



# Standards for lived experience recovery organisation community groups and providers

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## 1. Background and purpose

The College of Lived Experience Recovery Organisations (CLERO) formed in 2020 when a group of recovery leaders and advocates came together to:

- identify and learn from innovation in lived experience recovery organisations (LERO) community provision
- champion the value of and evidence for LERO community provision

The CLERO:

- has a nationwide membership of LEROs
- facilitates LERO networking and learning opportunities
- advocates for the critical role of LERO community groups and providers in reducing harm, supporting treatment engagement and outcomes, and strengthening recovery with policymakers, service providers and commissioners

These standards have been developed for:

- LERO community groups and providers
- commissioners
- funders such as grant-making trusts and foundations
- policymakers

They will help to:

- guide LERO community groups and providers looking to develop and sustain their model
- review current practice and identify areas for development
- provide ways in which to evidence and quality assure practice

This guidance will also help LERO community groups and providers to prepare for any bidding for funding.

We are aware that there are many peer-led organisations working to support recovery and are proud to be part of a family of peer-led organisations doing this good work. We are also aware of 'living' experience initiatives in which people currently affected by their own or a family member's problem alcohol or drug use offer peer-to-peer support. This can include, for example, peer-to-peer naloxone provision and hepatitis C testing.

We value the role of treatment services in initiating some people's recovery and the support that they may provide to people in early recovery and beyond. We promote and recognise people's right to choose their own recovery pathway whether or not that includes treatment. This is why we promote and help people to access support including treatment, mutual aid, faith groups, wraparound services, community groups and other specialist/culturally appropriate support. We take our role in protecting a person's health seriously and always support them to seek treatment and other health and care services as appropriate. Treatment services also have a responsibility to support the people that they treat to access recovery support services, LEROs and other peer-led support such as mutual aid to help people sustain recovery long term.

**Our work and these standards focus on lived experience-led community groups and providers who provide direct support in local communities.** This support is typically free at the point of access, not time limited and provided regardless of treatment or recovery status. There are of course some services delivered by LERO community providers that are time limited such as housing and some work undertaken that is not delivered in the local areas where they operate such as consultancy and training. As a general rule, while LERO community groups and providers may ask for **voluntary** contributions or donations from people who access support, the core support offer is free.

**Throughout the rest of this document, we use 'LERO' to refer to lived experience led community groups and providers and specify where we mean only LERO community groups or only LERO community providers.**

We do not expect all LEROs at all stages of development to fully align to these standards. They are aspirational and have been designed as best practice guidance to support development. The CLERO do not intend to monitor or govern LEROs but instead to provide resources that support and advocate for their development.

These standards will be followed by resources to support their implementation including toolkits. We are committed to working with LEROs to further develop these standards. They will be regularly reviewed and they (and the supporting resources that follow) are expected to evolve in response to feedback from LEROs, other peer-led organisations and stakeholders. We welcome feedback to help develop and refine these standards.

In this document, we provide some information on organisational structures and relevant legislation that employers need to be aware of. All employers have a duty to check which legislation applies to their organisation type by seeking legal and other specialist advice. We strongly advise all LEROs to engage with their local voluntary and community organisation and to make use of the national support provided by:

- the [National Council for Voluntary Organisations \(NCVO\)](#). This includes a small charity and voluntary group helpline, free webinars and online guidance.
- the [Charity Commission](#) (where looking to register or already registered as a charity)
- [Companies House](#) (where looking to register or already registered as a company)

We believe that developing, sustaining and investing in LEROs will:

- support the growth of recovery communities and effectiveness of recovery-oriented systems of care
- deliver benefits and social value to individuals, families and communities in the long term that go beyond any direct commission and outside of any contract value and length

## **2. Our definition of a LERO community group and provider**

In this context, lived experience is the experience of people who were previously affected by problem alcohol or drug use and now identify as being in recovery (which is self-defined), and families affected by problem alcohol or drug use. We define a LERO as an independent initiative led and delivered by and for people with lived experience offering direct support to people whose drug and alcohol use is problematic and those who identify as in recovery (which is self-defined). This support is typically free at the point of access, directed by and for local residents, time unlimited and provided regardless of treatment or recovery status.

LEROs can deliver a range of interventions depending on the needs and strengths in their communities. This includes harm reduction, peer support and recovery support, support to improve wellbeing and helping people to access and engage in treatment and other support services. LEROs deliver support to someone regardless of their treatment or recovery status.

To maintain its core values, we think a LERO should have or aspire to having the following members of the group or provider having lived experience:

- the provider leader such as group leader, CEO or Director (if there is one)
- more than half of the board of directors or trustees (if there is one)
- 90% of frontline staff and volunteers

Some LEROs have or aspire to having 100% of the organisation having lived experience at all levels. While we see lived experience representation in the delivery and leadership of a LERO as fundamental, the number of people with lived experience within the leadership team, the Board, staff and volunteers given above are intended as a guide. We recognise that the make-up of a LERO will change over time and that at some points the levels of lived experience representation may fall below this. In keeping with the culture and values of LEROs, we believe that all LEROs should aspire and be actively seeking to address lived experience representation in their organisation where it falls out of balance.

We encourage LEROs to become CLERO members and supporters and champions of LEROs to become CLERO supporters. There is [information about membership](#) on our website.

## **3. How we developed these standards**

We have co-produced these standards drawing on the collective experience and knowledge of our national network of LEROs. These standards were written by the CLERO with support and feedback from the Alcohol and drug treatment and recovery team in [Office for Health Improvement and Disparities \(OHID\)](#). The development of these standards has been informed by the 'social model of recovery', the work of recovery researchers such as William White and the [CHIME framework](#).

