



OBJECTIVES

- ▶ Learn how SAMHSA BRSS-TACS assisted in technical assistance to develop the program.
- ▶ Learn how we built partnerships within the criminal justice system
- ▶ Learn what supports are offered and how
- ▶ Understand and be able to differentiate the advantages and differences between utilizing peer recovery support services and how that's different from law enforcement and the criminal justice system creating programs operated themselves.

OBJECTIVES

- ▶ Identify what data is collected, how it's collected, short-term and long-term goals of "Peer Strength"
- ▶ Identify the challenges and successes when developing and launching "Peer Strength"
- ▶ Identify how a similar program can be developed in your own community using this model.



SOS is a recovery community organization (RCO) with 3 recovery community centers in Rochester, Dover and Hampton NH. We also run Peer-Strength as an off-site program, a Recovery Friendly Workplace initiative and a pre-arrest diversion program called Law Enforcement Assisted Diversion (LEAD) with Dover and Farmington NH Police

An RCO is an independent, non-profit organization led and governed by representatives of local communities of recovery to build prevalence and quality of long term recovery.

WHO IS SOS RECOVERY COMMUNITY ORGANIZATION AND WHY?

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Activities

- ▶ Carry out recovery-focused community education and outreach programs
- ▶ Provide peer-based recovery support services
- ▶ Organize recovery-focused policy advocacy activities
- ▶ Mobilize Resources

WHO/WHAT IS SOS RECOVERY & WHY "PEER STRENGTH"

Mission

The mission of SOS Recovery Community Organization is to reduce stigma and harm associated with substance use disorders by providing safe space and peer-based supports to people in multiple pathways of recovery.

Vision

SOS Recovery Community Organization envisions a world in which recovery from addiction to alcohol and other drugs is possible and widely embraced through low-barrier access to inclusive and respectful support, care and the resources needed to accomplish self-defined goals

WHO/WHAT IS SOS RECOVERY & WHY "PEER STRENGTH"

In 2017 SOS identified a lack of peer-based recovery supports throughout the NH criminal-justice and corrections system.

Studies have shown that people re-entering from corrections are at highest risk for overdose.

- ▶ According to the Massachusetts Medical Society in a study released back in 2007, "inmates were at high risk for death after release from prison, particularly during the first 2 weeks. Interventions are necessary to reduce the risk of death after release from prison."

WHAT DOES THE SOS "PEER-STRENGTH" PROGRAM DO?

- ▶ Partners with Strafford County office of NH Dept of Corrections, Probation and Parole to provide peer-recovery support services.
- ▶ Naloxone trainings inside the facilities and distribution to individuals when released at both Strafford County Correctional facility as well as Rockingham County Correctional facility.
- ▶ Outreach in Strafford and Rockingham County Correctional facility.

WHAT DOES THE SOS "PEER-STRENGTH" PROGRAM DO?

- ▶ Partners with Strafford County Drug Court including attendance at weekly drug court proceedings.
- ▶ Pre-arrest diversion program called Law Enforcement Assisted Diversion (LEAD) with Dover and Farmington Police Departments
- ▶ Weekly meetings inside Strafford County Corrections
- ▶ Outreach in Strafford and Rockingham County Correctional facility.

SOS Applied for a technical assistance grant in 2017 through the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) Bringing Recovery Supports to Scale, Technical Assistance Center Strategy (BRSS-TACS).

The application was awarded in early 2018 and the focus was to receive technical assistance for building peer-recovery support programs through the correctional system.

The goal of our TA was also to make sure programs were created could be duplicated statewide by other RCO's and agencies.

HOW "PEER-STRENGTH" STARTED

The TA from BRSS-TACS was a 6-month effort that concluded with extensive work with Dr. Pamela Keye, an award-winning educator, and former criminal justice involved woman. Dr. Keye has been active in advocacy for re-entry programs for many years.

Site visit included Superintendent Chris Brackett of Stafford County Correctional facility and Carrie Conway, Criminal Justice Programming Coordinator.

DEVELOPING "PEER-STRENGTH" PROGRAM

DEVELOPMENT OF PEER-STRENGTH

- ▶ Original design ended before it began!
- ▶ How a re-entry program started and then shifted to a program that worked primarily in Stafford County Probation and Parole.
- ▶ Follow up to site visit met with Chuck Wolfert, Chief of Probation for NH Dept of Corrections, Stafford County office.
- ▶ Put together a comprehensive proposal using principles of our previously designed re-entry program.



How Can We Help With Your Recovery Today?

