRRA performance domains as indicated under Content Specific Training. Continuing Education (CE) credit hours must be non-repetitive (i.e., the same course cannot be claimed
	more than one time during each credentialed period, even if the course is taken annually).
Renewal	Annual, on June 30th of each calendar year.



Application & Payment

The following information is required to complete your application for certification

Organizational Data

- Legal Name of Business / DBA Name
- Corporate Address
- Company Phone Number Listed on Site
- Website

- # of Residences Operated
- Ownership in Licensed Healthcare Facility
- Ownership in Independent of Confirmatory Lab

Contact Data - Must include ALL Owners, Directors, CFO, Direct Staff

- First & Last Name
- Phone Number
- Email Address

- Title
- Credentials
- Previous Training Experience

Residence Data - Must include ALL locations operated by the organization

- Level of Support
- Residence "Name" or identifier
- Address
- Peer Leader/House Manager Name
- Type of Structure
- MAT Allowance?
- Priority Populations Served?
- Number of Units
- Residence Fee Schedule

- Number of Bedrooms
- Number of Bathrooms
- Total Number of Beds
- Property Ownership
- Gender Served
- Recovery Path
- Food Included?
- Date Established

***Invoices are sent after phone interview has been completed

Application Fee: \$100 ALL Levels of Support

Level I – II \$40 per bed CAPPED at \$2,500 per location Level III-IV \$100 per bed (For-Profit) CAPPED at \$3,500 per location Level III-IV \$75 per bed (Non-Profit) CAPPED at \$3,500 per location



Background Checks

All owners, directors, and chief financial officers of an applicant recovery residence are subject to level 2 background screening as provided under s. 408.809 and 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. 408.809(4) or s. 435.04(2) unless the department has issued an exemption under s. 435.07. Exemptions from disqualification applicable to service provider personnel pursuant to s. 397.4073 or s. 435.07 shall apply to this subsection. In accordance with s. 435.04, the department shall notify the credentialing agency of an owner's, directors, or chief financial officer's eligibility based on the results of his or her background screening.



All eligible staff must submit level II binders to background@farronline.org
FARR cannot accept previous determination letters but providers who have had their background performed in the last 5 years typically do not have to get re-fingerprinted.



Certification staff will initiate provider background check through the clearing house and email provider their individual livescan request forms along with a list of local livescan providers in the area. Fingerprinting must be done within 30 days of submission, or a resubmission would be required at the cost of \$15.00



The clearing house reports back to FARR the determination status typically within 14-30 days of fingerprinting. FARR emails determination letters directly to the individual. DCF also sends a paper letter to the registered address of the individual screened.



Individuals who are deemed ineligible by the Department may be eligible for an exemption pursuant to 397.4073 and 435.07. Exemptions can be filed at https://www.myflfamilies.com/service-programs/background-screening/exemption/

For More Information Contact FARR at 561-299-0405

............

DCF Background Screening Department 888-352-2849



Documentation Review

Instructions: Each of the following sections below represents their own individual documentation package. Please consolidate all listed items beneath each category as seen below and upload complete manual. Use the "Page #" and "Paragraph #" fields to specify where each of the following policies, procedures, and/or protocols are listed within your documentation manual. Each section should be considered a single upload. FARR Certification is a consultative process. Certification staff will assess provider documentation for compliance with NARR Standards and industry best practices and report back to providers necessary modifications to achieve certification compliance.

Program Do	Program Documents				
Page #	Paragraph #	Item	Requirement		
		Proof of Legal Business Entity			
		(Business License, Articles of Incorporation)			
		Marketing Materials			
		(Brochures, Flyers, etc.)			

Page #	Paragraph #	Item	
		Mission Statement	
		Vision Statement	
		Code of Ethics	
		Confidentiality Policy & Procedure	
		Resident Screening Policy & Procedure	
		Resident Orientation Policy & Procedure	
		Hardship Scholarship Assessment Policy	*if applicable
		Policies Concerning Paid Work to Residents	*if applicable
		Good Neighbor Policy & Procedure	
		Hazardous Items Search Policy & Procedure	

P&P Manual Continued			
	Emergency Policy & Procedure		
	Medication Storage & Use Policy & Procedure		
	Drug Testing and/or Toxicology Policy & Procedure		
	Reoccurrence of Use Policy & Procedure		
	Discharge Policy & Procedure		
	Grievance Policy & Procedure		
	Life skills Development Program Overview & Supporting Documentation (Level III & IV Only)		
	Maintenance Repair Policy		
	Financial Controls Policy & Procedure		
	Infectious Disease Control Policy & Procedure		