In a 'social model of recovery', recovery can be promoted by:

- the environment people are in (housing, services and local community)
- people using their personal recovery experience to help others

William White argues that 'the culture of addiction [...] must be replaced by an equally consuming and well-organized culture of recovery' (*Pathways from the Culture of Addiction to the Culture of Recovery: A Travel Guide for Addiction Professionals*, 2<sup>nd</sup> edition, 1996, page xxiv). A 'culture of recovery' can have the following characteristics:

- way of working in and with communities
- diverse mutual aid and peer support options
- community advocacy and campaigning
- use of language that supports recovery
- recovery-related literature, media, music and art
- personal markers of recovery such as t-shirts and badges
- growth local and national recovery celebration and advocacy events

The CHIME framework, originally developed for mental health recovery, identifies 5 components of recovery. These are:

- connectedness
- hope and optimism about the future
- identity
- meaning in life
- empowerment

**Annex A** outlines how we apply the CHIME components of recovery to the work of LERO community groups and providers.

#### **4. Types of lived experience initiative**

When people with lived experience are involved in delivering a project or service within a non-peer-led organisation, we describe this as **peer-delivered**. Where a provider is delivered and led at all levels of the organisation by peers, we describe this as **peer-led**. Collectively, we call peer-delivered and peer-led options 'lived experience initiatives'.

We have identified 4 types a lived experience initiative that provide direct support in services or communities. These are:

- peer-delivered project
- informal LERO community group
- constituted but not incorporated LERO community provider
- incorporated LERO community provider

**Figure 1** provides a brief outline of lived experience initiatives of each type.

#### **Peer-delivered project**

A project including events and groups delivered by peers (but led by a treatment provider or non-peer-led service) offering direct support to people with problem drug and alcohol use, typically those who are in treatment.

#### **Informal LERO community group**

An independent and autonomous peer-led small group offering direct support regardless of treatment or recovery status with no formal organisational structure that may rely on another LERO or other service provider/organisation for some governance, support and infrastructure

#### **Constituted but not incorporated LERO community provider**

An independent and autonomous peer-led constituted group offering direct support regardless of treatment or recovery status with an agreed constitution and the required statutory policies and procedures in place

#### **Incorporated and regulated LERO community provider**

An independent and autonomous peer-led incorporated organisation offering direct support regardless of treatment or recovery status with the required statutory and mandatory policies and procedures

**Figure 1 The 4 types of lived experience initiative and 3 types of LERO community group or provider providing direct support**

These 4 types of lived experience service are described below.

#### **Peer-delivered project**

Peer-delivered projects includes projects, events and groups that are delivered by people with lived experience but led by treatment or other non-peer-led service provider staff. These can involve people with living or lived experience volunteering or working in treatment or other services. These projects operate within the treatment or other service providers' organisational leadership, governance and systems. While such peer-delivered projects are not LEROs, they can develop into them.

We have identified 3 types of LERO community group or provider:

#### **Informal LERO community group**

Informal LERO community groups are independent and autonomous peer-led small groups offering direct support regardless of treatment or recovery status with no formal organisational structure. They may rely on another LERO or other organisation for some governance, support and infrastructure.

#### **Constituted but not incorporated LERO community provider**

Constituted but not incorporated LERO community providers are independent and autonomous peer-led constituted groups offering direct support regardless of treatment or recovery status. Constituted groups (also known as associations) adopt a constitution. This is a set of agreed rules about the group's aim and how it operates. They have the minimum required statutory policies and procedures in place. LERO community providers are not incorporated as charities or companies and so are not legally regulated.

#### **Incorporated and regulated LERO community provider**

Incorporated LERO community providers are independent and autonomous peer-led organisations offering direct support regardless of treatment or recovery status that have an incorporated legal structure. These legal structures include a company, charity, community interest company or

community benefit society. Due to their organisational structures, this type of LERO are required to follow specific laws and regulatory restrictions and requirements.

The 3 types of LERO are mapped against the 3 types of organisational structure that can be adopted. [MyCommunity](#) provide information about these different organisational structures.

It is important to note that LEROs do not necessarily need or want to become a different type of LERO. While some LEROs emerge from peer-delivered projects, others grow entirely autonomously in the community without ever operating with support from another organisation. A LERO can begin as any type and doesn't always start as a small informal group. While the types are differentiated by their organisational structure, LERO community groups do not need to formalise their organisational structure. The types of LERO we've identified are not intended to imply that an incorporated LERO community provider is better than other types of LERO or that informal LERO community groups do not strive for and achieve good practice. Some informal LERO community groups may, for example, be longstanding and have policies and procedures in place.

**Annex B** outlines the attributes of lived experience initiatives of each type. It specifies for each type:

- who delivers them
- who leads, manages and governs them
- their organisational structure, governance and financial management

## 5. Standards

Our LERO standards comprise of 33 statements divided into 4 sections, covering the following aspects of LEROs:

- A. culture and values
- B. support offer
- C. staff and volunteers
- D. operations and management

To be classified as a LERO community group or provider, a group or provider should aspire to meeting the standards for culture and values (section A) and support offer (section B).

LERO community providers as constituted groups and incorporated organisations should aspire to meet the standards for staff and volunteers (section C) and operations and management (section D) in accordance with their organisational maturity and structure.

