



# Center on Rural Addiction

UNIVERSITY OF VERMONT

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Rural Center of Excellence  
on SUD Treatment

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UNIVERSITY OF VERMONT

Community Rounds Workshop Series

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Rural Center of Excellence  
on SUD Treatment

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## Recovery Housing as a Bridge to Aligning Social and Medical Interventions

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Rural Center of Excellence (RCOE) on SUD Recovery at the Fletcher Group

## Today we will cover:

- The guidance and support offered by the Fletcher Group's Rural Center of Excellence
- An overview of Recovery Housing
- What is a Recovery Ecosystem?
- An overview of social and medical interventions
- Systemic changes supporting alignment
- Discuss how we can come together to support people in rural communities

# The Fletcher Group Approach: Rural Center of Excellence

- **Community Catalyst.** We engage individuals, organizations, and communities through a “boots on the ground” personal approach.
- **Drive best practice and innovation.** Develop, implement, evaluate, and disseminate best recovery practices.
- **Training and technical assistance.** Provide training, consultation and technical assistance to program managers, RCOs, RHs on issues relevant to quality care and implementation of best practices for substance use disorders.
- **Research and evaluation.** Conduct original research to inform and improve recovery programs and services.

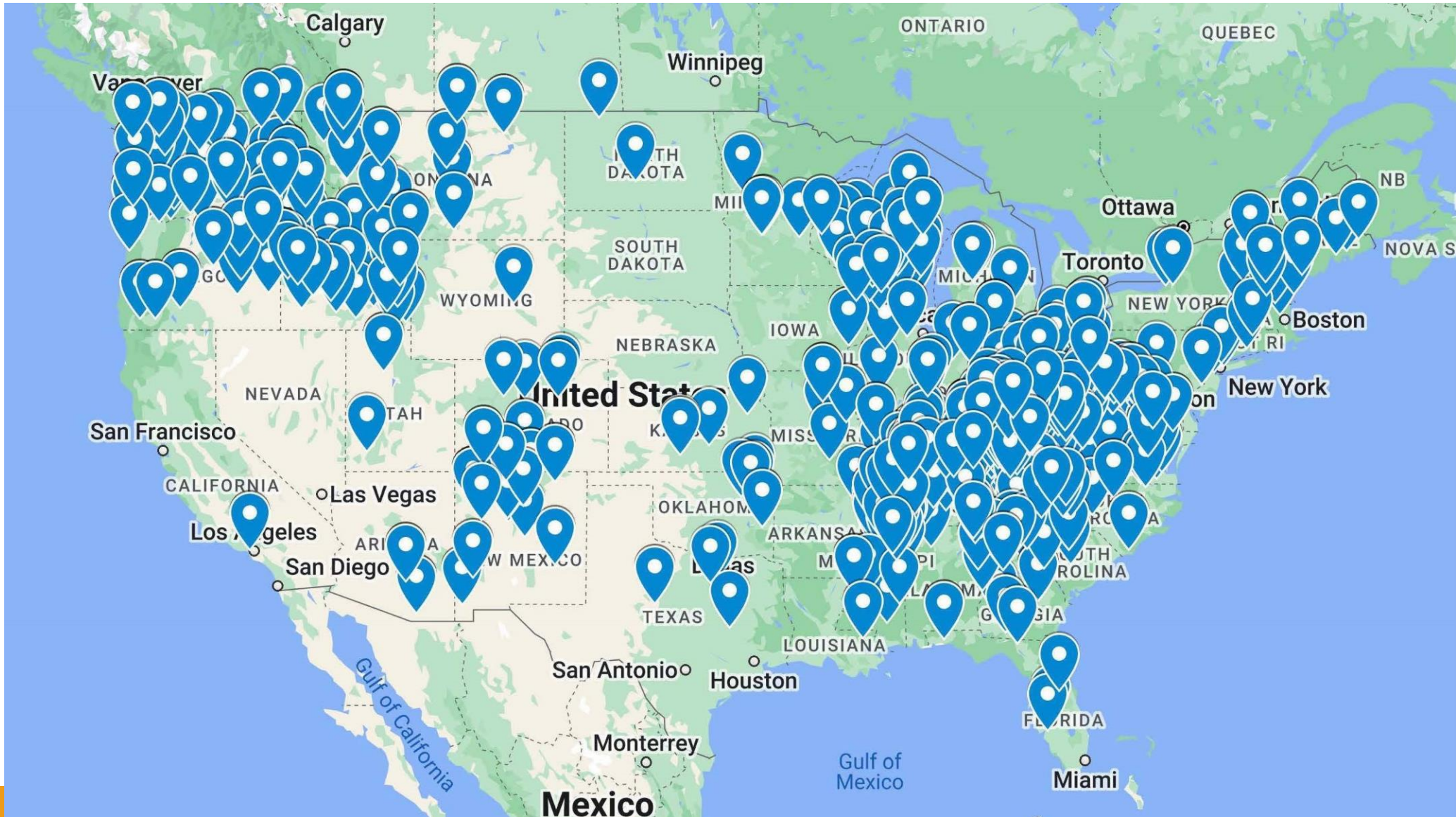


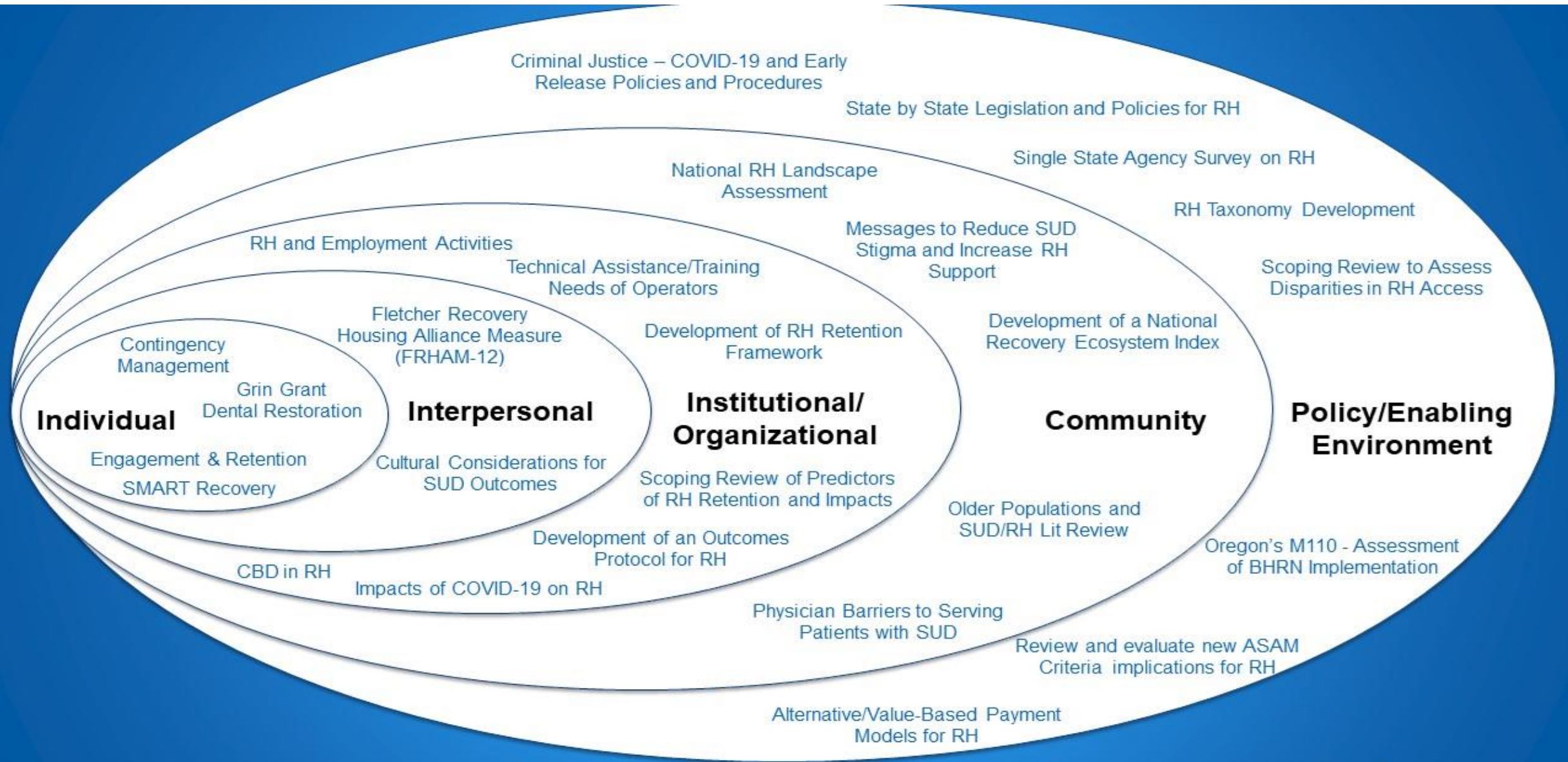
# TA & Implementation Consulting Categories

