CONSUMER OPERATED SERVICES (COS)
FIDELITY REPORT

Date: November 23, 2016

To: Suzanne Legander, CEO

From: Georgia Harris, MAEd
             Karen Voyer-Caravona, MA, LMSW
             AHCCCS Fidelity Reviewers

Method

On October 18, 2016, Georgia Harris and Karen Voyer-Caravona completed a review of the Stand Together and Recover Centers (STAR) Central - a Consumer Operated Service Program (COSP). This review is intended to provide specific feedback in the development of your agency's services, in an effort to improve the overall quality of behavioral health services in Maricopa County.

STAR Central is one of three STAR locations in the Metro Phoenix Area, located at 2502 East Washington Street in Phoenix, Arizona. This facility is in close proximity to city bus routes and the Valley Metro light rail system and is open six days a week (with a reduced schedule on Fridays and Saturdays). The center is wheelchair accessible and equipped with multiple classrooms, a kitchen, showers and laundry equipment for member use, as well as an art room, food/clothing share, exercise room, library/quiet room, lounge areas, and a dining hall where daily meals are served.

The individuals served through this agency are referred to as members; for the purpose of this report, and for consistency across fidelity reports, the term "member" will be used. In addition, throughout this COS report, the term "people with lived experience" will be used to reference self-identified people with lived experience of recovery.

During the site visit, reviewers participated in the following activities:

- Tour of the center's facility, including observations of the classrooms, offices, group rooms, lounges, art studio, dining hall and reception hall;
- Interview with the Chief Executive Officer and Chief Clinical Officer;
- Review of the center's key documentation, including organizational documents, Articles of Incorporation, polices, annual reports, training materials, job descriptions, etc.;
- Focus group interview with four supervisory staff;
- Focus group interview with nine non-supervisory staff; and
- Focus group interview with six participating program members.

The review was conducted using the Substance Abuse and Mental Health Services Administration (SAMHSA) Fidelity Assessment/Common Ingredients Tool (FACIT) of the *Consumer Operated Service (COS) Evidence Based Practice Tool Kit.* Using specific observational criteria, this scale assesses the degree to which an agency's operation aligns with a set of ideal standards established for high-fidelity COS. The 46-item scale considers the agency's operations in 6 domains: Structure, Environment, Belief Systems, Peer Support, Education and Advocacy. Each ingredient is rated on a point scale, ranging from 1 (not implemented) to 5 (fully implemented with little room for improvement).

The FACIT was completed following the visit. A copy of the completed scale with comments is attached as part of this report.

Summary & Key Recommendations
The agency demonstrated strengths in the following program areas:
- STAR consistently maintains a high number of *Consumer Staff*. About 90% of STAR Central's staff are self-identified as people with lived experience. The remaining 10% are family members of people with a lived experience.
- STAR continually develops strong partnerships with businesses and other community/social service agencies. STAR uses these relationships to create educational and enrichment opportunities for its members.
- Members feel secure in their ability to contribute to the center through participation in groups and volunteering opportunities within and outside of the center building.

The following are some areas that will benefit from focused quality improvement:
- Though members and staff were in clear support of the center's rules, most people (from both groups) interviewed were either unclear of their source, or attributed their origins to senior executive staff. In addition to members voting on changes on the established rules, work to create a system where members and center staff are actively involved in the creation of rules and/or policies.
- The center has many accommodations to improve accessibility for members; however, staff was unable to confirm any accommodations for members who may be hearing or visually impaired who want to access to navigate center activities alone. Consider options for expanding accessibility for those who are hearing or visually impaired (i.e. TTD/TTY service, etc.).
- STAR offers various opportunities for job readiness activities; however, the participation rates in these programs remain relatively low. Continue to encourage participation in job readiness skills activities by educating members on the positive role employment plays in recovery.

