

HARBOR CARE: PRSS FACILITATING ORGANIZATION

ANNUAL REPORT FY 2024

July 2023- June 2024



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Definitions

- **Digital Recovery Support Services (DRSS):** PRSS services that are provided through online or telephonic platforms in lieu of face to face contact.
- **Peer Recovery Support Services (PRSS):** Social support designed and delivered by people who have experienced Substance Use Disorder and recovery. This peer-based model helps individuals engage in the recovery process and embodies a message of hope for the recovering community (SAMHSA, 2009).
- **Recovery:** a process of change through which people improve their health and wellness, live self-directed lives, and strive to reach their full potential (SAMHSA, 2020). There are four major dimensions that support recovery:
 - **Health**—overcoming or managing one’s disease(s) or symptoms and making informed, healthy choices that support physical and emotional well-being.
 - **Home**—having a stable and safe place to live.
 - **Purpose**—conducting meaningful daily activities and having the independence, income, and resources to participate in society.
 - **Community**—having relationships and social networks that provide support, friendship, love, and hope.
- **Recovery Capital:** Conceptually linked to protective factors and wellness, Recovery Capital can be divided into three categories; personal, family or social and community. These categories encompass factors such as physical health, basic needs, social relationships, attitudes, policies, and other resources (W. White, W. Cloud, 2008). Recovery Capital is measured through the Brief Assessment in Recovery Capital (BARC-10) assessment tool on a scale of 10-60.
- **Recovery Coaching (RC):** One-to-one mentoring wherein focus is to work with the service recipient in development and accountability with a personal Recovery Wellness Plan. Help with barrier reduction and systems navigation is also expected. Relationship is ongoing until terminated by either party.
- **Recovery Community Center (RCC):** Peer operated centers that serve as local resources of community-based recovery support and help build recovery capital among individuals and the community (Recovery Research Institute). A single Recovery Community Organization can have multiple centers.
- **Recovery Community Organization (RCO):** “An independent, non-profit organization led and governed by representatives of local communities of recovery. These organizations organize recovery-focused policy advocacy activities, carry out recovery-focused community education and outreach programs, and/or provide peer-based recovery support services” (P. Valentine, W. White, P. Taylor, 2007).
- **Telephone Recovery Support (TRS):** Weekly outgoing calls to individuals for brief check-ins on his/her/their status and progress in recovery. Referral to other resources is expected. Relationship usually lasts the length of each call, with multiple RCO representatives calling daily lists of program participants.
- **Activities/Activity Logs:** Group services that can cover a variety of topics. Some common group activities that RCOs host are anonymous step groups, family support groups, art, music, and writing groups, yoga, and mutual aid meetings. RCOs are also able to track any trainings or outreach they offer to the public or their local communities.
- **Brief check ins:** are used to record Telephone Recovery Support service engagements in RecoveryLink. These engagements typically last less than 15 minutes and can be completed in person, over the phone, or through messaging.
- **Recovery Planning Sessions:** used to record individual coaching services where coaches work with the participant to maintain and progress on their recovery plan and help with barrier reduction and systems navigation.
- **Group Sessions:** used to record a recovery coaching or recovery planning session where 2-12 participants are engaged and participate in group discussion facilitated by 1-2 recovery coaches.

Project History

Harbor Care (formerly Harbor Homes) was contracted in July 2016 to serve as the Facilitating Organization (FO) for the State of New Hampshire's effort to support the sustainable and integrated development of Recovery Community Organizations (RCO) and their delivery of Peer Recovery Support Services (PRSS). RCOs and Recovery Community Centers (RCCs) were known elsewhere in the country to fill gaps in addiction treatment and recovery infrastructures and to increase the number of people accessing vital supports to achieve and sustain long-term recovery. New Hampshire's innovation of funding a Facilitating Organization to aggressively grow a collaborative workforce of community based PRSS providers has contributed to an improved system of care for people affected by substance use.

The PRSS field, though new relative to clinical disciplines and unorganized peer support fellowships, has demonstrated measurably improved outcomes for program participants before, during, after, and in lieu of traditional addiction treatment services. Dramatic outcomes are demonstrated in New Hampshire by way of personal accounts and measurable outcome data through the use of a peer friendly electronic health record, RecoveryLink™.

In summer 2016, the FO completed an environmental scan to identify grassroots organizations dedicated to providing peer support within the state of NH. Those organizations deemed "most ready" to meet standards set for the by the Council on Accreditation of Peer Recovery Support Services (CAPRSS) were subcontracted under the FO. In September 2016, the FO subcontracted with three organizations in three different Public Health Regions, providing those organizations with technical and operational support, start-up funding, and monthly reimbursement-based funding after the first two months. Two additional organizations were subcontracted in December 2016; two between January and May 2017, two were subcontracted in July 2018, one in March 2020, and two additional centers in March 2021. In light of recent organizational mergers including the merging of (former) Plymouth Area Recovery Connections with Archways and (former) North Country Serenity Center with White Horse Recovery and the termination of a subcontract with MWV Supports Recovery, Harbor Care currently subcontracts with 10 RCOs servicing 21 different locations across all 13 of NH's Public Health Regions. The FO continues to identify and work with multiple organizations and grassroots efforts to expand quality peer recovery support services in underserved areas of the state.

Harbor Care has made great efforts to share their subject matter expertise in Recovery Community Organizations and PRSS on a more national level. These efforts include;

- Broadly sharing statewide PRSS evaluation data to national partners including submitting abstracts for multiple conferences and providing didactics and case studies for the Peer Recovery Innovations Network's Recovery Science Echo.
- Approved technical assistance providers for the National Peer Center for Excellence.
- Registered stakeholders with the National Peer Center for Excellence.
- Member of the Peer Recovery Innovation Network external advisory board as they look for opportunities to advance recovery support services through innovation and research.
- Providing technical assistance and consulting work with multiple RCOs in the Greater Boston area and the University of New Hampshire for Alternative Peer Groups.

RCO	Original Contract Date	Public Health Region
Addiction Recovery Coalition of NH <i>180 Elm St. Suite E Milford, NH 03055</i>	March 2021	Greater Nashua
Archways <i>5 Prospect St. Tilton, NH 03276 175 Center St. Franklin, NH 03235 202 N. State St. Concord, NH 03301 57D Main St. Plymouth, NH 03264</i>	February 2017	Winnepesaukee, Capital, Central
Hope for NH Recovery <i>267 Wilson St. Manchester, NH 03103</i>	March 2020	Greater Manchester

