Recovery Residence Outcomes for State Fiscal Year 2025

October 2025

The Vermont Department of Health provides grants to six recovery residence organizations that manage a total of 118 beds. Ahead of state fiscal year 2025 (FY25), the Division of Substance Use Programs (DSU) developed a new data collection tool with input from Department-funded organizations. This report summarizes data received from Department-funded organizations in FY25, which is from July 1, 2024 – June 30, 2025.

If you need help accessing or understanding this information, contact AHS.VDHDSU@vermont.gov.

Department-funded recovery residence organizations include:

- Good Samaritan Haven
- Jenna's Promise
- Second Wind
- Shires Housing
- Springfield Supported Housing
- Vermont Foundation of Recovery

FY25 Data Collection

DSU worked directly with Department-funded organizations to coordinate quarterly data collection that balances state priorities and administrative burden on the organization. The information collected in FY25 shows program outcomes, changes between intake and departure and provides information about the types of services people received during their stay at a recovery residence. The following FY25 data is included in this report:



Numbers Served in FY25

- Number of People Who Received Recovery Residence Service
- Number of Departures
- Demographics of People Who Left a Recovery Residence
 - o Age and Self-Reported Gender
 - o Primary Substance of Use
 - o Number of Children Housed at the Recovery Residence
 - Justice Involvement
 - o Referral Source



Client Outcomes in FY25

- Length of Stay (LOS)
- Departure Reason
- Employment Status
- Housing Type at Departure
- Connections to Employment, Recovery, Clinical, Social Supports





Numbers Served in FY25

Number of People Who Received Recovery Residence Service

- To identify the number of people served in the recovery residence, organizations reported how many unique people they served during each quarter.
- 317 people were served in Department-funded recovery residences in FY25 an average of 79 people per quarter.

Number of people served in FY25

Quarter	Start Date	End Date	Number Served
Quarter 1	7/1/2024	9/30/2024	77
Quarter 2	10/1/2024	12/31/2024	73
Quarter 3	1/1/2025	3/31/2025	75
Quarter 4*	4/1/2025	6/30/2025	92
Total served in FY25**	7/1/2024	6/30/2025	317

^{*}Shires Housing submitted their first report in Quarter 4.

Number of Departures

 Organizations reported person-level information for everyone who left the recovery residence regardless of their reason for departure. 158 people left Department-funded recovery residences in FY25.

Number of residences, beds, and departures, for each organization in FY25

Organization	Number of residences	Number of beds	Total departures in FY25 (N)
Good Samaritan Haven	1	13	22
Jenna's Promise	3	16	19
Second Wind	2	10	16
Shires Housing*	1	8	3
Springfield Supported Housing	1	5	10
Vermont Foundation of Recovery (VFOR)	13	66	88
Total**	21	118	158

N = number of clients.

^{*}Shires Housing opened in late FY25 and submitted their first report in Quarter 4. **Total departures may include multiple departures per person and are not unique individuals.



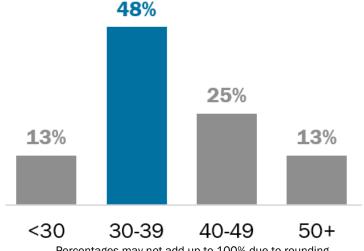
^{**}There may be duplication of people served from quarter to quarter.

Age and Self-Reported Gender

• Age and gender are collected at program entry. The average age at intake is 39 years.

The largest age group is 30-39 years old, representing 48% (76) of clients who left a recovery residence.

The youngest client was 22 at intake, while the oldest was 65. Age was not reported for one person.



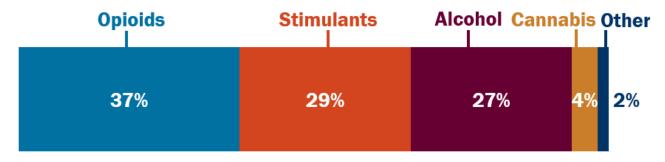
Percentages may not add up to 100% due to rounding.

