

# RECOVERY SUPPORT WORKGROUP

INDIANA'S WELLNESS AND RECOVERY QUARTERLY NEWSLETTER

## FAREWELL MESSAGE FROM THE PAST DIRECTOR

Greetings from Amy Brinkley

Dear Recovery Support workgroup:



Greetings from your past director of Recovery Support Services and chairperson of the Recovery Support Workgroup. Just when you thought I was gone! Bwaahaaa! I am a National Association of State Mental Health Program Directors employee full time now. I'm pleased to report things are smooth in my new role, though I miss the RSW work and people dearly. I'm happy to tell everyone who will listen all about the wonderful things happening in Indiana under the umbrella of the RSW.

I'm very proud of our work accomplished and the work continuing to happen within the Recovery

Support Workgroup. We have worked very hard to de-silo the system and remove the barriers that hinder access to recovery supports and treatment for people across the state. This work will empower so many people and grant access to recovery and treatment for many years to come. I believe that with my whole heart and so should you. Remember to stay the course as this is largely uncharted territory, but with diligence and commitment Indiana will be leading the nation in professionalizing the recovery field. It's only a matter of time. Working together in a coordinated way is the only way forward effectively keeping people with lived experience at the forefront of all that you do is a must. Remember who we serve.

Thank you all for all that you have done to make the Recovery Support Workgroup what it is today. I'm so glad we were able to get the quarterly newsletter off the ground before I left DMHA. I'm looking forward to staying plugged in and reading all the wonderful things each of the workgroups are doing. Keep up the great work and I'm wishing us all success and every great thing in the future. I am also very excited for the future with the new DMHA director of Recovery Supports Niki Howenstine and DMHA bureau chief of Mental Health and Addiction Recovery Debi Hayworth. Indiana is very fortunate. Consider me a fan of the RSW for life.

*Amy Brinkley*

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OUR MISSION IS TO RECOMMEND AND PROMOTE IDENTIFIED NEEDED SUPPORTS AND RESOURCES FOR INDIVIDUALS IN WELLNESS AND RECOVERY FROM MENTAL HEALTH AND SUBSTANCE USE DISORDERS ACROSS INDIANA.

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## WHAT IS THE RECOVERY SUPPORT WORKGROUP?

In 2012 and 2013, the Family and Social Services Administration Division of Mental Health and Addiction submitted a Mental Health and Substance Abuse Prevention and Treatment Block Grant application that identified recovery supports as one of their four identified priority areas. To elevate this priority area and provide the supports to achieve the established goals, a workgroup was developed and assigned under the Mental Health and Addiction Planning and Advisory Council called the Recovery Supports Priority Area Workgroup.

The responsibilities of this workgroup at that time included the following:

- » Establishing recovery supports priorities
- » Identifying gaps in the system where priority recovery supports are not funded
- » Ascertaining the availability or accessibility of those supports.

Based upon that original analysis, five priorities were identified by the members of the RSW per the request of the MHAPAC. These areas were:

- » **Personal support networks**
- » **Peer support services**
- » **Hobbies and interests**
- » **Prevention and wellness**
- » **Safe housing**

It was noted that **employment supports are essential** and workgroup members stated that they found employment intrinsically essential throughout each priority.

In 2020, an overall review of the RSW process resulted in some significant systemic changes by DMHA and the RSW members. These changes included the creation of the mission statement and purpose, as well as a focus on the desired outcomes and necessary overall membership in order to successfully achieve the original mandate. Membership is to comprise no less than 51% of individuals who identify as having direct lived experience. As of February 2022, the RSW membership included 61 individuals across 28 different state and community agencies.

One of the outcomes of the review and change process included the creation of dedicated subgroups that are charged with focusing on the continued priority areas, as well as incorporate both employment supports and data analysis. In 2020, it was determined that a critical area of focus must be on the identification, collection, reporting and ongoing review of recovery support data. Both employment supports and data analysis

were identified as needed subgroups of the RSW, and subject matter experts were recruited to assist with this endeavor across state agencies and community organizations.

### THE PURPOSE OF THE RECOVERY SUPPORT WORKGROUP IS:

1. Break down silos within systems and in the continuum of recovery, which includes identifying other state agencies or community groups that are conducting the same or similar needs, assessments or activities, and to coordinate and communicate these efforts to individuals, providers and local community agencies across the state.
2. Identify existing gaps and needs in the system, as well as those supports, and services requested by individuals in recovery; identify strategies and recommend/advise DMHA (and any other applicable state agency) for funding/implementation.
3. Identify resources to assist and impact with social determinants of health and ensure they are communicated and connected with individuals in recovery.
4. Expand and improve recovery supports across Indiana.

Each subgroup has member volunteers who are subject matter experts in the area of focus from both state and community agencies. The RSW has developed a charter document that encompasses the definition and charge for each of the subgroups, which includes identifying data resources to conduct gap analysis and the resulting development of recommendations to present to the state and the MHAPAC for potential future funding initiatives as needed.

In this inaugural edition of *Recovery Support Workgroup: Indiana's Wellness and Recovery Quarterly Newsletter*, the defined focus of the subgroups are included in the following sections. The subsequent newsletters will share information about their activities as well as requests for assistance from the community across the state.