RCO	Original Contract Date	Public Health Region
Keene Serenity Center <i>24 Vernon St. Keene, NH 03431</i>	December 2016	Greater Monadnock
Navigating Recovery of the Lakes Region <i>102 Court St. Laconia, NH 03246</i>	July 2017	Winnepesaukee
Revive Recovery Resource Center <i>263 Main St. Nashua, NH 03060 6 Railroad Ave. Derry, NH 03038 99 Blaine St. Manchester, NH 03102</i>	December 2016	Greater Nashua, South Central, Greater Manchester
Safe Harbor Recovery Center <i>865 Islington St. Portsmouth, NH 03801</i>	September 2016	Seacoast
SOS Recovery Community Organization <i>4 Broadway Dover, NH 03820 63 S. Main St. Rochester, NH 03867 1 Lafayette Rd. Unit 1 Hampton, NH 03842 92 Portsmouth Ave., Suite 10 Exeter, NH 03833</i>	September 2016	Strafford, Seacoast
TLC Recovery Programs <i>62 Pleasant St. Claremont, NH 03743 *24 Hanover St. Lebanon, NH 03766 John Stark Highway Newport, NH 03773</i>	July 2018	Greater Sullivan, Upper Valley
White Horse Recovery <i>68 NH-16B Center Ossipee, NH 03814 2977 White Mountain Hwy. N. Conway, NH 03860 45 Union St. Littleton, NH 03561 38 Glen Ave. Berlin, NH 03570</i>	September 2016	Carrol County, North Country

**This location is not currently under contract with Harbor Care through the Facilitating Organization. .*

FY24 Project Summary

Harbor Care was contracted to provide facilitating organization (FO) services for Recovery Community Organizations (RCOs) in NH that provide Peer Recovery Support Services (PRSS) to individuals with Substance Use Disorder (SUD) and their families. FO services include but are not limited to:

- Provide funding and assistance for operational and programmatic support to each RCO.
- Support the provision of quality PRSS within each recovery center.
- Monitor each subcontractor's compliance through regularly occurring meetings.
- Subcontract with 12 RCOs totaling 19 open RCCs providing PRSS.
- Ensure each subcontracted RCO provide a minimum of one recovery center, recovery coaching, telephone recovery support, a venue for mutual aid meetings, additional support as determined by the local community, engage with local and regional partners, and comply with all applicable state and federal laws, rules, and regulations.
- Work to maintain existing recovery centers and establish new centers in underserved geographic regions.
- Work with each subcontractor within each centers' administrative capacity and readiness to reach the following goals; meet the NH RCO Standards of Excellence (NHRCOSOE), Medicaid enrollment and billing, capacity building, sustainability, and service development.
- Assist subcontractors with ongoing back-office functions as needed included but not limited to HR, IT, P&P development, grant writing, compliance monitoring, quality improvement, billing, and data collection and management.
- Ensure training and TA is available to recovery center staff including but not limited to recovery coaching, TRS, co-occurring disorders, family dynamics of addiction, ethical standards, information security, and HIPAA.
- Facilitate a Community of Practice (CoP) that allows administrators and leaders to establish and strengthen cooperation, collaboration, and informal mentoring.

- Ensure RCOs are providing CRSWs with supervision in compliance with the NH Licensing Board.
- Implement data collections and organization process using RecoveryLink.
- Collaborate with the Department to evaluate service performance and participant level outcomes and enhance contract management.
- Actively promote the availability, purpose, and value of PRSS across NH.
- Facilitate monthly RCO leadership meetings.

Funding Breakdown

Harbor Care currently manages a single contract, the Peer Recovery Support Service Facilitating Organization (PRSS FO) contract, with multiple funding streams including; SORII, Substance Abuse Prevention and Treatment Block Grant, Governor’s Commission on Alcohol and Other Drugs, Opioid Abatement Trust Fund, and General Fund dollars. New funding received this year included program specific dollars to support Homeless Outreach efforts and the opening of a new recovery center in Berlin, NH under White Horse Recovery. The PRSS FO contract is overseen by the NH Department of Health and Human Service (DHHS), Bureau of Drug and Alcohol Services (BDAS) and currently provides funding to twenty-one RCCs. On average, PRSS FO funding supplements 62% of subcontracted RCO’s annual operating budgets. *RCOs also have independent grants and funding revenues not managed by Harbor Care that help support their day-to-day operations and programming.*

FY 2024 Highlights

- Harbor Care continues to provide updated procedures, training, and TA for data input into RecoveryLink.
- Harbor Care continues to facilitate shared learning and open communication forums for RCO’s through the RCO Association:
 - Harbor Care facilitates bi-monthly Data Quality Community Forum for RCOs to discuss and identify best practices for managing daily data entry of staff and monitoring quality.
 - Harbor Care facilitates a biweekly meeting for all RCO Directors to discuss program and contract updates.
 - Harbor Care facilitates a monthly parenting education meeting that allows trained parenting facilitators to discuss ongoing curriculum implementation.
 - Harbor Care facilitates an ethics committee that allows directors to seek feedback and work through ethical dilemmas with other RCOs as problems arise.
 - Harbor Care continues to provide Community of Practice trainings quarterly with Technical Assistance being provided by Growth Partners.
- Harbor Care manages and updates staff lists and training requirements through MedTrainer, an online Learning Management training platform. **These training are not counted in the training activity numbers in the FY24 Activities table below.*
- Regularly meets with contract leads at BDAS for project updates.
- Harbor Care meets regularly with NH DHHS, BDAS, and Arkansas Foundation for Medical Care (AFMC).
- Harbor Care uploads monthly data reports to AFMC for ongoing dashboard maintenance; [public facing dashboard](#) displaying aggregate RCO service numbers and demographics.
- Harbor Care, NH DHHS, BDAS, and AFMC finalized a [comprehensive evaluation](#) of FY22-FY23 RCO services and outcomes. Harbor Care is currently working with BDAS and AFMC to finalize a comprehensive evaluation the facilitating organization “model”.
- Consulting with Main Stay to assist in comprehensive assessment of Exhibit K compliance.
- Harbor Care, BDAS, and Growth Partner’s finalized a procedure for the NH RCO Standards of Excellence to ensure RCOs are providing quality services in alignment with national standards. Two RCOs went through this process this year and two more RCOs are ready for BDAS site visit.
- Harbor Care provided back-office services and technical assistance to all RCOs.
- Continues to monitor statistically significant improvements in recovery capital for all subcontractors