In the criteria and evidence included below, we use the following words in a specific way:

- 'must' is used where there is a specific legal or regulatory requirement that you must comply with or where something is fundamental to our definition of a LERO
- 'should' is used for minimum good practice guidance you should follow unless there's a good reason not to.
- 'could' is used where something is one of many examples of practice to consider

## ANNEX A The CHIME components of recovery and work of LEROs

The CHIME components of recovery can be applied to the work of LERO community groups and providers, showing how they support recovery as follows:

- **Connectedness:** the positive peer relationships and connections made through LEROs benefit us each as individuals, are the building blocks of healthy partnerships and communities, and are fundamental in creating change in inclusive, non-judgemental and authentic ways. These relationships provide a platform and knowledge base to facilitate effective generation of personal, social and community capital through the quality and quantity of the connections made with all stakeholders.
- **Hope and optimism about the future:** hope is generated and sustained by having lived experience at all levels of a LERO from members of the board, management, workers and volunteers. Hope is inspiring all members at all stages of recovery to reach their full potential.
- **Identity:** a LERO needs to have lived experience at all levels of the organisation including key decisionmakers. Every individual has the right to define their own personal recovery identity and set their own goals.
- **Meaning in life:** LEROs help people to find meaning and purpose through a sense of belonging to and pride in the recovery community and wider community that it serves. Involvement in a LERO service offers people meaningful activity that in turn enables connection.
- **Empowerment:** LEROs use their collective lived experience to work with individuals as the co-producers of their own change by working to redefine 'problems' into an alternative future. LERO services support people by giving them the tools to become active citizens in their community with the freedom and autonomy to shape and affect change in their lives.



## ANNEX B Key attributes of each type of lived experience initiative

Attributes	Peer-delivered project	Informal LERO community group	Constituted but not incorporated LERO community provider	Incorporated and regulated LERO community provider
<b>Vision and mission</b>	<ul style="list-style-type: none"> <li>Vary between service but focused on treatment outcomes</li> </ul>	<ul style="list-style-type: none"> <li>Vary between LEROs but all serve the recovery community and align with the CHIME components of recovery and the CLERO standards for culture, values and support offer</li> </ul>		
<b>Delivered by</b>	<ul style="list-style-type: none"> <li>Peer volunteers</li> <li>Treatment or other service provider staff</li> </ul>	<ul style="list-style-type: none"> <li>Peer volunteers</li> </ul>	<ul style="list-style-type: none"> <li>Peer staff and volunteers</li> </ul>	<ul style="list-style-type: none"> <li>Peer staff and volunteers</li> </ul>
<b>Led and governed by</b>	<ul style="list-style-type: none"> <li>Treatment or other service provider staff/board/directors</li> </ul>	<ul style="list-style-type: none"> <li>Independent and autonomous</li> <li><b>May</b> rely on another LERO or other organisation for some governance, support and infrastructure</li> <li>Peer leader</li> </ul>	<ul style="list-style-type: none"> <li>Independent and autonomous</li> <li>Peer leader</li> <li>Governing body such as a committee or board of directors</li> </ul>	<ul style="list-style-type: none"> <li>Independent and autonomous</li> <li>Peer leader</li> <li>Governing body such as trustees or directors depending on organisation type</li> </ul>
<b>Organisational structure</b>	<ul style="list-style-type: none"> <li>Sits within the treatment or other service provider structure either 3<sup>rd</sup> sector, NHS or independent provider</li> </ul>	<ul style="list-style-type: none"> <li>None, also known as 'small group'</li> </ul>	<ul style="list-style-type: none"> <li>Constituted group (also known as an 'association')</li> </ul>	<ul style="list-style-type: none"> <li>Incorporated, regulated legal structure (company, charity, community interest company or community benefit society)</li> </ul>
<b>Governance</b>	<ul style="list-style-type: none"> <li>Treatment or other service provider organisational governance including structure, policies and procedures, properties and insurance</li> <li>In line with legislation, staff and volunteers doing 'regulated activity' have enhanced DBS checks</li> </ul>	<ul style="list-style-type: none"> <li>May have core written principles and ways of working. This can range from basic rules for the group and simple paperwork to more comprehensive paperwork and guidance such as confidentiality forms, role descriptions and volunteering policies and procedures.</li> <li>Members of peer support groups are not classified as undertaking 'regulated activity' and so are not required to do Disclosure and Barring Service (DBS) checks under legislation. However always refer to guidance and take advice when deciding whether to undertake DBS checks.</li> </ul>	<ul style="list-style-type: none"> <li>Has a constitution (a set of agreed rules about the group's aim and how it will operate) which comes with some minimal regulation</li> <li>In line with legislation, staff and volunteers doing 'regulated activity' have enhanced DBS checks</li> <li>Mandatory and statutory policies and procedures in place</li> <li>May rent property, get insurance and employ staff</li> </ul>	<ul style="list-style-type: none"> <li>Has a governing document such as articles of association, as appropriate which comes with stricter regulatory requirements, greater accountability and transparency</li> <li>In line with legislation, staff and volunteers doing 'regulated activity' have enhanced DBS checks</li> <li>Annual report and public/general meeting</li> <li>Mandatory and statutory policies and procedures in place</li> <li>May rent property, has insurance and employs staff</li> </ul>
<b>Finances</b>	<ul style="list-style-type: none"> <li>Treatment or other service provider oversees finances including budgets, grants and fundraising</li> </ul>	<ul style="list-style-type: none"> <li>May have a bank account and do basic bookkeeping such as managing petty cash</li> <li>Funded via donations and other fundraising</li> <li><b>May rely</b> on another LERO or other organisation to manage monies</li> </ul>	<ul style="list-style-type: none"> <li>Bank account with 2 signatories</li> <li>Annual accounts</li> <li>Eligible for some grants</li> <li>Limitations on raising finance</li> </ul>	<ul style="list-style-type: none"> <li>Bank account with 2 signatories</li> <li>Annual accounts</li> <li>Eligible for grants, sub-contracting to another organisation and direct local authority commissioning</li> </ul>



