

Telephone Recovery Support

Volunteer Training

Learning Objectives

- Discuss the history and purpose of Telephone Recovery Support (TRS)
- Discuss the issue of boundaries and anonymity and the roles and responsibilities of a TRS volunteer.
- Discuss statewide and regional recovery resources; know where to find information about these resources in order to help recoveree.
- Develop a working knowledge of the TRS database.
- Have a knowledge and understanding of a wide range of situations through role play.

Working Agreements

- Respect for people's thoughts, opinions and experiences
- One person speaks at a time
- Openness to the information
- Stay focused and on the topic
- Confidentiality (share the message but not the messenger)
- Stretch Rule

History of Telephone Recovery Support (TRS)

- Bill White leading addiction/recovery researcher and author of <u>Slaying the Dragon</u> - idea of a recovery check up phone call
- 2005 CCAR (CT Community for Addiction Recovery) starts pilot program: Telephone Recovery Support.
- 2007 DMHAS (CT Department of Mental Health and Addiction Services) funds TRS program.

Overview of TRS Program

Volunteers will call "recoverees" once a week to offer support, encouragement, information about resources and a point of connection to help them maintain their recovery.

Volunteers - Great way to give back to the recovery community.

Recoverees - Receive support in their recovery



Consent Form

Telephone Recovery Support Consent Please Print Clearly

Name:			Date of Bit	th:/_	
Phone #:(_)	Refer	red By		
Cell Phone #:(Gender (circle on	e): Male Female	Other
City:		State		Zip:	
Preferred	Pronouns: He/Him/H	is She/Her/Her	s They/The	m/Their	
		rt calls are made be the time range tha			
	We will try to	call you during the	time range you c	ircle. Thanks!	
	9am – Noon	Noon – 2pm	2pm - 4pm	4pm – 5pi	m
	Spanish speaking only	☐ DO NOT leave m	essage on Answering	g machine	
understa	nd and agree to the fo	llowing:			
1.	I grant permission for a volunteer from Connecticut Community for Addiction Recovery (CCAR) to call me weekly on the above telephone number(s) to support me in my recovery.				
2.	Each time the CCAR volunteer calls, he/she will be asking me how my recovery is progressing and if I am in need of additional support (i.e., meetings in area, recovery community centers, safe/sober housing, social events, other resources)				
3.	At the time of a call, if I am in need of a referral to a treatment program or detox unit, I will be assisted in finding a program, if I so desire.				
4.	At any time, I may decide not to take part in this service. I will call CCAR at 844-269-8844 ext.5 or tell the volunteer when he/she calls.				
Date	Signature of Client				
Please	Fax signed for	orm to: 1-877	-840-2703		
	oll online at <u>v</u>				D

Name, Date of Birth, Phone #, Referred By Cell #, Gender, City, State, Zip, Call Time Spanish Speaking Only Leave a Message Consent for us to call

Recovery Community Centers

Hartford Recovery Center:

198 Wethersfield Ave, Hartford, CT 06114, (860) 244-3343

Willimantic Recovery Center:

713 Main Street, Willimantic, CT 06226, (860) 423-7088

Bridgeport Recovery Center:

430 State Street, Bridgeport, CT 06604, (203) 332-3303

Waterbury Recovery Center:

132 Grand St. Waterbury, CT 06701, (203) 290-0679

New Haven Recovery Center:

1435 Chapel Street, New Haven, CT 06511, (203) 672-4115

Statewide Recovery Resources

DMHAS Website:

http://www.dmhas.state.ct.us/

DMHAS Bed Availability:

https://www.ctaddictionservices.com/

Access Line:

1-800-563-4086

2-1-1 Website:

http://www.infoline.org/
American Job Centers:

https://portal.ct.gov/ajc

CCAR Website:

www.ccar.us

Suicide Prevention Lifeline:

1-800-273-8255

Mobile Crisis Hotline:

(203) 974-7713

Problem Gambling hotline:

(888) 789-7777

Problem Gambling services:

https://portal.ct.gov/-/media/DMHAS/PGS/BettorChoi ceProgramspdf.pdf

Behavioral Health Recovery Program

Behavioral Health Recovery Program: (formerly Recovery Support Program and Basic Needs)

BHRP is not an entitlement, and is usually temporary- Individual must be:

- 1. Actively engaged in behavioral health treatment services
- 2. Employable and not receiving cash assistance
- 3. In need of basic recovery supports and have no available resources to meet such needs.

