

### **Telerecovery Guide and SOP**

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#### Introduction

Delivering recovery support services using digital channels exclusively requires peer specialists to have a high degree of technological literacy, as well as being able to adapt typically face-to-face primary and secondary service delivery to various digital platforms. As communication and relationships are central to peer recovery support services, the integrity of these must be preserved and emulated, while taking advantage of the digital convenience offered through telerecovery. This handbook is written as a supplement to the Unity Recovery Peer Handbook, which contains the foundational principles and procedures of Unity Peer recovery support specialists.

# **Initial Engagement**

Digital contact comes through several channels; email, telephone, text, direct messaging, and app chat. Each of these channels has different levels of proximity and intimacy, and more importantly, different styles of communication. The peer specialist should use the appropriate style and convention for the channel; for example, text abbreviations such as prolly, tmrw, and IDK are appropriate for text/DM, but not for email. All of these interactions are generally more brief than in-person ones, so focus is important.

Many potential recoverees may be reaching out via technology or digital channels for the first time, which may add to the inherent anxiety present when requesting recovery support. It is important to begin to build rapport as quickly in the digital interaction as possible. This can be accomplished in a similar fashion as a face-to-face interaction, such as by sharing your name and recovery status, offering initial positive feedback on the recoveree seeking support, etc.

No matter which digital the initial communication begins on, peer specialist should ensure that they have provided their name, their role, and the recovery support services available to the potential recoveree early on. This can and should be accompanied by asking for the location of the potential recoveree and what type of support they are reaching out for.



# Opportunities and Invitations to Provide Peer Recovery Services

Motivational Interviewing skills combined with excellent recoveree service is the foundation of our approach. Queries should be met with open, welcoming conversation punctuated with immediately relevant information about services available. Using the same OARS approach as face-to-face sessions, peer specialists should focus on:

Open-ended questions - gather information about the person and why they reached out Affirmations - motivate the person to share more Reflections - keep conversations going and help the person feel heard Summary - pivot point, can move someone towards engagement

In addition to the OARS, peer specialists should also provide invitations to services whenever relevant:

Invitation - Can I give you/would you like more information? Can I help you get connected to someone?



# **Engaging Recoverees in Services**

At such time that a potential recoveree agrees or asks for peer recovery support services, the peer specialist handling initial contact and information sharing should work to schedule the remote intake. If a potential recoveree is interested in only digital recovery meetings, yoga, or other digital recovery support services (other than peer services), you should provide them the relevant links and access points to those services, as well as providing all information needed to request peer support services in the future.

It is critical to try and gather as much information when beginning to schedule an intake for appropriate peer specialist matching by your peer supervision. While we consider gender identity and expression the most important matching characteristic, it may also be helpful to know the type of recovery the potential recoveree is interested in or utilizing currently, as well as any other characteristics that may help improve a peer connect (e.g., veteran status, student status, criminal justice involvement, etc.).

You should not assume a potential recoverees gender identity or expression from the name they provide to you. Instead, you should tell the potential recoveree that we have several peer specialists that are available to help and ask whether they prefer to work with a male or female identifying peer.

After this information is gathered, you should identify the most appropriate time and future date that a potential recoveree would like to complete their intake and first engagement with a peer specialist. You should also decide with the potential recoveree whether they would prefer a video or telephonic engagement (video is preferred, but either is available). Once this information is gathered and dates set, request the potential recoveree's email and let them know that a peer specialist will send a calendar invite with all of the necessary information to them within 24-hours (though we should strive to send this as soon as possible).