## PERSONAL SUPPORT NETWORKS

Interim Chairperson: Becca Sigafus

Defined as more general supports that come from natural relationships people find in such places like church, volunteering, work, community-based activities, etc. It stems from responses from individuals that the most valued network was seen to be persons who have "HOPE" for the person receiving care, such as:

- » **A person in my life who has hope for me:** A person who openly expresses and supports meaningful and long-lasting recovery from a mental illness or addiction.
- » **Someone I trust to take care of my children:** Someone who can watch over children while the parent is engaged in treatment. This relieves the stress of child care while the parent focuses on recovery supports for short periods of time.
- » **Friends or family I can do things with:** This is positive meaningful relationships that support recovery.
- » **A place to go where I feel welcome:** A place where the nature of mental illness and/or addiction is understood. It is a place where a person finds acceptance.
- » **Friends and family that I feel close to:** Healthy personal relationships outside of the treatment environment that provide a sense of belonging.
- » **Friends or family that feels connected to the individual:** Relationships that promote a healthy lifestyle.
- » **Crisis plan development by individual and support team:** This could be a psychiatric advanced directive, a wellness recovery action plan or a similar plan.

## PEER SUPPORT SERVICES

Chairperson: Cameron Drury

Defined as someone who has had similar experiences, such as formal peer support, self-help recovery programs, friends and family. Examples include, but are not limited to, recovery centers, sponsors, peer support for the family, peer telephone supports, peer run community-based groups and self-help recovery programs.

- » **Someone who has had similar experiences:** This could be formal peer support, self-help recovery programs, friends and family. This is broad and could include many people.
- » **Recovery Center:** An actual physical site that houses recovery-oriented activity.
- » **A sponsor:** While sponsorship is often associated to twelve-step groups or programs, a sponsor could also be a mentor who is a guide or navigator to a person on their recovery journey.
- » **Peer support for the family:** This is support for families as they experience the stress or duress of helping a loved one.
- » **Peer telephone support, such as a warm-line:** Some communities support warm-lines staffed by persons with experience in recovery from mental illness and/or addiction.
- » **Alcoholics Anonymous, Narcotics Anonymous, Gamblers Anonymous, Cocaine Anonymous, etc.:** These peer-run community-based groups are widespread and self-supporting. They have a high profile and are easily located through a variety of resources. These support group meetings are held in recovery clubs, churches, libraries, town halls or community centers.
- » **Self-help recovery programs:** These are groups or programs that one might find in the community, such as Celebrate Recovery or Smart Recovery.

## SAFE AND AFFORDABLE HOUSING

Chairperson: Jenna Ward

Helping to ensure that consumers are living in a safe housing environment of their choice without experiencing hardships

related to housing costs. Helping to ensure that individuals have the needed supports to maintain housing.

## DATA ANALYSIS

Chairperson: Wendy Harrold

This newly created subgroup is responsible for the analysis and presentation of identified critical data to assist with completion of gap analysis and ongoing performance monitoring to determine effectiveness of RSW recommendations and interventions.

The subgroup is also responsible for facilitating the establishment of data-informed outcomes and metrics for each RSW

subgroup that are approved by current stakeholders and subject matter experts, identifying if there is an existing data source to generate that metric, and mapping each approved outcome to its specific dimension of recovery support. If a metric is unable to be measured in the current state, subgroup members will work with appropriate workgroup members to modify an existing data source/instrument or identify a new method of collecting this information.

The subgroup will also help drive recovery support services by utilizing data to:

1. Identify potential patterns in the complex social systems that influence SUD/SMI recovery; and
2. Evaluate the influence of identified interventions on an individual's recovery capital.

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## HOBBIES AND INTERESTS

Interim Chairperson: Becca Sigafus

Defined as recreational activities that provide an outlet for stress and promotes creativity. Included as a priority area, as individuals identified this as highly valued but it was deter-

mined via previous gap analysis that individuals struggle to access these types of supports due to access and financial limitations.

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## PREVENTION AND WELLNESS

Chairperson: Ari Nassiri

Those activities that seek to provide a holistic approach to reduce the impact of substance use through early identification, active intervention, and ongoing care for individuals across their lifespan.

Prevention: Activities that reduce the impact of substance use on three levels, primary, secondary and tertiary across life dimensions (physical, emotional, relational, time/age, career, financial and spiritual).

Wellness: active engagement in holistic care, occurring at various levels related to an individual's journey towards optimal well-being.

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## EMPLOYMENT SUPPORTS

Interim Chairperson: Becca Sigafus

Employment supports refer to policy and practice aimed at assisting individuals with behavioral health diagnoses obtain and maintain employment that provides a living wage and meaning as identified

by the individual. This subgroup serves to advance employment supports statewide for the any mental illness, serious mental illness, substance use disorder and dually diagnosed populations.

In alignment with best practices and Indiana's Employment First legislation, competitive integrated employment is the first and preferred option.

