AGENDA: Recovery Strategy Committee, August 2, 2018

Welcome, Introductions

What supports are needed to sustain recovery no matter where one is on the Recovery path?

- A person *new in treatment*
- A person **stable in treatment**
- A person in *long-term recovery*
- A person *relapsing*

Following are **Recovery Strategies** for consideration:

What is missing, what needs to be strengthened?

Consider Pathways to effect change:
Policy
Program
Infrastructure
Investment

Recovery Centers/Recovery Network

- Continued expansion of resources for 12 centers, the Vermont Recovery Network, and VAMHAR.
 - SAMHSA technical assistance consultation underway; report due late August.
- **Service navigation:** How does Vermont enhance a continuum of care and support from treatment to recovery? (and possibly including intervention)
 - Community-based initiatives such as Project VISION (Rutland), DART (St. J), CommSTAT (Burlington) offer consistent monthly meetings with all providers, for coordination. Does this address the need?

What's missing? What development is needed to make these "actionable"?

Employment

- Employees in Recovery: Inter- and intra-agency collaboration leveraging existing and new resources
 to support employment counseling including skills training and connection to employment
 placement. Program development underway to place employment consultants in all Recovery
 Centers by December 2018. In addition, pilot program to launch in three regions providing
 additional resources for employee education and training by placing full-time staff connecting
 treatment providers and Recovery Centers.
- <u>Employers</u>:
 - Model a Vermont initiative after the Recovery-Friendly Workplace initiative in New Hampshire.
 - Develop an employer toolkit including guidance for flexible workplace policies, harm reduction methods including naloxone, and a video to raise public awareness and reduce the stigma attached to addiction.

What's missing? What development is needed to make these "actionable"?

Housing

- Inventory existing recovery/sober housing and identify regional gaps.
- Support the Non-Profit Housing Provider Opioid Task Force applying for a grant to:
 - Conduct the inventory
 - o Provide education and training for non-profit housing providers, landlords and private sector developers about addiction, treatment and recovery
 - Support recovery/sober housing in every region supportive services and homes.
- Support the expansion of programs of excellence to include:
 - o Landlord Liaison Program, Rutland
 - o SASH
 - o Other?
- <u>Support for VTARR</u>: Support development of standards for Vermont recovery residences based on NARR guidance.

What's missing? What development is needed to make these "actionable"?

Recovery Coaching

- Encourage and support national certification of recovery coaches in Vermont through the International Certification & Reciprocity Consortium (IC & RC) and/or NAADAC (Association for Addiction Professionals)
- Expand the number of recovery coaches across Vermont, including training focused on particular cohorts within the Recovery Community:
 - o Every hospital emergency department (ADAP/recovery coach pilot)
 - o Pregnant women with addiction through hospital-based programs
 - New Mom's through recovery centers
 - o Department of Corrections support groups
 - Offender reentry
 - o Youth: new program to reach high school through young adults
 - o General support for people with OUD through treatment providers and recovery centers
- Expansion of supervision for Recovery Coaches

What's missing? What development is needed to make these "actionable"?

Transportation

- Expand the regional ride program (bullet 3)
- Expand regional collaboratives: Project Vision, DART, PITR, Project Action Model. ONE collaborative model; sub-committees to target efficiencies, systemic effectiveness.

What's missing? What development is needed to make these "actionable"?

Criminal Records – Expungement

Review underway. Critical to employment, housing, driver licenses, insurance.

- Summer legislative study committee will craft recommendations and present for OCC review this fall.
- Other?

What's missing? What development is needed to make these "actionable"?

Misc:

- Service Navigation/Care Coordination/Case management
- Benefits cliff
- Dental care
- Child care
- other