An Emerging Framework – A Recovery-Oriented Systems Approach

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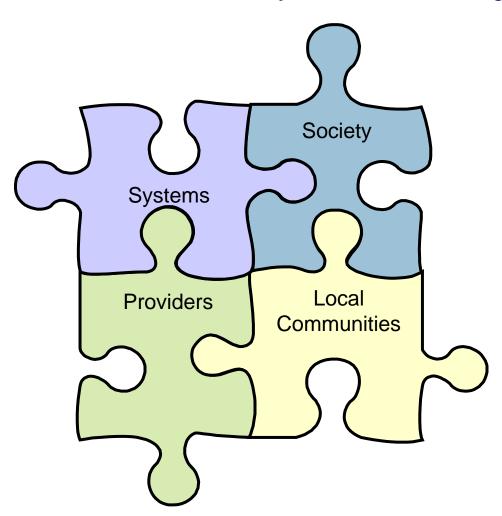


Presentation Goals

- To provide an overview of a recovery-oriented systems approach;
- To discuss the benefits this emerging approach;
- To engage you in the system change process; and
- To answer your questions.

Any problems faced by the individual substance user cannot be seen in isolation from their family, local community and society.

- Scottish Advisory Committee on Drug Misuse, 2008.



A Recovery-Oriented Systems Approach: An Emerging Framework













Recovery-oriented systems supports person-centered and self-directed approaches to care that build on the strengths and resilience of individuals, families, and communities to take responsibility for their sustain health, wellness, and recovery from alcohol and drug problems.

Recovery-Oriented Systems Adopt a Public Health Model

- Population-based
- Holistic
- Risk factor-oriented
 - With attention to vulnerable populations
- Focused on:
 - Health promotion
 - Disease prevention
- Evidence-based





Describing the Approach

- A comprehensive menu of services and supports that can be combined and readily adjusted to meet the individual's needs and chosen pathway to recovery.
- An ongoing process of systems improvement that incorporates the experiences of those in recovery and their family members.
- The coordination of multiple systems, providing responsive, outcomes-driven approaches to care.



Systems Elements

Person-Centered:

- Individualized & Comprehensive Services Across the Lifespan
- Responsive to Culture & Personal Belief Systems
- Partnership-consultant Relationships
- Strength-based
- Community-based
- Commitment to Peer Services
- Involvement of Recovering Individuals, Families and other Allies



System Elements (cont'd)

Efficiency and Cost Effectiveness:

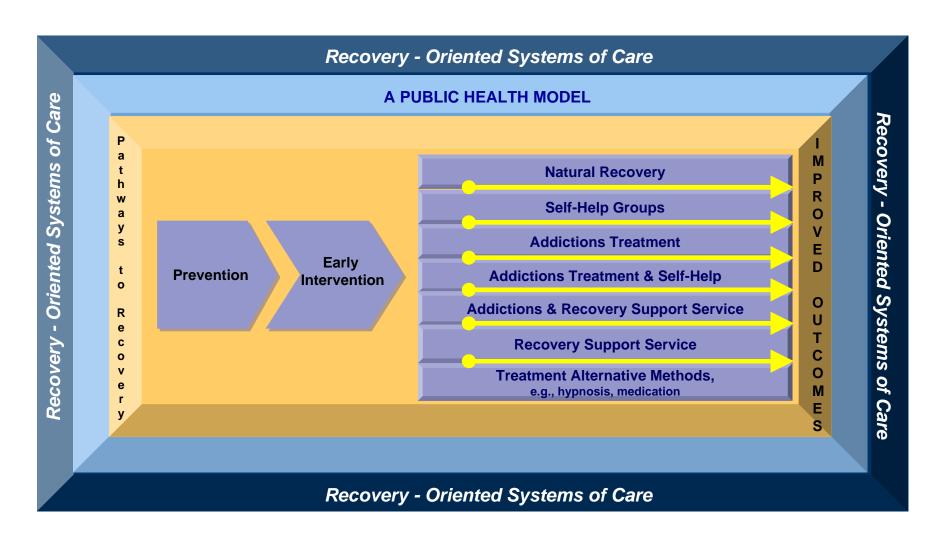
- Outcomes-oriented
- Integrated Services
- Systems-wide Education and Training
- Continuity of Care
- Monitoring and Outreach
- Research-based
- Adequately & Flexibly Financed





- To support preventive strategies related to substance use problems & disorders;
- To intervene early with individuals with substance use problems;
- To support sustained recovery for those with substance use disorders; and
- To improve individual, family and community outcomes.

Illustrating Recovery-Oriented Systems



Why Do We Need This Approach?



Why do we need this approach?

- Operations are not always aligned with our values and knowledge
- Insufficient and inefficient use of resources
- Cumbersome, fragmented and inflexible systems



Why do we need this approach? (cont'd)

- 46% of referrals to inpatient alcoholism treatment did not show up for their initial interview
- 44% of those who did show up for their initial interview did not return
- 52-75% of alcoholic clients dropped out of treatment by their fourth outpatient session
- 4.7 was the average number of outpatient alcoholism treatment sessions (Dennis Donovan, Ph.D., 2003).
- Studies report that most clients undergo 3 to 4 episodes of care before reaching a stable state of abstinence (Dennis, Scott & Funk, 2003).