FIDELITY ASSESSMENT/ COMMON INGREDIENTS TOOL (FACIT)

Ingredient #	Ingredient	Rating	Rating Rationale	Recommendations
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Ingredient #	Ingredient	Rating	Rating Rationale	Recommendations
Domain 1 **Structure**				
1.1 Consumer Operated				
1.1.1	Board Participation	1-5 4	The three STAR centers share one Board of Directors (BOD). Currently, there are nine board members. The board can be staffed with up to 16 members, but the CEO reports that an ideal-sized BOD consists of 12 members. Seven of the nine board members self-identify as persons with lived experience with mental illness and/or a co-occurring disorder. One board officer is a family member of a person with lived experience, and one is a professional community member.	• Though STAR's Board of Directors consists of members with a lived experience, continue working toward becoming fully staffed with a majority of self-identified members.
1.1.2	Consumer Staff	1-5 5	There is a total of 77 staff between the three STAR centers. At the STAR Central location, two of the 17 assigned staff members are identified as family members of persons with lived experience. All staff at the other locations are self-identified as persons with lived experience. Administrators are included in the staff count.	
1.1.3	Hiring Decisions	1-4 4	Members are responsible for most hiring decisions. When a candidate is selected for an interview, staff and a member delegate (often from the member counsel) participate in the interview panel. Center members may occasionally interact with interviewees, but their role in the interviewing/selection process could not be confirmed. However, if the center's membership is unhappy with a staff's performance, they are able to provide feedback to senior administrators. Staff and members report that all final hiring and firing decisions are made by the CEO (who is also self-identified as a person with lived experience)	

1.1.4	Budget Control	1-4 4	Members are responsible for development and control of the budget. Each year, the BOD approves each of the STAR centers for an allotment of money. Once approved, the member counsel and board liaison will meet to prioritize the center's needs based on the center's overall strategic plan and requests made by the membership through the suggestions box and/or the monthly member meetings. Staff reported that all member suggestions are considered, providing all members with the opportunity prioritize the submissions by voting during the monthly member meetings.	
1.1.5	Volunteer Opportunities	1-5 5	Staff estimated that over 90% of STAR attendees volunteer in some capacity. Outside of the center, members participate in volunteer opportunities in food banks, animal shelters, and soup kitchens. Inside the center, members also volunteer as Peer Leads, member counsel, Board Liaisons and co-facilitators for center classes. Each day, while signing in at the front desk, members sign-up for a daily chore. By volunteering for a chore, members earn STAR dollars, an in-center currency that can be used to purchase items and other privileges, as well as the opportunity to eat a hot lunch. Members stated that they felt the lunch privilege was appropriate and they were in favor of its current operation.	
1.2 Participant Responsiveness				
1.2.1	Planning Input	1-5 5	There are multiple avenues for STAR members to provide input on changes to the center and its activities. The STAR Board of Directors decides the amount of money allotted to each center for the fiscal year. Members meet with the member council to discuss their programming needs. The member council then meets with the board liaison to finalize items. The board liaison meets with the Board of Directors for final approval. If the Board	

			does not approve items, members are notified in the member meeting. Members are also invited to voice requests in the member meeting, the suggestion box, directly to the member council or to a staff member at any time. Members and staff gave examples of instances when members have engaged the center in this manner. (e.g. extending center hours).	
1.2.2	Member Dissatisfaction/ Grievance Response	1-5 5	Upon program entry, members participate in a center orientation class. Members are given a copy of the *Member Handbook*, which clearly outlines the grievance policy. Members interviewed demonstrated their familiarity with the handbook's policies by quoting relevant sections to reviewers. Members are also able to file a grievance with the Regional Behavioral Health Authority (RBHA) if they are dissatisfied with their services at STAR. STAR also has a partnership with Arizona State University (ASU) to provide member satisfaction surveys at intake and on a quarterly basis. ASU provides feedback and suggestions on program improvement practices.	
1.3 Linkage to Other Supports				
1.3.1	Linkage with Traditional Mental Health Services	1-5 4	STAR has strong relationships with multiple behavioral health clinics; however, clinical team involvement is not always reciprocated. Staff reported that their interactions with the clinics range from outreach for crisis-related situations to making follow-up calls to report member progress. It was also stated that case managers will come to the center to have lunch with members whom they are having trouble engaging. STAR also has a post-hospitalization discharge coordination program. Peer Support Specialists are on site at the hospital to assist with post-hospitalization wraparound care. STAR also does presentations at local clinics, where they share their range of services with teams and invite them	• Continue current efforts to improve coordination and communication with clinic agency partners. Continue to educate clinical and other traditional service providers on the programs STAR has to offer members.

