

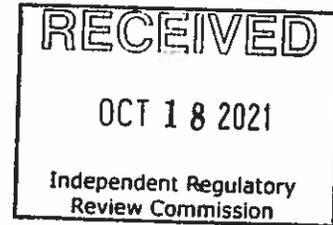
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COUNTY OF



ALLEGHENY

RICH FITZGERALD  
COUNTY EXECUTIVE



October 18, 2021

**RE: Comments on Regulation #74-4: Standards for Drug and Alcohol Recovery House Licensure**

Please find comments, questions and suggestions for clarification from Allegheny County's Department of Human Services, Office of Behavioral Health in comments below.

Comments on specific sections

- 709.136 House Manager - For most current Recovery Houses run across the commonwealth the term "House Manager" is almost always in regards to a person with lived experience who is helping preside over the recovery house community and is sometimes compensated for their duties with free rent. Perhaps House Administrator or House Superintendent or House Supervisor or some other title would be better. This should help avoid potential confusion as well as designate a difference between licensed and non-licensed recovery housing.
- 709.136 House Manager – The requirement to have 12 hours of training in the first 5 areas (Fiscal Policy to Program licensure) seems to be an unnecessary requirement for the reasonable duties of a recovery house manager. Training in the rest of the areas, as well as in safety trainings like overdose reversal, is certainly applicable and important for this position.
- 709.137 Fiscal management - DHS would require a certified audit once the funding reaches the \$750,000 threshold (Combined State and Federal) or \$500,000 State. However, DDAP currently state in their fiscal manual that if a provider is under these thresholds or if they are strictly fee for service no audit is required. Please see regulatory section 9.03.2, which shows this part of the draft is in conflict with current DDAP policy.
- 709.138 Personnel Management – the County does not currently require that any providers have these rigorous personnel management practices. While some of these checks are important, like clearances, requiring all of them is burdensome to providers.
- Part C that references trainings – naloxone or overdose reversal trainings are not listed. Should be a requirement for Narcan training.

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- Part D states that at least one person trained in CPR and first-aid must be onsite during hours of operation. Since people are living at these homes wouldn't that require 24/7 staffing and, therefore, the need to always have a person trained in CPR on-site at all times? Needs to be clarification on what "hours of operation" means in a residential facility.
- 709.141 b and 709.142 b are the same statement but are worded differently ("store" vs. "keep). Clarification is needed.
- 709.143 section also speaks to discharge/eviction but is not reflected in section title. Also, in this section, there are no expectations/standards for discharge procedures, connecting to housing resources, community supports, etc.
- Resident Orientation – doesn't speak to location of overdose (OD) reversal medication as residents may be first to respond to another resident experiencing an OD so they need to know as well.
- Basic personal data doesn't ask about any medical concerns. If the person is seizure prone, has asthma or something that may result in a medical emergency it may be helpful if it was known to the provider.
- 709.148 – Suggest procedures for notifying emergency contact if person is absent from facility for a prolonged period are added.
- 709.150 – It is not clear whether licensee is required to meet the applicable local occupancy and zoning requirements in advance of seeking licensure with the State.