• Among clients who left a recovery residence, 47% (74) self-identified as female and 53% (84) as male.

Primary Substance of Use

Clients most frequently reported opioids (37%) as their primary substance of use prior to recovery followed by stimulants (29%) and alcohol (27%).

"Other" primary substances reported included Benzodiazepines.



Percentages may not add up to 100% due to rounding.



Number of Children Housed at the Recovery Residence

 Two recovery residence locations in Vermont allow for minor children to be housed with parents living in the residence. A total of seven children under the age of 18 were housed with a parent who left a recovery residence.

Justice Involvement

Organizations reported a person's criminal justice involvement status at the time the
person entered the program. 47% (74) of clients were justice-involved at intake.

Most clients, 53% (84), are not justice-involved at intake.

Criminal justice involvement status	% reported
Not involved	53%
Probation	25%
Pre-trial	11%
Parole	6%
Drug Court	4%

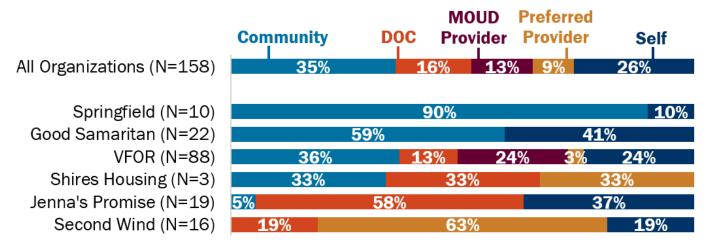
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Referral Source

• A **referral source** is the person or group who helps someone enter a recovery residence.

More people were referred to recovery residences by community organizations (35%) than any other referral source.

Some organizations had other primary referral sources. At Jenna's Promise, most referrals came from **Department of Corrections (58%)**; for Second Wind, from DSU's **Preferred Provider network (63%)**.



DOC = Department of Corrections, MOUD = Medication for Opioid Use Disorder (i.e., Hub or Spoke). Percentages may not add up to 100% due to rounding.

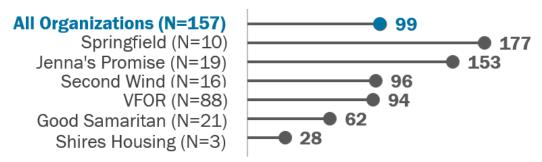


Client Outcomes in FY25

Length of Stay

The median length of stay (LOS) at all recovery residences was 99 days. Median LOS varies across organizations.

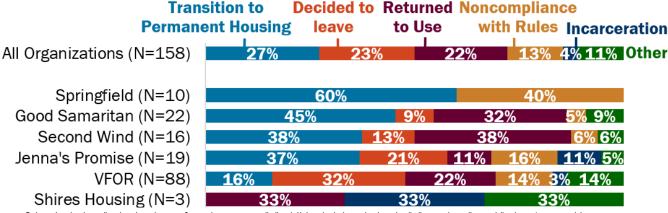
Length of stay was not reported for one person. Shires Housing opened in late FY25.



- The median length of stay is the middle amount of time people stay with half staying less and half staying longer. It is a better reflection of a typical stay than the average length of stay (158 days), because it is less affected by lengths of stay that are very different from the rest.
- The **maximum length of stay** for someone who departed the recovery residence was **over 2 years (860 days).**

Departure Reason

People most frequently departed the recovery residence to transition to permanent housing (27%), followed by a decision to leave (23%) and a return to drug use (22%).



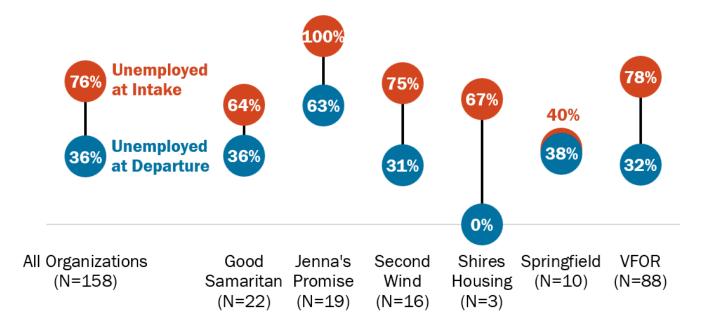
Other includes: "asked to leave for other reason", "exhibited violent behavior", "overdose", and "other (entered in comments)". Percentages may not add up to 100% due to rounding.