## ANNEX C Standards for LERO community groups and providers

A. CULTURE AND VALUES (The statements in section A apply to all LERO community groups and providers)			
No.	Statement	Criteria You will know you are achieving this standard if you meet the following criteria.	Example evidence You should have example evidence available that you are meeting this standard. This could include:
1.	<b>Is led, governed and delivered by people with lived experience</b>	<p>You have or aspire to have the following members having lived experience:</p> <ul style="list-style-type: none"> <li>the provider leader such as group leader, CEO or Director (if there is one)</li> <li>more than half of the board of directors or trustees (if there is one)</li> <li>90% of frontline staff and volunteers</li> </ul>	<ul style="list-style-type: none"> <li>recovery status of the leader (if there is one), governing body (if there is one), staff and volunteers based on their testimony</li> </ul>
2.	<b>Maintains its independence and autonomy to best serve the recovery community</b>	<p>You maintain your independence and autonomy to best serve the recovery community. This ideally includes you having direct relationships with commissioning teams regardless of whether you are directly or indirectly funded by them.</p> <p>LERO community groups: you operate as a 'small group' independently of other organisations but <b>may</b> rely on another LERO or other organisation for some governance, support and infrastructure.</p> <p>LERO community providers: you have adopted a formal organisational structure and governance. Any governing documents and related policies and any procedures in place must outline how the organisation ensures that the governing body remains representative of the recovery community.</p>	<ul style="list-style-type: none"> <li>mission statement</li> <li>vision statement</li> <li>strategic plan</li> <li>evidence of attending local, regional or national strategy, commissioning, policy and service planning meetings such as meeting minutes, strategies and policies</li> <li><i>LERO community groups</i>: constitution (a set of agreed rules about the group's aim and how it will operate)</li> <li><i>LERO community providers only</i>: relevant governing document such as articles of association outlining the responsibilities and recruitment of Board members</li> </ul>

## A. CULTURE AND VALUES

*(The statements in section A apply to all LERO community groups and providers)*

No.	Statement	Criteria	Example evidence
		You will know you are achieving this standard if you meet the following criteria.	You should have example evidence available that you are meeting this standard. This could include:
3.	<b>Promotes and recognises people's right to choose their own recovery pathway</b>	You promote and help people to access support including treatment, mutual aid, faith groups, wraparound services, community groups and other specialist/culturally appropriate support. You collaborate with these other services and groups to improve pathways.	<ul style="list-style-type: none"> <li>• programme of support and activities on offer</li> <li>• active pathways as evidenced by referrals into and buddying people to other services and groups</li> <li>• partnership with other community members, groups and services</li> </ul>
4.	<b>Advocates for people with living and lived experience</b>	You advocate on behalf of people to support them to access support, have their needs met, build on their strengths and have their voices heard by treatment and other service providers, commissioners and other stakeholders.	<ul style="list-style-type: none"> <li>• feedback from people accessing support</li> <li>• evidence of attending local, regional or national strategy, commissioning, policy and service planning meetings such as meeting minutes, strategies and policies</li> <li>• evidence of accompanying ('buddying') people to appointments and meetings</li> </ul>
5.	<b>Co-creates their offer with people with living and lived experience to meet identified community needs</b>	You co-design and co-produce your support offer with those you support. Co-design involves defining the problems and solutions together. Co-production involves implementing the solutions together. When you both co-design and co-produce, that is called 'co-creation'.	<ul style="list-style-type: none"> <li>• anecdotal feedback from people accessing support</li> <li>• needs assessments</li> <li>• evaluations via forms, surveys and focus groups</li> <li>• committee and board meeting minutes</li> </ul>

## A. CULTURE AND VALUES

*(The statements in section A apply to all LERO community groups and providers)*

No.	Statement	Criteria	Example evidence
		You will know you are achieving this standard if you meet the following criteria.	You should have example evidence available that you are meeting this standard. This could include:
6.	<b>Takes an asset-based approach, building on the strengths of individuals, the recovery community and the wider community and maximising the value of available resource</b>	You identify, create and maximise the value of assets including financial resources. Staff and volunteers must have knowledge of local community resources, services and opportunities.	<ul style="list-style-type: none"> <li>• feedback from people accessing support</li> <li>• asset mapping reports</li> <li>• promotion of key local resources in services such as posters and leaflets</li> <li>• staff and volunteers can provide up-to-date information on local community resources, services and opportunities</li> <li>• relationships and partnership with key stakeholders and the wider community including local community groups, businesses and services</li> <li>• in-kind support and donations provided by, and reciprocal relationships with, businesses and services as shown in accounts and promotional materials</li> <li>• income generated through social enterprise initiatives</li> </ul>
7.	<b>Creates safer communities</b>	You work to create safer communities through active community outreach, engagement and events.	<ul style="list-style-type: none"> <li>• outreach and engagement monitoring data</li> <li>• community events programme</li> <li>• partnership working</li> <li>• staff and people accessing support volunteering in the community to tackle local issues</li> </ul>

