

# Breakout Room Activity

Northern California Region - June 1, 2021 (10:00 am - 12:00 pm)

***Please record your notes on your breakout room slide.***



# Recovery Capital

## Social

- Family
- Friends
- Peers
- Partners
- Co-Workers

## Physical

- Housing
- Clothes
- Transportation
- Insurance
- Money

## Human

- Education
- Positive health
- Values
- Knowledge
- Experience
- Interpersonal Skills
- Sense of Purpose

## Cultural

- Access to Recovery Supports
- Laws and Regulations that Promote Recovery
- Supportive Language about Recovery

# Breakout Room 1: Discuss examples of existing program supports and ways to enhance support within each of the four categories of Recovery Capital.

## Social

- **Existing:** phone app for people in recovery - provides daily encouragement, connections to others in recovery, milestones and anniversaries
- Esp during COVID, more peer outreach. Brought closer together; 12-step and coalition groups
- Phone for patients to text when struggling

**Enhance:**

## Physical

- **Existing:** MAT case managers help with transportation, housing, funding for meds, helping with insurance
- Enhance:

## Human

- **Existing:** Encouraging work and connection
- Enhance:

## Cultural

- **Existing:** Gives phone number to text during difficult times
- **Enhance:** Resources in different languages, Kimau to get funding for more cultural resources, build and construct a cultural area - tables, benches, fire pit to enhance spiritual aspects; funding for healers and elders to come to group

# Breakout Room 2: Discuss examples of existing program supports and ways to enhance support within each of the four categories of Recovery Capital.

## Social

### ● Existing:

- Having groups was nice/connecting for clients and team - especially women
- Early recovery program (to get referrals to mental health, etc) - also helps individualize treatment to meet patients where they are
- Lists of resources and different social groups for people to participate in (videos, books, community events, things to connect them when they are outside of treatment)
- After care programs

### Enhance:

## Physical

### ● Existing:

- Nutritional support bags (dollar store meals to teach budgeted health)
- Houseless bags (survival skill items)
- Testing for HIV/Hep-C and other health issues that may not be addressed otherwise for the patients

### ● Enhance:

- Would like to provide more assistance for medical problems
- Difficult to stabilize a patient when starting on methadone (addressing with rapid induction procedures)

## Human

### ● Existing:

- Department of rehabilitation (job tools/support)
- Goal setting/sense of purpose
- DBT - builds good interpersonal skills

### ● Enhance:

- Not enough resources/support for job searching help
- Establishing patient strengths and talking with them about it

## Cultural

### ● Existing:

- Community resources

### ● Enhance:

- Some language barriers unable to be addressed

# Breakout Room 3: Discuss examples of existing program supports and ways to enhance support within each of the four categories of Recovery Capital.

## Social

- **Existing:** Rural community- staff are approached in the public (Navigators); Coordinating care staff , Previously offered groups and counseling
- **Enhance:** In person groups of 4-6 in a large room (planned)

## Physical

- **Existing:** Aegis- ERS (EARLY RECOVERY SKILLS)
- **Enhance:**

## Human

- **Existing:** Referrals for all of these categories at Aegis Marysville; Transportation needs and housing needs are referred; “ You can’t fail” approach; ongoing education courses
- **Enhance:** Increasing physical space for experience of treatment to be changed (Garden)

## Cultural

- **Existing:** Recovery App (Physical Care for App) recently rolled out -
- **Enhance:** Language accessibility for the App? Build a gym (used to be able to offer in person Tai Chi); Mobile Unit (Recovery Behavioral Health)

# Breakout Room 4: Discuss examples of existing program supports and ways to enhance support within each of the four categories of Recovery Capital.

## Social

- **Existing:** Case managers identify emotional needs; bring in family and friends (communicate with them to support in recovery). Encourage building support networks and how they can utilize in their recovery. Peer support group available to all patients. Encourage support systems and build own peers.
- **Enhance:** Find a way to do family groups in the program (both do not do that). Lots of community support - we want to help them access those community resources.

## Physical

- **Existing:** Support with gas cards and bus passes, clothes vouchers (different programs to help with seeking employment). Help with housing as well. Case Managers help apply for medical. We can help with budgets/money management. Integrated care team helps with physical and dental care. Lots of referring to outpatient services.
- **Enhance:** Wish MAT program could do all of this.....they refer to outpatient to help. Wish we had more access to housing supports. Support recovery housing funding. Need more resources to connect patients. More connection between the different support systems.

## Human

- **Existing:** Counseling/CBT incorporates a lot of this; provide education in groups and individual sessions. Group members share a lot and provide lots of support for each other. Shasta has circle of friends - great support.
- **Enhance:** More community connections (community recovery center where people can get together).

## Cultural

- Existing:
- Enhance:

# Breakout Room 5: Discuss examples of existing program supports and ways to enhance support within each of the four categories of Recovery Capital.

## Social

- **Existing:** support groups with peers (has been a struggle with COVID); building up relationships with infectious disease collaborator that also has a MAT program; offered virtual appointments with patients during COVID
- **Enhance:** need to figure out a way to get back to the successful groups that were in place prior to COVID

## Physical

- Existing: putting in a gym to help with patients who use stimulants (to work physical bodies); MAT program is located in medical facility (discuss other medical needs when they come for their medication); connect patients with hepatitis c treatment and diabetes care
- Enhance: encourage the use of holistic services (acupuncture, chiropractic care)

## Human

- Existing: transportation support (gas card, bus pass); flexibility in scheduling or offering afternoon appointment slots on days when MAT patients are seen; offer a text line for patients to text case manager
- Enhance: work with Hospitality House (vaccinations, screenings for people experiencing homelessness)

## Cultural

- Existing: separate AA group for Latino community; also have separate groups offered in Spanish; sweat lodge for men and beading groups for women (Hoopa Valley Indian Reservation)
- Enhance: collaborating with Native American clinics in Round Valley to come up with game plan for outreach

# Breakout Room 6: Discuss examples of existing program supports and ways to enhance support within each of the four categories of Recovery Capital.

## Social

- Existing:
- Enhance: being able to know who to go to. There's a communication piece that can be built upon. Systems change, community dynamics change and it's an ongoing effort.

## Physical

- Existing: Pilot with LVN, video conferencing with providers new program. Exciting to see what information we see being in patients home.
- Enhance: Technological skill is extremely beneficial

## Human

- Existing: Meeting with care team is building the experience of the patient.
  - Providing information on knowledge, human capital building
- Enhance: Where else can we enhance the recovery process

## Cultural

- Existing: Looking at different processes that enhance care.
  - Regulation like the waiver - at mercy of funding, regulations. We mobilize quickly on this piece.
- Enhance: culture of treatment, sets the stage and the tone. If we as an organization can implement regulations smoothly it builds aspect if recovery capital.