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The Continuity of Care Gap Effective Communication and Transition



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Continuity of Care Gap

Development of the Continuum



Finances

Lack of Collaboration

Lack of Respect

Lack of Follow through

Lack of Humility

Failure to understand the continuum

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The responsibility lives with us



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Bridging the Gap

Community Based Professional Transition Services

Interventions

Safe Passage (Safe Transport)

Case Management

Personal Recovery Assistants/Sober Companions/Peer Recovery

Monitoring Programs

PHP/IOP

The Coach Connect (virtual apps)



What Affects High Quality Transition Planning

- Strong leadership support for new and improved transition policies
- Positive relationships between the sending and receiving providers
- Active communication with family and support members
- Family and support members having necessary resources and capacity for needed processes (finances, burnout, need for additional external resources)
- Interdisciplinary team involvement and collaboration
- Transitions that involve interpersonal communication, instead of only written or electronic communication, throughout the continuum of care

What Affects High Quality Transition Planning Cont.

- Coordination and management of medication, including possible side effects, in collaboration with pharmacists and medical professionals
- Two-way client and family education- teaching client and family their role and responsibility in managing the problem while learning about the psychological issues and how to relate to one another with trust and without conflict
- Electronic health records (EHS and ROI's), as long as they are not relied upon as a sole method of communication
- Staff member(s) assigned for accountability of transition- related tasks and outcomes

www.jointcommission.org/assets/1/6/TOC_Hot_Topics.pdf

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Research shows that the longer the client stays in treatment, the better the outcome.

One year of treatment yields to best outcome.

Potential Gaps

Intervention/Educational Consultant

- Detox
- Residential
- PHP
- IOP
- OP

Potential Gaps (2)

Residential Treatment

- PHP
- IOP
- OP
- Sober Living
- Peer support programs

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Potential Gap (3)

Family

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Recovery Community Organizations (RCOs)

History and Ecology

presented by

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Learning Objectives

Define Recovery Community Centers (RCCs) and Recovery Community Organizations (RCOs)

Identify the Differences & Similarities of RCC's and RCO's

Describe the types of RCOs

Provide examples of what RCCs and RCOs do

Recall Core Principles and Best Practices



Definitions RCO's and RCC's

Advocacy

Education & Outreach

Peer

Recovery Support

Services

Recovery Community Organization (RCO)

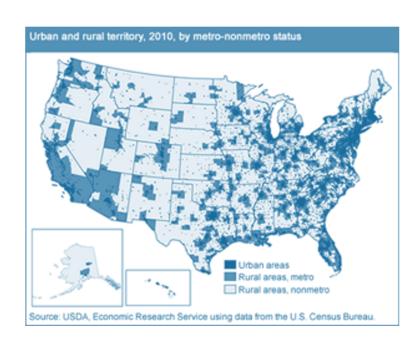
- A recovery community organization (RCO) is an independent, non-profit organization led and governed by representatives of local communities of recovery.
- Phillip A. Valentine, William L. White and Pat Taylor, 2007

Recovery Community Center (RCC)

- Non-profit centers for the recovery community that offer local networks of non-medical, recovery support services.
- https://www.recoveryanswers.org/re source/recovery-communitycenters/



Types of RCOs



Metropolitan/Urban >50,000
1,000 persons/Sq. mile
Urban Clusters 2,500 - 49,999
1,000 persons/Sq. mile
Rural & Small Town<2,500
> 500 persons/Sq. mile



What do RCOs Do? Advocacy & Peer Recovery Support Services



Advocacy

- conduct ongoing local recovery support needs assessment surveys or focus groups,
- organize recovery-focused policy and advocacy activities,
- support the development of recovery support institutions (e.g., educationbased recovery support programs, recovery community centers, recovery cafes, recovery ministries, recoveryfocused employment programs, recovery-focused prison reentry programs, etc.),



Peer Recovery Support Services

 provide peer recovery support services (PRSS)



What do RCOs Do? Education & Outreach

Education

- increase recovery workforce capacity and expertise through training and education
- conduct recovery-focused public and professional education events





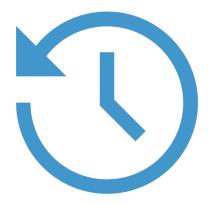
Outreach

- carry out recovery-focused outreach programs to engage people seeking recovery, in recovery, or in need of recovery-focused support services or events to educate and raise public awareness
- host local; regional; or national recovery celebration events,
- collaborate on the integration of recovery-focused activities within local prevention; harm reduction; early intervention; and treatment initiatives



The History

- Foundational work from Bill White et al.
- Formed and grown over the past 25+ years
- Proliferation across all communities
- Language and cultural challenges
- Internal stigma, because...humans
- Recent ARCO review of criteria
- Transition to best practice and standards





10 Best Practices

- 1. Non-profit Organization
- 2. Led and Governed by the Recovery Community
- 3. Primary Focus is Recovery from Substance Use Disorders
- 4. Grassroots
- 5. Participatory Process
- 6. Peer Recovery Support Services
- 7. All Pathways Towards Recovery
- 8. Diverse, Equitable, and Inclusive Policies, Practices, and Services
- 9. Recovery-Friendly Language
- 10. Code of Ethics and Grievance Policies





Questions?



The ABCs of this Presentation



- ARCO: Associations of Recovery Community Organizations
- D.E.I.: Diversity, Equity, and Inclusion
- PRSS: Peer Recovery Support Services
- RCC: Recovery Community Centers
- RCO: Recovery Community Organizations



Resources

- Recovery Community Centers
 - https://www.recoveryanswers.org/resource/recovery-community-centers/
- Recovery Community Organization Toolkit
 - https://facesandvoicesofrecovery.org/arco/rco-toolkit/
- Rural Prevention and Treatment of Substance Use Disorders Toolkit
 - https://www.ruralhealthinfo.org/toolkits/substance-abuse



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