- Continues to work with RCOs individually for corrective action planning regarding data collection, outcome improvement, organizational coaching, contract compliance, etc. as needed.
- Harbor Care is collaborating with National Peer Center for Excellence to schedule a three-part sustainability training for all subcontractors. It is scheduled for July-August 2024.
- Harbor Care continues to support RCO's in Medicaid applications and MCO applications and has updated the Medicaid Billing Manual for RCO guidance.
- Harbor Care regularly attends the LADC Board, Governor's Commission on Alcohol and Other Drugs, and Opioid Abatement Committee meetings.
- Project Director is a member of the Governor's Commission on Alcohol and Other Drugs' Budget Taskforce.
- Assistant Project Director is a member of the Governor's Commission on Alcohol and Other Drugs' Data Taskforce.
- FO staff are active members of Harbor Care's Quality Assurance and Improvement, Workplace Violence Prevention, Emergency Preparedness, and Justice, Equity, Diversity, and Inclusion work groups.
- Assistant Project Director & Project Director are approved technical assistance providers for the National Peer Center for Excellence and are registered stakeholders that attend related meetings.
- The FO provides technical assistance to North Suffolk Community Services in Boston, MA for data entry quality improvement and quality assurance.
- The FO provides technical assistance to Victory Programs- Jamaica Plans RCO in MA on RecoveryLink customization and training.
- Providing technical assistance to UNH on required reporting needs for RCOs contracted to run Alternative Peer Groups (APGs) on how to collect and gather needed data using RecoveryLink.
- Regularly attend NH Opioid Abatement Committee meetings.
- Project Director is a member of the Peer Recovery Innovative Network (PRIN) External Advisory Board on Recovery Science.
- Project Director is on the faculty for PRIN ECHO through FY 2025.
- FO with help of NHCF is planning a two day leadership conference.
- Assistant Project Director completed Harbor Care's first leadership training cohort.
- Presenting in collaboration with subcontracted RCOs and AFMC at the CommUNITY Conference in PA October 2024.
- Project Director participates as a subject matter expert on the Peer Recovery Innovation Network external advisory board.
- Harbor Care is seeking opportunities to collaborate with NH Harm Reduction Coalition and RCOs currently operating syringe service programs.
- We received funding from NH Healthy Families to assist individuals participating at local recovery community organizations to purchase needed supplies for employment opportunities.
- Harbor Care has funded ongoing Impact Leadership Training for RCOs and FO staff through the Communities Project.
- Harbor Care provided scholarships for RCO staff/volunteers to attend RICH Conference hosted by SOS Recovery Community Organization.
- Harbor Care continues to engage the public via [NH Recovery Hub](#) Facebook page.
- Developed and maintains a new Recovery Hub website <https://www.nhrecovery.org/>
- Creates and distributes monthly Recovery Spotlight newsletter.
- Project Manager creates and distributes a monthly Parenting Ed newsletter called Parenting in Recovery.
- Provided technical assistance to RCOs on data collection and reporting to help meet various grant requirements.

- FY24 Activities:

	Count of Activities	Duration (hours)	Sum of Attendees
Back Office Support	149	237	N/A
Billing/Credentialing	36	62	N/A
Compliance	50	52	N/A
Finance	39	97	N/A
Grants	15	20	N/A
HR	6	4	N/A
IT	3	3	N/A
Promotion	124	229	*15222
RCO Association Meetings	120	221	1053
Community of Practice	16	20	244
Data Quality	5	4	59
Director's Meeting	26	24	462
Ethics	10	5	
Other	18	39	143
Parenting Ed	45	129	145
Technical Assistance	505	610	N/A
Administrative Support	5	50	N/A
Corrective Action Planning	50	73	N/A
Data/Reporting	108	132	N/A
Organizational Coaching	41	42	N/A
Other	24	25	N/A
RecoveryLink	151	123	N/A
SME	68	94	N/A
Standards of Excellence	58	72	N/A
Training	43	309	425
Facilitated	26	109	350
Paid For	17	200	75
Grand Total	941	1604.9	16831

**Promotion attendees includes the number of social media reaches.*

Training

Subcontracted RCOs have participated in diverse and practical trainings aimed at broadening the scope of PRSS and improving PRSS delivery, organizational capacity, and sustainability. The FO has facilitated and collaborated with third parties to provide RCOs with interactive trainings and webinars on the following topics, totaling 43 sessions and over 309 hours. *Trainings listed below do not include scholarships provided for conferences or annual trainings provided through MedTrainer for HIPAA and Cybersecurity compliance.*

Trainings delivered in FY 2024 include:

- Ethical Considerations for Recovery Coaches
- HIV/AIDS Prevention
- Suicide Prevention
- Art & Science of Peer Assisted Recovery
- Families in Recovery
- Parenting Journey
- RecoveryLink Data Entry
- RecoveryLink Outcomes
- Excel Functions
- FO Subcontractor Orientation
- Peer Supervision Rules
- Individual Placement and Support (IPS)
- Impact Leadership
- Recovery Capital Focused Coaching
- Email Encryption
- Non-clinical Professional Boundaries
- Alternative Peer Groups Data
- Addiction 101

Standards of Excellence

The Council on Accreditation of Peer Recovery Support Services (CAPRSS), a program of Faces & Voices of Recovery, measures include four core areas of standards (Principles, People, Practices, Performance) and thirty domains that are assessed by the RCOs themselves and through a peer review process. The four core areas of standards in the CAPRSS accreditation process – Principles, People, Practices, and Performance – refer to the mission, vision, and code of ethics that a center follows; the participants served by the center and the community the center is in; the way that the centers go about helping their participants and benefit the overall community; and the data showing that the centers are performing at the highest level – both through fiscal responsibility and overall outcomes for participants. To date, eight of the subcontracted RCOs have been accredited through CAPRSS, see table below for details.

Harbor Care worked collaboratively with Growth Partners, a third-party organization that provides technical assistance to non-profits, and BDAS, to develop a process to ensure NH RCOs meet CAPRSS standards without requiring the organizations to go through the formal and expensive accreditation process.

There are twenty-eight NH RCO Standards of Excellence which are organized into six domains, they include:

- I. Structure and Staffing
 - a. The RCO structure supports its ability to achieve its vision and carry out its mission and core responsibilities.
 - b. The RCO staffing supports its ability to achieve its vision and carry out its mission and core responsibilities.
 - c. The RCO has developed sustainable partnerships with other organizations in its service area that enhance its ability to advance its vision, mission, and core values.
 - d. The RCO uses effective processes to market peer recovery support services and encourage community members to support and participate in RCO programs.
- II. Board of Directors
 - a. BOD membership is representative of, and responsive to, local communities of recovery.
 - b. The BOD has a defined structure and roles and responsibilities for members.
 - c. BOD organizational policies and procedures are consistent with the principles of good governance.
 - d. The BOD uses participatory processes with diverse recovery and other community members to solicit their input, engage them in strategic planning, and ensure cultural competency.
- III. Assessment and Planning
 - a. The RCO collects, analyzes, and uses valid and objective data to identify recovery support needs.
 - b. The RCO collects, analyzes, and uses valid and objective data to plan improvements to service delivery and access.
 - c. The RCO uses participatory processes to engage partners and stakeholders—including those who are in, or seeking, recovery—in planning efforts.
- IV. RCO Workforce

- a. The RCO provides policies and procedures to all staff and volunteers that outline requirements for the positions, rules of the center, and local and federal regulations.
- b. The RCO has a defined process for determining the number of staff and volunteers needed to provide effective programming.
- c. The RCO has defined roles and responsibilities for all staff and volunteers.
- d. The RCO has efficient and effective processes to recruit quality staff and volunteers.
- e. The RCO has efficient and effective processes to retain quality staff and volunteers.
- f. The RCO has a process for regularly providing reviews, feedback, and disciplinary measures to staff and volunteers.
- g. The RCO provides training opportunities for staff and volunteers that are relevant to their roles in the organization.

V. Operations

- a. The RCO has established defined operational policies and procedures for the staff and volunteers at the center.
- b. RCO operational policies and procedures are easily accessible to staff and volunteers.
- c. RCO operational policies and procedures are regularly reviewed and updated as needed.
- d. The RCO has the financial resources in place to provide necessary recovery supports and programming.
- e. RCO services are responsive to the demographics and needs of those who are in, or seeking, recovery in the service area.