## Research and Evidence-Based tools

- Recovery Housing Development
- Blended Funding Models
- Criminal Justice Diversion Programs
- Environmental/Community Assessments
- Community and Stakeholder Development
- Opioid Response Programs
- Peer-Driven Support
- Community-Based Care
- Medication-Assisted Treatment
- Business/Project Plan Templates and Toolkits
- Trauma-Informed Care
- Recovery Outcomes
- Payment Methodologies
- Workforce Training
- Recovery Ecosystem Development
- Clinical & Social Model Care Continuum

# FGI RCOE – TA Locations To Date – 47 States





# Substance Use: A Public Health Challenge

1. According to the NSDUH, **46.3 million people** aged 12 or older (or **16.5 percent of the population**) met the applicable DSM-5 criteria for having a substance use disorder in the past year. In 2021, **94% of people** aged 12 or older with a substance use disorder **did not receive any treatment**.
2. Overall, drug overdose deaths rose from 2019 to 2021 with more than **106,000** drug overdose deaths reported in 2021.
3. More than **140,000 people** (approximately 97,000 men and 43,000 women) die from alcohol-related causes annually, making alcohol the fourth-leading preventable cause of death
4. According to the January 2022 PIT count, **582,462** people were experiencing homelessness across America. This amounts to **18 out of every 10,000 people**.

1. <https://www.hhs.gov/about/news/2023/01/04/samhsa-announces-national-survey-drug-use-health-results-detailing-mental-illness-substance-use-levels-2021.html>

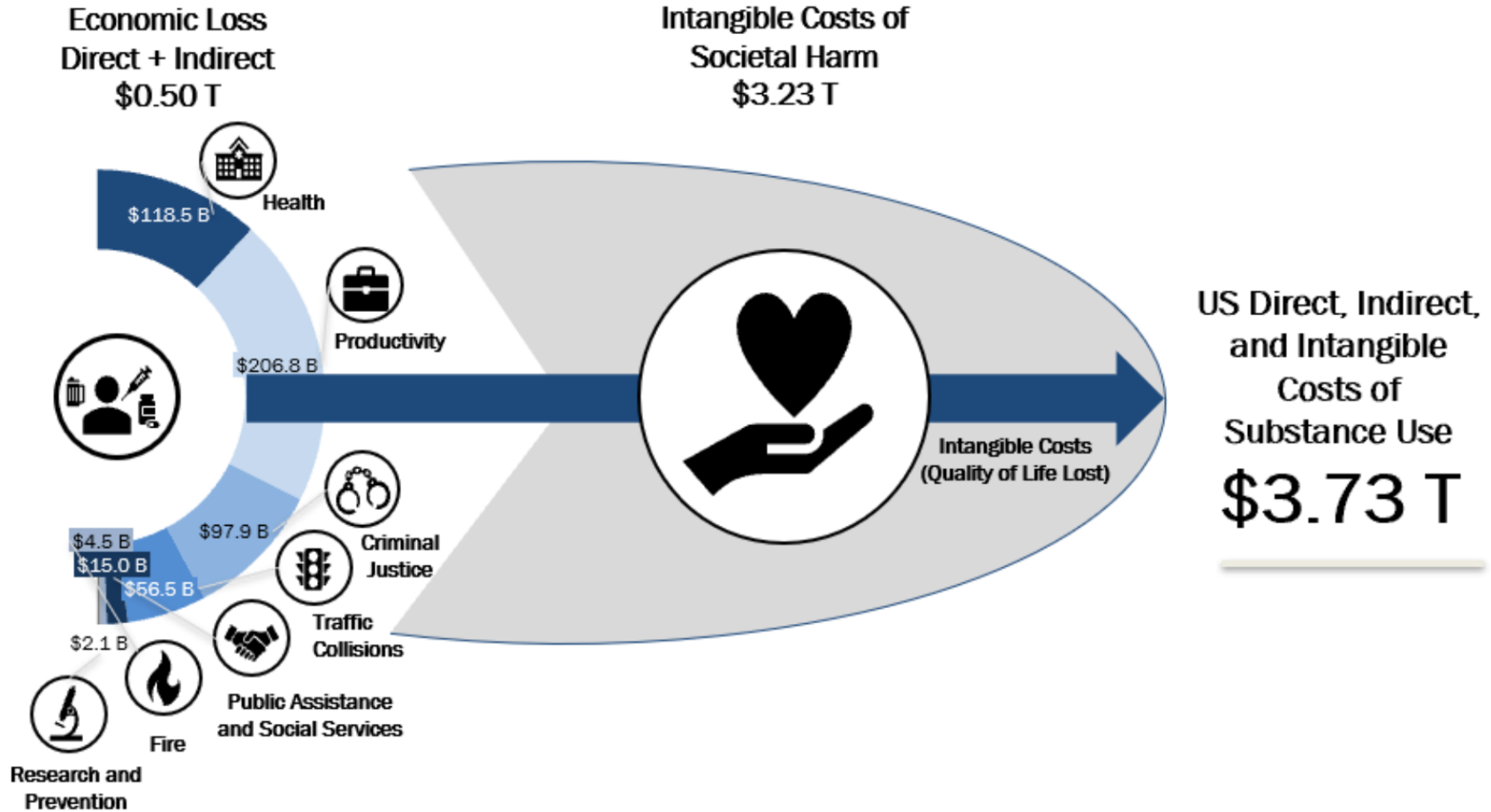
2. <https://nida.nih.gov/research-topics/trends-statistics/overdose-death-rates#:~:text=Overall%2C%20drug%20overdose%20deaths%20rose,overdose%20deaths%20reported%20in%202021.>

3. CDC. Alcohol and Public Health: Alcohol-Related Disease Impact. [Table], Annual average for United States 2015–2019 alcohol-attributable deaths due to excessive alcohol use, all ages. [cited 2022 Apr 26].