**A. CULTURE AND VALUES**

*(The statements in section A apply to all LERO community groups and providers)*

No.	Statement	Criteria	Example evidence
8.	<b>Reaches and supports excluded and under-represented groups</b>	<p>You will know you are achieving this standard if you meet the following criteria.</p> <p>You work to reach and support excluded and under-represented groups such as people from ethnic minorities and women. People with protected characteristics and socially excluded groups experience barriers to accessing support. This includes:</p> <ul style="list-style-type: none"> <li>• ethnic minority groups</li> <li>• LGBTQ+ groups</li> <li>• women</li> <li>• older people</li> <li>• people with learning disabilities</li> <li>• inclusion health groups</li> </ul> <p>You must tailor support to meet the person’s unique needs, values and perspective without making assumptions based on people’s ethnicity, faith or other protected characteristics.</p>	<p>You should have example evidence available that you are meeting this standard. This could include:</p> <ul style="list-style-type: none"> <li>• records of culture competence training</li> <li>• partnership with community groups, faith groups and other culturally appropriate services and projects supporting excluded and under-represented groups</li> <li>• feedback from people accessing support</li> <li>• community engagement and events programme</li> <li>• community outreach including home visits</li> <li>• promotional and harm reduction information is available in and staff and volunteers who speak community languages</li> </ul>

**A. CULTURE AND VALUES**  
*(The statements in section A apply to all LERO community groups and providers)*

No.	Statement	Criteria You will know you are achieving this standard if you meet the following criteria.	Example evidence You should have example evidence available that you are meeting this standard. This could include:
9.	<b>Manages and supports behavioural change in staff, volunteers and the people we support in the best interests of the individual, service, recovery community and the wider community</b>	<p>You ensure that:</p> <ul style="list-style-type: none"> <li>• people accessing support are inducted into and regularly reminded of the code of conduct and ground rules</li> <li>• staff and volunteers are inducted into, trained and supported to work in line with the provider's agreed ways of managing behavioural change</li> </ul> <p>This could include a code of conduct, sickness absence policy. Your organisations must have an agreed policy on how lapse and relapse are defined and managed and how alcohol and drug use in the project or workplace is addressed. Individual LERO community providers will have their own approach to managing relapse, lapse. This includes their approach to recovery, self-care and wellbeing planning for staff and volunteers.</p> <p>LERO community providers that employ 5 or more people must have a health and safety policy. This may cover alcohol and drug use in the workplace.</p>	<ul style="list-style-type: none"> <li>• recovery, self-care and wellbeing plans for staff and volunteers</li> <li>• feedback from people accessing support</li> <li>• staff and volunteer induction and training records</li> <li>• staff and volunteer handbook/policies and procedures</li> </ul>
10.	<b>Tackles stigma by making recovery visible</b>	<p>Your staff (if you have any), volunteers, communications and activities embody your culture and values. This could include sharing recovery stories, activism and advocacy and challenging stereotypes.</p>	<ul style="list-style-type: none"> <li>• community events programme</li> <li>• press coverage and marketing materials including showcasing recovery stories</li> </ul>

**B. SUPPORT OFFER**  
*(The statements in section B apply to all LERO community groups and providers)*

No.	Statement	Criteria You will know you are achieving this standard if you meet the following criteria.	Example evidence You should have example evidence available that you are meeting this standard. This could include:
11.	<b>Is free at the point of access</b>	You do not require people to pay to access your core support offer. To note, this does not prevent you seeking <b>voluntary</b> contributions or donations from those accessing support; charging external organisations to attend certain events, training or programmes; having trading arms; and running social enterprises.	<ul style="list-style-type: none"> <li>no charge to access their core support offer as evidenced on website, promotional materials and accounts</li> </ul>
12.	<b>Does not time limit support</b>	You offer people support in the long term. This can include lifelong support. To note, some specific elements of your offer may be time limited such as housing or community rehabilitation programmes.	<ul style="list-style-type: none"> <li>feedback from people accessing support</li> <li>discharge policy, if one is in place</li> </ul>
13.	<b>Is directed by and for local residents</b>	You make decisions about the support offered with local residents. Your staff and volunteers have a deep understanding of the local area, needs and resources and are invested in meeting these needs and growing local resources.	<ul style="list-style-type: none"> <li>staff and volunteer records</li> <li>local resident, staff and volunteer testimony</li> </ul>
14.	<b>Reduces drug and alcohol related harm and supports recovery</b>	You support people to reduce harm, recover and improve their health and wellbeing. This includes providing harm reduction, support to engage in treatment and other services, and recovery support services. This could include buddying, staff and volunteer training and harm reduction. You take your role in protecting a person's health seriously and always support them to seek treatment as appropriate.	<ul style="list-style-type: none"> <li>evidence of buddying people to appointments</li> <li>feedback given to other services on barriers to access and positive solutions to these</li> <li>partnership work with treatment and other services</li> <li>staff and volunteer training records including drug and alcohol awareness</li> <li>feedback from people accessing support</li> <li>formal and informal data collection including activity monitoring such as numbers of people engaged in outreach, supported and specific interventions and case studies</li> <li>referral pathways including peer-led referrals into treatment as evidenced in the National drug treatment monitoring system (NDTMS)</li> </ul>



