

**Region IV Behavioral Health Board Meeting**  
**February 12, 2015**  
**Room 131, 1720 Westgate Drive, Boise, ID 83704**

**11:00 AM – 1:00 PM**

<b>Time</b>	<b>Agenda Item</b>	<b>Presenter</b>	<b>Notes</b>
11:00-11:10	Welcome/call to order; Introductions; Approval of consent agenda (includes January minutes and reports attached to agenda)	Jess Wojcik, Vice Chair	
11:10-11:30	Old Business Update from working group – CDHD discussions	Jennifer Burlage and Working Group Members Laura Thomas	
11:30-12:20	Bylaws – code of conduct item from January meeting Executive committee report Budget Needs and Gaps Youth BH committee progress	Jess Wojcik	
12:20-12:30	Process for Scholarships– ICADD Scholarships for interested board members discussion	Laura Thomas	
12:30-12:45	Ada County Organizing Group Community Recovery Center (15 minutes)	Monica Forbes	
12:45-12:50	Recovery Idaho, Inc. Update	Melanie Curtis	
12:50 -1:00	Announcements Next meeting agenda items Wrap-up Adjournment	All	

Region 4 Behavioral Health Board working Budget

ICADD Scholarships (2 per region for all 4 days)

\$2400 (2 scholarships x \$300 x 4 counties)  
\$ 782 (Mileage for Mtn Home and Boise County, 4 scholarships, 4 days x 88 miles rdtpt x 4 scholarship)  
\$ 560 (Estimate 4 nights x \$70 x 2 scholarships Valley Co)  
\$ 214 (Mileage for McCall, assumes two scholarship recipients ride together)  
\$ 516 (Estimate meals on partial days 8 scholarship recipients)  
**\$4, 472 Subtotal - Estimated ICADD scholarship sub total for 2 scholarships per county**  
**(Scholarships only, could provide 8 more 3-day conference scholarships, \$4400)**

\$6000 Estimate additional scholarship only – board members (14 @ \$4,200) , preconference workshops (10 @ \$900), and students (10 @ \$1450, 2 per UI, NNU, BSU, ISU, C of I)  
\$ 250 Meeting meal for board meeting and values working session (\$10.50 x 24)  
\$ 500 Community Recovery Center support – must be acceptable expense  
\$ 800 Estimate for Writing Services -\$ 40/ hr x 20 hours – Needs and Gaps Analysis Report  
\$ 500 Estimate for Professional fees for reviews of bylaws, contract, MOA  
\$ 600 Estimate for board organization consultant fees (G. Raney)

13,122 Estimated budget

\$ 15,000.00	2014-15 Budget
- 393.93	Expenditures to date
\$ 14,606.07	Budget Balance to date
- 13,122.00	Estimated Budget Expenditures
\$ 1,484.07	Reserves to spend prior to May 31, 2015

# Regional Behavioral Health Board

## Gaps and Needs Analysis

2014

Please provide a brief description for each of the columns listed. Include additional information as needed.

Identified Regional Service Needs and Gaps	Short Falls and Challenges	Project Proposals, Progress and Accomplishments	Improvement and Strategy Measures
<p><i>Relating to Prevention, Treatment and Rehabilitation Services</i></p> <p>More funding is needed to provide behavioral health care in the region for the uninsured which will help to avoid the use of costly emergency room treatment.</p> <p>Behavioral health care is not available in all areas of the region which leads individuals to leave their safety net in order to get services not offered in their own communities.</p>	<p>Funding Crisis Centers is all areas of Idaho are dependent upon the legislature.</p> <p>Access to affordable housing in Region X is often in short supply or not available. Funding to develop additional housing options is currently not available</p>	<p><i>Including those associated with Family Support Services and Recovery Support Services</i></p> <p>Work with DPHW towards opening a centrally located Crisis Center in Region X</p> <p>Sent letters and information to support the need for a Crisis Center in Region X to DPHW and the legislature.</p> <p>Develop access to affordable long and short term housing including transitional/supportive housing option for individuals needing treatment services that are not available in their area.</p> <p>Contacted XYZ company to assess their interest in future housing developments projects.</p>	<p>Gather data and other supporting evidence that verifies the need to expand behavioral health services in Region X and send to the Department of Health and Welfare, legislature and Governor's office.</p> <p>Explore grant opportunities to develop future housing options. Region X has one transitional housing unit and will work towards obtaining additional units.</p>
<p>Transportation is limited for individual living in rural areas of the region.</p>	<p>Transportation is in short supply and not available in some areas. Individuals rely on family and friends which is not always a reliable source</p>	<p>Seek funding to develop a transportation system that is cost effective, efficient and adequately address the needs of the citizens. Developing partnerships with</p>	<p>Continue to involve other agencies in the development of a transportation system that is available for usable for many</p>

	of transportation to individuals.	other agencies and governmental entities to advance a transportation structure that is beneficial to all players.	individuals with transportation needs. Continue to seek grant opportunities to assist in the development of the transportation structure.
Other:			