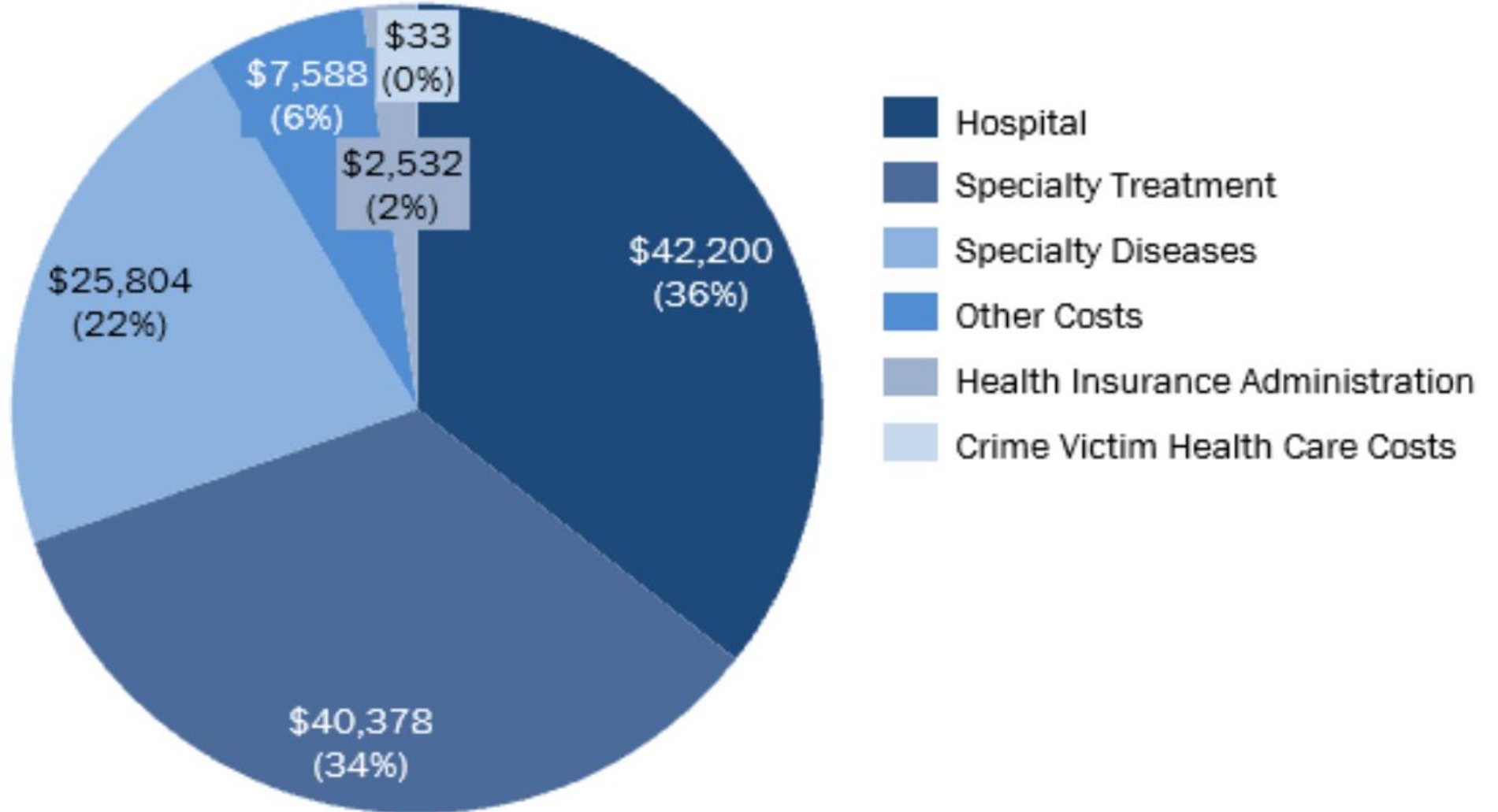
4. <https://www.huduser.gov/portal/datasets/ahar/2022-ahar-part-1-pit-estimates-of-homelessness-in-the-us.html>



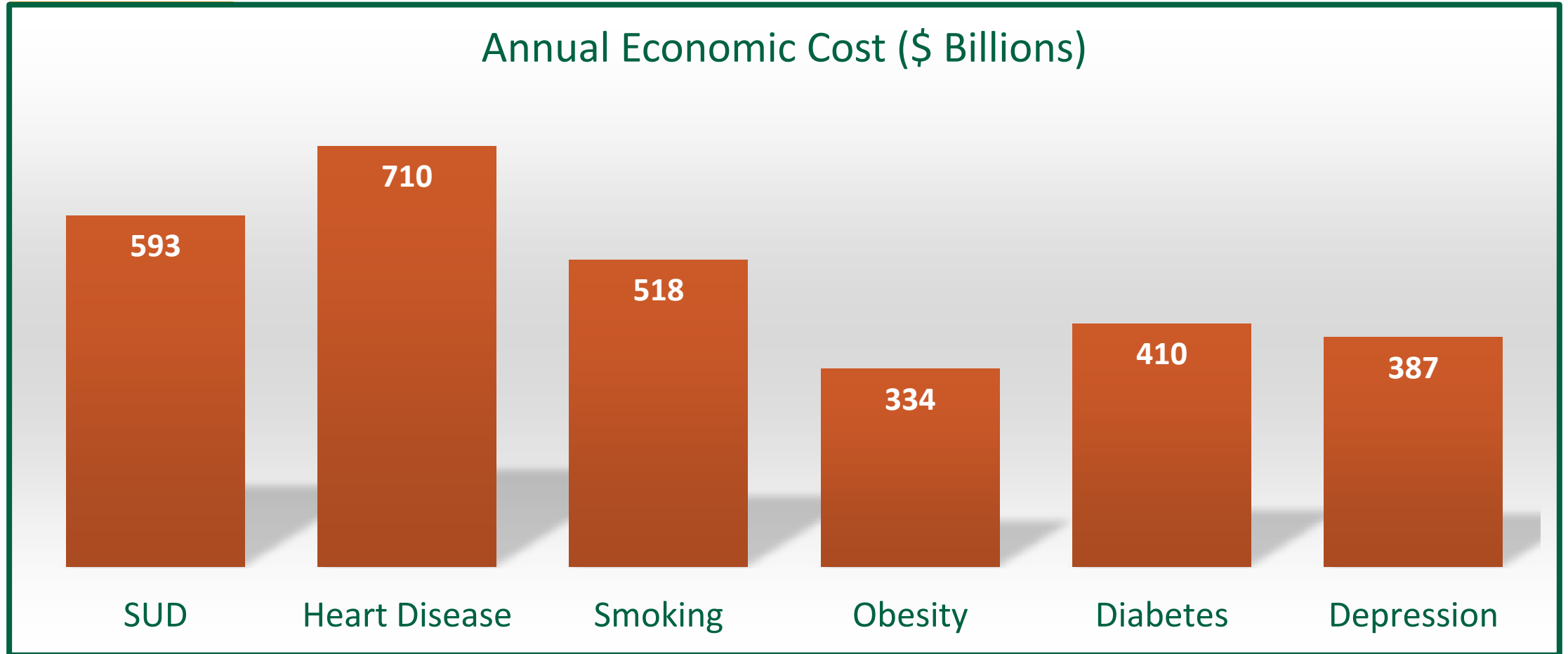
# Economic Cost of Substance Use Disorder in the United States (2019)



