

# A Peer Respite Homes Overview and Discussion

And how they support traditional recovery residence programs while employing harm reduction and housing first doctrines



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*By: William Atkinson CRRA, CRSS*

# Credentials



Executive Director of Recovery Epicenter Foundation (RCO) Serving Tampa Bay since 2017

Providing Peer Respite Care for participants of sober living homes since 2023



- Created the First FARR Accredited program on the West Coast of Florida, founded as Tampa Bay Sober Living in 2011, we gained out FARR accreditation in 2013, and became ARC when we incorporated TN24, in 2017.



# Credentials Continued

- Person in long term recovery since February of 2006
- Started working in treatment as a behavioral health technician in 2008
- Opened Tampa Bay Sober Living in 2011
- Graduated from Springfield College with a bachelors in 2012
- Member of the FARR Board of Directors since 2014 - 2018, and again from 2021 - present
- Member of the Floridians For Recovery Board of Directors since 2018 - present

# Before we Begin

*A special thank you is owed to Rick Riccardi and Sara Barkley for all of their support, and for leading the way in the development of peer respite care in Florida.*



Fellowship RCO created the first peer respite home in the state of Florida before Covid.



# People with a Substance Use Disorder need more than just Safe and Supportive Housing.

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*“None of us would be here today if somebody hadn't taken time to explain things to us, to give us a little pat on the back, to take us to a meeting or two, to do numerous little kind and thoughtful acts in our behalf. So let us never get such a degree of smug complacency that we're not willing to extend, or attempt to extend, to our less fortunate brothers that help which has been so beneficial to us.”*

Dr. Bob's Farewell Address

# What is a Peer Respite Center?



Peer Respite is a 24/7 peer staffed residence that provides housing and recovery support to people suffering from a substance use disorder that do not meet the medical threshold for care required by emergency services and do not have the means to check themselves into a private detox.

# Why is Peer Respite important to the community?



Abstinence based “sober living” homes throughout the United States often have discharge policies that involve removing residents from the home who return to active use.



# FARR's Discharge Guidelines



## FARR Suggested Protocol:

### Discharge for Reoccurrence of Use

#### Upon Intake:

- 1) Review community abstinence policy:
  - a) core resident expectation of management is alcohol and drug-free environment
  - b) discharge is not a punitive policy (disease; not moral failing)
    - i) management's first priority is to protect the safety and integrity of community
    - ii) management's secondary priority is full support for the discharged resident
    - iii) protocol stages are governed by resident's willingness to participate in their recovery
    - iv) objectives are to protect the residence community **and** the individual resident

- v) ARD should:
  - (1) Contain a clear, unambiguous statement by the resident to the effect that while currently, in possession of sound mind, they consider any future return to active use as a profound demonstration that they are no longer of sound mind and, based on their personal history with alcohol and/or drug use, present a potential danger to themselves and/or others.
  - (2) Contain the resident's acknowledgement and agreement that it is the program's policy to contact family and recovery supports immediately upon discharge for active use. This written agreement, executed in by the resident, is a condition of her/his enrollment into the recovery residence.
  - (3) Follow these step-down options:
    - (a) Detox (if deemed medically necessary)
    - (b) Return to referring entity (if option is available)
    - (c) Placement with higher level of care (if option is available)
    - (d) Initiate a Baker Act request of the local police or sheriff's department, acknowledging that at intake, when of sound mind and committed to her/his recovery, the resident executed an ARD acknowledging that a return to active use demonstrates that she/he presents a potential danger to self and/or others



- (e) Transport to the nearest hospital emergency room
- (f) Transport to homeless shelter (specify name(s) and location(s) in ARD)
- (g) Transfer to a family member's home (if option is available)
- (h) Purchase a motel room for one night, after first itemizing for family member(s) each of the alternative options presented to the resident and the fact that she/he refused to participate in them. Upon delivery to motel, immediately communicate the motel address, phone number and room number to family member(s) and recovery supports as directed and identified in the ARD.

# Abstinence Based Environments have unintended consequences



Potential for loss of life increases when the individual who returns to active use is not being monitored, ie:

- Returns to their using environment
  - Ends up homeless
- Gets dropped off at a hotel

# The Story of Adam (2012)



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- I imagine we all have stories of residents we have felt compelled to discharge who we wished we had the opportunity to help.
- And, we have more than likely all spent hours at times trying to find a resident appropriate placement in a detox or treatment program only to discover that the person doesn't meet the criteria, and or needs to be "more" inebriated than they are to receive the help they are looking for.