			to visit their location. Though STAR has many strong connections, staff reported varying levels of consistency in the responsiveness from clinics. Staff reported instances where they had difficulty receiving return calls from case managers after multiple outreach calls.	
1.3.2	Linkage with Other COSPs	1-5 4	STAR reports linkages with other peer-run organizations in the RBHA. Annually, STAR participates in bowling and kickball tournaments with other centers. STAR also hosts the *Fun Bunch* - a community leisure activities group that is open for members of all the peer-run organizations to attend. The Fun Bunch has been in operation for many years and is rated by members as one of the best ways to connect with people from other centers. Though annual and quarterly activities are planned for members, there was little evidence to support that STAR leadership had regular contact or collaboration with the leadership of other COSs.	• Continue working to create regular opportunities to collaborate with other COS leaders in the RBHA. Consider working on jointly developed initiatives for member advocacy and support.
1.3.3	Linkage with Other Service Agencies	1-5 5	STAR has strong linkages with many community service agencies. STAR collaborates with some local hospitals for inpatient coordination and discharge coordination for RBHA members. STAR has ongoing collaboration efforts with St. Vincent De Paul and the St. Mary's food bank. At the time of review, STAR had recently hosted a fresh food market alongside Gregory's Fresh Foods for members. STAR has other community collaborative efforts with agencies and businesses such as Danzeisen Farms and the WHAM Art Association.	

Domain 2 Environment				
2.1 Accessibility				
2.1.1	Local Proximity	1-4 4	The STAR Central location is optimal for the majority of attendees. The results from member satisfaction surveys estimate that over 75% of all members live within two miles of the center.	
2.1.2	Access	1-5 5	Local members are able to access the center easily. The center is located in close proximity to the Valley Metro Light Rail system and a Valley Metro bus stop. Members who drive their own cars will find ample parking onsite. Members who do not take public transportation are able to receive a ride in company-owned vans. STAR will transport members within a ten-mile radius of the center. STAR provides transportation to scheduled events and also between all STAR locations for members participating in additional programming. Members also use the RBHA-contracted cab service for transportation when necessary.	
2.1.3	Hours	1-5 5	The center is open Monday through Thursday from 7:30am-6: 30pm, Fridays 7:30am-3:30pm, and Saturday from 7:30am-2:00pm. Each of the three STAR centers rotate being open for the holidays. The chosen center is not open on actual holidays, but is open on the days surrounding it. Members interviewed stated that the center is open during hours that are most needed by the membership.	
2.1.4	Cost	1-5 5	All programs at STAR are free of charge to members. Members earn STAR dollars for completing chores at the center. The STAR dollars can be exchanged for food share/clothing share privileges, and community trips that are more costly. Hot lunch is also earned by completing chores, but members are always welcome to eat sandwiches provided by the center regardless of	