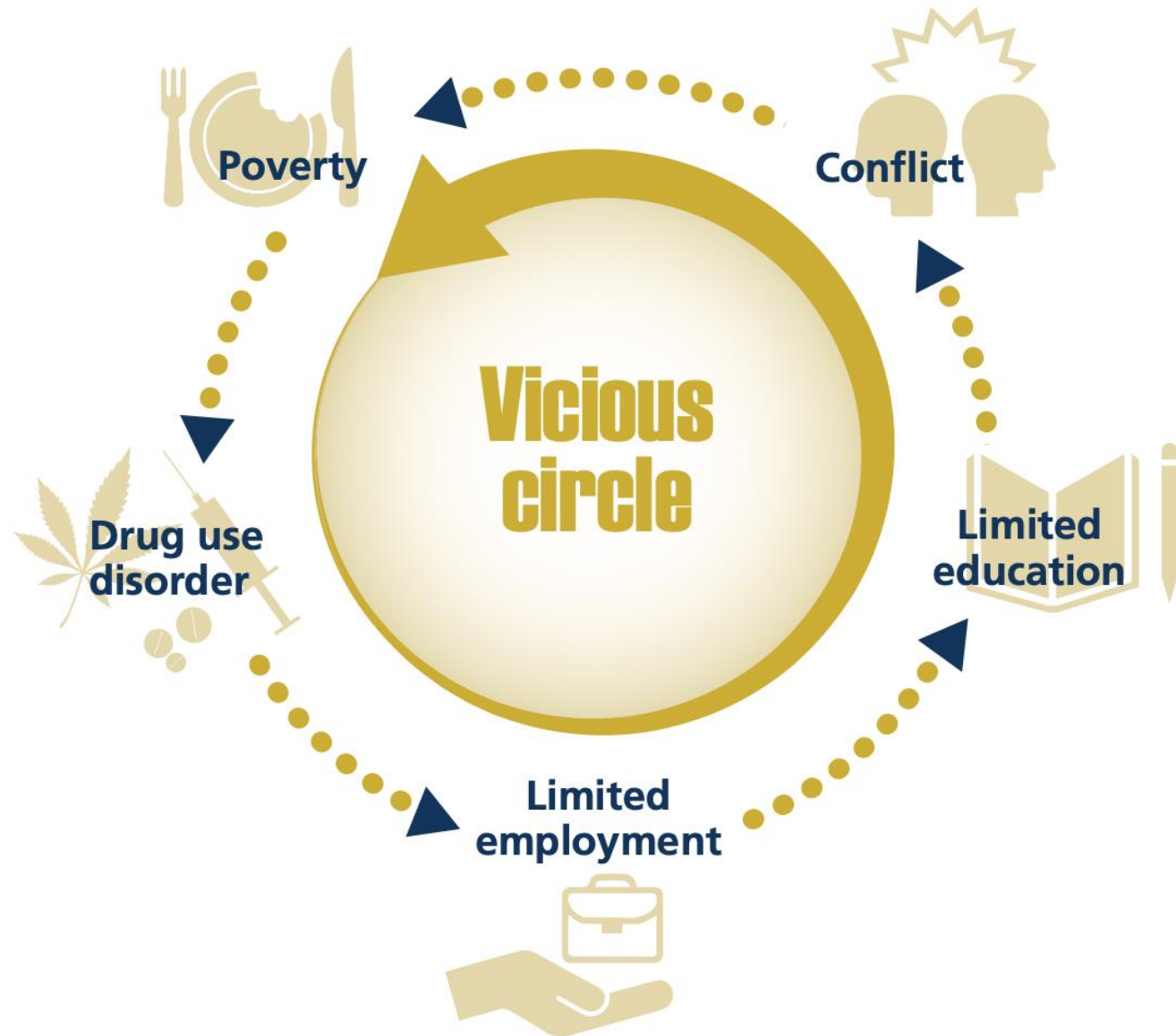
# Substance Use Costs Within the Health System



# The Cost of Illness



# Socioeconomic Disadvantage and SUD



Socioeconomic  
Characteristics of  
Drug Use Disorders

United Nations Office  
of Drugs and Crime  
(2020)

# Barriers to Preventing and Treating SUDs in Rural Communities

- A complicated system of care
- Lack of interagency coordination and communication
- Limited resources and personnel
- Lack of mental health services and case management services
- Insufficient capacity in hospitals to treat SUDs
- Transportation barriers
- Homelessness and substandard housing
- Motivation for change or isolation
- Stigma and confidentiality concerns

## Check Point:

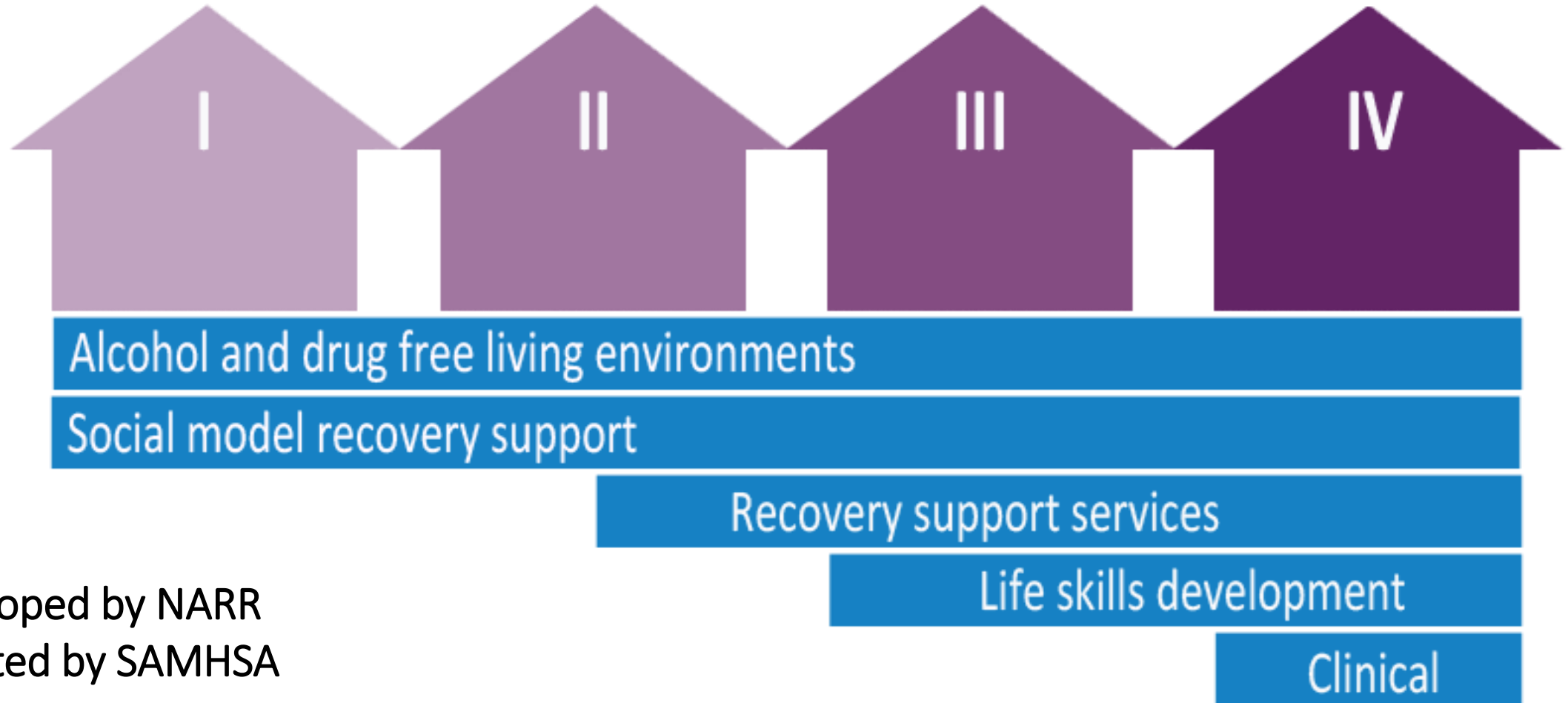
- Are there barriers or challenges we haven't discussed?
- So now that we have talked about barriers let's talk about solutions.