**B. SUPPORT OFFER**  
*(The statements in section B apply to all LERO community groups and providers)*

No.	Statement	Criteria You will know you are achieving this standard if you meet the following criteria.	Example evidence You should have example evidence available that you are meeting this standard. This could include:
			<ul style="list-style-type: none"> <li>programme of support and activities on offer</li> <li>harm reduction activity monitoring such as outreach and engagement and naloxone</li> </ul>
15.	<b>Supports people to improve their general health and wellbeing</b>	You provide opportunities for people to connect with others, be physically active, learn new skills, give to others and pay attention to the present in line with the ' <a href="#">5 ways to wellbeing</a> '. This could include partnerships with other health and wellbeing services such as stop smoking and gambling. Your take your role in protecting a person's health seriously and always support them to seek health and care services as appropriate.	<ul style="list-style-type: none"> <li>feedback from people accessing support</li> <li>programme of support and activities on offer</li> <li>partnership work with other health and wellbeing services</li> </ul>
16.	<b>Offers a culture of recovery in which people can connect and support each other</b>	You create opportunities for people to connect and support each other, creating the conditions in which visible contagious recovery can grow and fostering hope, motivation, belief in recovery and a positive sense of identity in line with the CHIME components of recovery.	<ul style="list-style-type: none"> <li>feedback from people accessing support</li> <li>programme of support and activities on offer</li> <li>events</li> </ul>
17.	<b>Creates opportunities for people to be active citizens in the recovery community and wider community</b>	You provide and facilitate access to informal and formal volunteer opportunities within and beyond the organisation.	<ul style="list-style-type: none"> <li>feedback from people accessing support and formal volunteers</li> <li>volunteer role descriptions</li> <li>case studies</li> </ul>
18.	<b>Involves and support families and friends</b>	You involve and support families and friends. This could include social events, co-creation of services and projects, and informal or formal peer support for families and friends.	<ul style="list-style-type: none"> <li>feedback from families and friends accessing support</li> <li>programme of support and activities and events some of which are inclusive of families and friends</li> <li>family and friend specific roles and projects</li> </ul>
19.	<b>Engages with the wider community</b>	You engage with and build relationships between the recovery community and wider community.	<ul style="list-style-type: none"> <li>feedback from the wider community</li> </ul>

<b>B. SUPPORT OFFER</b> <i>(The statements in section B apply to all LERO community groups and providers)</i>			
<b>No.</b>	<b>Statement</b>	<b>Criteria</b> You will know you are achieving this standard if you meet the following criteria.	<b>Example evidence</b> You should have example evidence available that you are meeting this standard. This could include:
			<ul style="list-style-type: none"> <li>events, outreach, educational and other activities, social enterprises and recovery community centres that are open to the public</li> </ul>
<b>20.</b>	<b>Provides support and activities in welcoming and accessible spaces</b>	You provide support and activities in spaces that promote engagement, allowing for privacy where required and maintaining an alcohol- and drug-free environment. Where possible, spaces and events should be accessible to people with disabilities.	<ul style="list-style-type: none"> <li>feedback from people accessing support</li> <li>location(s) from which support is provided are well looked after, comfortable and display positive messages and support options</li> <li>programme of support and activities on offer</li> <li>participant rules, rights and responsibilities are displayed and reiterated in groups and other activities</li> <li>out-of-hours and remote support</li> </ul>
<b>21.</b>	<b>Provides support that is inclusive and works to advance equality of opportunity</b>	You offer inclusive and equitable support. This should include working from locations that are accessible to people with disabilities where possible.	<ul style="list-style-type: none"> <li>feedback from people accessing support</li> <li>community engagement and events programme</li> <li>partnership work with local cultural and community groups to raise awareness, share learning, build relationships and maintain pathways</li> <li>literature in community languages</li> </ul>

<b>C. STAFF AND VOLUNTEERS</b> <i>(The statements in section C apply to LERO community providers only)</i>			
<b>No.</b>	<b>Statement</b>	<b>Criteria</b> You will know you are achieving this standard if you meet the following criteria.	<b>Example evidence</b> You should have example evidence available that you are meeting this standard. This could include:
<b>22.</b>	<b>Recruits staff and volunteers safely, fairly and to serve the recovery community</b>	You ensure that your organisation reflects the diverse cultural identities, life experiences, needs, strengths, and pathways to the recovery of the people you serve. This must include recruitment policies and procedures.	<ul style="list-style-type: none"> <li>applicant, staff and volunteer feedback</li> <li>recruitment procedures</li> <li>employment applications</li> <li>employment eligibility documents and references</li> </ul>

**C. STAFF AND VOLUNTEERS**  
*(The statements in section C apply to LERO community providers only)*

No.	Statement	Criteria You will know you are achieving this standard if you meet the following criteria.	Example evidence You should have example evidence available that you are meeting this standard. This could include:
			<ul style="list-style-type: none"> <li>• Disclosure and Barring Service (DBS) checks, where required as 'regulated activity' is being undertaken</li> <li>• equal opportunities forms</li> <li>• staff and volunteer training records including training for staff involved in recruitment</li> </ul>
23.	<b>Helps staff and volunteers fit into their role and the service comfortably and safely</b>	<p>You ensure that new staff and volunteers:</p> <ul style="list-style-type: none"> <li>• are oriented to the service, building, team, role, and partner agencies</li> <li>• are familiarised with policies and procedures including the need to maintain clear boundaries between people working or volunteering for the organisation and those they support</li> <li>• are inducted into how lapse and relapse are defined and managed and how alcohol and drug use in the workplace is addressed</li> <li>• are introduced to line management and supervision</li> <li>• complete all essential training</li> </ul>	<ul style="list-style-type: none"> <li>• staff and volunteer feedback</li> <li>• staff handbook and policies and procedures</li> <li>• induction plans</li> <li>• training records</li> <li>• staff appraisal documentation</li> <li>• reviews of retention rates and the number of complaints and grievances</li> </ul>
24.	<b>Supports staff and volunteers</b>	<p>You empower staff and volunteers to 'bring their whole self to work' by developing a workplace in which everybody feels psychologically safe and is seen, heard, and valued. This must include regular management supervision. It could include opportunities for reflective practice and mentoring to help people to learn, develop and help others.</p>	<ul style="list-style-type: none"> <li>• team meetings which may include check-ins</li> <li>• staff and volunteer feedback</li> <li>• reflective practice sessions</li> <li>• mentoring arrangements</li> <li>• supervision notes</li> <li>• team building and social opportunities</li> </ul>
25.	<b>Is clear about and champions the role and</b>	<p>You clearly outline the role of and champions peer workers and volunteers both within and outside the</p>	<ul style="list-style-type: none"> <li>• staff and volunteer feedback</li> <li>• staff job descriptions and volunteer role descriptions</li> <li>• training packages and feedback from trainees</li> </ul>