# The Time to Help is When the Participant Asks for Help



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Unfortunately we can do very little for people who suffer from a substance use disorder who are not willing or interested in getting help.

But, my experience is that people like us are often looking for help, but react poorly to barriers, judgements, and punishments.

And, being discharged from a recovery residence can often have the feeling, for the resident who returned to active use, as a rejection by the recovery community.



# This is the Gap Peer Respite Centers Fill



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Hospitals, Detox's and Treatment programs that operate through grants often have admission criteria that require the participant to be high or inebriated upon admission.

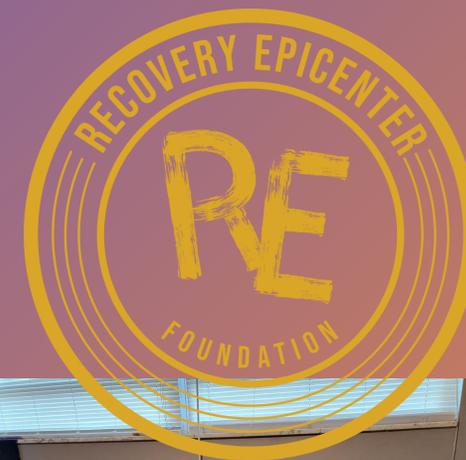
Some, like the hospital ER rooms in Florida, won't provide detox services unless the individual is experiencing withdrawal symptoms. Asking for help isn't enough.

The medical threshold for a person to receive the care they are asking for, if they don't have private insurance or funding, denies people with a substance use disorder the opportunity to avoid more serious consequences such as potential criminal arrest, overdose, and homelessness.



# What to Expect at a Peer Respite Center?

Recovery Epicenter Foundation converted an existing FARR accredited sober living home into our Peer Respite Center.



Participants of a Peer Respite can expect a sober home like environment, with the additional support of Certified Peer Support Specialists 24/7

# Short Term



**The CATCHER'S MITT**

The Catcher's Mitt is a peer-led 3-7 day recovery community assessment, observation, and recovery support service. We serve those who do not qualify for medical detox, hospitalization, or simply lack the funds for private treatment.

The Mitt offers its participants a home-like environment. We provide 24/7 peer support as they transition from active use to post acute withdrawal.

**Key Components**

- 24-Hour Peer Support
- Daily Recovery Support Groups
- Daily Recreational Groups
- Linkages to Longer-Term Housing and Community Supports
- Linkages to Ongoing Therapies and Services
- Recovery Management Plans and Recovery Capital Assessment Baselines Established

BayCare

[www.RecoveryEpicenterFoundation.org](http://www.RecoveryEpicenterFoundation.org) 1 (727) 223-3453  
Recovery.e.Foundation@gmail.com | [www.facebook.com/RecoveryEpicenter](https://www.facebook.com/RecoveryEpicenter)

Participants of what we call the Catchers Mitt, generally only stay for a couple days up to a couple weeks.

Sober Living homes in our area often have 3-7 day waiting periods or drying out periods that must be abided by before the participant is allowed to return to their abstinence-based environment.

While at the Respite, participants have free food, they are allowed to work (as this is often another barrier for why residents refuse to go to detox or treatment when they return to active use), they are drug tested and breathalyzed any time they leave and return to the Center, and with the peer support on site they are connected to higher levels of care when they meet the criteria for them.

# Demonstrating Efficacy

80% of participants at the Mitt are reconnected to an abstinence-based recovery program.

Recovery Epicenter Foundation opened the Peer Respite Center at the end of March this year, and have seen over 200 participants thus far, while having to turn people away on a daily basis.

We now have 10 beds available at this time.