SOS
RECOVERY COMMUNITY ORGANIZATION

- ▶ Relationships within the criminal justice are KEY!
- ▶ Different attitudes, viewpoints and philosophies between corrections and recovery community.
- ▶ Barriers that had to be overcome
- ▶ Be clear with expectations and be sure you ask for clarity on expectations from corrections.

DEVELOPMENT OF PEER-STRENGTH

HOW IS IT DESIGNED?

- ▶ SOS places our recovery coaches in a spare office room in basement of county courthouse for a full day on "check-in" day.
- ▶ Individuals are referred by probation officers.
- ▶ Individuals may self-refer (not designed initially but occurred organically).
- ▶ SOS has agreement and a release with probation and parole that they can provide info to us and we can provide whether individuals are "engaged" or "non-engaged."



Weekly SOS attendance in Drug Court and work with case managers in Drug Court program



Weekly "Recovery Capital/All Recovery" groups held in Therapeutic Community in Stafford County Correctional facility.



Law Enforcement Assisted Diversion (LEAD) in Dover and Farmington, NH

WHAT ELSE DOES PEER STRENGTH DO?

DATA COLLECTION AND PROCESS FLOW

- Participants complete a SOS "member intake" to gather data for future aggregate data at first session.
- Participants basic and immediate needs are identified.
- Participant is enrolled in telephone recovery support services if interested.
- Availability and frequency of recovery coach sessions is determined (by the participant).

DATA COLLECTION AND PROCESS FLOW

- An "engagement scale" in Recovery Data Platform (RDP) is completed. (1st or 2nd session)
- Membership info, recovery coach logs, referrals to other services are inputted by SOS staff into RDP.
- 2nd session roles are clarified and wellness planning is initiated.
- 2nd or 3rd session a recovery capital scale is completed

DATA COLLECTION AND PROCESS FLOW

- Additional engagement scales completed at 30 days, 90 days and 6 months
- Additional Recovery capital scales completed 30, 90 and 6 months after first.
- Thorough review of wellness planning conducted after 60 days.
- After 6 months goal is to enroll individuals into a recovery coaching curriculum
- Goal is for participants to become coaches and/or get hired into program in future to enhance capacity of system



HOW IS IT WORKING?

- ▶ SOS has a total of 1353 unique participants since we started collecting recovery center(s) data. 628 of these participants are "actively receiving services."
- ▶ 20% of those RCO participants who are "actively" receiving services identify as being on probation or parole.
 - ▶ Underreported number as 20% of SOS members refused to answer.

HOW IS IT WORKING?

- ▶ 1 year results for Peer-Strength and LEAD program have completed:
 - ▶ 14 pre-arrest diversions (individuals were not charged) and entered into intense case management review.
 - ▶ 248 face to face recovery coaching sessions for 69 unique individuals.
 - ▶ 14 individuals enrolled in telephone recovery support services and 200 telephone recovery coaching calls were made to those participants.

WHAT DO MOST COACHING SESSIONS LOOK LIKE?

- ▶ Basic needs which often open doors that are closed.
- ▶ Housing, Transportation
- ▶ Medicaid and being able to transport individuals to mobile van to navigate enrollment
- ▶ No ID = No Medicaid. Navigation of a license which requires a birth certificate.
- ▶ Navigation of social security cards.
- ▶ Above navigation allows navigation into treatment options or mental health supports.

- ▶ 59 of the 69 (85%) completed an engagement scale
- ▶ A total of 113 engagement scales have been completed
- ▶ 44% of individuals who were enrolled over 90 days ago have completed 2 or more engagement scales. (i.e. measurement demonstrates ongoing engagement with coaching)
- ▶ Average of 1.8 engagement scales per participant that enrolled over 90 days ago.
- ▶ Average of 4 recovery coaching sessions for individuals who did an intake over 90 days ago.

A DEEPER DIVE IN CONNECTION DATA



Data collection can be onerous and staying consistent with what we collect.



Probation and Parole does not capture recidivism rates making it impossible to have a control group to accurately evaluate reductions in recidivism.



Funded without any funding from Corrections and long term sustainability will need to look at whether we can utilize data to justify shifting funding into these supports as they reduce systemic costs.

CHALLENGES

THANK YOU!

Questions/Comments?

REFERENCES

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- "Release from Prison — A High Risk of Death for Former Inmates," Ingrid A. Browanger, Marc F. Stern, Richard A. Deyo, et al. New England Journal of Medicine & Massachusetts Medical Society. (2007)