## **Remote Engagements**

#### Remote Intake Procedure

- 1. Preparing for the session
  - Send out personal Zoom link (or telephone number) in calendar invite for the appointment time. Put in notes instructions on how to connect and the local time for the recoveree (if in a different time zone)
  - b. Send out intake documents as attachments to calendar invite
  - c. These can also be sent through Zoom as needed. Ensure that you have PDF copies of documents on file and ready.
- 2. Connect through video or telephone, check with recoveree to ensure comfort with the digital platform if using zoom, demonstrate features as necessary, exchange phone numbers in case of technical difficulty if you haven't already.
- 3. Begin verbal portion of intake document completion; ask recoveree to read along as you describe documents. Ask recoveree if they have questions before signing documents.
- 4. Signed documents can be returned in a number of ways:
  - a. Signed electronically with computer font and sent back digitally
  - b. Printed, signed and scanned and sent back digitally
  - Cell phone photos may be used (convert to PDF before uploading into RecoveryLink)
  - d. Printed, signed and mailed back in envelope
  - e. Please ensure all documents are legible
  - f. Note: The peer specialist **may not** render signatures for the participant.
- The intake GPRA should be explained and completed interview style by the peer specialist. GPRAs are only completed for <u>Pennsylvania</u> residents.
- 6. Complete the typical brief and full intake in RecoveryLink (Demographics, Recovery Characteristics, and Requested Services)
- 7. Conduct only the recovery capital assessment at the full intake portion in RecoveryLink.
- 8. Schedule follow-up appointment to begin the initial recovery plan and enter into personal calendar and send the recoveree the calendar invite with zoom link, telephone number (if applicable), and the local time of the appointment (if applicable)



#### **Remote Initial Recovery Plan Procedure**

- 1. Preparing for the session
  - a. Send a reminder via text and/or e-mail to the recoveree 24-hours before the scheduled appointment to confirm
  - Provide the recoveree with copies of the individual recovery and wellness plan (or plan to screen share the plan if using video) so they may follow along during the engagement
  - c. Review the recoveree's demographic information, recovery characteristics, and desired services prior to the appointment
  - d. You should be in a relatively quiet and private (as possible) place to conduct the engagement
- 2. Connect through video or telephone, re-check with recoveree to ensure comfort with the digital platform if using zoom, demonstrate features as necessary
- 3. Complete the initial recovery plan engagement as you would an in-person engagement by using the individual recovery and wellness plan document as a discussion guide
  - a. It is critical in digital engagements that the session is discussion based, not a "check list" of items. Use your best judgement for building rapport and establishing the initial recovery plan, but be friendly and personable
- 4. Enter information in RecoveryLink in the "initial recovery plan" session for the recoveree as needed
  - a. Each recovery plan goal should be SMART with at least 2-3 action steps accompanying each goal. Ensure that the action steps are realistic for the recoveree and appropriately spaced out to help promote success
  - b. If providing referrals to help achieve a recovery plan goal or action step, use the Recovery Resource Hub or one of our regional RCO partners to find the most applicable and available referral resource. You should still work with the recoveree to schedule appointments and not just provide cold referral information.
- Once completed, finish the session by recapping the initial recovery plan (summarize goals and action steps) and get verbal confirmation from the recoveree that the summary is correct and not missing information
- 6. Update any recoveree demographics or contact information, complete the recovery capital assessment, and schedule the next engagement session.
- 7. Send a calendar invite for the next appointment, along with the telephone number, zoom video room URL, and local time as applicable
  - a. Provide a PDF copy of the initial recovery plan to the recoveree by attaching the PDF to the calendar invite for the next appointment



8. Note: If the next appointment is not happening for a time period greater than two weeks, please make sure to text or email the recoveree as a brief support check-in once a week.



