Recovery Coach and Recovery Coach Supervisor

Learning Community Binder

Massachusetts Department of Public Health
Bureau of Substance Addiction Services
Recovery Support Services

Welcome to the Massachusetts Recovery Coach and Recovery Coach Supervisor Learning Community. You are leading a new and innovative addictions peer recovery workforce!

The Bureau of Substance Addiction Services (BSAS) Recovery Support Services (RSS) is excited to sponsor and provide technical assistance to this new statewide Learning Community. As volunteer Learning Community Facilitators, you have agreed to create a thriving peer-driven Learning Community committed to being torchbearers for recovery. Together, we will build a statewide network through six regional coalitions of Recovery Coaches and Supervisors to uphold fidelity to the coaching model while strengthening the peer workforce. We seek to build community capacity to ensure sustainability of the Massachusetts Recovery Coach and Recovery Coach Supervisor Learning Community.

In 2011, Massachusetts learned about the CCAR Recovery Coach Academy (RCA) and by 2013, BSAS recruited local recovery trainers to start providing the trainings within Massachusetts. To date, almost 2,000 residents have completed RCA and hundreds are working as Recovery Coaches in many different settings, including: outpatient, emergency department, police stations, community health centers, hospitals, drug courts, and primary care. RSS through AdCare Educational Institute now offers nine different trainings to support Recovery Coaches and Recovery Coach Supervisors, with more educational opportunities to follow.

Your commitment to voluntarily facilitate the new regional Learning Community is a testament to 'giving back' and 'paying it forward'; core recovery community values that build Recovery Capital to live another day and champion improved health and wellness.

Special thanks to all of our recovery trainers and especially Thulani DeMarsay for her efforts in creating this Recovery Coach and Recovery Coach Supervisor Learning Community Binder in collaboration with BSAS.

We at BSAS/RSS look forward to this new collaboration with our recovery communities.

Julia Ojeda, RSS Coordinator

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What is a Learning Community?

A Learning Community (LC) is a form of professional development in which members with shared interests work together to expand their knowledge and support each other. Learning Communities involve collaboration in approaching and resolving shared concerns. Members of Learning Communities strive to answer critical questions and engage in collective inquiry to build shared knowledge. Group members interact positively and create a safe space for one another to share thoughts, perspectives, and goals.

The Recovery Coach and Recovery Coach Supervisor Learning Community provide an innovative approach to supporting and building Massachusetts' rapidly expanding addictions peer recovery workforce, fostering shared knowledge and communal resources.

Learning Community Characteristics

– Coaches and Supervisors collaborate and talk about their practice

– Shared Vision (What do we hope to become?)

– Shared Mission (What are we trying to achieve?)

– Shared Values (How will we behave?)

– Shared Goals

– Trust

– Collaboration

– Action-orientated

– Commitment to continuous improvement

– Outcomes-oriented

Vision

The Massachusetts Recovery Coach and Recovery Coach Supervisor Learning Community is a thriving, peer-driven community committed to being torchbearers for recovery.

Mission

To build a statewide network through regional coalitions of Recovery Coaches and Supervisors who uphold fidelity to the addictions peer recovery coaching model, thereby strengthening and reinforcing the value of this expanding workforce.

Core Values: Recovery

Fostering Collaboration, Respect, Equity, Humility, Giving Back, and Life-Long Learning

Shared Learning Community Goals

- Model strength-based, person-centered, trauma-informed Recovery Coaching.
- Build the advocacy capacity of Recovery Coaches and Recovery Coach Supervisors to champion the peer model.
- Develop mutual respect and understanding between Recovery Coaches and Supervisors.
- Enhance knowledge and expertise to deliver effective coaching and supervision.
- Stay current on the local/state/national recovery movement and share with community.
- Share resources and knowledge for continuous learning, growth, and improvement.
- Identify racial and health disparities to build equity within the peer recovery workforce.
- Collaborate with like-minded local and statewide entities.
- Speak and model recovery language.

Recovery Coach Learning Objectives

- Practice peer model advocacy within Recovery Coach settings.

- Articulate what recovery capital is and how to sustain recovery.