VI. Monitoring and Evaluation

- a. The RCO has internal financial controls and systems to follow accepted accounting principles and accurately track the time of staff and volunteers.
- b. RCO staff have effective processes for monitoring the quality with which recovery support service and programs are implemented.
- c. RCO staff have effective processes for analyzing and using monitoring and evaluation data to improve the quality with which recovery support service and programs are implemented.
- d. RCO staff accurately collect and report program data in accordance with all requirements.
- e. The RCO has procedures in place to analyze and use program data to evaluate the impact and effectiveness of recovery supports and services and plan to improve outcomes.

The NH Recovery Community Organization Standards of Excellence is a five-step process;

1. **Organizational Development:** during this phase RCOs participate in regular one-on-one meetings with Harbor Care. During these meetings RCO staff are able to ask questions and submit all required policies, procedures, and other documentation that demonstrate adherence to the standards described above for initial review and feedback from Harbor Care staff.
2. **Desk Review:** All policies procedures, and other required documentation is sent to BDAS for review to assess if they meet standards.
3. **Site Visit:** Representative from BDAS conducts an in person visit to RCO location(s). During the site visit, the center staff, board members, volunteers, and some participants will be interviewed about organizational policies and procedures. This helps ensure the organizational documents provided have been communicated throughout the organization and are used in daily operations.
4. **Findings Report:** based on the information obtained in steps two and three, BDAS compiles a report with a summary of findings and recommendations.
5. **Reassessment:** based on the findings and recommendations provided, Harbor Care will work with the RCO to develop a custom work plan and support for improvement in preparation for their next review.

RCO/ Address	Standards of Excellence Status
Addiction Recovery Coalition of NH <i>180 Elm St. Suite E Milford, NH 03055</i>	Organizational Development
Archways <i>5 Prospect St. Tilton, NH 03276</i> <i>175 Center St. Franklin, NH 03235</i> <i>202 N. State St. Concord, NH 03301</i> <i>57D Main St. Plymouth, NH 03264</i>	Standard 3-Year Accreditation (August 2019)
Hope for NH Recovery <i>267 Wilson St. Manchester, NH 03103</i>	Reviewed and In Compliance (December 2022)
Keene Serenity Center <i>24 Vernon St. Keene, NH 03431</i>	Standard 3-Year Accreditation (July 2019)
Navigating Recovery of the Lakes Region <i>102 Court St. Laconia, NH 03246</i>	Reviewed and In Compliance (March 2023)
Revive Recovery Resource Center <i>263 Main St. Nashua, NH 03060</i> <i>6 Railroad Ave. Derry, NH 03038</i> <i>99 Blaine St. Manchester, NH 03102</i>	Standard 3-year Accreditation (January 2021)
Safe Harbor Recovery Center <i>865 Islington St. Portsmouth, NH 03801</i>	Standard 3-year Accreditation (January 2021), Organizational Development
SOS Recovery Community Organization <i>4 Broadway Dover, NH 03820</i> <i>63 S. Main St. Rochester, NH 03867</i> <i>1 Lafayette Rd. Unit 1 Hampton, NH 03842</i> <i>92 Portsmouth Ave., Suite 10 Exeter, NH 03833</i>	Exemplary 5-year Accreditation (April 2018)
TLC Recovery Programs <i>62 Pleasant St. Claremont, NH 03743</i> <i>*24 Hanover St. Lebanon, NH 03766</i> <i>John Stark Highway Newport, NH 03773</i>	Organizational Development
White Horse Recovery <i>68 NH-16B Center Ossipee, NH 03814</i> <i>2977 White Mountain Hwy. N. Conway, NH 03860</i> <i>45 Union St. Littleton, NH 03561</i> <i>38 Glen Ave. Berlin, NH 03570</i>	Standard 3-Year Accreditation (April 2020)

Back Office Support

Harbor Care is obligated to provide a variety of supportive functions including back-office support to subcontracted RCOs. This ensures that small grass root and non-profit organizations have the resources needed to operate. Back office and technical assistance (TA) may include but is not limited to organizational coaching, capacity development, administrative support, data collection and evaluation, and quality improvement that can vary based on the individual RCO's needs. The chart below depicts different back-office support and TA functions that the FO regularly provides and whether it is utilized by each RCO (indicated by an "X").

<i>Back Office Support</i>				
RCO	Human Resources	Finance	Medicaid Billing	Technical Assistance
Addiction Recovery Coalition of NH <i>180 Elm St. Suite E Milford, NH 03055</i>	X	X	X	X
Archways <i>5 Prospect St. Tilton, NH 03276</i> <i>175 Center St. Franklin, NH 03235</i> <i>202 N. State St. Concord, NH 03301</i> <i>57D Main St. Plymouth, NH 03264</i>	X	X	X	X
Hope for NH Recovery	X	X	X	X

<i>267 Wilson St. Manchester, NH 03103</i>				
Keene Serenity Center <i>24 Vernon St. Keene, NH 03431</i>	X	X	X	X
Navigating Recovery of the Lakes Region <i>102 Court St. Laconia, NH 03246</i>	X	X	X	X
Revive Recovery Resource Center <i>263 Main St. Nashua, NH 03060</i> <i>6 Railroad Ave. Derry, NH 03038</i> <i>99 Blaine St. Manchester, NH 03102</i>	X	X	X	X
Safe Harbor Recovery Center <i>865 Islington St. Portsmouth, NH 03801</i>		X		X
SOS Recovery Community Organization <i>4 Broadway Dover, NH 03820</i> <i>63 S. Main St. Rochester, NH 03867</i> <i>1 Lafayette Rd. Unit 1 Hampton, NH 03842</i> <i>92 Portsmouth Ave., Suite 10 Exeter, NH 03833</i>	X	X	X	X
TLC Recovery Programs <i>62 Pleasant St. Claremont, NH 03743</i> <i>*24 Hanover St. Lebanon, NH 03766</i> <i>John Stark Highway Newport, NH 03773</i>		X	X	X
White Horse Recovery <i>68 NH-16B Center Ossipee, NH 03814</i> <i>2977 White Mountain Hwy. N. Conway, NH 03860</i> <i>45 Union St. Littleton, NH 03561</i> <i>38 Glen Ave. Berlin, NH 03570</i>	X	X		X

Medicaid Reimbursement

In FY21 the FO attended multiple webinars and Q&A sessions with NH Department of Health and Human Services and Program Integrity regarding policies and procedures for RCOs to bill Medicaid for reimbursement. An RCO Billing Manual was developed and approved by DHHS that summarizes the relative He-W 513 SUD provider rules for subcontracted RCOs to reference as they each work towards eligibility for Medicaid reimbursement.

Subcontracted RCOs continue to get support from Harbor Care throughout this entire process including applying for Medicaid IDs, contracting with individual Managed Care Organizations (MCOs), and providing monthly billing templates for claims submissions for each eligible RCO. There are currently seven RCOs actively billing Medicaid. Of the five RCOs that use a third-party biller contracted through Harbor Care (Archways, TLC, Navigating Recovery, Revive, and Hope), a total of \$485,232.89 was received in reimbursement from NH MCOs in FY24.

Sustainability

Each RCO has been successful in leveraging FO funds for service contracts and grants which expand their scope of work. A majority of subcontracted RCO's receive additional funding for a variety of programs including but not limited to recovery coaching in the emergency department, probation and parole relationships, Recovery Friendly Workplace initiatives, homeless outreach, etc. All RCO's are in close working relationships with their regional Doorways. However, most RCOs still face workforce capacity issues related to their expanded roles in their communities.

