



Government of
Northwest Territories

TRANSITIONAL HOUSING FOR ADDICTION RECOVERY PROGRAM STANDARDS MANUAL

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INTRODUCTION

Transitional Housing for Addiction Recovery Program (THARP) is a transitional housing program designed to provide a safe, stable environment for individuals who have completed an addictions treatment or recovery program. THARP serves as a supportive bridge for clients transitioning from a structured recovery program, back to community where they can practice the strategies they learned during treatment.

THARP programs delivered in the Northwest Territories are rooted in the following guiding principles:

- **recovery-oriented**, recognizing that recovery is a personal journey where individuals strive to reach their full potential.
- **relationship-based**, where relationships between individuals and providers are prioritized.
- **trauma-informed**, recognizing the impact that past and current experiences of violence and trauma have, and the influence they have on the lives and behaviours of individuals.
- **culturally safe practices**, where all individuals feel safe and respected, free of racism and discrimination when accessing programs and services.

The standards outlined in this manual identify the minimum level of service provision acceptable for publicly funded THARPs across the Northwest Territories. The *Transitional Housing for Addictions Recovery Standards Manual* provides the DHSS with a system-wide approach for strategic planning, funding, monitoring, evaluating, and reporting performance of THARPs. The DHSS will conduct THARP audits every two years for quality assurance purposes.

Where there is evidence of non-adherence to the standards, the DHSS may undertake one or more of the following actions:

- Negotiate terms and conditions with the service provider to re-establish adherence.
- Request that the service provider initiate remedial measures within a specified period.
- Initiate a service review and/or funding audit and evaluation.
- Suspend or terminate any existing agreement and enter into a time-limited agreement, as determined by the DHSS.
- Suspend or terminate any agreement by exercising the provision for termination as outlined in the agreement and decline to enter a new agreement with the service provider.

CULTURAL SAFETY

The DHSS recognizes that best practices are continuously evolving and that there are always opportunities for improvement in service provision. Therefore, these standards will be reviewed at least every three years. THARP's practices must reflect the most up to date version of the Transitional Housing for Addiction Recovery Program Standards. DHSS staff across the system are expected to always honour and promote a culturally safe and anti-racist environment and to interact with clients, families, community members, partners and colleagues in a relationship-based approach. This involves being tactful, respectful, self-aware, and humble to develop and maintain ongoing and trusting relationships.

In Canada, there is increasing awareness of systemic racism in



health and social services, especially against Indigenous people. In the NWT, the HSS system is focusing on cultural safety and anti-racism to address this problem through the 2016 commitment to action document, "Building a Culturally Respectful Health and Social Services System" and the 2019 document, "Cultural Safety Action Plan". Cultural safety means Indigenous people feel safe and respected, free of racism and discrimination, when using health and social services. To achieve cultural safety, anti-racism and relationship-based care -which is a way to build strong relationships between clients and providers - are necessary.

Cultural Safety is a key part of reconciliation between Indigenous and non-Indigenous Canadians. Addressing racist attitudes in health and social services systems across Canada is specifically addressed in the Truth and Reconciliation Commission's (TRC) Call to Action Report, the United Nations Declaration on the Rights of Indigenous Peoples, and as well as the Missing and Murdered Indigenous Women, Girls and 2-Spirits Inquiry's Calls to Justice. In addition, following an audit of addiction prevention and recovery services, the Office of the Auditor General's Report listed 14 recommendations for GNWT to implement with a work plan and timelines in place. One recommendation (#6) has requested: That the Government of the Northwest Territories conduct a whole-of-government review of cultural safety in all standards and policies associated with GNWT programs and services and provide a timeline for implementation. This review should identify barriers to cultural safety to inform efforts to remove or reduce identified barriers. In response to this directive, this Standard has been created to align with these recommendations, incorporating changes that reflect a commitment to enhancing cultural safety.¹

¹ Standing Committee on Government Operations. (2022). *Report on the Review of the 2022 Audit of Addictions Prevention and Recovery Services* (Report). Northwest Territories Legislative Assembly.

https://www.ntlegislativeassembly.ca/sites/default/files/legacy/scogo_cr - oagaddictions_report_v3.pdf

STANDARD 1 – LEGISLATIVE REQUIREMENTS

PURPOSE

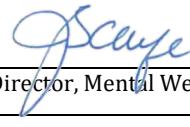
All THARP sites must comply with federal, territorial, and municipal laws and regulations. Failure to comply can result in penalties such as fines, criminal charges, imprisonment, or program closure. Relevant laws include, but are not limited to:

- Fire Prevention Act
- Human Rights Act
- Public Health Act
- Safety Act
- Health Information Act
- Access to Information and Protection of Privacy Act
- Societies Act

For more details, individuals can refer to the Legislation of the Northwest Territories.