- Identify self-care practices and maintain a commitment to personal well-being.

- Techniques and tools:

    ❑ Practice ethics and boundaries.

    ❑ Speak and model recovery language.

    ❑ Utilize a Recovery Wellness Plan.

    ❑ Describe and employ the stages of recovery and stages of change.

    ❑ Apply motivational interviewing techniques with recoverees.

- Apply strengths-based, person-centered and trauma-informed approaches.

- Understand racial and health disparities and how they impact the Recovery Coach role.

Recovery Coach Supervisor Learning Objectives

- Educate organizations on the strategies, policies, and practices for onboarding and integrating the peer Recovery Coach workforce.

- Be a RECOVERY champion and keep fidelity to the peer Recovery Coach model!

- Identify racial and health disparities to build equity within the peer recovery workforce.

- Understand foundational differences between clinical and non-clinical supervision.

- Embody and practice core competencies of Recovery Coach Supervisors.

- Encourage and support Recovery Coach and Supervisor self-care.

- Educate organizations on the role and responsibilities of the peer Recovery Coach.

- Create opportunities for coaches to engage in professional development.

- Advocate for and help Recovery Coaches incorporate ethical practices and boundaries with special attention on non-clinical settings and roles.

- *Recommendation: Attend RCA to become familiar with the Recovery Coaching model.*

Meeting Norms and Working Agreements

What Are Norms and Why Do We Need Them?

The success of community learning teams depends on established and agreed upon norms and faithfulness to protocols and rules of conduct. By emphasizing norms and practices, team members see the value in their work and build trust with one another in ways that strengthen results for Learning Community members.

Norms or community agreements guide the behaviors of members in the Learning Community, create expectations for the group, encourage engagement, and establish accountability. Regional leaders help to establish the norms of their group.

Suggested Working Agreements

- Create a safe space
- Inspire a spirit of inquiry
- Listen to understand
- Participate actively
- Assume BEST intentions
- Take care of self
- Value all opinions
- Stay on topic and follow the agenda
- Share the air

- Trust facilitator's lead on timing
- Start and end on time
- Practice individual and group reflection
- Silent all cellphones
- Honor confidentiality
- Be supportive of each other
- Be honest and compassionate
- Bring your best self

Quarterly Meeting Guidelines

Purpose
Quarterly meetings provide a safe space for continued learning and development of Coaches and Supervisors, building regional capacity and strengthening the peer workforce.

Time and Place
- Regional meetings are held once a quarter in a centralized location.
- An agenda is created for each meeting.
- Meetings are 60 to 90-minutes long.

Outreach and Recruitment
- Develop strategies to include the entire region.
- Use social media, flyers, email, and phone calls to recruit participants.
- Create a database of contacts.

Community Norms and Working Agreements
- The glue that holds the group together.
- Review at every meeting.

Decision Making
- Community members represent a decision-making body.
- Decisions are made by the group and reached by consensus.
- Conflicts are managed by regional leaders (facilitators) using Community Norms.

Participation
- Regional leaders are responsible for ensuring that members are engaged.
- Regional leaders are responsible for creating a safe space for LC members.

Time Management
- Arrive 1 hour early to set up and welcome people.
- Be respectful of people's time – start and end on time.
- Have a process for facilitating meetings.

Documentation
- Make copies of sign-in sheets.
- Use meeting minutes template.
- Use binder to keep all documentation (sing-in sheets, contact lists, meeting minutes)
- Maintain a contact list and database.

Role and Responsibilities of Regional Leaders (Facilitators)

Regional Leaders play a crucial role in the Learning Community. They work with a partner collaboratively to lead quarterly meetings in the region they represent. They receive mentorship and technical assistance from BSAS/RSS. Facilitators share the responsibility of ensuring the creation and maintenance of the Leaning Community in their region, with special attention to the following: :

- Support the vision, mission, core values and objectives of the Learning Community.
- Foster a sense of community within their region.
- Inspire a culturally inclusive and responsive community.