It is clear that Medicaid reimbursement alone is not a sustainable source of dollars for the RCOs due to low reimbursement rates and the additional administrative procedures and time needed to process and submit claims. A majority of RCOs are just starting the detailed process of sustainability planning for their programs. Harbor Care has partnered with the National Peer Center for Excellence to offer a training series on sustainability planning for the beginning of fiscal year 2025.

Data Collection

Data collected and summarized below comes from two sources; qualitative data from RCOs written reports and quantitative data collected in RecoveryLink™.

[RecoveryLink](#)™ is a modern company with a mission to provide a suite of accessible and impactful recovery support tools designed to elevate collective impact. The platform “offers recovery community organizations, peer recovery support providers, and enterprise health systems a suite of digital tools platform designed to improve outcomes through systems transformation.” (RecoveryLink, 2021). The cloud-based program offers a secure platform for recovery providers to record recovery data and outcomes.

Participant Demographics

Participant demographics include age, gender, race, ethnicity, sexual orientation, and veteran status. The tables below represent total demographic information for participants that received at least one peer recovery support service in fiscal year 2024. Of the 6,769 unique individuals served throughout the fiscal year, the primary service in fiscal year 2024. Of the 6,769 unique individuals served throughout the fiscal year, the primary demographic is 25-44-year-old, heterosexual, white, non-Hispanic, men who are not veterans.

Age	
	Count of Participants
17 and Under	40
18-24	265
25-44	4087
45-64	1851
65+	229

Race	
	Count of Participants
Alaskan Native	5
American Indian	43
Asian	17
Black	231
Pacific Islander	12
White	5755
More than 1 Race Selected	374
Other	205
Prefer not answer/Unknown	245

Ethnicity	
	Count of Participants
Peurto Rican	91
Mexican	23
Hispanic or LatinX	87
Cuban	7
Other Hispanic, LatinX, or Spanish Origin	293
More than 1 Ethnicity Selected	11
Non Hispanic /Latin X/ Spanish	5588
Unknown/Prefer not Answer	555

Sexual Orientation	
	Count of Participants
Heterosexual	4239
Homosexual	102
Bisexual	302
Asexual	1
Pansexual	18
Not listed/Other	121
Decline to Answer	259

US Military Veteran	
	Count of Participants
Veteran	204
Non Veteran	6346
Prefer not to answer	103

Gender	
	Count of Participants
Female	2712
Male	3863
Trans gender	17
Gender fluid	10
Non binary	13
Not listed	13
Prefer not to answer/unknown	27

Participant Services

PRSS as they are defined for purposes of potential Medicaid billing are exclusive to individual or group Recovery Coaching and continuous recovery monitoring (or telephone recovery support). However, PRSS as delivered by NH RCOs include a broad array of services, including police-assisted recovery response programs; housing and other basic needs assistance; treatment/health systems navigation; inter/intraorganizational group facilitation; homeless outreach; hospital and emergency department response; transportation; services delivered to family members; community outreach and education, adventure outings, naloxone training and distribution, syringe service programs, fentanyl test strip distribution, etc. RCOs utilize the various engagement types in RecoveryLink to record these different services including recovery planning sessions, brief check ins, referrals, contact logs, and activity logs. ***In FY24 subcontracted RCOs provided 28,532 individual services and 11,964 activities with 134,177 people in attendance and 1,209,171 items distributed.*** The following tables offer fiscal year totals for services provided subcontracted RCOs including intakes, recovery planning sessions, referrals, brief check ins, group sessions, and activity logs.

No. of Sessions						
	Referrals	Brief Check-in	Intakes	Recovery Planning	Groups	Total Services
Addiction Recovery Coalition of New Hampshire	45	579	44	905	0	1573
Archways	517	3690	207	1473	4	5891
Hope For New Hampshire Recovery	1160	3350	192	1708	18	6428
Keene Serenity Center	7	50	25	219	13	314
Navigating Recovery of the Lakes Region	385	796	104	2372	56	3713
Revive Recovery Resource Center	79	1110	505	1334	279	3307
Safe Harbor Recovery Center	11	412	177	34	12	646
SOS RCO	52	2325	316	151	2	2846
TLC Recovery Programs	5	41	267	2924	143	3380
White Horse Recovery	46	216	89	83	0	434
Grand Total	2307	12569	1926	11203	527	28532

Organizational Activities		
	Count of Activities	Sum of Attendees
Addiction Recovery Coalition of New Hampshire	249	1682
Archways	430	809
Hope For New Hampshire Recovery	411	8158
Keene Serenity Center	126	1153
Navigating Recovery of the Lakes Region	116	1253
Revive Recovery Resource Center	3629	8671
Safe Harbor Recovery Center	129	700
SOS Recovery	450	9168
TLC Recovery Programs	189	2120
White Horse Recovery	391	2609
Grand Total	6120	36323

Partnered Organizational Activities		
RCOs	Count of Activities	Sum of Attendees
Addiction Recovery Coalition of New Hampshire	183	3201
Archways	234	4117
Hope For New Hampshire Recovery	1230	32267
Keene Serenity Center	125	2016
Navigating Recovery of the Lakes Region	114	1122
Revive Recovery Resource Center	1001	14787
Safe Harbor Recovery Center	390	4381
SOS Recovery	509	5583
TLC Recovery Programs	250	1544
White Horse Recovery	476	5927
Grand Total	4512	74945

Outreach Activities		
RCOs	Count of Activities	Sum of Attendees
Addiction Recovery Coalition of New Hampshire	54	950
Archways	19	3006
Hope For New Hampshire Recovery	15	354
Keene Serenity Center	241	2170
Navigating Recovery of the Lakes Region	78	1204
Revive Recovery Resource Center	483	5956
Safe Harbor Recovery Center	4	117
SOS Recovery	34	5066
TLC Recovery Programs	110	975
White Horse Recovery	48	314
Grand Total	1086	20112

Distribution Activities	
RCOs	No. items distributed
Addiction Recovery Coalition of New Hampshire	2667
Archways	4895
Hope For New Hampshire Recovery	460
Keene Serenity Center	56295
Navigating Recovery of the Lakes Region	73912
Revive Recovery Resource Center	412471
Safe Harbor Recovery Center	428
SOS Recovery	657435
TLC Recovery Programs	530
White Horse Recovery	78
Grand Total	1209171

**Items distributed may include but are not limited to sterile syringes, rapid drug testing strips, naloxone, sharps containers, collection of used syringes, hygiene items, daily essentials (clothing, food, shelter supplies), safe use kits, etc.*

Training Activities		
RCOs	Count of Activities	Sum of Attendees
Addiction Recovery Coalition of New Hampshire	28	358
Archways	10	180
Keene Serenity Center	3	38
Revive Recovery Resource Center	145	1333
SOS Recovery	60	888
Grand Total	246	2797

Participant Outcomes

The primary outcome data metric is collected using the Brief Assessment of Recovery Capital (BARC-10). The BARC-10 is an assessment of recovery capital measured on a scale from 10-60. Recovery Capital is the measure of internal and external assets that can be utilized by recoverees to initiate and sustain recovery (Cloud & Grandfield, 2008). The original Assessment of Recovery Capital (ARC) identified 10 primary domains (substance use and sobriety, global psychological health, global physical health, citizenship and community involvement, social support, meaningful activities, housing and safety, risk-taking, coping and life functioning, and recovery experience) across 50 questions (Groshkova, Best & White, 2013). The BARC-10 was derived from the initial ARC tool to assess each domain for a total of 10 questions. This brief assessment tool is used to evaluate recovery support services and their effectiveness on recovery related outcomes, inform recovery support providers' service delivery, and provide a strength-based measurement of progress for the recoveree. It is recommended that this assessment be used at intake and a minimum of one month during ongoing service engagement.