Why do we need this approach? Feedback from the Community

- "The opportunity for the client to choose what support is best for them"
- "Identify as many supports as possible to address where the client is"
- "Case management that runs concurrently with treatment and follows the client after treatment into recovery"
- "Treatment for the length of time a client needs it"
- "System where clients can learn life skills and how to handle the addiction in and after treatment"
- "Services that accommodate the clients' schedules"

Feedback from the Community (cont'd)

- "Services that fit the client rather than the client fitting into a box"
- "Access to services 24 hours a day during and after aftercare"
- "Programs that address and can accommodate additional medical issues"
- "A mentor to guide you into recovery during and after treatment"
- "[Treatment centers] which are involved in and outside the community and knowledgeable about resources and support systems"
- "Treatment, prevention and recovery working together" (New Jersey Community Forum)

...we have a lot to build upon

- □ Federal and State initiatives
- ☐ Institute of Medicine (IOM) Report
- Advances in science and technology
- □ Growth of recovery communities
- □ Emergence of recovery advocacy
- □ Focus on collaboration and accountability





What are the Benefits of Recovery-Oriented Systems?





- Systems provide comprehensive services that not only treat, but reduce risk and prevent problems.
- Systems and policies provide clients with options and the ability to make informed decisions regarding their care.
- Treatment is viewed as one of many critical resources needed for a client's successful integration into the community.
- Systems and services are more welcoming and flexible.
- Measures of satisfaction are collected routinely from people in recovery and their families.

Working with People in their Social Environments

Family & Friends

School

Work



Faith

Recreation

Recovery Support

Treatment



Enhancing Current Systems & Services



Enhancing Current Systems & Services

Many elements of this approach are not new.

Enhancements include:

- Incorporation of ongoing prevention, early engagement and early intervention across systems;
- Emphasis on recovery support services throughout the continuum of care;...



Enhancing Systems & Services (cont'd)

Enhancements include: (cont'd)

- Adoption of individualized and flexible menu of services;
- Inclusion of chronic care approaches (i.e., recovery management);
- Emphasis on evidence-based practices; and
- Incorporation of community networks & resources.

Enhancing the Continuum of Care to Provide a Recovery-Oriented Approach

Prevention	Intervention	Treatment	Post-Treatment
Across the lifespan	■ Screening, Brief	■ Menu of services	■ Continuing care
Community, individual& family focused	intervention, Referral to treatment	Individualized & strength-based care	■ Recovery support services
■ Evidence-based	■ Early intervention	across the lifespan	■ Follow-up
■ Cross-systems work	■ Pre-treatment	Client-informed decision-making	communication
	■ Evidence-based		Self-monitoring
Stigma reductionRecovering individual	■ Recovery support services	Recovery support services	■ Early re-intervention
& community involvement		Recovering individual& family involvement	Recovering individual, family, ally & community involvement

- A full continuum should be made available through coordination with multiple systems.
- Individuals should have access to a full continuum of care regardless of the system they enter or the community in which they live.

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Role of the Prevention, Treatment and Recovery System

- Acts as one of the coordinators for change process;
- Provides person-centered/self-directed services and supports
- Accesses services from other systems; and
- Supports recovery-oriented improvements in other systems.



- Service Engagement & Early Intervention: Expand outreach services to reach people (individuals, families, communities) at earlier stages of problem development.
- Service Access: Expand treatment access and increase the ability to access services in other areas (e.g. psychiatric access, housing with community supports, etc.).
- Assessment: Move toward global strengths-based assessment procedures.

Ways to Strengthen Your Efforts (cont'd)

- Service Relationship: Shift the primary service relationship from an expert-patient model to a partnership/consultant model. Emphasize the right of clients to participate in direct service decisions, plan for services, and to move toward self-management of their recovery in collaboration with the people who serve them.
- Clinical Care: Move to recovery-focused, evidence-based, age-appropriate, gender-sensitive, culturally competent and trauma-informed services.
- Community Supports: Use a variety of community resources to supplement treatment resources and to support sustained recovery.

States are Beginning to Develop & Implement this Systems Change Approach





Of the 49 States, DC & Puerto Rico that participated in the Regional Recovery Meetings:

- 10% have started planning and actively implementing recovery-oriented systems change
- 35% are implementing systems elements and beginning to plan recovery-oriented systems implementation
- 43% are implementing selected systems elements
- 12% are considering a recovery-oriented approach





A State Example: Connecticut



Connecticut's Recovery-Oriented Approach

- Develop core values and principles
- Establish conceptual and policy framework
- Build competencies and skills
- Change programs and service structures
- Align fiscal resources and administrative policies in support of recovery
- Monitor, evaluate and adjust



What people want from their healthcare system:

- A welcoming healthcare setting with prompt access
- An expectation of "getting better," not necessarily "cured"
- A hopeful and respectful atmosphere
- Treatment and tools to manage their own recovery ("you can do it; we can help")
- Examples of other people who have benefited from the system
- Support for improving their quality of life



A Person-Centered Recovery Plan:

- Promotes self-determination and a valued role within the community;
- Re-orients participants, as well as providers, to strengthbased and solution-oriented approaches;
- Develops skillful use of personal and community assets;
 and
- Extends beyond medical models.