# RECOVERY SUPPORT SERVICES ORGANIZATION SPOTLIGHT

## Phoenix Paramedics

Phoenix Paramedic Solutions, LLC was founded by Nathaniel Metz in 2017. Just as the mythical phoenix obtains new life by arising from the ashes of its predecessor, Phoenix Paramedic Solutions has risen by pursuing an innovative vision, a high standard of care and by developing new deployment models that empower emergency medical services professionals in expanded roles in the rapidly changing fields of health care.

The agency is rapidly moving toward serving communities through a comprehensive community paramedicine model. Like most EMS agencies, Phoenix operates ambulances for both emergency and non-emergency transport, but that is far from the only service they offer. Mobile occupational health teams deploy to assist manufacturers with a full array of onsite services, ranging from pre-employment and post-accident drug screening to injury response, vaccinations and health screenings.

In 2018, when the Lafayette Resilience and Recovery Network reached out to the EMS community for assistance with creating a quick response team, Metz saw another innovative opportunity to be of service. The pilot program found Phoenix EMTs pairing up with a peer-based recovery support team led by Jason Padgett to knock on the doors of overdose victims, offering, "What would recovery look like for you and how can we help you get there?" The program was well-received, and it didn't take long for some of the EMTs to come out of the shadows and share they too were in recovery and wished

to obtain peer certification. Within six months, Phoenix had teamed up with Valley Oaks Health and secured a sizable grant and employed Padgett and a full team of peers, some of which are EMTs. Today the QRT is led by Cheyenne Wuebker and Dock Henry and serves Tippecanoe County as well as eight surrounding counties. In any given week, they deploy mobile peers and have peers stationed in Lafayette Transitional Housing Center, Jasper County Jail and Tippecanoe County Communications.

Metz is challenging all of his employees to become dually certified as both EMS providers and peers. Those who do not have lived experience are obtaining certification as community health workers. The Lafayette Transitional Housing Center partnership now includes an onsite health clinic run by Leighanne Ellis, a Phoenix nurse.

These innovators are growing and moving to a much larger facility, where they intend to begin an education program and work diligently to assist an underfunded EMS industry rise from the ashes through collaboration and innovation.



Phoenix Paramedic Solutions, LLC team members in the picture, from left to the right are: Dock Henry, CAPRC I, CRS/CHW assistant QRT director; Michael Turner, CRS/CHW, QRT peer; Jenna Forney, CAPRC I, QRT peer; Nova Lee, station dog and mascot; Cheyenne Wuebker, EMT, CRS/CHW, director of Addictions and Mental Health Services; Paris Forman, CRS/CHW, QRT peer; Garret Newhard, CRS/CHW QRT peer.

### Thoughts from Larry Smith, founder/executive director of Intrepid Phoenix

As it relates to recovery, the meaning of the words Intrepid Phoenix has special meaning to me and people in recovery. It sums up what a person in recovery is all about:

*Intrepid: Resolutely fearless; dauntless; Phoenix: A person or thing that has become renewed or restored after suffering calamity or apparent annihilation*

Intrepid Phoenix is an Indiana non-profit 501(c)3, headquartered in LaPorte, Ind. Our purpose is to provide a wholistic fitness program and fellowship for people in recovery from substance abuse. We believe improving the mental, emotional and physical health of our members increases their chances of abstinence thereby having a positive impact on their lives and the community.

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Division of Mental Health and Addiction

Indiana Family and Social Services Administration  
Division of Mental Health and Addiction

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You can [sign up to receive this Wellness and Recovery](#) newsletter.

Learn more [about the Recovery Supports Workgroup](#).

Visit the [Indiana Recovery Council website](#) to learn more about the survey.



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Family and Social Services Administration

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## INTRODUCTIONS OF NEW STAFF

Please welcome our newest RSW teammates

Let us introduce the DMHA administrative team for Recovery Support Services that are working with on behalf of the Recovery Support Workgroup.

- » Niki Howenstine is the new director of Recovery Support Services and replaced Amy Brinkley's position.
- » Debi Hayworth is the new bureau chief of Mental Health and Addiction Recovery.

## UPCOMING COMMUNITY EVENTS

### MAY

NAMI Greater Indianapolis is presenting a readers' theater called "Nobody Needs to Know" during the month of May at various locations across greater Indianapolis. For more information or if you are interested in being a host site, email [info@namiindy.org](mailto:info@namiindy.org).

**17-18** Indiana Division of Mental Health and Addiction presents the 2022 Practice, Policy & Innovation in Mental Health and Addiction virtual conference, 9 a.m.-4:30 p.m. To register, visit <https://go.techserv.io/DMHA-Conference2022.html>.

### JUNE

**17** Indiana Recovery Community Summit. For information and registration, visit: <https://www.indianarecoverynetwork.org/events1/2022-indiana-recovery-community-summit/>.

### MAY & JUNE

Join us for the statewide Summer of Recovery 2022 tour! There will be live music, bounce houses, food trucks, powerful stories of hope and more as we celebrate sobriety and raise awareness to STOP overdose deaths in Indiana! May 31: Kokomo; June 9: Columbus; June 16: Portland; June 24: Gary, June 30: Indianapolis. For more info, visit [www.summerofrecovery.com](http://www.summerofrecovery.com).