# WHAT IS A RECOVERY COMMUNITY CENTER?

*Adapted from CCAR and IDHW*

Recovery Community Centers provide a meeting place for those in recovery from mental illness, alcohol and/or drug addiction and act as a face for recovery to the community as a whole. Building meaningful and healthy relationships is key to successful recovery, and these centers offer the venue for that to take place. Ideally, the centers are located as close to the heart of a community as possible, and are very visible.

## THE RECOVERY COMMUNITY CENTER CAN OFFER A VARIETY OF ACTIVITIES:

- Others can be counted on to provide support when an individual's recovery is feeling shaky
  - Reliable information is available on services needed by those in recovery, such as housing and transportation assistance
  - Internet service is available to enhance computer skills, conduct job searches, and stay in touch with family and friends
  - Classes are provided to enhance recoverees' ability to live their lives clean and sober and can cover areas such as job skills, social opportunities, and health education
  - Phone banks are provided for volunteers to make requested check-in calls to people in recovery. Knowing someone is going to call every week to see how they are doing may be what it takes to keep an individual in recovery.
  - It is a place to give back. These centers rely heavily on volunteers to function. Experience tells us that giving back is as powerful to the person volunteering as it is to the recoveree receiving the help.
  - The center is an information source for those who are seeking help for themselves or those they care about
- |                     |                  |                 |                   |                    |
|---------------------|------------------|-----------------|-------------------|--------------------|
| • Recovery Coaching | • Peer Support   | • WRAP Training | • Health Coaching | • Fitness Classes  |
| • Art Therapy       | • Support Groups | • Meditation    | • CRAFT Training  | • Parenting Skills |

## AND MORE!

*A Recovery Community Center should not be confused with a 12-step clubhouse, and it is not a drop-in center. It isn't meant to be a place to hang out, but is meant to be a place where a person can go to work on improving their life and that of those around them. It could also be expected to take on the personality of the people who use it and the community that is its home.*

## DIFFERENCES BETWEEN TYPES OF CENTERS

<b>Characteristic</b>	<b>Drop-In Center</b>	<b>12 Step Clubhouse</b>	<b>Recovery Community Center</b>	<b>Addiction Treatment Center</b>
<b>Primary Target Audience</b>	People with mental health issues, people who are homeless	Members of a specific 12-Step fellowship	People in all stages of recovery from mental illness, alcohol & other addictions	People still actively using or in early stages of recovery
<b>Secondary Target Audience</b>	People with co-occurring addiction & mental health issues	None	People seeking recovery, family members, friends & allies	Family members (in some settings), EAP, drug court participants
<b>Core Services</b>	Crisis response, focus on immediate basic needs of individual (food, clothing, shelter, etc.), place to hang out	Sober social fellowship, mutual aid meetings, meeting rental space	Peer recovery support services, advocacy and public education opportunities, social activities	Assessment, diagnosis, treatment planning, treatment services, continuing care
<b>Culture/Tone</b>	Variable, often perceived as a place to have immediate needs met, in & out	12-Step environment, signs, slogans, language, meetings; fellowship; sanctuary	Multiple pathways to recovery welcomed, sanctuary, hope, caring, healing; recovery task oriented; fellowship; opportunities promoted	Variable, often perceived as sterile, hospital like
<b>Service/Support Framework</b>	Not recovery oriented	Operates within beliefs and practices of a 12-Step fellowship (see <u>AA Guidelines – Relationship between AA and Clubs for more</u> )	Works across multiple frameworks of recovery via choices of those with whom they work	Works within a particular organizational treatment philosophy; can involve 12-Step