Areas of Responsibility

- Facilitate Learning Community members in a meaningful dialogue
- Outreach to Coaches and Supervisors within the region
- Facilitate four 90-minute meetings (meetings are held every 3 months)
- Secure meeting location
- Develop agenda
- Ensure the discussion stays on topic and follows the agenda
- Maintain contact database
- Arrive early to set up with others
- Establish meeting schedule with member input

- Circulate sign-in form
- Describe role to LC members
- Commit 2-4 hours per month to ensure success of meetings
- Attend BSAS webinars (3 per year)
- Communicate status and issues regularly with RSS staff
- Assist in annual Recovery Coach conference
- Ensure someone takes minutes Recruit planning committee/volunteers

Leadership Competencies

- Model recovery language
- Understand recovery movement
- Ability to mobilize members
- Deep commitment to learning
- Collaborative leadership
- Strong communication skills

- Demonstrate cultural humility
- Responsible, dependable and reliable
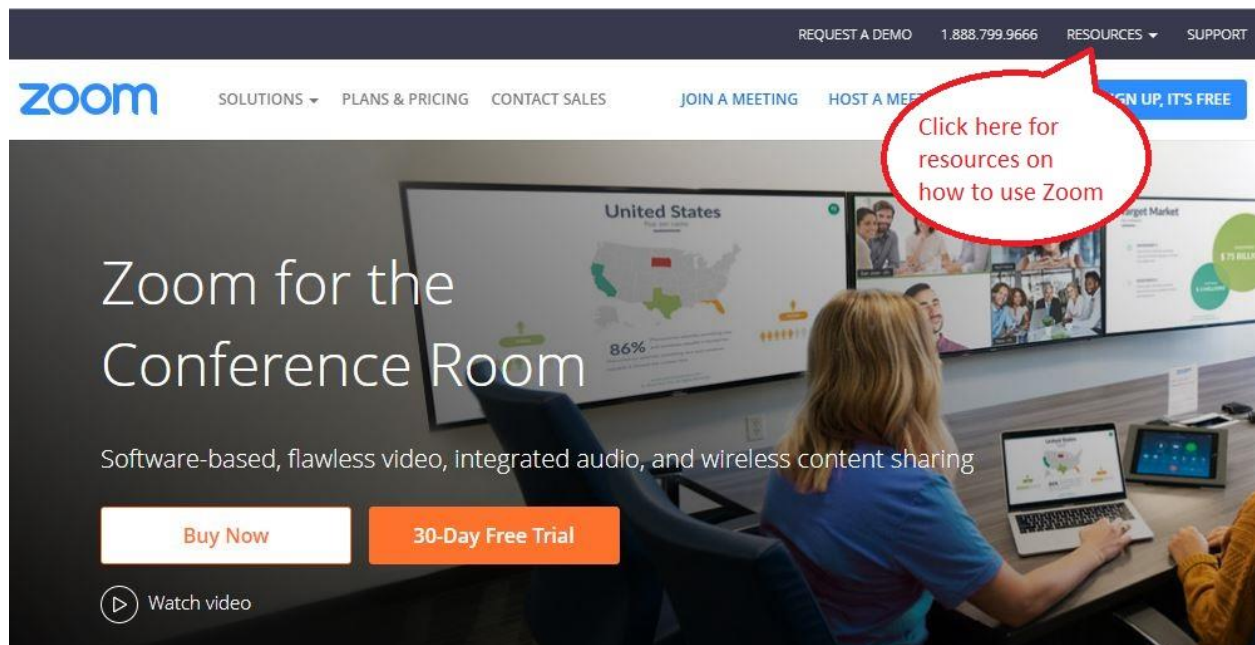- Flexible and adaptable to change
- Support LC values, vision and mission

Virtual Learning Community Webinars for Coaches and Supervisors

The RSS team will facilitate three 60 to 90-minute Zoom sessions each year. Zoom sessions support continued learning and offer an opportunity for Coaches and Supervisors from **all six regions** to share best practices. The virtual meetings are intended to be informal, engaging and impactful. Themes for meeting are based on learning objectives and expressed needs of regional Learning Communities. Sessions address skill-building needs for Coaches and Supervisors.

