

Recreating our Crisis Centers: The Living Room

A Peer Support Alternative

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Recovery



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Supporting **META** Certified Recovery Alternatives



The Context

- Crisis Services: Psychiatric Recovery Center
- Anyone in Maricopa County (3.5 million population is eligible for services).
- Licensed screening site for commitments due to danger to self or others; new and amendments.
- Serve 525 people monthly average; 20% involuntary.
- Referrals from police, jail, hospital ERs, case managers, family, and self.
- Over 45% are new to us and new to psychiatric services.
- Multi-disciplinary team with a Psychiatrist in charge of care. Peer Support Specialists on staff.

Living Room

- Co-located with the Psychiatric Recovery Center.
- Offers a peer alternative to traditional psychiatric crisis services.
- Staffed with Peer Support Specialists around the clock.
- Following a screening by the MD, people may choose to be a guest in the Living Room.

Role of Peer Support Crisis Specialists

- Connects to the individual from a position of mutuality.
- Promote recovery by creating a warm and friendly environment where people want to engage.
- Hold the hope and communicate the message of hope.
- Be an equal member of the team/ not a sheltered work place.
- Bring a peer/recovery perspective to the team.
- Eliminates forced and violent interventions like seclusion/restraint due to recovery expectations established.

Creating the Living Room

- First added “greeters” to Center.
- Recovery Innovations Peer Support Training program, funded by RSA, provided essential training for peers.
- Used learning from previous peer integration experience.
- Training of all Center staff in role of Peers.
- Began working through staff doubt.

Living Room

- Peers share their stories of hope. (refer to “Telling Your Story.”)
- Negotiate each person’s needs individually.
- Guests develop recovery plans. (refer to “Recovery Plan.”)
- Peer role model how to document without “writing about people”.
- Guests make connections with the community and plans for “next steps”.

Influence of Peer Support on “Clinical Staff”

- “Patients” are seen as people with a future, not a situational crisis
- Active engagement rather than safety and security enforcement
- Medical Staff “prescribing” peer support

