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RECOVERY

The Guiding Principle of the DMHAS System of Care



Why Focus on Recovery Now?

- Blue Ribbon Commission
- Federal Emphasis and Expectation
 - President's New Freedom Commission
 - SAMHSA
- Growing body of research
- Expectations of consumers and persons in recovery
- Improved outcomes and effectiveness





(From the state of Connecticut)

The Department endorses a broad vision of recovery that involves a process of restoring or developing a positive and meaningful sense of identity apart from one's condition and then rebuilding a life despite or within the limitations imposed by that condition. A recovery oriented system of care identifies and builds upon each individual's assets, strengths, and areas of health and competence to support achieving a sense of mastery over his or her condition while regaining a meaningful, constructive, sense of membership in the broader community.



ONE GOAL



Many Paths



- To the extent possible, individuals should have responsibility and control over their personal recovery process
- Increase individual/family participation in all aspects of service delivery
- Expand recovery efforts to all aspects of individual's lives- social, vocational, spiritual through direct services or linkage to natural helping networks
- Promote highest degree of independent functioning and quality of life for all individuals receiving care in our system



 Develop a philosophical/conceptual approach

Build competencies, skills, and service structure

 Align fiscal and administrative policies in support of recovery

Service System Progression



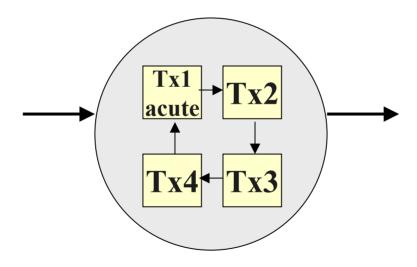
Traditional



Service System Progression



Evolution



Service System Progression



Revolution





Dimensions of Recovery



Empowerment and citizenship

Overcoming Stigma Assuming control



Meaningful activities

Incorporating illness

Managing symptoms

Hope and Commitment

Redefining Self

Support of Family and friends

<u>Sample Recovery Dimension in</u> <u>CT Recovery Model: *Supportive Others*</u>

Person In Recovery:

What recovery means to me...

Direct Service Provider:

How I can support people in their recovery...

Manager/Administrator:

<u>How I can lead an organization</u> <u>that supports recovery...</u>

- I know when I am not doing well and when I need to ask for help from others.
- I have something to offer and can help others when they need me.
- Help people to develop lasting connections to communities and natural supports
- Be willing to include natural supports in the planning process
- Be willing to help people get their basic needs met in the community
- Believe in people and share that belief with others
- Be an "advocate" as well as a "provider"
- Value and explore spirituality as a potential source of support

- Educate staff and others about natural support networks and how to build them
- Develop structured educational programs for families and natural supporters
- Offer to host local, state-wide, and national consumer and family support group, e.g., NAMI, AU, & CCAR
- ·Value and foster use of peersupport and self-help throughout the agency

Recovery Markers:

We will know that we are working together toward recovery when...



- •Staff help people build connections with neighborhoods and communities
- •Services are provided in natural environments
- Peer support is facilitated and utilized
- •Natural supports are relied upon



BARRIERS TO





Systemic Barriers

- Lack of consensus regarding vision
- Unclear standards or expectations
- Commitment to old way of operating
- No mechanism for technology transfer
- Lack of incentives for change
- Plan for change is not integrated
- No feedback or evaluation of change

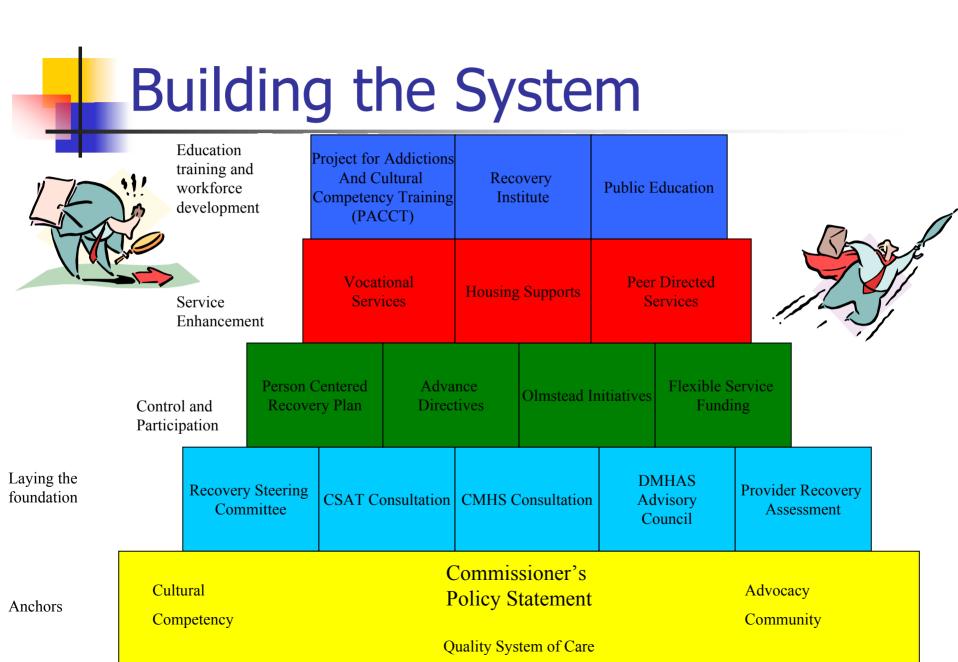




- Technical assistance and consultation
- Consensus building regarding vision
- Development of recovery standards
- Formalized advisory structure
- Implementation plan and work teams
- Training and education
- Ongoing communication