Employment Status

- Unemployment dropped by 40% between intake and departure.
- Some organizations, like Jenna's Promise, have their own employment services while others may connect residents to external employment services such as <u>HireAbility</u> Vermont.

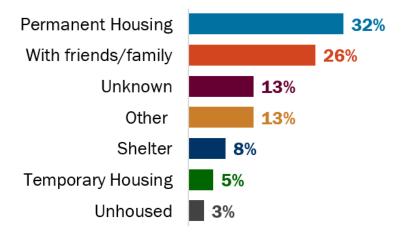
The unemployment rate decreased 40% from intake to departure at all organizations. 36% of all clients were unemployed at departure.



Housing Type at Departure

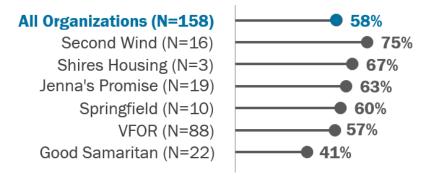
Permanent housing (32%) was the most common housing type at departure for people who left a recovery residence.

"Other" housing types include departures to medical facilities, other recovery residences, and correctional facilities.





Of all people who left a recovery residence in FY25, 58% had permanent housing or housing with friends/family at departure.



Connections to Employment, Recovery, Clinical and Social Supports

• Establishing connections to employment, recovery, clinical and social supports and services while in a recovery residence can foster personal growth and strengthen a person's recovery journey.

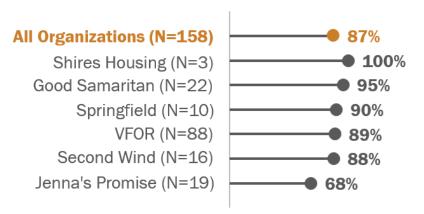
22% of all people who left received employment services during their stay at a recovery residence.

<u>HireAbility</u> is an example of an employment service.

All Organizations (N=158) Jenna's Promise (N=19) Good Samaritan (N=22) Springfield (N=10) VFOR (N=88) Second Wind (N=16) Shires Housing (N=3) 22% 47% 45% 40% 0%

87% of all people who left were connected to recovery services and supports at departure.

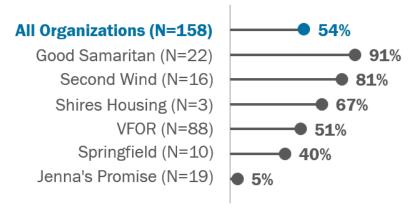
Clients self-reported whether they were connected to these services. Recovery Centers are an example of a <u>recovery</u> support service.





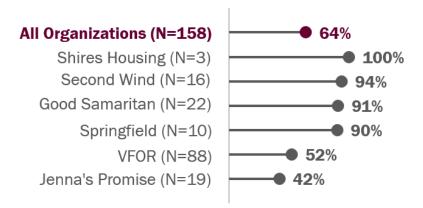
54% of all people who left were connected to clinical services at departure.

A <u>DSU Preferred Provider</u> or a <u>Hub or Spoke</u> are examples of clinical service providers.



64% of all people who left reported having more positive relationships at departure than at intake.

Clients self-defined and reported an increase in positive relationships while at a recovery residence.



Future Data Collection

- DSU works continuously with Department-funded recovery residence organizations to ensure that data collection efforts measure desired people and organization-level outcomes while also limiting administrative burden.
- Additional measures were added to the <u>FY26 data collection tool</u> to better understand client interactions with the State system of care as well as connections to services upon departure from the recovery residence.

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