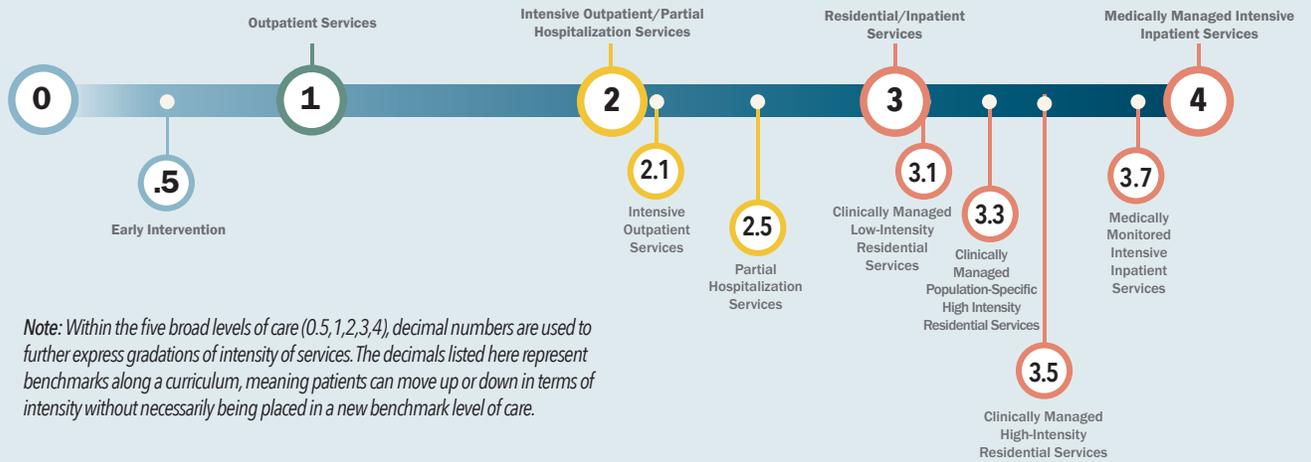




TREATMENT BEDS VS. RECOVERY BEDS

TREATMENT BEDS		RECOVERY BEDS
		
<p>Clinical</p> <ul style="list-style-type: none"> • <i>Accepts and bills insurance</i> • <i>Physicians, nurses, counselors, and case managers on site</i> 	<p>SETTING</p>	<p>Home-like setting</p> <ul style="list-style-type: none"> • <i>Residents pay rent</i> • <i>Clinical services are not offered on site</i>
<p>Short-term and based on medical necessity</p>	<p>LENGTH OF STAY</p>	<p>Long-term based on an individual's needs/recovery capital</p>
<p>Withdrawal management and stabilization</p>	<p>PURPOSE</p>	<p>Learning how to sustain recovery outside of a residential treatment facility; residents are able to work, leave for meetings, etc.</p>
<p>Intense, monitored 24/7, vital checks, more restrictive in rules, unable to leave for work, etc.</p>	<p>LEVEL OF SUPERVISION</p>	<p>Peer run, or peers along with credentialed staff</p>
<p>Licensed by the State</p>	<p>CERTIFICATION/LICENSING</p>	<p>Voluntary certification through West Virginia Alliance of Recovery Residences but no State licensing; offers four levels of support (see chart on the following page)</p>
<p>WVU Center for Hope and Healing, Prester's Pinecrest Programs, and Westbrook's Amity Program</p>	<p>EXAMPLES</p>	<p>Recovery Point, Life House, and Rea of Hope</p>

Reflecting a Continuum of Care



Note: Within the five broad levels of care (0,1,2,3,4), decimal numbers are used to further express gradations of intensity of services. The decimals listed here represent benchmarks along a curriculum, meaning patients can move up or down in terms of intensity without necessarily being placed in a new benchmark level of care.

Source: www.improvingmipractices.org/resources/encyclopedia/american-society-addiction-medicine-asam-levels-care

		RECOVERY RESIDENCE LEVELS OF SUPPORT			
		LEVEL 1 Peer-Run	LEVEL 2 Monitored	LEVEL 3 Supervised	LEVEL 4 Service Provider
STANDARDS CRITERIA	ADMINISTRATION	<ul style="list-style-type: none"> • Democratically run • Manual or policies and procedures 	<ul style="list-style-type: none"> • House manager or senior resident • Policy and procedures 	<ul style="list-style-type: none"> • Organizational hierarchy • Administrative oversight for service providers • Policy and procedures • Licensing varies from state to state 	<ul style="list-style-type: none"> • Overseen organizational hierarchy • Clinical and administrative supervision • Policy and procedures • Licensing varies from state to state
	SERVICES	<ul style="list-style-type: none"> • Drug screening • House meetings • Self-help meetings encouraged 	<ul style="list-style-type: none"> • House rules provide structure • Peer run groups • Drug screening • House meetings • Involvement in self-help and/or treatment services 	<ul style="list-style-type: none"> • Life skills development emphasis • Clinical services utilized in outside community • Service hours provided in-house 	<ul style="list-style-type: none"> • Clinical services and programming are provided in-house • Life skills development
	RESIDENCES	<ul style="list-style-type: none"> • Generally single family residences 	<ul style="list-style-type: none"> • Primarily single family residences • Possibly apartments or other dwelling types 	<ul style="list-style-type: none"> • Varies – all types of residential settings 	<ul style="list-style-type: none"> • All types – often a step down phase within care continuum of a treatment center • May be a more institutional environment
	STAFF	<ul style="list-style-type: none"> • No paid positions within the residence • Perhaps an overseeing officer 	<ul style="list-style-type: none"> • At least one compensated position 	<ul style="list-style-type: none"> • Facility manager • Certified staff or case managers 	<ul style="list-style-type: none"> • Credentialed staff

Source: narronline.org/wp-content/uploads/2016/12/NARR_levels_summary.pdf