Guidelines for Change

- Re-orient all systems
- Build partnerships and consensus
- Incentivize the system
- Evolve process using phased approach
- Identify and develop "preferred practices"
- Distribute to field through training and technical assistance
- Integrate recovery initiative into existing initiatives
- Non-punitive approach to transition
- Development of recovery-oriented performance outcomes



IMPLEMENTATION PLAN** Examples

	Phase I	Phase II	Phase III
Philosophical/ Conceptual	Build Consensus on Definitions	IdentifyImplicationsDog & PonyShows	 Address stigma within other systems and the community
Competencies, Skills & Programs	EvaluateApproachesBaselineAssessment	Begin TrainingIncentivizeProgramInnovations	AdvancedTrainingTA/KnowledgeTransfer
Fiscal/ Administrative	Identify Barriers & Incentives	Solution-focused workgroupsDevelop Fiscal Support	Performance MeasuresImplement Policy Changes

^{**}Utilize a consensus process throughout the implementation



Moving the System

- Development of standards
- Training
- Agency recovery plan
- New service procurement
- Revised program or service profiles
- Monitoring
- Modifications
 - Policies
 - Contracting
 - Performance Indicators



Recovery Preferred Practices

- Access, engagement and service
- Recovery sensitive tools
- Multi-disciplinary review (voc., social)
- Service coordination
- Use of community supports
- Increased consumer and family participation
- Quality of life focus
- Self-help resources





- Host Recovery Conference focused on "What is Recovery" (Build Consensus)
- Establish a Recovery Steering Committee
- Convene workgroups to identify & develop Preferred Practices
- Conduct a Recovery Assessment of Programs
- Include recovery in all new Funding Opportunities
- Prioritize and Integrate Recovery in Training Activities
- Conduct an anti-stigma campaign
- Develop a Policy that Establishes Recovery as the organizing paradigm for all services
- Create a Recovery Position Paper

Making Vision a Reality Sustaining Momentum (Phase 2)

- Host Recovery Conference focused on the "How" (Highlight Specific Practices and Programs)
- Implement Recovery Preferred Practices through policy and funding
- Establish Recovery Education Center
- Continue anti-stigma campaign
- Implement Peer Support programs
- Develop Recovery Education Center and create training curriculum based on consensus process
- Implement training/consultation campaign for providers
- Incorporate Recovery-Oriented Performance Measures

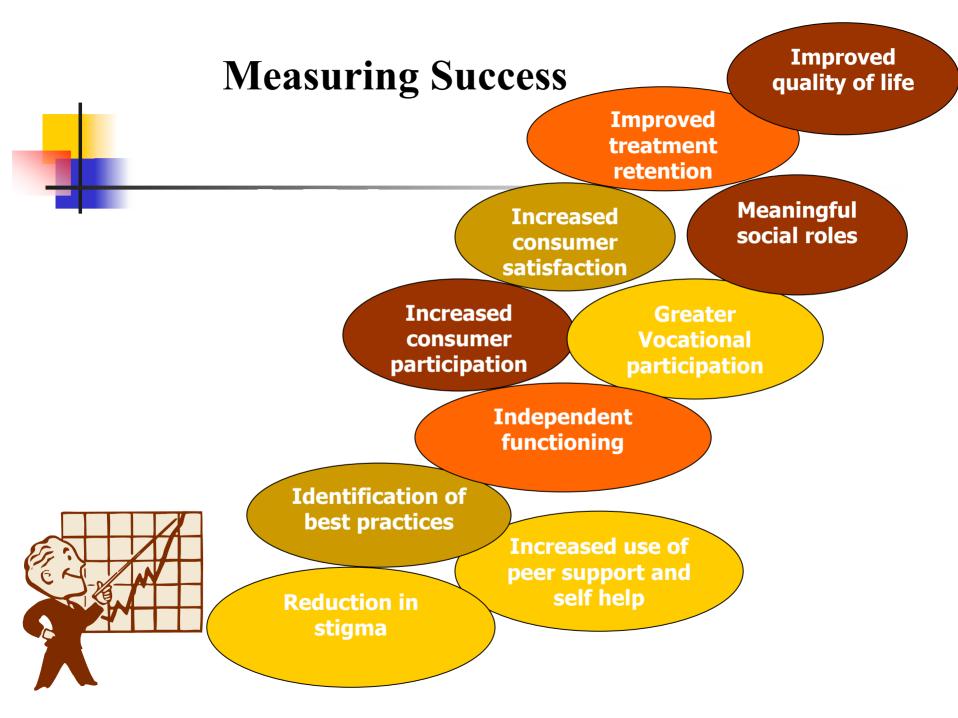
Making Vision a Reality Changing the Service System (Phase 3)

- Continue to implement recovery approaches through programming, funding opportunities and policy development
- Continue to refine and operationalize the concept across the entire service system
- Continue to identify and implement Recovery preferred practices
- Reorient all systems (eg performance measures, fiscal policy, etc) to support a recovery oriented system of care



Benefits for DMHAS System

- Improved treatment retention
- Increased consumer satisfaction
- Broadened community supports
- Staff development through state-of-theart training through Recovery Institute
- Knowledge transfer through Centers of Excellence





THANK YOU!

