



RESIDENT RELAPSE POLICY

DOCUMENT 08: VERSION 1.1

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OVERVIEW

At Sunstone, we understand that relapse is sometimes part of the chronic brain disease of addiction. Below, we have outlined the policy that should be followed if a resident relapse occurs. By working directly with the resident and their substance use disorder (SUD) treatment provider, it is our objective to dramatically reduce (and ideally eliminate) the occurrence of relapse in our resident population.

The definition of Relapse: *The resumption of substance use after a period of recovery, using again and again over a period of time.*

The definition of Lapse: *A brief resumption of the addiction before quitting again soon thereafter.*

RELAPSE PREVENTION

At the onset, Sunstone seeks to prevent relapse from occurring. The Sunstone model requires that the recovery home and therapeutic providers directly collaborate. Sunstone facilitates this process by offering a variety of high-value activities for residents: on-site yoga, meditation, arts and crafts, cooking classes, volunteering, peer mentoring, social events and support groups.

RESPONSE TO RESIDENT RELAPSE

If a resident were to experience a relapse, exhibit dangerous symptoms or overdose, Sunstone will take the necessary steps to ensure the resident receives appropriate medical attention. Narcan is stored in multiple locations on the Sunstone premises. Any resident or staff who suspects that a person is experiencing an overdose should contact 911 and administer Narcan immediately. For more information, please refer to the policy entitled, ***House Rules***.

A relapse is considered an **INCIDENT**. Therefore, the ***Incident Policy*** must be followed, and an Incident Report must be generated. The resident agrees and understands that relapse is not part of recovery but is an attribute of a SUD.

POLICY GUIDELINES

1. The resident agrees and understands that Sunstone and the resident's treatment provider are in daily and weekly communication and share information (including but not limited to treatment documents, toxicology reports, treatment plans, etc...).
2. The resident will place their treatment program first and foremost. All scheduled appointments with treatment providers are critical and are required to attend while residing at Sunstone.
3. If the resident should relapse, Sunstone will work with the treatment provider to determine the best course of action (i.e., brief inpatient withdrawal management admission, ambulatory withdrawal management, inpatient mental health admission, increased SUD and or MH services, assessment for increased or other services, etc.).
4. If the resident should experience a relapse, the resident is to report this immediately to their treatment provider and Sunstone staff.
5. Should relapse occur and the resident is approved to continue living at Sunstone, the resident agrees to all requirements set forth by Sunstone and the resident's treatment provider. This includes, but is not limited to: on-site social support via support groups like SMART Recovery, in-person support meetings like Celebrate Recovery, 12-step support groups like Narcotics Anonymous or Alcoholics Anonymous, peer-based art therapy, peer-based yoga and meditation.
6. If the resident relapses, Sunstone may modify access to the Medication Lockbox Vestibule and require observed dosing of medication for an indefinite time period.
7. Should relapse occur, Sunstone reserves the right to implement a curfew including but not limited to restrictive movement outside of the Sunstone property.
8. If it is determined that the resident's needs cannot be met by Sunstone or the resident puts the health or safety of other residents at risk, then Sunstone and the resident will mutually agree to terminate residency at Sunstone. Sunstone will assist the resident in finding a suitable living arrangement, whether with family, friend, shelter or other housing provider.
9. If the resident's actions create an unsafe living environment for the resident and/or other residents, Sunstone staff will require the resident comply with specific instructions. If the resident refuses to comply, Sunstone reserves the right to have the resident removed from the property. Sunstone staff will make their best efforts to help safely relocate the resident.

ACKNOWLEDGEMENT

I, _____ have received, understand and agree to the Sunstone Resident Relapse Policy.

Signature of Resident

____/____/____
Date

Signature of Sunstone Representative

____/____/____
Date