			participation level.	
2.1.5	Accessibility	1-4 3	The center has accessibility features; however, some improvements can be imagined. The center has a larger font computer for visually impaired members. The center is equipped with an elevator, and the hallways can accommodate two wheelchairs passing in opposite directions. The center uses the RBHA language line for translation services. STAR also has a sign language translator. When asked about the TTY/TTD for members who are hearing impaired, staff could not confirm that the center was equipped with the service.	• Consider options for expanding accessibility for those who are hearing or visually impaired (i.e. TTD/TTY service, etc.). Consider options for braille, PA system, and other accommodations.
2.2 Safety				
2.2.1	Lack of Coerciveness	1-5 4	STAR encourages members to regularly participate in their programs. Members report that new members are expected to participate "right away". Though members report a swift participation rate, they attribute this to supportive engagement efforts by the staff who respect the pace by which members choose to become involved. Members also report that the swift participation rate helps members to acclimate to the center faster.	• Though most members are comfortable with the pace of participation, work towards creating an environment where members feel absolutely no pressure to participate in center programs.
2.2.2	Program Rules	1-5 3	STAR members help to keep each other accountable to the center guidelines. Members report that all new members attend an orientation class to learn the center's rules. Both the staff and members report that STAR's administration creates the center rules, but the members have the opportunity to vote for amendments as needed. Staff does not require participation in center programs; however, in order to receive the hot lunch/dinner option, members must participate in at least one group and complete one chore. Most members support the lunch rule because they believe the hot lunch	• Work to create a system where members are actively involved in the development and modification of rules and/or policies.

			is an earned privilege.	
2.3 Informal Setting				
2.3.1	Physical Environment	1-4 4	The physical environment of the STAR central location is both orderly and inviting. Multiple classrooms and lounge areas are available to accommodate the center's group/activity schedule. The furnishings are comfortable and attractive; all rooms and bathrooms are spacious and accommodating.	
2.3.2	Social Environment	1-5 4	The members at STAR enjoy a positive environment, and they believe that staff respects them. Members report that staff is available at anytime to speak in a one-on-one setting. Staff are primary facilitators for center groups, however, members are able to co-facilitate with them. Center staff offices are open to members at any time; however, the reviewers were unable to compare the administrative offices because the leadership staff does not have offices onsite.	• STAR should designate an office/workspace for agency leadership onsite. Members should have equal access to all employees of the center.
2.3.3	Sense of Community	1-4 4	Members at STAR have a strong sense of community. Center Ambassadors are assigned to new members to help them to acclimate to STAR's culture. Many members discussed how STAR has helped them to improve socially. Members interviewed also described their relationships with each other as "tight knit" and "very close".	
2.4 Reasonable Accommodation				
2.4.1	Timeframes	1-4 4	Per members and staff interviews, timeframes for participation are set by the individual; staff check-in with members and seek to understand the participation from that person's point of view. For some members, leaving one's apartment to sit in the dining room with a dozen new faces is as significant a step toward recovery as is co-facilitating an art group for another member. Staff reported that clinical teams are not contacted	

			when a member's participation is lacking; instead staff seek feedback from the member, further clarifying his or her needs, goals, and values. Clinical teams are contacted for crisis and coordination of care concerns.	
Domain 3 **Belief Systems**				
3.1 Peer Principle				
3.1	Peer Principle	1-4 4	Staff and members report mutual and equal levels of self disclosure with each other. Members reported that staff are open, but are careful to share only stories that are relevant to the members' situation. Some staff also shared experiences where they have revealed personal stories with members.	
3.2 Helper Principle				
3.2	Helper Principle	1-4 4	Most STAR members interviewed felt confident in their ability to help other members at the center. Each member was able to share examples of when they have helped another peer in need. Members shared instances of helping fellow members to establish Facebook accounts; working with each other on completing chores; and helping members with mobility issues within the center.	
3.3 Empowerment				
3.3.1	Personal Empowerment	1-5 5	All members interviewed reported improved levels of confidence, personal empowerment, and social stability since attending the center. Members expressed that their involvement with the program has helped to improve self-confidence levels, renewed self-worth, and the security of having a stable, consistent social group.	
3.3.2	Personal Accountability	1-5 5	Members are expected to be personally responsible for their behaviors and actions while at the center. Members interviewed are familiar	