CRITERIA

1. All THARP sites will comply with Federal, Territorial, and municipal laws and regulations, including:
 1. All necessary business insurances, licenses, and/or permits required under legislation.

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 2 – TRAINING

PURPOSE

THARP programming requires comprehensive training to address both the mental and physical health needs of residents. This includes training in mental health awareness, suicide assessment, prevention, and response, as individuals in recovery are often at higher risk for mental health crises, including suicidal thoughts and behaviors. Recognizing warning signs and providing timely intervention can significantly reduce the risk of harm. Providing support in a culturally safe environment helps build trust, fosters open communication, and creates a sense of safety, which is essential in mitigating the negative impacts of living with trauma. Additionally, naloxone administration and First Aid/CPR-C training ensure staff can respond effectively to overdoses and other medical emergencies, promoting resident safety. Ethics training is crucial to uphold dignity, confidentiality, and cultural safety, while reinforcing professionalism, accountability, and integrity in service delivery. The training also supports the program's commitment to diversity, equity, and inclusion, ensuring that all care practices are anti-racist and anti-oppressive. All of these standards can be met through a mandatory training plan, ensuring a holistic approach that improves outcomes and fosters a safer, more compassionate environment for recovery.

CRITERIA

1. All THARP sites will have and show evidence of implementation of a mandatory training plan for all volunteers and staff that at minimum must include:
 - Mental health awareness and support
 - Suicide risk screening, response and life promotion
 - Standard First Aid and CPR-C
 - Naloxone administration
 - Trauma Informed Care and Practices
 - Ethics and professional boundaries
 - Cultural safety (see: *Standard 3 – Indigenous Cultural Safety, Cultural Humility and Anti-Racism*)

REQUIRED DOCUMENTATION

Mandatory Training Policy

Mandatory Training Plan

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 3 – INDIGENOUS CULTURAL SAFETY, CULTURAL HUMILITY AND ANTI-RACISM

PURPOSE

THARP is committed to promoting Indigenous cultural safety and anti-racism in all aspects of care. Each site adopts a person-centered approach, recognizing the individual's family and community as integral to their support system. THARP provides collaborative, culturally informed care that prioritizes the well-being and dignity of Indigenous peoples. Acknowledging the harmful effects of anti-Indigenous racism, systemic discrimination, and health inequities, THARP is dedicated to confronting and dismantling systemic racism. Through cultural sensitivity and humility, the program fosters a collaborative environment that upholds the dignity and well-being of Indigenous peoples.

CRITERIA

1. All THARP sites will have and show evidence of implementation of policies and procedures to promote cultural safety, cultural humility and anti-racism through the inclusion of a site-specific Cultural Safety Plan, within the larger Mandatory Training Plan. The Cultural Safety Plan will at minimum, include:
 - Requiring all staff and volunteers to complete mandatory cultural safety training and education on Indigenous healthcare, cultural humility, and anti-racism.
 - Ensuring the Individualized Recovery Plan includes the co-creation and integration of Indigenous cultural values and practices, where appropriate.
 - Incorporating cultural safety into ongoing quality improvement and feedback processes, creating space for individuals to safely raise cultural safety concerns.

REQUIRED DOCUMENTATION

Cultural Safety Policy

Cultural Safety Plan, as part of the larger Mandatory Training Plan

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 4 – ADMISSION PROCESS

PURPOSE

THARP values fairness and equal access, which is ensured through a consistent admissions process. The process has two steps: 1) GNWT sets eligibility requirements to apply to THARP, and 2) Program-specific selection criteria are used to screen and assess applicants for suitability. The eligibility criteria set by GNWT remain the same for all THARP sites. However, each THARP site establishes its own screening and assessment criteria based on its unique resources and programming. Applicants must meet both sets of requirements—GNWT's eligibility criteria and the site-specific criteria—to be considered for THARP. Once accepted into the program, individuals will review a service agreement specific to their site. This agreement outlines roles, expectations, and responsibilities, supporting informed and voluntary decisions. The approach promotes fair, equitable access to transitional housing, sobriety resources, recovery skills, and long-term success.

