

**Standard Procedure for Relapses at a Recovery Residence:  
Recovery Residence Continuum of Care Model**

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The following is a suggested procedure for dealing with a relapse and potential loss of residency in a recovery residence in Vermont.

In the event of a positive drug screen or blowing numbers on a breathalyzer:

**First Relapse:**

*The resident will immediately be asked to leave the residence. The recovery residence representative will give the resident a reasonable amount of time to collect some of their belongings and the resident will explain the following steps of the First Relapse, as indicated below.*

**The resident at risk for losing residency due to a relapse is to be brought by a recovery residence representative to the local PIP/DOC facility:**

1. If in the judgement of the PIP/DOC staff the resident is not intoxicated:
  - a. The resident will stay in Public Inebriate Program for up to 24-hours.
  - b. If there are no beds available at PIP than a law enforcement officer will transport the resident to protective custody at local DOC facility.
  - c. The resident can be transported to DOC facility by a law enforcement officer if the resident:
    - i. Is judged by law enforcement or PIP/DOC staff as not intoxicated and;
      1. No beds are available at a PIP
  - d. If the resident refuses protective custody at PIP/DOC facility, the resident's residency may be discontinued on a case to case basis.
2. If in the judgement of the PIP/DOC staff the resident is intoxicated:
  - a. The resident will be brought to a detox facility and billed for an alcohol and/or drug assessment fee and allowed to stay for up to 24-hours.
  - b. If there are no beds available in the detox facility, the resident will be transported to the ED by a law enforcement officer except;
  - c. When a substance abuse crisis team or a designated substance abuse counselor exists in the vicinity and is available, the person may be released to the team or counselor at any location mutually agreeable between the officer and the team or counselor.
  - d. The resident can be brought to a DOC facility by a law enforcement officer if the resident:
    - i. Is judged as intoxicated, does an assessment by the detox facility, hospital, or crisis team and requires detoxification, and;
      1. Refuses treatment at the approved facility;
      2. Or there are no beds/staff available at the detox center or hospital

**Second Relapse:**

-Recovery residence representative will follow *First Relapse* procedure.

1. The PIP/DOC staff will make a referral to an IOP program: At the designated agency for SUD by county

**Third Relapse:**

1. If the resident is enrolled in IOP: IOP staff will refer the resident to a residential treatment facility and the recovery residence representative will follow *First Relapse* and *Probation Period* until a bed becomes available.
2. If the resident has completed IOP: Recovery residence representative will start back at *First Relapse*.

**Fourth Relapse:**

1. If the resident does not successfully complete residential treatment: The resident's residency, on a case to case basis, could be discontinued.
2. If the resident completes residential treatment: The recovery residence representative will go back and follow procedure as indicated in *First Relapse*.

**Additional Relapses:**

1. This cycle should just continue based on where the resident is at in their individualized treatment plan and their willingness to participate in programming.

**Note:** This procedure can be overridden by the recovery residence representative on a case to case basis in the event of an extreme danger to the resident, the residence, or the community. It can also be modified to fit the individualized treatment plan of the resident as defined by the resident and their care team.

**Probation Period:**

In retaining residency after a relapse, the resident will be put on a 30-day probation period. While on a probation period, the resident should contact recovery residence representative regularly, submit to more regular and random drug and alcohol testing, and allow for occasional random room searches if deemed appropriate by recovery residence representative.