			with the program structure and rules, with most being able to recite the consequences for breaking center policies. Many members expressed confidence in their ability to self-manage and to hold other center members accountable for their actions.	
3.3.3	Group Empowerment	1-4 4	Members interviewed reflected intense feelings of membership and acceptance within the STAR program. Members felt secure in their ability to contribute to the center through participation in groups and volunteer opportunities. Members felt affirmed within the center, and many gave examples of opportunities to extend beyond the center and into the larger community (e.g., center members deciding to independently visit ill members at the hospital).	
3.4 Choice				
3.4	Choice	1-5 5	Members have various daily groups/classes to choose from. The weekly group schedule is located in the dining hall of the center. Members are able to identify the group and group facilitator by a color-coding system. In addition to hourly groups, members can choose from other offsite activities as scheduled. If members would like to see a new group implemented, they may present it to staff and/or the member council. Members have the ability to shape discussions within the established groups, and any member is eligible to co-facilitate a group.	
3.5 Recovery				
3.5	Recovery	1-4 4	STAR staff and members identified the principles of recovery as the central theme and focus of all the STAR programs and activities. All staff and members interviewed articulate the recovery oriented language (e.g., recovery is possible, based on personal choice and agency, based on strengths, reflective of the person's unique	

			vision), and describe how they are implemented in their lives, and the lives of those around them.	
**3.6 Spiritual Growth**
3.6	Spiritual Growth	1-4 4	STAR implemented a *Spirituality* group for members. Staff and members report that the group is focused on spiritual growth instead of religion. Members felt the group provided an opportunity to discuss their beliefs and how their beliefs were related to attaining/maintaining recovery.	
**Domain 4** **Peer Support**
**4.1 Peer Support**
4.1.1	Formal Peer Support	1-5 5	There are multiple formal peer support activities at the STAR Central location. New members are assigned program ambassadors to help them acclimate to the center culture. Members also benefit from scheduled classes such as *Positive Affirmations*, *Self-Esteem*, and *Building Support*. Staff and members also described the frequently scheduled outings as consistent opportunities to provide support for each other.	
4.1.2	Informal Peer Support	1-4 4	The center provides multiple opportunities for members to give and receive informal peer support. Prior to all scheduled group activities, members are given time to have discussion with each other. The members gave examples of helping each other privately or in informal groups. Both staff and members described the relationships between members to be "like family"; members show support in very sincere and compassionate ways.	

			4.2 Telling Our Stories	
4.2	Telling Our Stories	1-5 5	STAR incorporates opportunities for members to share their stories in the groups offered on the center calendar (e.g., *Sharing Your Personal Recovery Story).* Members and staff report that some members prefer to share in more intimate, one-on-one settings. STAR staff also noted recent opportunities members had to share their talents and perspectives with their community (e.g., clinical all-site meetings, teaching for graduating peer classes, etc.)	
4.2.1	Artistic Expression	1-5 4	The STAR Central location is equipped with adequate supplies to engage in multiple artistic mediums, such as fused glass, molds, and ceramics. STAR provides members with a variety of opportunities to develop their artistic skills and to share their work with the community. Members can sell their jewelry, ceramics, and other pieces in local art shows hosted by STAR. The STAR group schedule also indicated that a poetry group was made available to members. Members were satisfied with the resources and entrepreneurial opportunities afforded though the art program; however, few could articulate how their art helped them to share their stories with others. The center also has members' artwork prominently, throughout the building.	• Educate members on how to improve their personal connections to their artistic expressions, helping them to find personal meaning and support in their recovery.
			4.3 Consciousness Raising	
4.3	Consciousness Raising	1-4 3	STAR provides members with announcements and invitations to local meetings/events connected to the peer movement. Though most members interviewed were unaware of the *peer movement* itself, many were familiar with groups such as NAMI. Members also expressed that they feel most connected to the peer group at the center. When asked how they contributed to the peer community at large, a few members gave	• Continue to encourage and help members to participate as contributors to local peer-driven, consciousness raising activities (e.g. candlelight celebration, NAMI meetings, etc.)