CRITERIA

1. All THARP sites will have and show evidence of implementation of policies and procedures for a standardized, equitable overall admissions process that incorporates the following components:
 - Eligibility determination
 - Consent to receive services
 - Consent to share information
 - Screening and Assessment for suitability
 - Service agreement
 - Timelines for completing the admission process
 - Documentation and communication process for all screening and assessment decisions made

Eligibility Criteria

1. All THARP sites will use the following GNWT set eligibility criteria as part of their admission process:
 - The individual must be at least 18 years of age.
 - The individual must be a resident of the NWT and provide evidence of residency, such as but not limited to:
 - Letter from professional (social worker, counsellor, nurse, Indigenous Government, income assistance record)
 - Income assistance record, pay stub from an NWT based organization
 - NWT Health Care Card
 - The individual must be currently nearing completion of a substance use treatment program or have successfully completed one within the past three months of their application date. Provisional acceptance will be given to those currently attending a treatment program and finalized upon completion of treatment. Proof of completion may be obtained by the THARP Site as part of their screening and assessment process.
 - Substance use treatment programs could include, but not limited to:
 - GNWT Funded Treatment Centers
 - On the Land Addictions Based Programming
 - Privately Funded Treatment Centers or programming
 - NNADAP Facilities

Screening And Assessment

1. In addition to the GNWT set eligibility criteria, all THARP sites will have and show evidence of implementation of program specific criterion for screening and assessment process to determine program suitability, that includes:
 - Proof of treatment program completion (either physical or verbal confirmation is acceptable)
 - Clearly defined screening and assessment criteria that is used to determine and justify program admission or decline decisions
 - A transparent, consistent, and well-documented screening and assessment process.
 - All THARP sites may maintain a waitlist for admission with written policies and procedures for managing these.

Consent To Receive Services

1. All THARP sites incorporate Consent to Receive Services in their admission process. *See Standard: Consent to Receive Services.*

Consent To Share Information

1. All THARP sites incorporate Privacy and Information Sharing procedures into their admission process. *See Standard: Privacy and Information Sharing.*

Service Agreement

1. All THARP sites will have and show evidence of implementation of their own service agreements, which at minimum includes:
 - A clear explanation of THARP services, risks, and benefits, including occupancy agreements and room search policy.
 - The rights and responsibilities of both the individual and THARP staff, based on the Individual Rights and Responsibilities Standard.
 - Space for individuals to agree to the service agreement verbally, as per the Consent to Receive Services standard.
 - A clear process for how any concerns or disruptive actions will be addressed, including the process for program-initiated transition out of the program (*See Standard: End of Service and Aftercare Planning*)
 - How to provide feedback or raise concerns.

REQUIRED DOCUMENTATION

Admission Policy

Screening and Assessment Procedure

Forms related to the admission process, including but not limited to:

- Eligibility determination
- Screening and Assessment criteria
- Consent to Share Information Service Agreement

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 5 – CONSENT TO RECEIVE SERVICES

PURPOSE

Informed consent is essential to respecting an individual's rights and dignity. It ensures people are fully informed about the services, risks, benefits, and alternatives, empowering them to make decisions about their care. THARP staff will assume people engaging with or seeking information on THARP are participating with implied consent.

THARP staff will assume individuals can consent to services, but still must consider:

- How language, culture, worldview, historical trauma, and colonization may affect understanding.
- The need for a trauma-informed approach, recognizing that colonization, systemic racism, and trauma can create inequities, especially for Indigenous, newcomer, and marginalized individuals who may face pressure.
- The individual's capacity to understand relevant service information.
- The individual's ability to weigh the pros and cons of available services.
- That consent is an ongoing process, as competence may fluctuate, and regular check-ins are necessary.