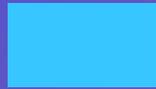
NAME	DOB	ADDRESS	PHONE	EMAIL	DISCHARGE DATE	REFFERED TO	STATUS	REMARKS
1. Anita Baker	4/10/23	New Mexico	NA	NA	4/4/2023	7/1/2023	inpatient	
2. Lori Burch	4/10/23	New Mexico	NA	NA	4/4/2023	7/1/2023	inpatient	
3. Angela Alvarez	4/7/23	Delaware House	NA	NA	4/10/2023	7/1/2023	inpatient	
4. Brett Smith	4/10/23	Michigan	NA	NA	4/10/2023	7/1/2023	inpatient	
5. Elyse Galloway	4/10/23	Michigan	NA	NA	4/10/2023	7/1/2023	inpatient	
6. Thomas Papp	4/10/23	New Mexico	NA	NA	4/10/2023	7/1/2023	inpatient	
7. Cheryl Miller	4/10/23	Michigan	NA	NA	4/10/2023	7/1/2023	inpatient	
8. Emily Johnson	4/10/23	Michigan	NA	NA	4/10/2023	7/1/2023	inpatient	
9. Danny Williams	4/10/23	New Mexico	NA	NA	4/10/2023	7/1/2023	inpatient	
10. Emily Clark	4/10/23	New Mexico	NA	NA	4/10/2023	7/1/2023	inpatient	
11. Debra Jones	4/10/23	Michigan	NA	NA	4/10/2023	7/1/2023	inpatient	
12. Aaron Baker	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
13. Danny Hayes	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
14. Daniel Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
15. Christine Terry	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
16. Cheryl Carter	4/10/23	Michigan	NA	NA	4/10/2023	7/1/2023	inpatient	
17. Eric Williams	4/10/23	Michigan	NA	NA	4/10/2023	7/1/2023	inpatient	
18. Emily Miller	4/10/23	Michigan	NA	NA	4/10/2023	7/1/2023	inpatient	
19. Brett Smith	4/10/23	Michigan	NA	NA	4/10/2023	7/1/2023	inpatient	
20. Thomas Williams	4/10/23	Michigan	NA	NA	4/10/2023	7/1/2023	inpatient	
21. Danny Williams	4/10/23	New Mexico	NA	NA	4/10/2023	7/1/2023	inpatient	
22. Anthony Smith	4/10/23	Michigan	NA	NA	4/10/2023	7/1/2023	inpatient	
23. Jennifer Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
24. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
25. Michael Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
26. Daniel Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
27. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
28. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
29. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
30. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
31. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
32. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
33. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
34. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
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37. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
38. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
39. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
40. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
41. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
42. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
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46. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
47. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
48. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
49. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
50. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
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52. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
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67. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
68. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
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71. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
72. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
73. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
74. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
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76. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
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81. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
82. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
83. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
84. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
85. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
86. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
87. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
88. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
89. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
90. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
91. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
92. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
93. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
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97. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
98. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
99. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	
100. James Smith	4/10/23	ETC	NA	NA	4/10/2023	7/1/2023	inpatient	



# Color Codes



Jail Diversion program is paying for their stay at the Catchers Mitt.



Participant was successfully transferred to a sober living home, treatment center, or detox



Participant made a choice that the Peer Support Staff did not recommend, ie returned to an unsafe environment, got a hotel room, or in a couple cases we had participants that used the Respite Center time available to them to get themselves their own long term housing (lease, mortgage, etc)

We almost always saw this person return within a month or two



*Associate Recovery Communities*



Participant was unable to close pandora's box that had been opened when they picked up again, and were now on a bender

# Developing a best Practice



The building that we operate the Catcher's Mitt in has room for 18 beds at the NARR standard of one full bathroom for 6 beds. We only operate 10 beds due to our staff coverage.

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We learned in the first two months, that the best ratio for providing adequate peer support services, including but not limited to...

- Case Management (Placement)
- Recovery Management Plans
- Recovery Capital Assessments
- Food Security
- Transportation Support
- Active Listening (Recovery Coaching)
- Relapse Prevention Groups

... Was 1 peer for every 10 participants, with one day time Supervisor (Swing shift)



# Peer Respite Funding/ Start Up



I imagine many of you, like I, have seen the need for a program such as this in your area for a long time.

I am incredibly grateful to share with you that my local hospital system BayCare Health System agreed and provided our RCO with a three-year grant, that covers the housing overhead costs, and some of the Staff Costs.

With more funding, we can hire more peers, and thus help more participants.

We hope in the near future to attach this type of care to funders that already provide sober living costs for indigent person, thus opening up more beds.



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# Peer Respite Start Up



If you are a larger program with available space and see the need for this type of program in your area, you don't need to rely on outside grants or funders.