<b>Characteristics</b>	<b>Drop-In Center</b>	<b>12 Step Club</b>	<b>Recovery Community Center</b>	<b>Addiction Treatment Center</b>
<b>Assessment</b>	None	None	"How can we help you with your recovery today?" Gradual, informal over duration of relationship, may include strengths-based recovery capital needs assessment; could result in recovery plan	Immediate upon arrival, formal, comprehensive, documented, results in diagnosis & treatment plan; pathology-based
<b>Recovery Focus</b>	Limited to none	Maintenance & sustainability	Maintenance & sustainability	Initiation
<b>Role of Community in Recovery</b>	Minimal	Intrapersonal & interpersonal focus; Minimal focus on ecology of recovery; No advocacy	Focus on linking to community resources & building recovery capital; Significant public awareness & advocacy work	Intrapersonal & interpersonal focus; Minimal focus on ecology of recovery; Minimal advocacy
<b>Training on Recovery</b>	None to minimal	12-Step training	Extensive, varied, comprehensive, wide variety of topics, based on community needs	Historically minimal but increasing, majority of training focused on addiction
<b>Knowledge Base</b>	Mix of experiential & professional	Experiential	Experiential (encouragement to professionalize)	Professional & scientific knowledge
<b>Corporate Status</b>	Nonprofit	Nonprofit; membership-based	Nonprofit; membership-based	Vary from nonprofit to proprietary/for profit
<b>Service/Support Relationship</b>	Moderate power differential; Moderate external accountability	Minimal power differential; Support is reciprocal; Minimal to no external accountability	Minimal power differential; Ethical guidelines being developed; Moderate external accountability	Significant power differential; Explicit ethical guidelines; High external accountability
<b>Style of Helping</b>	Ranges from formal to informal	Informal, open & spontaneous	Variable by organizational setting but generally personal & informal	Formal, personally guarded and strategic
<b>Use of Self</b>	Self-disclosure usually limited and discouraged	Strategic use of one's own story; Role model expectation	Strategic use of one's own story; Role model expectation	Self-disclosure discouraged, monitored for strategic value or prohibited
<b>Volunteer Opportunities</b>	None to moderate	Yes, informal system, no formal recognition, within specific fellowship; high level	Yes, formal system, formal recognition, multiple opportunities; high level	Minimal, some opportunities with alumni programs; low level
<b>Temporal Orientation</b>	Focus on present, how can we assist you today?	Variable by fellowship & stage of recovery	Focus on present	Considerable focus on past experience and problem solving strategies
<b>Duration of Support/Service Relationship</b>	Variable	Variable but can span years determined by individual	Variable but can span years, determined by individual and/or organization	Short term with beginning, middle & end, based on payment availability and/or clinical guidelines
<b>Documentation</b>	Minimal	None	Minimal (for those providing service) but growing	Extensive
<b>Sources of Funding</b>	Grants, foundations, ministries	Membership dues, donations	Grants, contracts, fee-for-service, insurance, individual giving	Fee-for-service, insurance, grants, self-pay, individual giving
<b>Computer Access</b>	None to minimal	None to minimal	Yes	Usually none and/or may be prohibited from accessing internet during inpatient treatment
<b>Paid Staff</b>	Primarily	Minimally	Variable (mix with paid staff & volunteers)	Primarily

Please contact us if you have any questions or would like to join the Ada County Recovery Community Center effort!

Monica Forbes

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Recovery Idaho is a developing organization taking its first steps toward supporting Idaho's recovery community through a mission of service, education and advocacy.



## Recovery Idaho's Mission

We support the recovery community by collaborating with local groups and organizations in the development and delivery of community driven recovery support services. We work on behalf of all those impacted by recovery (including family members, friends and allies) through service, education, and advocacy, to remove the stigma and discrimination surrounding addiction and mental illness.

Recovery Idaho does this by:

- ✓ Providing coaching services to individuals in recovery with the goal of maintaining long-term individual wellness, regardless of their recovery path.
- ✓ Providing opportunities for individuals in recovery to build on their potential, rather than focusing on their pathology.
- ✓ Putting a face on recovery to ensure the recovery community is treated with dignity and respect.
- ✓ Creating an environment where citizens and their communities can collaborate to create positive change and eliminate barriers for those in and those impacted by recovery.

## Core Values

You're in recovery when you say you are.

Support all pathways to recovery.

Focus on recovery potential, not pathology.

Recovery is a gift. Expect to pay it forward.

The path of recovery is life-long.

Ongoing community support is vital to successful outcomes.

We support the wellness of the full person.

Everyone has a strength to share



Find out more:

Recovery Idaho is currently in the process of filing for 501 (c)(3) nonprofit status. Email [recoveryidaho@gmail.com](mailto:recoveryidaho@gmail.com) and ask to be added to our mailing list so we can keep you informed as the organization's work progresses.