CRITERIA

1. All THARP sites will have and show evidence of implementation of written procedures regarding consent to receive services, which include at minimum the following procedures to guide staff to:
 - Identify and assess consent capacity concerns with individuals who are unable to consent to receive services
 - Procedures to guide staff to support those who have guardianship or substitute decision makers in place, including any special documentation requirements

REQUIRED DOCUMENTATION

Consent to Receive Service Policy

Informed Consent and Capacity Assessment Procedure (if applicable)

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 6 – PRIVACY AND INFORMATION SHARING

PURPOSE

THARP staff are responsible for protecting individuals' privacy and maintaining confidentiality. Consent to share information, provided verbal or written, will be obtained before sharing personal information with others, including services or organizations. Consent is an ongoing process, not a one- time agreement. The individual leads their care, and staff will ensure their needs are met while respecting their rights and autonomy.

CRITERIA

1. All THARP sites will have and show evidence of implementation of written policies and procedures regarding confidentiality, consent and the sharing of information, including at minimum the following:
 - Dedicated space on consent forms to document that verbal or written consent was received, updated and/or withdrawn.
 - A process in place to ensure individuals are informed of their rights to privacy and confidentiality.
 - A communication tool to share with individuals their rights and limits to confidentiality, including:
 - Significant risk of harm to self or other
 - Report or suspicion of child maltreatment
 - Legal subpoena/Coroner's inquest
 - Operational administration (file audits)
 - Process for how individuals access their own information/records
 - Processes related to legal processes (subpoenas, Coroner requests, etc.).
 - Processes in place to protect individuals' information, including who can request information and how those requests will be responded to

REQUIRED DOCUMENTATION

Privacy and Information Sharing Policy
Release of Information Consent Form

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 7 – INDIVIDUAL RIGHTS & RESPONSIBILITIES

PURPOSE

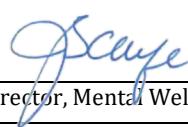
THARP is committed to respecting and protecting the rights, autonomy, and decision-making of individuals in the program. All THARP sites have procedures and communication tools to ensure individuals are informed of their rights and responsibilities. These tools are designed to be clear and accessible, considering language, literacy, and cultural needs.

CRITERIA

1. All THARP sites will have and show evidence of implementation of written communication tools that outline individuals' rights and responsibilities while living at THARP.
2. All THARP sites have written policies and procedures for individuals to appeal decisions made including:
 - A clear step by step appeal process, that covers:
 - Submission of appeals.
 - Review and response to appeals.
 - Documentation of appeal process and decisions made.

REQUIRED DOCUMENTATION

Individual Rights and Responsibilities Communication Tool Appeal Procedure

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 8 – ACCOMODATION

PURPOSE

Individuals returning from addiction treatment need a safe, sober environment that supports their recovery and helps them build on the skills they have learned. Stable housing through THARP is essential for their physical safety, emotional well-being, and long-term success in maintaining their sobriety goals.

CRITERIA

1. All THARP sites will have and show evidence of implementation of written policies, procedures or forms for:
 - Accommodation Policy, including:
 - A private room for each individual living at THARP
 - Provision of shared, accessible full washroom facilities
 - On-site laundry
 - Most daily meals provided
 - Transportation support
 - General household maintenance and management
 - Occupancy Agreement that outlines:
 - Expectations of individuals living at THARP
 - Staff responsibilities in supporting individuals
 - Parameters of length of stay
 - Steps to address issues and prevent eviction
 - Storage of personal and household items at THARP
 - Room Search Procedure, including:
 - Frequency and reason for room searches
 - The rights and responsibilities of staff and individuals
 - Procedure for Staff Use of Program Vehicle
 - End of Service Plans, See Standard: Aftercare
 - Eviction Procedure, including:
 - Eviction criteria
 - Eviction process (including supports available, timelines for leaving the premises)
 - Expectations and procedures to support individuals during eviction
 - Eviction appeal information and procedures

REQUIRED DOCUMENTATION

Accommodation Policy

Occupancy Agreement

Room Search Policy and Procedure

Program Vehicle Use Policy

Eviction Policy and Procedure

Appeal Policy, Procedures and any necessary forms

APPROVED:



Director, Mental Wellness and Addictions Recovery

STANDARD 9 – CRISIS MANAGEMENT AND INTERVENTION

PURPOSE

THARP recognizes that clear, effective protocols for managing emergent situations are crucial to the well-being of individuals in its care. This includes situations involving suicidal thoughts, escalating behaviors, and violent incidents. By providing structured response and intervention strategies, as well as clear documentation and communication protocols, this standard ensures that crises are addressed quickly and effectively, minimizing further harm. The purpose of these crisis management procedures is to reduce harm and help individuals better cope with distress, supporting their progress in recovery. Collaboration with mental health professionals and thorough follow-up care are key to helping individuals navigate high-risk situations, build resilience, and maintain long-term recovery and well-being.

