## **Individual's Constructive Assessment of this Recovery Environment (ICARE)**

A. Optional Section 1. I am in recovery*:	No 🗆 Skip to A	.3. Yes □
*Recovery = Made a public commitment to: a) so alcohol and/or other drugs and/or b) better mana- than your sobriety date, or the date of your last a	ge mental health conditions. This is	
2. Length of recovery		
3. Length of experience with this program	Years	Months
B. What I like best about this program:	Years	Months
C. What could improve this program?		
D. Optional anonymity code: Enter the following as identify this survey as yours.	nd remember your code if later yo	ou want to
First letter of your mother's first name:		
<u>Last</u> letter of your mother's <u>last</u> name:		
First digit of your social security number:		
Last digit of your social security number:		

Thank you for completing this ICARE survey. Please continue on the next page.

## **Individual's Constructive Assessment of this Recovery Environment (ICARE)**

<u>Instructions</u>: Please do not change your answer to any item while completing this page. Write each item's circled number in the blanks below. \* = also enter the number in the Staff column. Then, add each column's numbers and write the total in the Subscale Totals lines.

## Item Number. Circled Number

	Item Number. <u>Circled Number</u>					
	1 3 4	5	10	2 6 7 8* 9* 11*	8 9 11	
	13 15 16	14* 17*		12*	12 14 17	
	19 20	21*		18* 22*	18 21 22	
	23* 25* 26* 27 29  33  36 37 38	35*	30* 31*	24* 28* 32* 34*	24 25 28 30 32 35	
Subscale Totals:	39					
A = 90% B = 80% C = 70% D = 60% F = 50%	72-65 = A 64-58 = B 57-51 = C 50-43 = D 42 = F	20-18 = A 17-16 = B 15-14 = C 13-12 = D $11 \ \psi = F$	12-11 = A 10 = B 9 = C 8 = D 7 = F	52-47 = A 46-42 = B 41-37 = C 36-31 = D $30 \psi = F$	60-54 = A 53-48 = B 47-42 = C 41-36 = D $35 \ \psi = F$	
Subscale Letter Grades:	Operating Procedures	Recovery Orientation	Community Outreach	Individualized Services	Staff	
<b>A</b>						