			examples of how they are beginning to branch off into other segments of the community.	
4.4 Crisis Prevention				
4.4.1	Formal Crisis Prevention	1-4 4	STAR provides numerous formal opportunities to address the crisis prevention needs of members. STAR provides an *Action Planning* class as the main source for formal crisis prevention at the center. The *Action Planning* class is based in the *Wellness Recovery Action Planning* (WRAP) model. STAR also provides groups such as *Stress Management* and *Cognitive Restructuring* to help members develop coping skills for difficult times. If a situation with a member becomes escalated, staff will attempt to provide one-on-one attention, when appropriate. If staff are unable to de-escalate a member in need, staff will contact the clinical team and/or local authorities, such as police.	
4.4.2	Informal Crisis Prevention	1-4 4	Staff and members described multiple informal crisis prevention techniques. Members said they felt comfortable speaking with staff about potential concerns at any time. Though one-on-ones with staff were identified as the primary method of informal crisis prevention, staff described other techniques such as: conversation, going for walks around the center, and guided deep breathing with members.	
4.5 Peer Mentoring and Teaching				
4.5	Peer Mentoring and Teaching	1-4 4	Staff and members were able to identify people in the program they relied on for support and encouragement. Members felt comfortable relying on other members as much as staff for guidance, support and companionship. Staff also spoke of ways that members regularly inspire them to make improvements in their own lives.	

			Domain 5 Education	
			5.1 Self Management/ Problem Solving Strategies	
5.1.1	Formally Structured Problem-Solving Activities	1-5 5	STAR provides members with a robust calendar of groups/classes, many focused on problem-solving activities. Some of the most popular classes are curriculum based, such as *Action Planning*, *Relapse Prevention,* and DB101. Staff reported that more than 75% of members participate in these sessions.	
5.1.2	Receiving Informal Problem-Solving Support	1-5 5	All members interviewed reported receiving informal problem solving support from fellow center members and staff. Members recalled situations where staff and fellow members have helped them to de-escalate personal situations using verbal techniques, coping skills, and action planning.	
5.1.3	Providing Informal Problem Solving Support	1-5 5	All of participants interviewed indicated they have provided problem-solving support to other members. All members interviewed felt they have acquired skills through the program that are useful and relevant in helping other persons in need.	
			5.2 Education/Skills Training and Practice	
5.2.1	Formal Practice Skills	1-5 5	The center has a well-established group calendar, filled with opportunities to learn and practice communication, assertiveness and daily living skills. Agency leadership estimated more than 80% of members attend daily groups. Outside of the center, members participate in volunteer opportunities in food banks, animal shelters, and soup kitchens.	
5.2.2	Job Readiness Activities	1-5 3	STAR provides opportunities for members to engage in job readiness activities. STAR has an offsite location that offers job readiness activities such as resume writing, food handler's card certification, and interviewing skills. Members	• Continue to encourage participation in job readiness skills activities by educating members on the positive role employment plays in recovery. Consider inviting working members to share their stories about the

			who are not interested in visiting the offsite location may receive similar help from onsite staff, often in the computer lab. Staff often assists members with pre-job search skills (e.g., setting up an email address). Though STAR provides job readiness activities, the estimated member participation rate was slightly over 25%. Some staff attributed the participation rate to the large number of members who "prefer to work on their recovery rather than getting a job".	benefits of employment.
Domain 6 **Advocacy**				
6.1 Self Advocacy				
6.1.1	Formal Self Advocacy Activities	1-5 5	Both member and staff groups report that most STAR members participate in formal self-advocacy activities. Most members learn self-advocacy in scheduled center groups such as *Conflict Resolution* and *Self-Advocacy.* Members described instances where they have been coached by staff on appropriate ways to discuss concerns with clinical team staff and other agencies.	
6.2 Peer Advocacy				
6.2	Peer Advocacy	1-5 4	STAR members participate in peer advocacy efforts. Many members reported that the center helps them access local peer advocacy events such as the NAMI walk and the Candlelight Celebration. Though members are involved in formal peer advocacy, some members still rely more heavily on assistance provided by staff. Members often schedule appointments with staff for special assistance with advocacy concerns such as entitlement issues, medical concerns, and behavioral health needs.	• Coach and train members who have a functional expertise in advocacy issues and/or have received assistance with advocacy issues, so they may be asked to assist fellow members with similar concerns.
6.2.1	Outreach to Participants	1-5 4	STAR uses multiple channels as outreach to members. For physical copies of flyers and other pamphlets, STAR maintains information tables in the center's foyers and at the front desk. The	• Consider expanding outreach efforts using social media outlets to keep members informed of center updates. Formalize the agency process for members and/or staff to