Crisis situations include, but are not limited to:

- Loud, disruptive, or triggering behavior (unable to regulate)
- Physical, verbal, sexual aggression
- Threats toward others or staff
- Disclosure of suicidal thoughts, self-harm, or harm to others

CRITERIA

1. All THARP sites must have and show evidence of implementation of a written crisis management policy, including at minimum:
 - a. Suicide Response Protocol
 - b. Violent Situation Protocol
2. Each protocol must include:
 - a. Response and intervention procedures
 - b. Documentation requirements
 - c. Communication/reporting procedures
 - d. Follow up and collaboration with mental health professional/support network
 - e. Expectations for post-crisis follow up and coordination with mental health professionals/support network

REQUIRED DOCUMENTATION

Crisis Management Policy
Suicide Response Protocol
Violent Situation Protocol

APPROVED:



Director, Mental Wellness and Addictions Recovery

STANDARD 10 – MEDICATION AND MEDICAL SUPPORT

PURPOSE

THARP programs will provide individuals with safe storage, access and administration of medication. These standards outline the minimum requirements for medication and medical support. The DHSS acknowledges that Each THARP site has the potential to offer different supports based on their resources and expertise.

CRITERIA

1. All THARP sites will have and show evidence of implementation of written policy or procedure, based on site specific resources, including:
 - a. Training to address medication and medical/emergency needs, including:
 - i. First Aid
 - ii. CPR
 - iii. Naloxone administration.
 - b. Safe medication storage, access, and administration procedures (including self-administration), and support for personal medical supplies (e.g., glucometers).
 - c. Procedures for staff to assist individuals in seeking healthcare (e.g., 811 or primary care) and accessing emergency services (fire, ambulance, police).
 - d. Protocols for responding to medical emergencies (e.g., seizures, withdrawal symptoms).

REQUIRED DOCUMENTATION

Medication Policy and Procedure Medical Support Policy and Procedure Naloxone Policy and Procedure

Medication and Medical Forms as required to meet this Standard

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 11 – RECOVERY PROGRAMMING

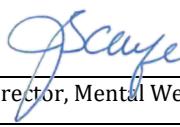
PURPOSE

THARP sites recognize that social and cultural connections are key to an individual's well-being and recovery, fostering healing through meaningful relationships and activities. With a holistic approach, THARP prioritizes unique connections between therapeutic supports with culture, family, and community over standardized programming. Recovery Programming will include the following values:

- **Co-creation:** Individuals and the program work together to create a personalized recovery plan, moving away from traditional "expert-led" approaches.
- **Cultural and Social Integration:** All programming will focus on connecting individuals to their culture, family, and community while respecting their cultural identity.
- **Individualized Approach:** Staff will develop flexible, person-centered plans tailored to each individual's goals and needs.
- **Holistic Support:** Activities will address spiritual, emotional, physical, and mental wellness, linking these aspects to cultural and social well-being.
- **Continuous Evaluation:** Regular assessments will ensure programming meets individual needs and supports recovery.
- **Collaboration with External Supports:** Staff will connect individuals to external and community-based resources to strengthen support networks beyond THARP.

CRITERIA

1. All THARP sites will have and show evidence of implementation of policies that ensure social and cultural connections are central to all programming. These policies must include, at a minimum, the following requirements:
 - a. Quarterly review and documentation that identifies programming available in these areas:
 - i. Cultural connections
 - ii. Community connections
 - iii. Therapeutic & Family supports

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 12 – RECOVERY PLANS

PURPOSE

Recovery plans guide person-centered, collaborative care, ensuring THARP staff meet individuals where they are in their recovery, respecting their unique needs and goals. Co-creating these plans empowers individuals to take control of their recovery and reinforces THARP's commitment to culturally safe, relevant person-centered and strengths-based care.