All subcontracted RCOs consistently demonstrate increases in the recovery capital of their participants when comparing baseline BARC-10 scores to their most recent BARC-10 scores. RCO's have a standard goal of completing a BARC-10 at least 30% of the time during ongoing engagements with participants. This benchmark completion rate goal was originally set to help increase the sample size (number of participants with two or more BARC-10s completed) to determine statistical significance. In support of these goals, Harbor Care provides ongoing technical assistance to the RCOs to help improve data monitoring and quality improvement efforts and also facilitates a forum for the RCOs to share what strategies have been successful or unsuccessful in this area.

Outcomes			
RCOs	No. BARC-10s Completed	Average Recovery Capital Differential	BARC-10 Completion Rate
Addiction Recovery Coalition of New Hampshire	74	2.14	52%
Archways	1372	3.48	38%
Hope For New Hampshire Recovery	569	0.49	12%
Keene Serenity Center	215	1.93	89%
Navigating Recovery of the Lakes Region	1516	6.10	54%
Revive Recovery Resource Center	1705	3.86	60%
Safe Harbor Recovery Center	260	1.08	44%
SOS Recovery	1548	0.92	73%
TLC Recovery Programs	205	3.30	31%
White Horse Recovery	48	4.73	90%
Grand Total	7512	3.20	54%

Participants who received peer recovery support service(s) during fiscal year 2024 showed significant increase in Recovery Capital ($M= 3.18$, $SD= 7.92$) compared to baseline BARC-10 scores, $t(7511)=34.85$, $p<0.001$.

Outcomes					
	Mean difference	Std. deviation	t -test	df	Significance (p-value)
Current BARC-10 10score - Baseline BARC- score	3.18	7.92	34.85	7511	<0.001

RCO Deliverables Summary

SOS RCO – Strafford County, Seacoast <u>Delivering TRS: Yes</u> <u>Delivering RC services: Yes</u> <u>Billing Medicaid: No</u> <u>NHRCOSOE: Needs recertification</u> <u>Sustainability Plan: Yes</u> <u>Engaged w/RPHN: Yes</u> <u>Engaged w/MHPS: Yes</u> <u>Engaged w/Doorway: Yes</u> <u>CRSW Supervision: Yes</u>	Safe Harbor– Seacoast <u>Delivering TRS: Yes</u> <u>Delivering RC services: Yes</u> <u>Billing Medicaid: Yes</u> <u>NHRCOSOE: In Progress</u> <u>Sustainability Plan: In Progress</u> <u>Engaged w/RPHN: Yes</u> <u>Engaged w/MHPS: Yes</u> <u>Engaged w/Doorway: Yes</u> <u>CRSW Supervision: Yes</u>	WHRC – Carroll County, North Country <u>Delivering TRS: Yes</u> <u>Delivering RC services: Yes</u> <u>Billing Medicaid: Yes</u> <u>NHRCOSOE: Needs recertification</u> <u>Sustainability Plan: Yes</u> <u>Engaged w/RPHN: Yes</u> <u>Engaged w/MHPS: Yes</u> <u>Engaged w/Doorway: Yes</u> <u>CRSW Supervision: Yes</u>
KSC – Greater Monadnock <u>Delivering TRS: Yes</u> <u>Delivering RC services: Yes</u> <u>Billing Medicaid: No</u> <u>NHRCOSOE: Needs Recertification</u> <u>Sustainability Plan: In Progress</u> <u>Engaged w/RPHN: Yes</u> <u>Engaged w/MHPS: Yes</u> <u>Engaged w/Doorway: Yes</u> <u>CRSW Supervision: Yes</u>	Revive– Greater Nashua, South Central, Greater Manchester <u>Delivering TRS: Yes</u> <u>Delivering RC services: Yes</u> <u>Billing Medicaid: Yes</u> <u>NHRCOSOE: Yes</u> <u>Sustainability Plan: Yes</u> <u>Engaged w/RPHN: Yes</u> <u>Engaged w/MHPS: Yes</u> <u>Engaged w/Doorway: Yes</u> <u>CRSW Supervision: Yes</u>	Archways – Winnepesaukee, Capital, Central <u>Delivering TRS: Yes</u> <u>Delivering RC services: Yes</u> <u>Billing Medicaid: Yes</u> <u>NHRCOSOE: Yes</u> <u>Sustainability Plan: Yes</u> <u>Engaged w/RPHN: Yes</u> <u>Engaged w/MHPS: Yes</u> <u>Engaged w/Doorway: Yes</u> <u>CRSW Supervision: Yes</u>
NRLR – Winnepesaukee <u>Delivering TRS: Yes</u> <u>Delivering RC services: Yes</u> <u>Billing Medicaid: Yes</u> <u>NHRCOSOE: Yes</u> <u>Sustainability Plan: Yes</u> <u>Engaged w/RPHN: Yes</u> <u>Engaged w/MHPS: Yes</u> <u>Engaged w/Doorway: Yes</u> <u>CRSW Supervision: Yes</u>	ARCNH- Greater Nashua <u>Delivering TRS: Yes</u> <u>Delivering RC services: Yes</u> <u>Billing Medicaid: No</u> <u>NHRCOSOE: In Progress</u> <u>Sustainability Plan: In Progress</u> <u>Engaged w/RPHN: Yes</u> <u>Engaged w/MHPS: Yes</u> <u>Engaged w/Doorway: Yes</u> <u>CRSW Supervision: Yes</u>	TLC- Greater Sullivan, Upper Valley <u>Delivering TRS: Yes</u> <u>Delivering RC services: Yes</u> <u>Billing Medicaid: Yes</u> <u>NHRCOSOE: In Progress</u> <u>Sustainability Plan: Yes</u> <u>Engaged w/RPHN: Yes</u> <u>Engaged w/MHPS: Yes</u> <u>Engaged w/Doorway: Yes</u> <u>CRSW Supervision: Yes</u>
HOPE - Greater Manchester <u>Delivering TRS: Yes</u> <u>Delivering RC services: Yes</u> <u>Billing Medicaid: Yes</u> <u>NHRCOSOE: Yes</u> <u>Sustainability Plan: In Progress</u> <u>Engaged w/RPHN: Yes</u> <u>Engaged w/MHPS: Yes</u> <u>Engaged w/Doorway: Yes</u> <u>CRSW Supervision: Yes</u>		

RCO Quarter 4 Updates

The following section includes a compilation of quarterly reports from every subcontracted RCO. Reports provide details on location, hours of operation, contact deliverables, capacity, program updates, quarter highlights, and challenges.