			information pamphlets are often from community agencies and support services. Members can locate the weekly groups/classes calendars on the walls of the dining hall. STAR has a website that is equipped with center information, downloadable registration forms, and the center's programming schedule. Members who are "out of contact" with the center may receive an outreach call from members or other staff. No evidence of a targeted outreach or social media program/promotion was identified.	outreach and engage members who stop attending the program.

FACIT SCORE SHEET

Domain	Rating Range	Score
Domain 1: Structure		
1.1.1 Board Participation	1-5	4
1.1.2 Consumer Staff	1-5	5
1.1.3 Hiring Decisions	1-4	4
1.1.4 Budget Control	1-4	4
1.1.5 Volunteer Opportunities	1-5	5
1.2.1 Planning Input	1-5	5
1.2.2 Dissatisfaction/Grievance Response	1-5	5
1.3.1 Linkage with Traditional Mental Health Services	1-5	4
1.3.2 Linkage to Other Consumer Operated Services Program (COSPs)	1-5	4
1.3.3 Linkage with Other Services Agencies	1-5	5
Domain 2: Environment	Rating Range	Score
2.1.1 Local Proximity	1-4	4
2.1.2 Access	1-5	5
2.1.3 Hours	1-5	5
2.1.4 Cost	1-5	5
2.1.5 Accessibility	1-4	3

		Rating Range	Score
2.2.1	Lack of Coerciveness	1-5	4
2.2.2	Program Rules	1-5	3
2.3.1	Physical Environment	1-4	4
2.3.2	Social Environment	1-5	4
2.3.3	Sense of Community	1-4	4
2.4.1	Timeframes	1-4	4
Domain 3: Belief Systems		Rating Range	Score
3.1	Peer Principle	1-4	4
3.2	Helper's Principle	1-4	4
3.3.1	Personal Empowerment	1-5	5
3.3.2	Personal Accountability	1-5	5
3.3.3	Group Empowerment	1-4	4
3.4	Choice	1-5	5
3.5	Recovery	1-4	4
3.6	Spiritual Growth	1-4	4
Domain 4: Peer Support		Rating Range	Score
4.1.1	Formal Peer Support	1-5	5
4.1.2	Informal Peer Support	1-4	4
4.2	Telling Our Stories	1-5	5
4.2.1	Artistic Expression	1-5	4

	Rating Range	Score
4.3　　Consciousness Raising	1-4	3
4.4.1　Formal Crisis Prevention	1-4	4
4.4.2　Informal Crisis Prevention	1-4	4
4.5　　Peer Mentoring and Teaching	1-4	4
Domain 5: Education	Rating Range	Score
5.1.1　Formally Structured Activities	1-5	5
5.1.2　Receiving Informal Support	1-5	5
5.1.3　Providing Informal Support	1-5	5
5.2.1　Formal Skills Practice	1-5	5
5.2.2　Job Readiness Activities	1-5	3
Domain 6: Advocacy	Rating Range	Score
6.1.1　Formal Self Advocacy	1-5	5
6.1.2　Peer Advocacy	1-5	4
6.2.1　Outreach to Participants	1-5	4
Total Score	**194**	
Total Possible Score	**208**	