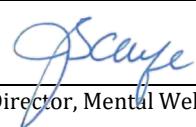
CRITERIA

1. All THARP sites will have and show evidence of implementation of their own Recovery Plan document, that at minimum includes:
 - a. Short-term and long-term goals with timelines, co-created by the individual and the THARP program.
 - b. Support needed to achieve these goals, including assistance connecting to health services, social services, or community resources.
 - c. Skills and strategies for maintaining sobriety.
 - d. Triggers, warning signs, and actions to take before a potential crisis escalates.
 - e. Identification of therapeutic, cultural, and community-based supports linked to the individual and their role in the recovery process.
2. All THARP sites will have and show evidence of implementation of their own Recovery Plan procedures, at minimum including:
 - a. Requirements for co-creation with the individual.
 - b. Requirements for file documentation.
 - c. Requirements for review timelines and processes that capture regularly scheduled reviews as well as events that may trigger the need for review (e.g., slips, setbacks).
3. All THARP sites will have and show evidence of co-creating a Recovery Plan with every individual at THARP, that must:
 - a. Be completed within 2 weeks of residing at THARP
 - b. Signed and dated by the individual

REQUIRED DOCUMENTATION

Recovery Plan Policy

Recovery Plan Document

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 13 – REPORTING INCIDENTS AND SERIOUS OCCURRENCES

PURPOSE

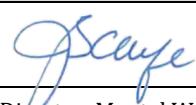
THARP believes incident and serious occurrence reporting is crucial for promptly addressing issues, enabling timely staff responses. Tracking incidents helps identify patterns, assess risks, and implement preventive measures, ensuring accountability, transparency, and continuous improvement. Reporting serious occurrences to DHSS allows for efficient responses to emergencies and supports THARP sites. Together, these reports foster a safe, secure environment, promoting trust and support for individuals in their recovery.

CRITERIA

1. All THARP sites will have and show evidence of implementation of written policies and procedures, at minimum including:
 - a. Procedures and documentation requirements for incident reporting
 - b. Incident Reports, at minimum must include:
 - i. Date, time and location
 - ii. Individuals involved
 - iii. Description of the occurrence
 - iv. Follow up actions or recommendations
 - v. Outcome of actions or recommendations
 - c. Procedures and documentation requirements for serious occurrences
 - d. Serious Occurrence Reports, at minimum must include:
 - i. Date, time and location
 - ii. Individuals involved
 - iii. Description of the occurrence
 - iv. Follow up actions or recommendations
 - v. Outcome of actions or recommendations
 - e. Serious occurrences & critical incidents must be reported to the DHSS designated contact via email within 24 hours. Serious occurrences include:
 - i. Death
 - ii. Disruptions in service where programming normally delivered is changed or interrupted (due to staffing issues, emergencies, etc.)
 - iii. Issues that may become a public concern (media or public involvement), such as incidents requiring emergency response.

REQUIRED DOCUMENTATION

Serious Occurrence Policy Serious Occurrence Reports

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 14 – END OF SERVICE & AFTERCARE PLANNING

PURPOSE

THARP understands that recovery is a continuous journey that requires ongoing, responsive support, particularly during transitions and aftercare. THARP ensures a smooth transition from treatment to post-THARP care by providing comprehensive support and connection to community-based resources, focused on effective transition planning, ensuring uninterrupted aftercare.

CRITERIA

1. All THARP sites will have and show evidence of implementation of written policies and procedures for ends of service, including aftercare plans for individuals as they transition out of THARP, that include:
 - a. A documented Aftercare Plan, that includes at minimum:
 - i. Previously successful areas in the individualized support plan, and the individual's plan for community-based supports.
 - ii. Consent to share information with community-based supports, as agreed on by the individual.
 - iii. Dedicated space for the logistics of moving out of THARP, including date, move out support needed and the condition of the room.
 - b. An exit interview and file closure form, that includes:
 - i. Type of service end – planned vs. unplanned, initiated by individual vs. initiated by program, reason
 - ii. Total length of stay at THARP
 - iii. Housing type they transitioned to:
 1. Market rent/independent housing
 2. Supported housing
 3. Family/friends
 4. Shelter system
 - iv. Support Based Questions:
 1. Did they feel supported to meet their goals?
 2. Do they feel THARP set them up for success?
 3. Additional data as requested in the Reporting Tool provided by DHSS

REQUIRED DOCUMENTATION

Aftercare Policy
End of Service Procedures
Aftercare Support Plan
File Closure Form
Exit Interview Document

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 15 – RECORDS MANAGEMENT & DOCUMENTATION

PURPOSE

THARP sites are committed to maintaining high standards of integrity in record-keeping. Accurate and thorough documentation is crucial for providing quality care, ensuring accountability, and supporting ongoing person-centered support for individuals. Good record-keeping helps staff coordinate care, track progress, and make informed decisions that best meet individual needs. It also ensures compliance with legal and ethical standards, fostering trust and transparency with those engaging with THARP services.