**C. STAFF AND VOLUNTEERS**  
*(The statements in section C apply to LERO community providers only)*

No.	Statement	Criteria You will know you are achieving this standard if you meet the following criteria.	Example evidence You should have example evidence available that you are meeting this standard. This could include:
	<b>value of peer workers and volunteers</b>	organisation. This could include training partner agencies on the role of peer workers.	
26.	<b>Develops peer leaders and leadership roles</b>	You develop existing and new peer leaders and leadership roles internally. You could also support emerging peer leaders from outside your organisation to develop their projects and leadership roles through mentoring, advice and guidance.	<ul style="list-style-type: none"> <li>• informal and formal opportunities for people to develop leadership skills are available such as shadowing</li> <li>• staff and volunteer training records</li> <li>• staff and volunteer feedback</li> <li>• case studies</li> </ul>
27.	<b>Proactively eliminates discrimination, harassment and victimisation and is diverse and inclusive</b>	<p>You proactively eliminate discrimination, harassment and victimisation and are a diverse and inclusive group or workplace that is broadly representative of the local community. All employers have a duty to and so must:</p> <ul style="list-style-type: none"> <li>• eliminate discrimination, harassment and victimisation</li> <li>• advance equality of opportunity</li> <li>• help develop good relations between different parts of the community</li> </ul> <p>This must include:</p> <ul style="list-style-type: none"> <li>• equality and diversity policies and procedures in place</li> <li>• staff and volunteers are inducted into and trained on the organisation's equality and diversity policy and procedures.</li> </ul> <p>You should ensure that the organisation and its workforce provide culturally appropriate support. For example, this includes taking account of religious requirements and festivals, and cultural competence training for staff and volunteers.</p>	<ul style="list-style-type: none"> <li>• staff and volunteer feedback</li> <li>• equality and diversity policy and procedures</li> <li>• staff and volunteer training records</li> <li>• awarded relevant national quality mark such as Investors in Diversity</li> </ul>

**D. OPERATIONS AND MANAGEMENT**  
*(The statements in section D apply to LERO community providers only)*

No.	Statement	Criteria	Example evidence
		You will know you are achieving this standard if you meet the following criteria.	You should have example evidence available that you are meeting this standard. This could include:
28.	<b>Is well governed and supported to function effectively and sustainably</b>	<p>You have the governing body, staff and contractors and systems in place to ensure that the organisation functions with integrity, openness and accountability. This must include:</p> <ul style="list-style-type: none"> <li>• sufficient ‘back office’ (HR, finance and administration) staffing and systems to support smooth operation of the organisation</li> <li>• policies and procedures including financial controls</li> <li>• a governing body that acts in the best interest of the provider, overseeing risk, controls and decision-making. This includes ensuring that assets are properly used, funds are spent effectively and financial affairs are well managed.</li> </ul> <p>Constituted but not incorporated LERO community providers are constituted groups with a set of agreed rules about its aim and how it operates (a ‘constitution’) in place.</p> <p>Incorporated and regulated LERO community providers are incorporated organisations with a regulated legal structure and follow specific laws and regulatory restrictions and requirements. The regulated legal structure could be a company, charity, community interest company or community benefit society.</p> <p>Depending on their registration, incorporated and regulated LERO community providers must:</p> <ul style="list-style-type: none"> <li>• have and operate in line with the relevant governing document such as articles of association outlining</li> </ul>	<ul style="list-style-type: none"> <li>• finance, HR and administration systems, staffing and support are in place</li> <li>• financial and HR records</li> <li>• relevant governing document such as constitution or articles of association, depending on organisational structure</li> <li>• governing body meeting agendas and minutes</li> <li>• annual budget, regular management accounts and annual accounts</li> <li>• most recent annual report and annual accounts</li> <li>• documentation of board member formal training and induction such as training records and induction plans</li> <li>• most recent strategic plan</li> <li>• documentation indicating that the Board reviews and approves policies and procedures regularly to agreed timescales. This includes a reserves policy, where relevant.</li> </ul>