Zoom Tutorial / Instruction

RSS will provide step-by-step instructions on how to participate in a Zoom session and how to join a break-out room session to all regional Learning Community members. Information on each specific virtual webinar will be sent ahead of the meeting. BSAS will be responsible for facilitating the Learning Community webinars. We encourage you to visit Zoom and learn more about the resources they offer.

www.zoom.us

Select Recovery Coach and Recovery Coach Supervisor Resources

Websites

Careers of Substance: https://careersofsubstance.org/

Recovery Research Institute: https://www.recoveryanswers.org

National Center for Cultural Competence: https://nccc.georgetown.edu

William White Papers: http://www.williamwhitepapers.com

Faces and Voices of Recovery Resources: https://facesandvoicesofrecovery.org/resources/

Recovery Resource Library: https://facesandvoicesofrecovery.org/resources/resourcelibrary.html

Council on Accreditation of Peer Recovery Support Services (CAPRSS): http://www.caprss.org/

Recovery Training Institute: https://www.recovery4detroit.com/?menu=rti

Facing Addiction: https://www.facingaddiction.org/

Recovery Binder: https://www.recoverybinder.org/

Publications

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Gagne, C. A., et al. (2018). Peer Workers in the Behavioral and Integrated Health Workforce: Opportunities and Future Directions. Am J Prev Med, 54(6S3):S258–S266.

Magidsen, et al. (2018). "Reduced Hospitalizations and Increased Abstinence Six Months After Recovery Coach Contact" (poster at the American Society of Addiction Medicine).

Ogbannaya, I. N., Keeney, A. J. (2018). A systematic review of the effectiveness of interagency and cross-system collaborations in the United States to improve child welfare. Children and Youth Services Review, Vol. 94, 225-245.

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https://dbhids.org/wp-content/uploads/1970/01/PCCI_Peer-Support-Toolkit.pdf [see references page 272, some specifically on SUD]

Recovery Live! "Integrating Peers in the Workforce: Supervision and Organizational Culture" (March 17, 2016) https://center4si.adobeconnect.com/_a966410469/p2k7kf5dxi9/ ?launcher=false&fcsContent=true&pbMode=normal&proto=true

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State Medicaid Reimbursement for Peer Support. (2018). Open Minds Reference Guide. Accessed 4/3/19, https://www.openminds.com/wp-content/uploads/OMCircle_ReferenceGuide_PeerSupport.pdf

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White, W. (2006). Sponsor, Recovery Coach, Addiction Counselor: The Importance of Role Clarity and Role Integrity. Philadelphia, PA: Philadelphia Department of Behavioral Health and Mental Retardation Services. Accessed 4/3/19, http://www.bumc.bu.edu/care/files/2018/12/Recovery-Coach-Article_William-White.pdf

White, W. (2019). Peer-based Recovery Support Services: The Connecticut Experience, An Interview with Phillip Valentine. MA Great Lakes Addiction Technology Transfer Center. Accessed 4/3/19 http://vtrecoverynetwork.org/data/Recovery_Symposium/GLATTCInterviewValentine.pdf

Forthcoming Research

"Recovery Coach Efficacy 2018 Report" from Massachusetts General Hospital. The following quote was provided to BSAS:

"6 months after engagement with a recovery coach, compared to the 6 months prior to the engagement with a recovery coach, patients have a 44% increase in attendance at outpatient primary care and behavioral health visits, a 25% decrease in inpatient admissions, and a 13% decrease in Emergency Department visits."

Brigham and Women's Hospital's study "Initiating Substance Use Disorder Treatment for Hospitalized Opioid Use Disorder Patients (ISTOP)" with Joji Suzuki, MD, as Principal Investigator. Study description states "Studies of recovery coaches have demonstrated greater treatment retention, reduced substance use, and reduced inpatient utilization." Accessed 4/3/19, https://clinicaltrials.gov/ct2/show/NCT03212794.

Boston Medical Center's Project RECOVER, (Referral, Engagement, Case management and Overdose preVention Education in Recovery), Ricardo Cruz, MD, MA, MPH Principal Investigator. http://www.bumc.bu.edu/care/research-studies/project-recover/