CRITERIA

1. All THARP sites will have and show evidence of implementation of written policies and procedures, including at minimum:
 - a. Protection of information in line with relevant laws, ethical standards, and organizational guidelines on privacy, confidentiality, and record management.
 - b. A records schedule for document storage, retention and destruction.
 - c. Secure storage for client files
 - d. Staff training in records management and documentation consistent with relevant legislation and ethical guidelines.
 - e. Clear policies or procedures outlining necessary file components, including:
 - i. Admission process documentation
 - ii. Consent to share information
 - iii. Service Agreement
 - iv. Recovery Plan
 - v. End of Service and After Care Supports

REQUIRED DOCUMENTATION

Records Management Policy, including Records Schedule

Documentation Procedures, as required in *Standard 5 - Admission Process, Standard 6 – Recovery Plan, Standard 11 – End of Service & Aftercare Planning*.

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 16 – EMERGENCY PLANNING

PURPOSE

THARP acknowledges that a comprehensive emergency plan is essential for safeguarding the well-being of individuals and staff. Recent natural disasters have severely impacted many NWT communities. Emergency planning must address fires, floods, and other disasters, as well as risks like frozen pipes that could cause displacement or disrupt access to essential utilities such as water and heat.

CRITERIA

1. All THARP sites must have and show evidence of implementation of a written emergency response plan for business continuity in the event of a natural disaster and/or other emergencies. Emergency management plans, must at minimum include:
 - a. An evacuation plan for safely leaving and relocating displaced individuals during emergencies (fire, flood, other).
 - b. Emergency Planning policies must follow all legislative requirements outlined in the Legislative Requirements Standard.

REQUIRED DOCUMENTATION

Emergency Management and Response Plan Evacuation Plan

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 17 – FEEDBACK AND QUALITY IMPROVEMENT

PURPOSE

THARP is committed to providing safe, effective, and high-quality services based on current research and best practices. THARP sites prioritize continuous improvement to enhance services, address concerns quickly, and strengthen relationships with individuals, families, and communities. These processes ensure that individuals have opportunities to engage in how services are delivered and received. They also support a safe, inclusive, non-judgmental environment that is free of racism and discrimination. Collecting and acting on feedback from individuals served by THARP is essential to promoting a culture of accountability, growth and improvement.

CRITERIA

1. All THARP sites will have and show evidence of implementation of written policies and procedures, that include at minimum:
 - a. Individuals are provided with information on how to submit confidential feedback.
 - b. The process for receiving and responding to feedback.
 - c. The process for implementing change based on feedback, such as informing program decisions, such as updating policies, staff training, or refining programs.

REQUIRED DOCUMENTATION

Feedback and Quality Improvement Policy

Feedback Procedures Feedback Form

Communication tool

APPROVED:

Director, Mental Wellness and Addictions Recovery

STANDARD 18 – ACCOUNTABILITY AND REPORTING

PURPOSE

Organizations are accountable to the DHSS for the safe, efficient, and effective delivery of all publicly funded THARPs. Data reporting ensures effective monitoring and oversight of THARPs territorially. Central to this commitment is the collection, documentation, and reporting of data to inform decision-making, evaluate programs, drive continuous improvement, and align services, programs, research, and training with the needs of NWT residents.

The DHSS will provide a data reporting tool that outlines data elements required for quarterly reporting.

CRITERIA

1. All THARP sites will provide quarterly data reports to the DHSS Designated Contact using the most up to date requirements outlined by DHSS reporting tool
2. THARP sites will provide additional data as requested by DHSS

REQUIRED DOCUMENTATION

Quarterly Report

Optional - Quarterly Reporting Tool provided by DHSS

APPROVED:

Director, Mental Wellness and Addictions Recovery

APPENDIX A – GLOSSARY OF TERMS

AFTERCARE: The essential care provided to a individual after they have participated in a treatment program or other service. Aftercare is designed to maintain outcomes achieved through other services, provide support and knowledge, and assist individuals in meeting their ongoing needs. The nature of aftercare services will vary from person to person and will build on the goals and progress made while the individual was accessing other services.