**D. OPERATIONS AND MANAGEMENT**  
*(The statements in section D apply to LERO community providers only)*

No.	Statement	Criteria	Example evidence
		<p>You will know you are achieving this standard if you meet the following criteria.</p> <ul style="list-style-type: none"> <li>• the responsibilities and recruitment of Board members. This document could also outline how the organisation ensures that the board remains representative of the recovery community.</li> <li>• meet legal reporting requirements including annual accounts</li> <li>• hold an annual general or public meeting</li> </ul>	<p>You should have example evidence available that you are meeting this standard. This could include:</p>
29.	<b>Trains and inducts staff and volunteers to help them develop and do a good job</b>	<p>You train and induct staff and volunteers into organisational policies and procedures. This should include staff and volunteers being supported to develop their skills and experience through informal and formal learning and development opportunities.</p>	<ul style="list-style-type: none"> <li>• induction plans</li> <li>• staff and volunteer feedback</li> <li>• individual and team training plan</li> <li>• training records and training feedback forms</li> <li>• organisational training plan</li> </ul>
30.	<b>Checks staff and volunteers where they are working with children or vulnerable adults</b>	<p>You must <a href="#">check the criminal records of staff and volunteers</a> at least where they are undertaking 'regulated activity' working with children or vulnerable adults. Where an employee or volunteer is undertaking regulated activities unsupervised, intensely or overnight, employers must do an <a href="#">enhanced DBS check</a>.</p> <p>Employers must ensure that:</p> <ul style="list-style-type: none"> <li>• candidates are given the opportunity to disclose criminal records during recruitment</li> <li>• those with specific offending histories are barred from working with a specific group and in all other cases, employers can use their discretion weighing a risk assessment of the role against the candidate's skills, qualifications, experience and circumstances of their conviction(s)</li> </ul>	<ul style="list-style-type: none"> <li>• recruitment policy and procedure</li> <li>• DBS checks for all staff and volunteers undertaking 'regulated activity'</li> </ul>



**D. OPERATIONS AND MANAGEMENT**  
*(The statements in section D apply to LERO community providers only)*

No.	Statement	Criteria	Example evidence
		You will know you are achieving this standard if you meet the following criteria.	You should have example evidence available that you are meeting this standard. This could include:
31.	<b>Protects employees, those accessing support and the public</b>	<p>You protect those who work for your organisation and access support from it. This must include the policies and procedures that are required by law (statutory) and by the organisation (mandatory) being in place and regularly reviewed.</p> <p>All volunteers and staff should complete training required by law (statutory) and required by the employer (mandatory) on a regular basis, in some cases annually. The <a href="#">UK Core Skills Training Framework</a> (CSTF) sets out 11 statutory and mandatory training topics for all staff working in health and social care settings. These serve as a minimum standard.</p> <p>All employers must comply with <a href="#">health and safety legislation</a>. This includes:</p> <ul style="list-style-type: none"> <li>• assessing risk</li> <li>• taking measures to prevent risk and protect people</li> <li>• having a written health and safety policy in place, where an organisation employs 5 or more people</li> <li>• reporting incidents and accidents</li> </ul> <p>The scope of an employer's responsibilities will vary depending on whether they work out of their own premises or another organisation's premises.</p>	<ul style="list-style-type: none"> <li>• staff and volunteer handbook covers all statutory and mandatory policies and procedures including health and safety policy (if applicable)</li> <li>• policies and procedures forms signed by staff and volunteers</li> <li>• references for staff on file</li> <li>• supervision notes</li> <li>• walkthrough of location(s) from which support is provided</li> <li>• consent and confidentiality forms</li> <li>• DBS checks for all staff and volunteers undertaking 'regulated activity'</li> <li>• grievance and disciplinary investigations and reports</li> <li>• evidence that safety equipment or personal protective equipment (PPE) provided when required</li> <li>• example risk assessments</li> <li>• evidence of reporting of incidents to the Health and Safety Executive and to any organisation that commissions their services</li> <li>• up-to-date emergency contact information for staff, volunteers, and community members is held on record</li> <li>• emergency evacuation procedures in place</li> </ul> <p>Depending on whether working out of own or another provider's premises:</p> <ul style="list-style-type: none"> <li>• risk management plan</li> <li>• evidence of emergency procedures and regular drills</li> <li>• functional and regularly checked smoke detectors and fire extinguishers</li> </ul>

**D. OPERATIONS AND MANAGEMENT**  
*(The statements in section D apply to LERO community providers only)*

No.	Statement	Criteria You will know you are achieving this standard if you meet the following criteria.	Example evidence You should have example evidence available that you are meeting this standard. This could include:
			<ul style="list-style-type: none"> <li>• up-to-date insurance certificates on record and on display where people can refer to them. The insurance must be applicable to the support that the organisation provides</li> </ul>
32.	<b>Protects and upholds people’s right to confidentiality (except where there is a legal duty mandating sharing information)</b>	<p>You must protect and uphold people’s right to confidentiality except where there is a legal duty mandating sharing information. Confidential information must be shared if it is required by law, or directed by a court, or if the benefits to a person that will arise from sharing the information outweigh both the public and the individual's interest in keeping the information confidential. In these circumstances, confidential information can be shared without the individual’s consent. Workers and volunteers must be trained to:</p> <ul style="list-style-type: none"> <li>• get informed consent</li> <li>• protect personally identifiable information</li> <li>• know when and how to break confidentiality if anyone is at risk of serious harm</li> </ul>	<ul style="list-style-type: none"> <li>• consent and confidentiality forms signed by people who access support</li> <li>• privacy notices</li> <li>• physical records are stored in a locked cabinet and electronic records are stored in a secure manner. Both are accessible only by authorised individuals.</li> <li>• safeguarding adults and children policies and procedures</li> <li>• safeguarding training for staff and volunteers</li> </ul>
33.	<b>Assesses quality and performance to ensure safety, impact, and equitable service provision</b>	<p>You assess quality and performance to ensure that the organisation is delivering its mission.</p>	<ul style="list-style-type: none"> <li>• evaluation via forms, surveys and focus groups</li> <li>• formal and informal data collection including activity monitoring such as numbers of people engaged in outreach, supported and specific interventions and case studies</li> <li>• file audits</li> <li>• project reports</li> <li>• performance capability policy and procedure</li> <li>• staff appraisals and performance improvement plans</li> </ul>