# What is Recovery Housing?



A **Recovery Residence (RR)** is a broad term describing a sober, safe and healthy living environment that promotes recovery from alcohol and other drug use and associated problems.

# Recovery Housing as a Care Model



Developed by NARR  
Adopted by SAMHSA



# Recovery Housing – Service Mix

Recovery houses offer a range of services and supports with a focus on social recovery and peer engagement with support. Within the social recovery model, a recovery house may provide:

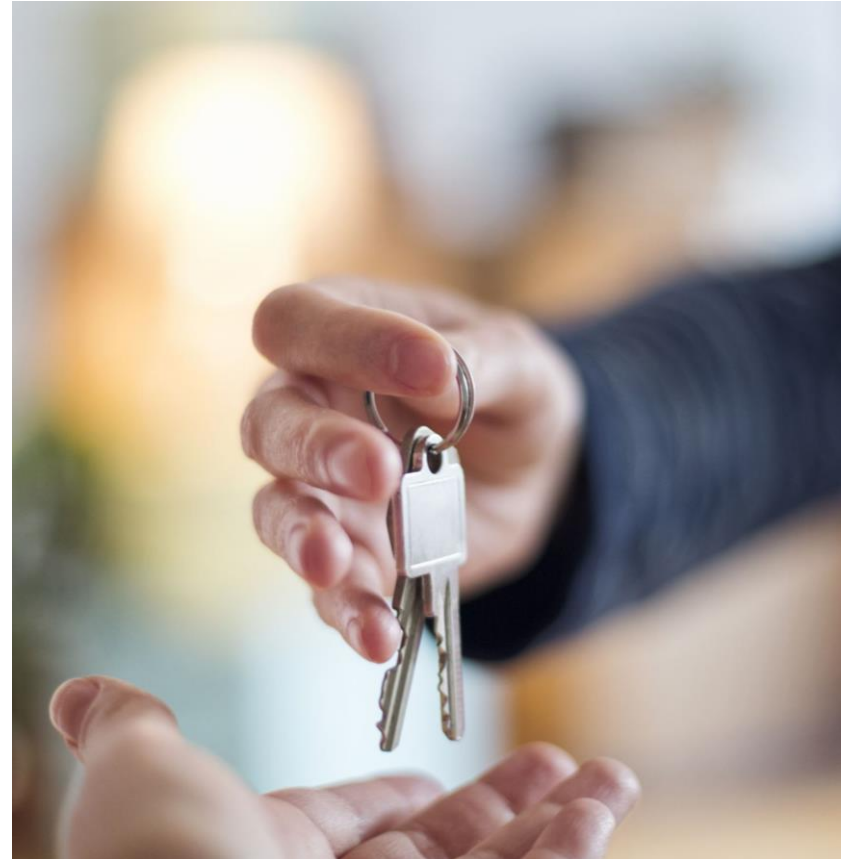
1. Peer Support and recovery support services
2. Group Services (SMART Recovery)
3. Case Management—core health home services
4. Recovery Navigation
5. Didactic and mutual support groups (12-step, Recovery Dynamics)
6. Building recovery capital through daily activities and operations
7. Life skills training
8. Vocational assessment, training and job coaching—engagement in social enterprises
9. Medication supports and service coordination

# So Why Recovery Housing?

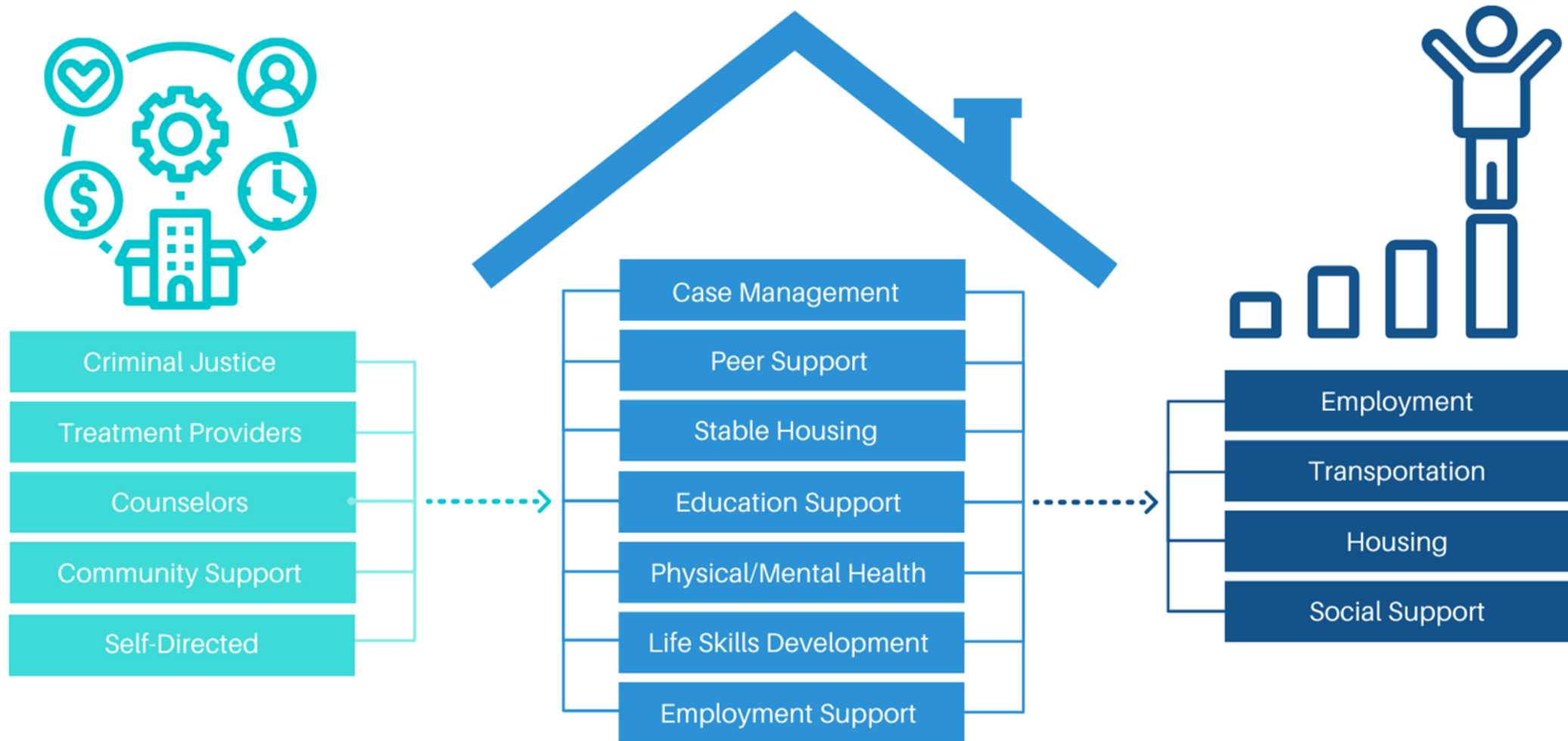
- ❖ The solution has to address the problem
- ❖ RH Addresses the vicious cycle of SUD – chronic and pervasive
- ❖ Aligns the social and medical needs – dismantles silos and is a trauma informed environment that supports person centered and integrated goals
- ❖ Addresses health related social needs to promote health outcomes
- ❖ Aligns with the goals of value-based care
- ❖ There is a return on investment
- ❖ Long-term support
- ❖ Less expensive start up and operational costs

