



Peer Respite

1. Peer Respite 01 (Rule 65E-14.021, F.A.C.) PEER RESPITE 01 Does a review of the Florida Certification Board credential verification system confirm that the Certified Recovery Peer Specialist or Certified Recovery Peer Specialist Provisional who documented services in the participant record possessed an active credential at the time services were rendered?
2. Peer Respite 02 (DCF Guidance Document 35; LSFHS ID 36) PEER RESPITE 02 Does the provider demonstrate that all newly hired peer specialists receive structured Recovery Management orientation training and ongoing refresher training consistent with Recovery-Oriented Systems of Care principles and peer support best practices?
3. Peer Respite 03 (DCF Guidance Document 35; LSFHS ID 36) PEER RESPITE 03 Does the provider maintain written policies and procedures governing peer support services that reflect peer specialist input regarding service delivery practices, recovery support principles, and peer supervision processes?
4. Peer Respite 04 (DCF Guidance Document 35) PEER RESPITE 04 Does the provider demonstrate that all peer specialists delivering services have completed Reaching for Their Dreams training and maintained documentation of course completion within their personnel records?
5. Peer Respite 05 (DCF Guidance Document 35; LSFHS ID 36) PEER RESPITE 05 Does the provider maintain documentation demonstrating structured peer supervision occurring in accordance with agency policy and no less frequently than monthly?
6. Peer Respite 06 (DCF Guidance Document 35; DCF Guidance Document 42) PEER RESPITE 06 Approved Program Description Does the provider demonstrate that Peer Respite staff receive training related to overdose prevention, naloxone administration, trauma-informed care, crisis response procedures, motivational interviewing, suicide prevention practices, and other training necessary to safely operate a Peer Respite program?
7. Peer Respite 07 (Approved Program Description; Provider Admission Policy; Florida Statute 394.459(3)(a)1., F.S.) PEER RESPITE 07 Does the participant record contain documentation demonstrating that a pre-admission screening was completed and that the individual met established eligibility criteria for admission into the Peer Respite program, including voluntary participation in peer recovery support services?
8. Peer Respite 08 (Approved Program Description; Provider Admission Policy; Florida Statute 394.459(2)(b), F.S.; Chapter 397, F.S.) PEER RESPITE 08 Does the participant record contain documentation demonstrating that the individual was screened and determined appropriate for a non-clinical Peer Respite setting and was not in need of detoxification services, inpatient psychiatric treatment, inpatient medical services, or another higher level of care?
9. Peer Respite 09 (Approved Program Description; Provider Suicide Prevention Policy) PEER RESPITE 09 Does the participant record contain documentation demonstrating that suicide risk screening was completed prior to admission and that any identified concerns were addressed in accordance with provider policy?
10. Peer Respite 10 (Approved Program Description) PEER RESPITE 10 Does the participant record demonstrate that priority populations identified by the provider, including individuals with recent overdose history, individuals exiting treatment settings, pregnant individuals, or individuals experiencing housing instability, were identified and processed in accordance with established admission procedures?



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11. Peer Respite 11 (Florida Statute 394.459(3)(a)1., F.S.) PEER RESPITE 11 Does the participant record demonstrate that the individual voluntarily consented to services, received an explanation of available peer recovery support services, and was afforded the opportunity to participate in the development of recovery goals and service planning?
12. Peer Respite 12 (DCF Guidance Document 35; LSFHS ID 36) PEER RESPITE 12 Does the participant record contain a completed BARC-10, Recovery Capital Scale, or other approved recovery assessment completed within timeframes established by provider policy?
13. Peer Respite 13 (DCF Guidance Document 35; LSFHS ID 36) PEER RESPITE 13 Does the participant record contain an individualized Recovery Plan or comparable recovery-focused service plan that reflects the participant's strengths, barriers, goals, and recovery support needs?
14. Peer Respite 14 (DCF Guidance Document 35; LSFHS ID 36) PEER RESPITE 14 Does the participant record demonstrate that peer support services, recovery coaching, skills development activities, resource navigation, care coordination activities, and recovery support services were delivered based upon the participant's identified needs and goals?
15. Peer Respite 15 (Chapter 397, F.S.; DCF Guidance Document 42;) PEER RESPITE 15 Chapter 397, F.S.; DCF Guidance Document 42; Approved Program Description Does the participant record demonstrate coordination of specialized referrals and recovery supports for individuals with co-occurring disorders, pregnant individuals, individuals living with HIV, or other identified special populations when applicable?
16. Peer Respite 16 (LSFHS ID 64) PEER RESPITE 16 Are Recovery Plans, Safety Plans, admission documentation, discharge documentation, and other required program documents signed or co-signed by a Certified Recovery Peer Specialist or Qualified Professional within ten business days of completion?
17. Peer Respite 17 (Rule 65E-14.021(4)(a), F.A.C.) PEER RESPITE 17 Does the peer support service documentation contain all required elements, including the participant's name or identifier, date of service, specific peer support service provided, staff providing the service, group name when applicable, and all other documentation elements required under Rule 65E-14.021, F.A.C.?
18. Peer Respite 18 (Approved Program Description;) PEER RESPITE 18 Contract Requirements Does the provider maintain documentation demonstrating continuous staffing coverage consistent with the approved Peer Respite operational model?
19. Peer Respite 19 (Provider Emergency Procedures;) PEER RESPITE 19 Risk Management Policies Does the provider maintain written procedures addressing participant medical emergencies, behavioral health crises, overdose response, fire safety, evacuation procedures, and other emergency situations that may occur within the Peer Respite environment?
20. Peer Respite 20 (Provider Incident Reporting Policy;) PEER RESPITE 20 Contract Requirements Does the provider maintain incident reporting procedures and documentation demonstrating appropriate response, review, and follow-up for participant safety incidents occurring within the Peer Respite program?
21. Peer Respite 21 (DCF Guidance Document 42; Provider Overdose Prevention Policy) PEER RESPITE 21 Does the provider demonstrate that naloxone is available within the Peer Respite program and that staff are trained in overdose recognition, overdose response, and naloxone administration procedures?



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22. Peer Respite 22 (DCF Guidance Document 35; Recovery-Oriented Systems of Care Principles) PEER RESPITE 22 Does the participant record demonstrate that discharge planning was initiated during the participant's stay and addressed the individual's ongoing recovery support needs?

23. Peer Respite 23 (DCF Guidance Document 35; Recovery-Oriented Systems of Care Principles) PEER RESPITE 23 Does the participant record demonstrate active linkage to treatment services, recovery supports, housing resources, healthcare services, employment supports, educational services, or other community resources identified by the participant?

24. Peer Respite 24 (DCF Guidance Document 42; Recovery-Oriented Systems of Care Principles; SAMHSA TIP 63) PEER RESPITE 24 When applicable, does the participant record demonstrate coordination and warm handoff activities involving medication-assisted treatment providers, behavioral health providers, housing providers, healthcare services, or other community recovery supports?

25. Peer Respite 25 (DCF Guidance Document 35; LSFHS ID 36) PEER RESPITE 25 Does the provider maintain a process for monitoring fidelity to peer support services, Recovery-Oriented Systems of Care principles, Motivational Interviewing practices, trauma-informed approaches, and the provider's approved Peer Respite service model?

26. Peer Respite 26 (Contract Requirements; Approved Program Description) PEER RESPITE 26 Does the provider routinely monitor and analyze key program performance measures, including admissions, average length of stay, discharge outcomes, recovery support linkage rates, housing outcomes, participant satisfaction, overdose events, and readmission trends for the purpose of quality improvement?