ARCHWAYS

Quarterly Progress Report

REPORT DATE	REPORTING PERIOD	PREPARED BY
July 2024	April-June 2024	Joseph Barbrie Dr. Mark Watman Michelle Lennon

BASELINE UPDATES

RCC Information

Recovery Center (s) Name	Address	Hours of Operation
Archways – Concord	202 N. State St Concord NH, 03303	10:00am-5:00pm
Archways – Franklin	175 Central St Franklin NH, 03235	10:00am-5:00pm
Archways - Tilton	5 Prospect St Tilton NH, 03276	10:00am-5:00pm
Archways - Plymouth	57D Main St Plymouth NH, 03264	10:00am-5:00pm

PRSS Expertise

Specified Field/Topic	Level of Expertise	Details/Notes
Harm Reduction	Expert in Field	Archways’ staff are fully trained in harm reduction as its own unique service, as well as a pathway to other participant-defined recovery, and a potential pathway to MAT/MAR, or abstinence based on each participant’s expressed goals and desired recovery pathway. Narcan and fentanyl test strips are available at all Archways locations, staff has been fully trained on administering Narcan and using test strips, and can instruct participants on how they are used properly in accordance with instructions provided by the New Hampshire Harm Reduction Coalition. Staff are also able to fully explain safer use resources such as never use alone and area syringe exchange programs. A number of Archways’ participants uses a form of harm reduction or are actively using substances, and staff are trained to hold various types of harm reduction conversations with participants that promote health and wellness while respecting the participant’s choices.
Legal System Involved	Expert in Field	Archway’s staff has received formal training in assisting participants involved in the legal system. To build a program specific for those who have experienced incarceration, multiple staff have applied for, and have been approved to enter into the State Department of Corrections (DOC) facility to begin relationship building with participants reentering the community. Archways also has established collaboration with local probation and parole offices, and regularly receive referrals from Merrimack County navigators while continuing to build our community corrections program. An MOA has been

		approved between DOC and Archways, as well as a collaboration begun with Dartmouth Hitchcock to provide Peer Recovery Support Services for a Re-entry Clinic that is being piloted in Concord. A manual for the Peer Recovery Support Services-Inside & Out has been drafted and DOC has edited it and is moving toward finalization. Archways has also developed a Peer Recovery Response Team program with a local consortium based in an FQHC. One of our Peer Recovery Support Workers on this project has regular contact with local police departments in Tilton, Laconia, and Alexandria and is working to expand the reach. The local police departments make referrals to Archways for individuals they encounter who may benefit from our services as the relate to substance use of any kind.
Crisis Intervention	<i>Expert in Field</i>	Staff have been trained in non-violent crisis intervention through the Facilitating Organization. Required referrals, mandatory reporting, suicide prevention, motivational interviewing, trauma informed care, and risk management are regularly trained and renewed. In addition to these trainings, all recovery staff are certified or working toward CRSW certification, and all staff are trained in The Protective Factors Framework and Standards of Quality curriculum. Archways has written and implemented Narcan training, as well as CPR/AED (Cardiopulmonary Resuscitation/Automated External Defibrillator) training. All centers are equipped with AED stations as well as overdose emergency kits. A NALOX BOX is located at each center with other first aid or AED boxes with the exception of Plymouth, but the organization has the intent to add them. Archways is involved in a DHHS supported Pilot of ZERO SUICIDE, and has been successful in advocacy efforts to have an evidence-based screening for Suicidal Ideation and Intent added to both the RecoveryLink platform for RCOS and the Quick Base-Family Support Data System for Family Resources Centers. Currently the Zero Suicide implementation team has developed and proposed an Archways Zero Suicide Policy to be implemented across all Centers. This proposal aims to be implemented this coming quarter.
Parenting/Family Support	<i>Expert in Field</i>	All staff are required to complete The Protective Factors Framework TM and Standards of Quality Family Support Training. Our agency is nationally recognized for our integrated family and recovery supports, as well as having our Family Threads program designated a Promising Practice by NH's Center for Excellence as part of the Addiction Service to Science initiative and we are pursuing designation of Evidence Based. Archways is designated a Family Resource Center of Quality for another three years by the Wellness & Prevention Council of the NH State Legislature. We hold regular parenting and family classes such as Parent Café's, Nurturing Families, Positive Solutions for Families, Parenting Journey in Recovery and more. Multiple Recovery Coaches have been trained in the curriculum Active

		Parenting of Teens to support kinship families affected by addiction. We have designated dually trained in Peer Recovery Support and Family Support practices, including home visiting curricula such as Growing Great Kids and Parents as Teachers.
Prevention	<i>Expert in Field</i>	We have received the Quality Designation from the Wellness and Primary Prevention Council of the State of NH. Our growing youth programming has a prevention practice component in its framework. In addition to our youth prevention work, staff is thoroughly trained in relapse/recurrence prevention and assists participants in developing unique safety plans participants can utilize. A large focus at Archways is prevention through consistent relationships with participants and goal planning during recovery planning sessions. Additionally, our Alternative Peer Group (APG) program focuses on youth intervention <i>before</i> substance use becomes a concern. APG Groups are held in three local schools with consistent attendance. This group can be a step down from acute care, or a step up from risk factor concern to prevention work.
Recovery Friendly Workplace	<i>Expert in Field</i>	Archways is a designated Recovery Friendly Workplace. We collaborate with RFW in our workforce programming, and work to connect individuals with a history of substance use to employers who are recovery friendly. We have added a page to our website specific to workplace/employer relations with a link embedded to the RFW initiative. Our previous workforce specialist developed many relationships with other Recovery Friendly workplaces. Archways collaborates regularly with these recovery friendly workplaces to assist in achieving employment goals for members of our communities. We routinely refer other employers looking for specialized workforce training to RFW. Archways' workforce program has regained momentum after the transition from our previous workforce specialist to the newly hired specialist. Current recruitment efforts are connecting us to participants and allowing us to connect members of the recovery community to employers. Additionally, we are collaborating on an application for a potential grant project to enhance workforce development with the RFW Workforce Development lead.
System Navigation	<i>Expert in Field</i>	In understanding that individuals with basic needs that are not being met may find it incredibly difficult to take necessary steps in other areas of their lives, all staff are trained and experienced in navigating systems and advocating for individuals within these systems to remove barriers to housing, employment, benefits, food security, recovery, family supports, and more. We have extensively trained one staff member as a Community Health Worker through Southern New Hampshire Area Health Education Center who is also on the Community Health Worker Advisory Board and funded the position of Resource Navigator through a Health Care Disparities grant. Archways also has four staff members extensively trained in state healthcare insurance navigation. Regular collaboration with Health