#### Remote Follow-up Engagements Procedure

- 1. Preparing for the session
  - a. Send a reminder via text and/or e-mail to the recoveree 24-hours before the scheduled appointment to confirm
  - Review the recoveree's demographic information, recovery characteristics, desired services, active referrals, and current recovery plan prior to the appointment
  - c. You should be in a relatively quiet and private (as possible) place to conduct the engagement
- 2. Connect through video or telephone, re-check with recoveree to ensure comfort with the digital platform if using zoom, demonstrate features as necessary
- Complete the follow-up engagement as you would an in-person engagement by using the current recovery plan and the follow-up engagement document as a discussion quide
  - a. It is critical in digital engagements that the session is discussion based, not a "check list" of items. Use your best judgement for building rapport and discussing progress and accountability to the recoverees recovery plan, but be friendly and personable
- 4. Enter information in RecoveryLink in the "follow-up engagement" session for the recoveree as needed
  - a. Ensure that you update the recovery plan with completed action steps, overall recovery plan domain goals, as applicable. This includes changes in status, completed actions, or goals the recoveree has decided to no longer work towards or work towards in the future.
  - b. If providing new referrals to help achieve a recovery plan goal or action step, use the Recovery Resource Hub or one of our regional RCO partners to find the most applicable and available referral resource. You should still work with the recoveree to schedule appointments and not just provide cold referral information.
  - c. If referrals that are active are now completed, ensure that you update the status of these referrals in the participant profile > referral tab after the follow-up engagement session.
- 5. Once completed, finish the session by recapping the self-reported progress and any changes to the recoveree's recovery plan (summarize changed or added goals and action steps, existing goals and action steps not yet completed, and any new referrals) and get verbal confirmation from the recoveree that the summary is correct and not missing information
- 6. Update any recoveree demographics or contact information, complete the recovery capital assessment, and schedule the next engagement session.

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- 7. Send a calendar invite for the next appointment, along with the telephone number, zoom video room URL, and local time as applicable
  - a. If changes were made to the recovery plan, provide a PDF copy of the plan to the recoveree by attaching the PDF to the calendar invite for the next appointment
- 8. Note: If the next appointment is not happening for a time period greater than two weeks, please make sure to text or email the recoveree as a brief support check-in once a week.



#### **Remote Referral Procedure**

- 1. Referrals made in a scheduled engagement session should follow the instructions provided in those sessions.
- 2. If an ad hoc referral is needed, navigate to the participant profile screen > referral tab and generate a new active referral for the recoveree
  - a. Use the Recovery Resource Hub or one of our regional RCO partners to find the most applicable and available referral resource. You should still work with the recoveree to schedule appointments and not just provide cold referral information.
- 3. Provide a PDF copy of the referral to the recoveree via email



#### **Remote Discharge Procedure**

- Discharges should be completed as needed and in a similar fashion to in-person discharges. This includes recoverees that have stopped responding to the peer specialist, those that have transitioned to a different level of care, or any other administrative discharge reason.
- If the discharge is planned (the recoveree is discontinuing services as desired and scheduled), you should schedule a zoom video meeting or telephone meeting via calendar invite.
  - a. Preparing for the session
    - i. Send out personal Zoom link (or telephone number) in a calendar invite for the appointment time. Put in notes instructions on how to connect and the local time for the recoveree (if in a different time zone)
  - b. Connect through video or telephone, check with recoveree to ensure comfort with the digital platform if using zoom, demonstrate features as necessary, exchange phone numbers in case of technical difficulty if you haven't already.
  - c. Enter information in RecoveryLink in the "discharge"" session for the recoveree as needed
    - i. Ensure that you note the reason for discharge and enter any final notes as applicable
    - ii. Complete the final recovery capital assessment
    - iii. Complete the discharge GPRA at this time after saving the discharge session in RecoveryLink
  - d. Once completed, finish the session by recapping the entirety of the recovery services relationship to date, and provide information on how to re-engage with the peer specialist in the future.
  - e. Provide the final recovery plan to the recoveree via email as a PDF after saving the discharge.



# **Additional Notes:**

- If recoveree is meeting with the peer specialist at longer intervals than weekly, the peer specialist should contact the recoveree via email, text message, or phone call on a weekly basis
- The 6-month follow-up GPRA should be completed in RecoveryLink as instructed by your peer supervisor.