Staffing Documents				
Page #	Paragraph #	Item		
		Employee/Volunteer Background Screening Policy		
		Staff Certification & Verification Policy & Procedure		
		Staff Development Plan Policy & Procedure		
		Staff/Peer Leadership Job Descriptions		
		Staff Evaluation Policy & Procedure		
		Sample Staffing Weekly Schedule		
		Staff Wellness & Selfcare Policy & Procedure		
		Supervision of Staff Policy & Procedure		

Resident Orientation Handbook			
Page #	Paragraph #	Item	
		Resident Application	
		Confidentially Policy & Consent	
		Staff/Management Contact Sheet	
		Program Format (Phases, Stages)	
		Sample Resident Weekly Schedule	
		House Rules & Consequences	
		Good Neighbor Policy, Procedure, & Consent	
		Hazardous Items Search Policy & Consent	
		Medication Storage & Use Policy & Procedure & Consent	
		Drug Testing and/or Toxicology Policy & Consent	
		Reoccurrence of Use Policy & Procedure & Consent	
		Discharge Policy & Procedure & Consent	
		Emergency Policy & Procedure	
		Emergency/Non-Emergency Contact Sheet	
		Resident Rights & Requirements	
		Grievance Policy & Procedure & Consent	
		Grievance Form	
		Maintenance Repair Request Forms	
		Resident Lease and/or Guest Agreement (Financial Obligation Agreement) Community Resource Guide	
		Infectious Disease Control Policy & Consent	

Recovery	Support Doc	uments	
Page #	Paragraph #	Item	
		Any forms, documents, and/or guides used to mentor or monitor a residents participation in the development of their recovery plan	

Instructions: The following items are required for each of your locations and can be uploaded as separate documents.

Location Documentation			
Page #	Paragraph #	Item	Requirement
		Acknowledgement Letter from Property Owner	Only applicable for locations that are leased from a third party or related individual.
		Liability Cover Policy and any other insurance policies held by entity for this location	Levels I-IV
		Safety Self-Assessment Checklist	Levels I-IV
		Evacuation Map	Levels I-IV
		Copy of DCF Issued License	Level IV Only

For assistance with documenting your policies, procedures, and protocols prior to submitting to FARR visit:

https://www.farronline.org/ files/ugd/866278 648bd75982854d12b468f3eea0034558.pdf



Provider Self Assessment

90% of the onsite assessment is based on provider submitted policies & procedures and an assessment of staff/manager knowledge and practical application of such. 10% is based on "physical plant" The following checklist can be used to prepare you for the physical portion of the onsite assessment.

Smoke	Detectors/Fire Extinguishers	5	omoking
	There is one smoke alarm on every level		Residence is a smoke free living
	of the home and inside and outside each		environment.
	sleeping area.		Designated smoking areas are location
	Smoke alarms are tested and cleaned		outside on the residence (typically outback
	monthly.		as to not draw neighbors' attention to
	Smoke alarm batteries are changed as		home)
	needed.		
	Smoke alarms are less than 10 years old.		not tossed on ground.
	Functioning fire extinguishers are		
	mounted in plain sight and in clear		from items that can catch fire.
	locations		
		ı	proof container
Cookin	ng Safety	1	p
	Cooking area is free from items that can		Heating Safety
	catch fire.		Chimney and furnace are cleaned and
	Kitchen stove hood is clean and vented to		inspected yearly.
_	the outside.		Furniture and other items that can catch fire
	Pots are not left unattended on the stove.		are at least 3 feet from fireplaces, wall
	Kitchen, fridge, microwave, oven,, are		heaters, baseboards, and space heaters.
	clean of bacteria and mold		Fireplace and barbecue ashes are placed
	cream or succeria aria mora	,	outdoors in a covered metal container at least
	10.1	1	feet from anything that can catch fire.
	cal & Appliance Safety		
	Electrical cords do not run under rugs.		heaters.
	Electrical cords are not frayed or cracked.		Heaters are approved by a national testing
	Circuit-protected, multi-prong adapters		laboratory and have tip-over shut-off
	are used for additional outlets.		function.
	Large and small appliances are plugged	=	
	directly into wall outlets.		Home Escape Plan
	Clothes dryer lint filter and venting		Have two ways out of each sleeping room.
	system are clean.		Know where to meet after the escape.
	Appliances are in working order and in		(Designated meeting location)
	good condition.		Meeting place should be near the front of your
		1	home, so firefighters know you are out.
Rasida	ent Safety / FARR Compliance		
	Resident Rights & Requirements posted		
	Grievance Policy & Procedure posted		locations.
	Evacuation Maps are posted		
	Emergency Phone numbers are posted	*	***When Gas Appliances are present
	- · · · · · · · · · · · · · · · · · · ·		Carbon monoxide alarms are located on
	Emergency Procedures are posted and		each level of the home.
	staff/residents are trained on procedures		Carbon monoxide alarms are less than 7
		-	years old.