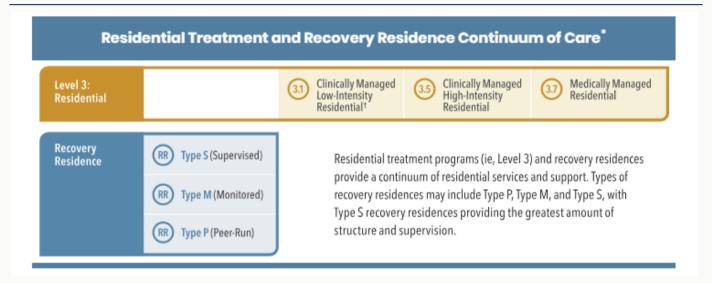
THE ASAM CRITERIA

THE FOURTH EDITION



The ASAM Criteria continuum of care now includes recovery residences, and the Dimensional Admission Criteria may recommend a recovery residence in addition to an outpatient level of care. ASAM worked closely with the National Association of Recovery Residences (NARR) to update these standards, including updating the NARR recovery residence nomenclature to better align with the treatment continuum.

LETTERS DESIGNATE RECOVERY RESIDENCES IN INTENSITY AND TYPE



LEVEL 3: RESIDENTIAL TREATMENT

- 3.1: Clinically Managed Low-Intensity Residential Treatment
- 3.5: Clinically Managed High-Intensity Residential Treatment
- 3.7: Medically Managed Residential Treatment

RECOVERY RESIDENCES (RR): CLINICAL, SUPERVISED, MONITORED, AND PEER-RUN

- A Clinical (C) RR uses a combination of supervised peer and professional staff and typically implements social model recovery care, most aligned with <u>The ASAM Criteria Level 3.1:</u> <u>Clinically-Managed Low-Intensity Residential Treatment</u>.
- A **Supervised (S) RR** has supervised, trained, and credentialed staff that delivers weekly structured and life skills development programming.
- A Monitored (M) RR is often referred to as a sober home or sober living, is free of alcohol and illicit substances and utilizes house rules and peer accountability to maintain a safe and healthy living environment. They can provide recovery support services and life skills development.
- A Peer-Run RR is free of alcohol and illicit substances and democratically run; Oxford Houses are the most widely known example.

NARR Type M NARR Type S NARR Type C* NARR Type P **Recovery Residence Types Bundled Services** Living environments free from alcohol Χ and illicit substances Mutual aid and social model milieu Х Recovery support services delivered Χ by professional staff[†] Life skills development programming Treatment services **Governance and Staffing**

Χ

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Χ

Recovery Residence Types

• RR Type C programs are a subtype of The ASAM Criteria Level 3.1 and should meet the service characteristic standards of clinically managed low-intensity residential treatment.

Democratically elected leaders

Appointed resident leaders and/or

Trained and/or credentialed peers

(Type S) or staff (Type C)

Supervised staff

managers

• **Text in bold** represents the primary differences between the two types of care. The unique addition of a governance structure within **RR Type C**, including resident leaders and/or managers, supports individual self-management skills and promotes each individual taking responsibility in the wider community.