Recovery Support Services:

- Housing: Sober housing, recovery homes, independent living
- Transportation: Peer service to & from some treatment setting, bus tokens
- Case management: Recovery guides, coaches, peers
- Employment: Services from DOL certified employment providers
- Basic needs: Food, clothing, personal care items, utilities, etc.
- Faith-based supports: Individual mentoring/coaching and groups
- Peer supports: Individual mentoring/coaching and groups
- Recovery clinical checkups
- Telephonic recovery support calls

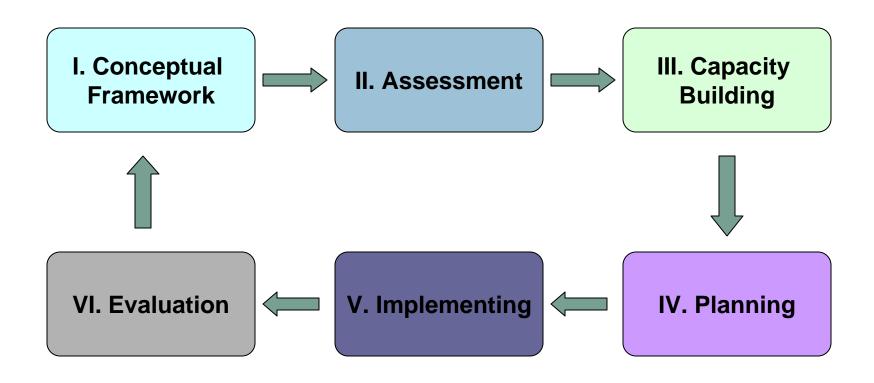


Sample Continuing Care, Long term Recovery Management Service System Outcome Measures

- Overall growth rate of costs
- Percent of total costs for each Level of Care (LOC)
- Access, retention and drop out indices
- Percent of total client admissions into each LOC
- Percent of first time admissions within existing system capacity
- Pre/Post-recovery support service cost and service comparisons
- Rate of connecting to lower LOC 7, 14, 30, 90 days
- Rate of readmissions to same or a high level of care within "X" days of discharge from a detox, inpatient or acute care service
- Consumer survey results: Access, appropriateness, general satisfaction, outcomes, recovery, participation in treatment, respect



Planning Recovery-Oriented Systems Change





- Does your organization have a process and plan to implement change?
- Are individuals in recovery engaged in developing and implementing your services?
- Are family members engaged in the recovery process?
- Are you working with prevention, mental health, primary care, and other systems to support your clients and their families?



Questions to Assist You with Implementation (cont'd)

- Have staff been provided the skills and organizational support needed to implement recovery-oriented systems change?
- Are you providing holistic and integrated services across the lifespan?
- Have you instituted a partnership-consultant relationship?



- Are you providing strength-based and culturally responsive services?
- Are evidence-based strategies being applied?
- Do you provide recovery support services (prior to, during, and following treatment)?



- Multi-year implementation process
- On-going systems improvement process
- Identify strengths & gaps in existing services
- Build on the strengths that currently exist
- Implement recovery-oriented performance outcomes
- Adjust systems based on outcomes

Pursue efforts where you can achieve early success and promote those accomplishments!



- CSAT Cross-Cutting Work Group on Recovery –
 Representatives from all CSAT Divisions and Offices focus on
 coordinating recovery-related efforts to ensure a unified voice to
 the field.
- Regional Recovery Meetings Five regional meetings, 210 participants representing 49 states, D.C., and Puerto Rico.
- White Papers Three white papers describing recovery-oriented approaches in States and communities, one paper describing the role of recovery support services in recovery-oriented systems, and one paper presenting research related to the recovery principles and systems elements.



- Conference Report Report on emerging peer recovery support services indicators of quality. The report can be accessed via: http://rcsp.samhsa.gov/lessons/index.htm.
- Recovery-oriented Resource Guide Resource which includes plans, practice guidelines, vision statements, workforce competencies, training outlines, surveys, protocols, and literature review.
- Educating State Legislators on Recovery-Oriented Approaches – Developing website, fact sheet, three webassisted audioconferences, presenting at Health Chairs Meeting and drafting issue brief.

SAMHSA/CSAT Resources

Substance Abuse and Mental Health Services Administration
 SHIN 1-800-729-6686 for publication ordering or information on funding opportunities

800-487-4889 - TDD line / http://www.samhsa.gov

- Recovery Community Services Program http://rcsp.samhsa.gov/about/overview.htm
- National Alcohol & Drug Addiction Recovery Month http://www.recoverymonth.gov
- Faces and Voices of Recovery http://www.facesandvoicesofrecovery.org/
- Partners for Recovery Shannon Taitt, PFR Coordinator (240-276-1691) http://www.pfr.samhsa.gov

Questions & Comments