# How Does Recovery Housing Create Value?

- Prioritizes patient outcomes by providing a **supportive and structured environment** that promotes long-term recovery.
- Provides residents with a **community of peers** who share similar experiences and can **offer support and guidance**.
- Addresses **KEY** *health related social needs* including, housing, employment, social connections, and removing barriers to care to enable an individual to focus on their recovery.



# How a Recovery Ecosystem Creates Recovery Capital





What is a Recovery Ecosystem?

# Recovery Ecosystems Bring Communities Together

- ❖ Local and State Officials
- ❖ Hospital and Health Systems
- ❖ Medical Providers
- ❖ BH Service Organizations
- ❖ Community Based Organizations
- ❖ Public Health
- ❖ Criminal/Legal system
- ❖ Faith-based communities
- ❖ Public safety & first response
- ❖ Transportation
- ❖ Housing Providers
- ❖ Human services
- ❖ Educational Institutions



# A RECOVERY ECOSYSTEM

Begins with safe housing and grows from there



## COMMUNITY

Stakeholders take pride in reuniting families, reviving local economies, and restoring meaning and purpose to life



## DIVERSION

From punishment to connection and rehabilitation—with full criminal justice support



## TREATMENT

A complete continuum of holistic, best-practice, on-demand care that's evidence-based and trauma-informed



## SUPPORT

Peer support and mentorship builds relationships while instilling comradery, a strong work ethic, and full accountability



## EMPLOYMENT

Vocational training and aggressive social enterprise create the recovery capital and meaningful employment critical to long-term recovery



## PROOF

Continuous documentation of outcomes, aided by academic researchers, ensures quality control and never-ending improvement

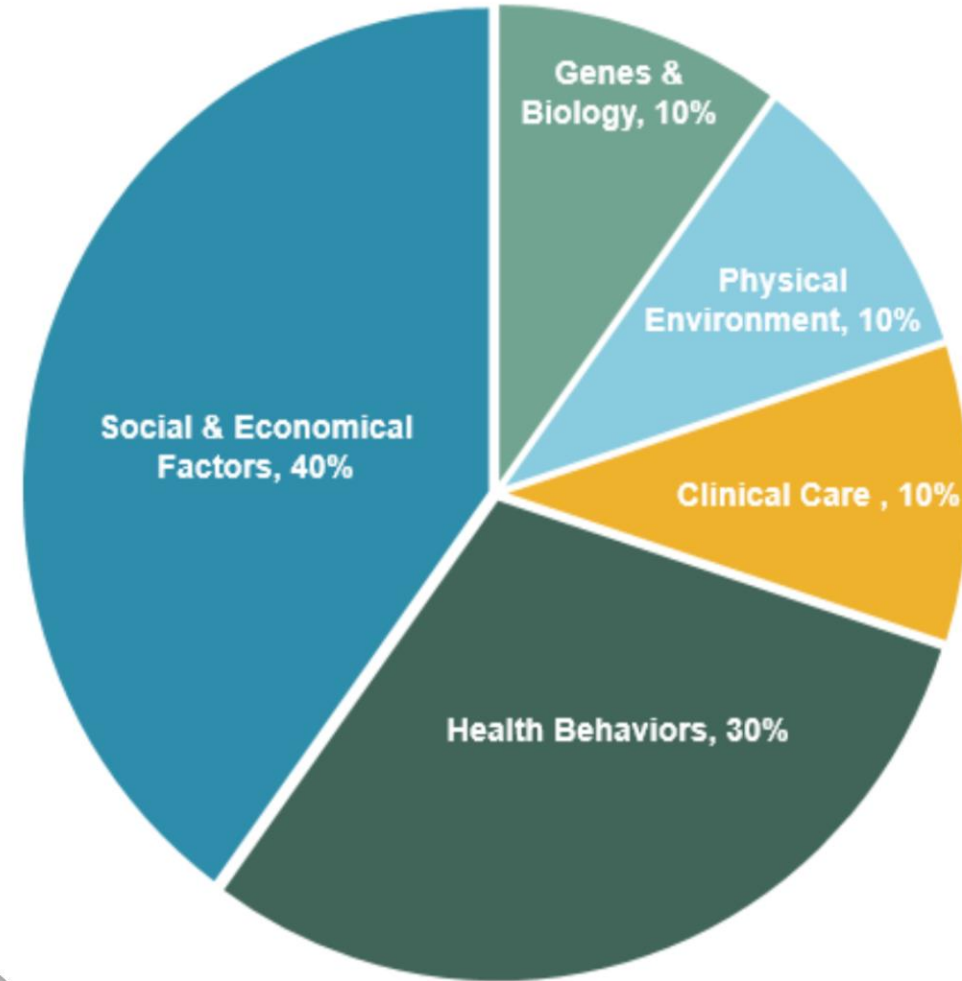
**A COMPLETE SYSTEM OF EXCELLENCE**

Based on Whole Health

# Holistic Support Services

Clinical care alone is only  
ten percent of the impact.