Provider has to sign you up to receive BHRP- Some of the supports you may receive from BHRP are:

- 1. Independent Housing
- 2. Transportation
- 3. Supported Recovery Housing
- 4. Basic Needs
- 5. Other Supports

Contact Info:

Clinical Recovery Supports:

(800) 606-3677

Basic Recovery Supports:

(800) 658-4472

Confidentiality

- Respect the confidentiality of the recoveree.
- Information about calls may be discussed with CCAR staff and TRS volunteers <u>only</u> to assist in supporting the recoveree.
- TRS information may not be discussed outside of CCAR.
- Recoveree should feel safe sharing what is going on with them and know that we will keep it confidential.

Multiple Pathways of Recovery

CCAR believes that there are many pathways to Recovery

Volunteers do not "push" their own pathway during TRS calls

Volunteers are there to *listen*

Volunteers should manage their own biases/judgements

Take every opportunity to celebrate and validate hard work and accomplishment!

Pathways of Recovery

12-step (AA, NA, CA, ACA, DRA, Women in Sobriety)

Religious (Celebrate Recovery, Alcoholics for Christ, Pioneer Association) or

Spiritual (Dharma Recovery, White Bison)

Secular (Life Ring, SMART)

Medication Assisted Treatment- Methadone, Suboxone, Vivitrol

Wellness based (Yoga, Meditation, Qigong, Tai-Chi, etc.)

Active Sober Community (The Phoenix, ROCovery Fitness, Fit2Recover, etc.)

Online Recovery Supports (In the Rooms, Recovery 2.0, Apps, etc.)

Boundary Issues for Volunteers & Recoverees

Boundaries protect both you & the recoveree from harm.

Always clarify your role as a volunteer.

You can't personally provide housing, transportation, financial assistance, employment, sponsorship, or socialization for a recoveree.

You can provide them with phone numbers and information, but it is up to them to call.

When in doubt check with the Volunteer Manager or RCC Manager.

Follow up Boundary Information

Volunteers may end up meeting recoverees they call out in the community or at meetings. It's fine to acknowledge this <u>if</u> and <u>only if</u> the recoveree initiates the conversation and provided that you don't break their anonymity.

If you have a personal relationship with a recoveree that you're assigned to call, let the Volunteer Manager know so that another volunteer can be assigned to call that person.

Volunteer Commitment

Volunteers are expected to complete the Volunteer Orientation Training and CCAR Ambassador Training prior to TRS training.

Volunteers are asked to make a commitment to come at least once a week and make Telephone Recovery Support calls.

Volunteers must fill out the Volunteer Time Sheet each time they volunteer.

If you cannot make your scheduled day, please call to let us know so that someone else can make the calls. Reschedule if possible.

The recoverees really appreciate the calls and we don't want to let them down.

TRS Suggestions

Take your time, read the contact history...each and every call deserves your attention.

Try to engage in a genuine conversation so that the person feels you are interested in them and their recovery.

It's okay to share some of your own story, if it's relevant to the conversation, you feel comfortable doing so, and you feel that the recoveree is interested and open to hearing it.

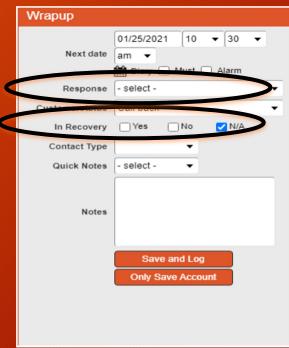
Conversation should be directed by the <u>recoveree!</u> You are there for support and encouragement.

TRS Reminders

• In the "Response Box" do not select "made contact" unless you speak with the recoveree.

 If speaking to a family member or friend put "left message"

• Do not change the "In Recovery" checkbox if you do not speak with the recoveree.



Role Plays

- 1. Recoveree is Doing Well
- * Sometimes someone will be doing fine in their recovery but may still need support in other areas of their lives.
- 2. Recoveree Shaky, But not Using
- 3. Relapsed But Is Open to Help
- 4. Relapsed But Is Not Open to Help
- 5. Recoveree is in Crisis
- 6. Boundaries

Take a minute to brainstorm some possible responses.

^{*} Recoveree asks volunteer for personal assistance.

What if's?

You get an answering machine:

This is Crystal from CCAR calling for "Joe" If you feel the need to speak with someone right away, please call us at 844-269-8844, otherwise we'll call you back in a couple of days.

A family member answers the phone and does not know what CCAR is:

Tell them what CCAR is without talking about the individual recoverees.

Family member answers the phone and knows about CCAR and wants to talk to the volunteer:

Volunteer is to leave message for recoveree but is free to talk about CCAR's Mission and that we have family support services available if they're interested.

Wrap-Ups

How's your confidence level about making TRS calls on a scale of 1-10?

What did you like?

What will you use?

What else do you feel you need?

Please fill out your Training Evaluation

Now it's time to make the calls!

Closing

Time for questions and comments.