ANTI-OPPRESSIVE: Challenging and dismantling systems and structures that perpetuate discrimination, prejudice, and oppression.

ANTI-RACIST: Opposing racism and discriminatory practices, actively working towards creating equitable and inclusive environments.

COLLABORATIVE CARE: Staff work alongside individuals as active partners and participants in their care, as well as with those who have been identified as potential supports. This can include formal and informal supports as agreed upon by the individual.

CRITICAL INCIDENT: Refers to any event or situation that disrupts normal care, creates risks to safety, or affects the well-being of individuals living at THARP. This includes serious events like injuries, abuse, or less severe incidents such as unexpected behavioral issues, medication errors, conflicts between individuals, missing people, or damages to THARP home or premises. These incidents require attention, documentation, and follow-up to assess impact, ensure appropriate responses, and prevent future occurrences. Reporting these incidents is essential for continuous improvement in care and service quality.

CULTURAL COMPETENCY: Refers to the skills, knowledge and attitudes of staff members and reflects the process of building effective relationships with individuals of all cultures.

CULTURAL SAFETY: An outcome where people feel safe, respected, and free of racism and discrimination when accessing health and social services.

CULTURAL HUMILITY: A lifelong commitment to self-reflection, learning, and openness to understanding diverse perspectives and experiences. It involves recognizing one's limitations, biases, and power dynamics, and actively engaging in respectful dialogue and collaboration with others.

CO-CREATION: A collaborative process where individuals actively participate in designing and shaping their own care, treatment, or recovery plans, rather than having them imposed. It is rooted in the foundational understanding that people know what is best for themselves, their families, and their communities, not the experts. This approach challenges colonial standards of the expert-client relationship by leveling the playing field and recognizing the value and knowledge individuals hold within themselves. Co-creation places person-centered care at the forefront, ensuring services and supports are tailored to the individual's unique goals, values, and circumstances. It empowers individuals to take ownership of their journey, fostering dignity, autonomy, and a sense of partnership.

INDIVIDUAL: The individual who is receiving services from the transitional housing for addiction

recovery program.

INFORMED CONSENT: The process by which an individual learns about and understands the purpose, benefits, and risks of a service (including individual rights and responsibilities, limits to confidentiality, and alternative services), and then agrees to receive the service. This process enables individuals to make a decision regarding participation without coercion or deception. The individual is free to withdraw consent at any time without providing an explanation.

PERSON- AND FAMILY-CENTRIC CARE: An approach to healthcare and support services that prioritizes the unique needs, preferences, and goals of individuals and their families. It focuses on collaborative decision-making, empowering individuals to have a voice in their care, and fostering respectful relationships, rather than using a "one-size-fits-all" model.

RECOVERY-ORIENTED: A recovering-oriented approach is based on the belief that recovery is a deeply personal process and that each person has the right to determine what works for them. Recovery is about being able to live a meaningful and satisfying life, whether or not there continues to be ongoing symptoms or limitations caused by mental health problems, illnesses, or addictions.

RELATIONSHIP-BASED CARE: An approach that puts the needs of individuals and families first and results in a health and social services system that prioritizes relationships while removing barriers to achieving those relationships.

SERIOUS OCCURRENCE: Services refers to an event that has a significant impact on the safety, well-being, or normal operation of services. This includes:

Serious injuries

Deaths

Disruptions in service delivery due to fire, flood, or staffing issues

Any event that has the potential to attract public concern or media attention

These incidents require immediate reporting and investigation to ensure appropriate responses, mitigate risks, and maintain transparency and accountability.

TRANSITIONAL HOUSING: Time limited accommodation that provides a safe and supportive environment.

APPENDIX B - REFERENCES

British Columbia Ministry of Health. Provincial Standards for Registered Assisted Living Supportive Recovery Services. 2021.

Government of Northwest Territories. Community Counselling Program Standards Manual. Yellowknife: 2021. Government of Northwest Territories. Critical Incident Reporting Guidelines. Yellowknife. 2020.

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Ontario Federation of Community Mental Health and Addictions Programs. Addictions Supportive Housing Literature Review. 2013.

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