The average daily rate for a sober living bed in Florida right now is \$30 a day, for \$50 - \$75 a day you can provide this type of service, in a dedicated space, with 24/7 peer support staffing.

Sometimes all that is needed is the desire and willingness to address a gap in our continuum of care. And the question of what do we do when a person returns to active use while living in our homes, is a gap worth addressing. It is no longer a struggle to figure out where to send the resident, nor are we just handing anyone a list of potential referrals and washing our hands of them.



# Opportunities to Provide Additional Services

I started off by saying that our participants need more than just a safe and supportive sober living home to recover.

We ask them to attend 12-step groups, celebrate recovery, smart recovery, refuse recovery, etc so that they can develop the connections we know are necessary for the personality shift required to overcome a substance use disorder.

And, through the dedicated space of your Peer Respite Center you can provide those connections, activities, and exposure to recovery.

Because, these environments are open to the recovery community at any time. So, you always have the opportunity to offer service/ fun activities to your residents through the Peer Respite Center.

**RECOVERY EPIC CENTER FOUNDATION**  
**empath EPIC**  
 FREE HIV TESTING  
 GET TESTED KNOW YOUR STATUS  
 NO COST  
 PREVENTION & EDUCATION  
 WHERE: THE CATCHER'S MITT, 316 S. BETTY LANE, CLEARWATER FL, 33756  
 WHEN: SAT, OCTOBER 7th, 10am-12 pm

**COME GET CREATIVE**  
**RECOVERY ART WORKSHOP**  
 @ THE CATCHER'S MITT  
 WHERE- THE CATCHERS MITT, 316 S. BETTY LANE, CLEARWATER FL, 33756  
 WHEN- AUGUST 12TH, 2023, 2-4:30PM

**UNITED VAPOR BARRIER LLC**  
 COMMUNITY PARTNER  
**UNITED VAPOR BARRIER LLC PRESENT CORNHOLE FOR A CAUSE..**  
 ALL FUNDRAISING PROCEEDS WILL GO TO SCHOLARSHIP FOR PEOPLE FACING FINANCIAL DIFFICULTY WHEN SEEKING A RECOVERY RESIDENCE  
 \$25 PER PLAYER  
 \$50 PER TEAM  
 TO SIGN UP CONTACT TERESA@RECOVERYEPICENTERFOUNDATION.COM  
 FOOD, FUN AND FELLOWSHIP PROVIDED!!!  
 WHEN: SATURDAY, OCTOBER, 28TH, 1-5 PM  
 WHERE: THE CATCHER'S MITT, 316 S. BETTY LANE, CLEARWATER FL, 33756

**RECOVERY EPIC CENTER FOUNDATION**  
**THE PHOENIX**  
**TAP INTO YOUR INNERSELF MINDFUL MOVEMENT**  
 @ THE CATCHER'S MITT  
 WHERE: THE CATCHER'S MITT, 316 S. BETTY LANE, CLEARWATER FL, 33756  
 WHEN: THURSDAYS @ 5:30 PM  
 SPACE IS LIMITED. SCAN QR TO SIGN UP  
 -PLEASE BRING A YOGA MAT. MATS ARE AVAILABLE BUT LIMITED



# Continuing Support

- The Catcher's Mitt actively involves alumni in continued service work. We have former recoverees come back to join or run meetings, participate in service activities and are encouraged to share their personal experience
- The respite home serves as a resource hub for ongoing recovery support for former participants
- Former participants can receive peer support services after transitioning from The Catcher's Mitt
- REF offers opportunities to former participants to volunteer fostering the principle of service work

# Maintaining the Status Quo



Is a scenario I hope we all understand is not working out for us in the long term.

Not in my backyard folks, as well as best practices involving housing first doctrines, both look at the issue of sober living homes as a potential threat to the community as well as a threat to the individual when they are removed from the abstinence-based environment

It is my opinion that the answer to both of these concerns is Peer Respite Housing. By offering a safe space for people who return to active use, we are doing our part to help arrest their slide into more serious consequences of their substance use disorder without sacrificing the integrity of the abstinence-based environment.



“There are multiple pathways to addiction recovery and all are cause for celebration!”

William White

**Thank you for  
this Opportunity  
and Your Time**



Questions?