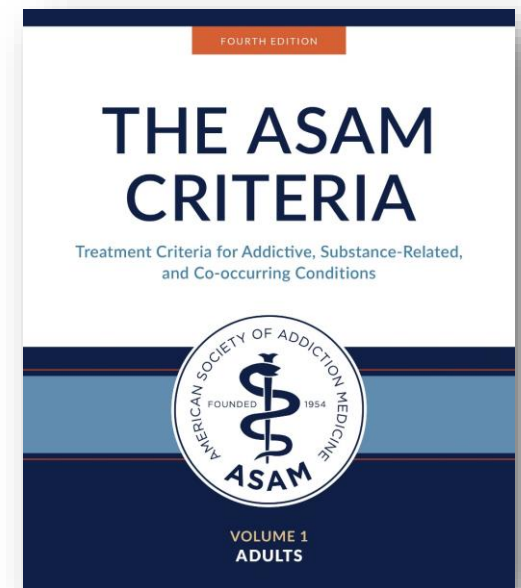
**Determinants of Health**





# What is the ASAM 4<sup>th</sup> Edition and Why Does it Matter?

- Released in November 2023, the ASAM Criteria 4<sup>th</sup> Edition is the most widely used guidance for addiction treatment providers
- The 4<sup>th</sup> Edition first to recognize and promote referrals to recovery housing and recovery support services
- Per recent federal HHS survey, 45 state Medicaid programs use ASAM criteria for placement in SUD treatment services and programs
- At least 26 states and DC provide coverage for some services specified in the ASAM Criteria



# ASAM 4th Edition Assessment Criteria

## Dimension 1: Intoxication, Withdrawal, and Addiction Medications

- Intoxication and Associated Risks
- Withdrawal and Associated Risks
- Addiction Medication Needs

## Dimension 2: Biomedical Conditions

- Physical Health Concerns
- Pregnancy-Related Concerns
- Sleep Problems

## Dimension 3: Psychiatric and Cognitive Conditions

- Active Psychiatric Symptoms
- Persistent Disability
- Cognitive Functioning
- Trauma-Related Needs
- Psychiatric and Cognitive History

## Dimension 4: Substance Use-Related Risks

- Likelihood of Engaging in Risky Substance Use<sup>1</sup>
- Likelihood of Engaging in Risky SUD-Related Behaviors<sup>2</sup>

## Dimension 5: Recovery Environment Interactions

- Ability to Function Effectively in Current Environment
- Safety in Current Environment
- Support in Current Environment
- Cultural Perceptions of Substance Use and Addiction

## Dimension 6: Person-Centered Considerations

- Barriers to Care
- Patient Preferences
- Need for Motivational Enhancement

# ASAM's Conceptual Framework for Recovery Supports

## Recovery Capital

- Underlying concept that supports integrating RSS in ASAM Criteria
- Clinical services and recovery support work in tandem to build recovery capital

Definition: Total resources available to a person to help them find and maintain their recovery, including the person's skills, abilities, and knowledge; resources to fulfill their basic needs and social and community support

## Social Model Recovery Support

- 4<sup>th</sup> Edition notes that many recovery residences utilize a social model to guide their programs and structure, creating a therapeutic milieu in a community that reinforces skills and attitudes needed for sustained recovery

# Recovery Capital



## Personal Capital

GENERAL HEALTH  
MENTAL WELLBEING  
NUTRITION  
EMPLOYMENT  
EDUCATION  
HOUSING SITUATION  
TRANSPORTATION  
CLOTHING



## Social Capital

FAMILY SUPPORT  
SIGNIFICANT OTHER  
SOCAL SUPPORT  
HEALTHY LIFESTYLE  
ACCESS TO HEALTHCARE  
SAFETY



## Cultural Capital

BELIEFS  
SPIRITUALITY  
SENSE OF PURPOSE  
CULTURAL RELEVANCE  
SENSE OF COMMUNITY  
VALUES

# What is ASAM's guidance to treatment providers about referrals to recovery housing and supports?

## Evaluate patient's "recovery environment interactions":

- Able to function effectively in current environment?
- Physical and emotional safety in current environment?
- Likelihood of engaging in risky behavior or SUD-related behaviors in current living situation?

**Is my patient able to engage in a supportive community?**

# What health system concepts are discussed that may be important to understand?

## The Chronic Care Model

- Framework originally designed to improve the quality of care for patients with chronic diseases like diabetes and heart disease
- Components include self-management support, delivery system design, decision support, clinical information systems, organization of health, and community

## Measurement Based Care (MBC)

- Systematic and routine assessment of a patient's symptoms and functioning inform treatment decisions and engage patients in their treatment

# What evidence does ASAM point to regarding recovery supports (and why does it matter)?

ASAM references over 60 studies, systematic reviews, books, other resources

Individual Assessment of Recovery Capital

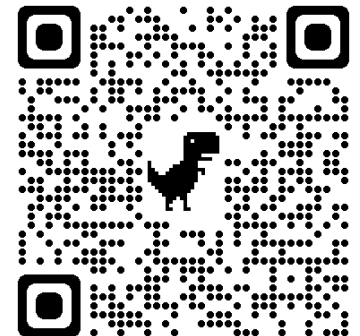
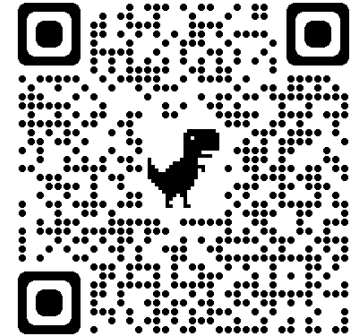
The Potential of Recovery Capital - Best and Laudet, 2010

<https://www.thersa.org/globalassets/pdfs/reports/a4-recovery-capital-230710-v5.pdf>

Development and validation of a Brief Assessment of Recovery Capital (BARC-10) for alcohol and drug use disorder.

Vilsaint, Kelly, et al – 2017

<https://www.sciencedirect.com/science/article/abs/pii/S0376871617302119?via%3Dihub>



# ASAM cites evidence of recovery supports

## Social Model Recovery Support

Maximizing Social Model Principles in Residential Recovery Settings

Plocin, et al 2014

<https://www.tandfonline.com/doi/full/10.1080/02791072.2014.960112>



Moving Social Model Recovery Forward:

Recent Research on Sober Living Houses

Plocin, et al 2023

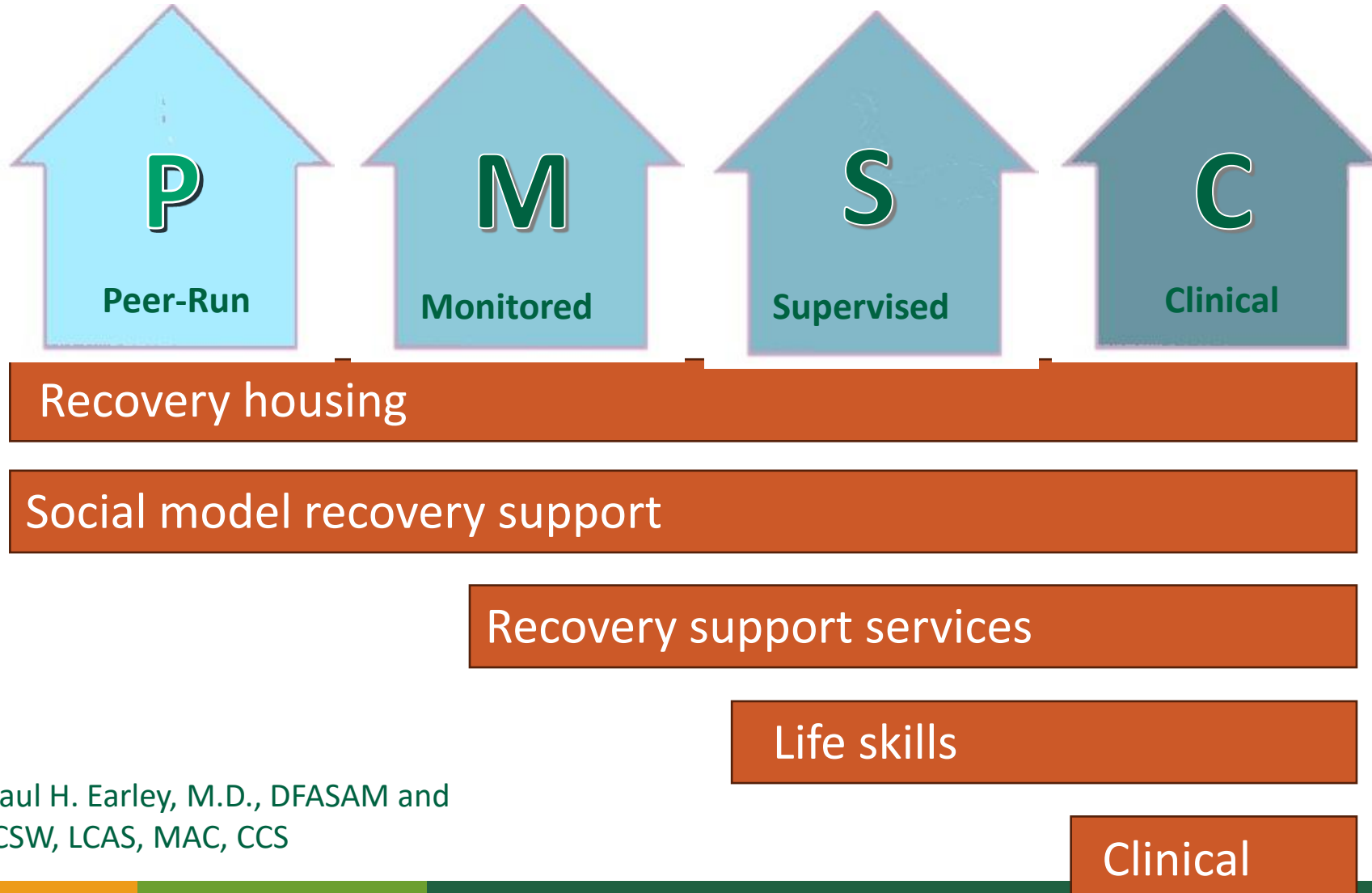
[https://www.tandfonline.com/doi/full/10.1080/07347324.2023.](https://www.tandfonline.com/doi/full/10.1080/07347324.2023.2167528?src=recsys)

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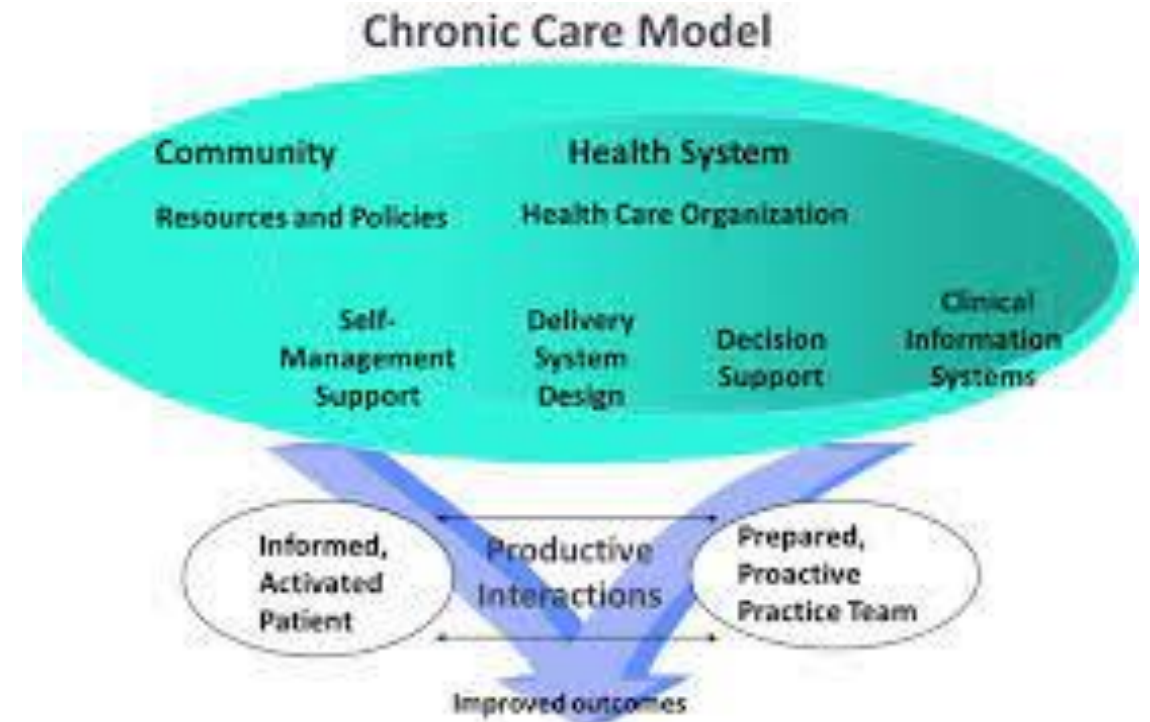
# ASAM & NARR: Four Types of Recovery Housing



Graphic provided by Paul H. Earley, M.D., DFASAM and  
Beth Fisher Sanders LCSW, LCAS, MAC, CCS

# Partnerships between treatment and recovery services are explicit in the chronic care model

- Integrated, team-based care
- Patients encouraged to participate in effective community programs
- Healthcare and community partnerships support interventions and fill gaps in needed services



# The CMS Innovation Center

Developing and testing health care payment and service delivery models to improve patient care, lower costs, and align payment systems to promote patient-centered practices



# What's Working?

## Washington State

- RH Legislation - Rental assistance, start up grants
- Medicaid Waiver – Foundational Community Supports

## New Mexico

- Recovery Housing Pilot Program
- SOR
- Linkages

## Kentucky

- SB90
- Recovery Kentucky Centers

# RHOAR—A Case Study



Cumberland River RHOAR - Recovery Building

# RHOAR—A Case Study



- Therapeutic Community
- Counseling on site
- Educational Opportunities
- Job Training
- Transitional Living
- Medication For Opioid Use Disorder

# Creating Conditions for Success

- What's next for you?
- Who is in your recovery ecosystem?



# Three Rural Centers of Excellence (RCOEs)



## Rural Center of Excellence on SUD Treatment at the University of Vermont

- Expanding evidence-based treatment and harm reduction for OUD and SUDs via educational resources and technical assistance
- Patient focused approaches serving the needs of rural populations across the U.S. through innovative technology and telehealth strategies
- Serving providers in any rural community throughout the U.S.

Find us at:

[www.uvmcora.org](http://www.uvmcora.org)



## Recovery Center of Excellence

## Rural Center of Excellence on SUD Prevention at the University of Rochester

- Working to prevent and reduce the impact of substance use and SUD in rural areas
- Building and sharing an array of evidence-based practices adapted for rural communities
- Serving any rural community in the U.S.

Find us at:

[recoverycenterofexcellence.org](http://recoverycenterofexcellence.org)



## Rural Center of Excellence on SUD Recovery at the Fletcher Group

- Expanding the capacity & quality of rural SUD Recovery Ecosystems
- Conducting/publishing original research on SUD outcomes & evidenced-based programs
- Working as a community catalyst to expand SUD recovery support services
- Working in any rural community across the U.S.

Find us at:

[www.fletchergroup.org](http://www.fletchergroup.org)





**Thank you!**  
**Questions?**

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