		Market Connect allows Archways the opportunity to contact members of our communities and assist them in obtaining or re-enrolling in health insurance plans. Staff are encouraged to belong to different community groups related to their job roles to increase knowledge and connection with other community partners enhancing their networks and sharing resource news with colleagues.
Parent & Recovery Café's	<i>Expert in Field</i>	Much of Archway's staff have been fully trained in facilitating and hosting recovery and parent café events directly from Be Strong Families out of Chicago. Our efforts to re-establish in person cafés post covid continues as we are currently hosting in person café events and are now at a point where we are in the planning phases of increasing the frequency of in person café events for members of our communities. These cafés encourage a protective factor of Healthy Social Connection, while focusing on positive generative questions to enhance knowledge and skills for healthy living.
Early Childhood	<i>Expert in Field</i>	Our agency offers early childhood home visiting and family support. Our agency is the backbone organization to the regional early childhood coalition, working to improve early childhood for families in our community. We also offer regular play group activities for families in the community at the Bessie Rowell Community Center. Our training center hosts a trainer for the Opioid Response Network's Curriculum Peer Support for Pregnant and Parenting Families and has cowritten a curriculum for Foster Parents Co-Parenting with families of origin with Be Strong Families of Chicago. Multiple staff are trained in Parents as Teachers, a home visiting curriculum for families with children ages birth to three. Additionally, Archways has been granted funding through the NH Early Childhood Comprehensive Systems Health Integration Project Rapid Micro-Grant Program which has allowed Archways to integrate concrete resources as well as connections to local health care providers through our Baby and Me playgroup program. Staff have also been trained in Growing Great Kids, another evidence-based family support curriculum for families with young children. We employ an early childhood specialist who has a Master's Degree in Early Childhood and oversees the playgroups to ensure proper supervision and modeling occurs. She recently spoke at the Tufts University HOPE Summit for work done on assessment and improvement of our Happy Trails Playgroup.
Youth Programming	<i>Expert in Field</i>	Archways' two youth program, Alternative Peer Groups and Seven Challenges continue to reach youth within middle and high schools in our service areas. Our Alternative Peer Group program has continued in Franklin middle and high school. Newfound Regional high school has partnered with Archways to allow attendance of the APGs as an alternative to suspension for youth. This has allowed us to reach many youths who otherwise may not have chosen to participate in the

		groups. Many of these youth decide to stay in group even after their requirement set by the school has been completed. The Seven Challenges youth counseling program continues out of our Concord location. Archways' partnership with Spaulding Youth Academy in Tilton allowed for us to host Seven Challenges sessions in their location, and is currently being assessed to determine if it will continue next quarter.
Training	<i>Expert in Field</i>	Archway's Forever Hope Training Center is equipped to provide training in peer assisted recovery support and other SUD trainings, Ethics, Suicide Prevention, and Bloodborne pathogens (HIV & AIDS) and Co-occurring Disorders. Our training center manager was trained in the facilitation of Red Cross CPR/AED Training. Archways training center coordinator had been certified Recovery Coach Professional Facilitator through CCAR. Archways partners with other recovery organizations to increase training, knowledge, and skills across the broader recovery community as well. We also have trainers of Peer Support for Pregnant and Parenting Families, Supporting Families Affected by Addiction, Positive Solutions for Families (Facilitators' Training), Recovery Coaching a Harm Reduction Pathway. A transition in the Training Center has led to a new Training Center Manager, who has been publicly speaking for some time, and is currently a peer who came up through services, volunteering, AmeriCorps (Recovery-Corps), and has been a center manager. She has degrees in Addiction Counseling, Psychology, and is currently completing an internship as a Clinical Social Worker. Her life experience, practice as a volunteer, coach, CRSW, center manager, group facilitator, parent educator, recovery café host makes her well rounded and experienced peer to lead the Training Center in our next phase of growth. Currently we are developing a boot camp for Family Support with a focus on Recovery Support.

Capacity

Current # of Staff:	22
# of Staff w/CRSWs:	12
Current # of Volunteers:	12
# of Volunteers w/CRSWs:	0

Contract Deliverables Status Updates

Contract Deliverable	Status	Notes
Meets NH RCO Standards of Excellence (NHCOSOE) and/or CAPRSS Accredited.	Yes	Originally Accredited with CAPRSS, in line for the NH Standards of Excellence.
Currently delivering Recovery Coaching services.	Yes	All four locations offer recovery coaching services from CRSW certified coaches, and from those working toward certification.
Currently delivering Telephone Recovery Support services.	Yes	Archways currently has a recovery coach assigned to deliver TRS calls using the process established by Archways. Recovery coaches assigned are trained to assist in any immediate needs, schedule appointments for participants with their assigned coaches, and initiate referrals when needed or requested.

Does the RCO have a Medicaid ID?	Yes	Concord, Franklin, and Tilton all have established Medicaid ID's. We will be working with the FO to obtain a Medicaid ID for our Plymouth location this coming quarter.
Is the RCO enrolled with MCOs?	Yes	Concord, Franklin and Tilton are enrolled with all MCO's, and we will be working to enroll Plymouth in the coming quarter.
Actively billing Medicaid for PRSS?	Yes	Currently billing from Concord, Franklin, and Tilton locations, and will be billing from Plymouth once Medicaid ID and enrollment with MCO's is complete.
Does the RCO have an active sustainability plan?	Yes	This is part of our strategic planning.
Is supervision being provided to CRSWs on staff in compliance with the NH Licensing Board.	Yes	Michelle Lennon, CRSW Kimberly Fortin, CRSW Patricia Eisner, CRSW Joseph Barbrie, CRSW Patricia Tucker, LADC Tania Rich, CRSW
Engage with Regional Public Health Network.	Yes	Our President/CEO recently resigned from service on the board of the Partnership for Public Health. Archways is currently exploring alternative methods to maintain engagement with a Regional Public Health Network outside of serving on the board. A CRSW staff member has been a member of a work group on substance use and suicide prevention.
Engage with Regional Doorway.	Yes	Archways has a signed MOU with the Doorway, and all locations actively refer all participants to the local Doorway in their catchment area for further resources and assistance.
Coordinate with local Mental Health Peer Support Center(s).	Yes	Archways collaborates with One Peer to Another, and coaches are trained in the referral process to One Peer to Another as our area peer-based mental health support agency. A proposal to host One Peer to Another at our Plymouth location has been suggested by a Plymouth participant. The local outreach worker was very enthused by the idea.

PROGRAM UPDATES

Service Delivery	- Archways served 202 unique individuals who were enrolled in Peer Recovery Support Services this past quarter. - We delivered 885 brief check-ins (including TRS calls), 539 of which were marked as successful, along with 319 Recovery Planning Sessions in which recovery plan goals were directly worked on. - Archways also helped 66 non-participant members of our community who came in for resources or referral connections to other local providers. - A total of 49 referrals were completed this quarter.
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	• Archways continues to partner with Healthfirst, our local FQHC. This partnership assists our participants by facilitating a medically assisted recovery program at our Franklin location each Friday. • This quarter Archways provided space for mutual aid groups to meet a total of 69 times, where members of our community accessed mutual aid support a combined 1,310 times. • Archways' transportation program provided transport 51 times this quarter, connecting participants to medical appointments, food pantries, job interviews, court hearings, probation appointments and more. • Our Franklin location provides shower resources to the community and was used 94 times this past quarter. (We are excited to have this resource at the new Plymouth location!) • Fourteen members of the community enrolled in our Recovery Exercise Program for Long Term Success (REPS) this quarter. 22 REPS class sessions were held, with a total combined attendance of 36 across the 22 sessions. There are still challenges with this program, as some participants are unable to get to the classes. • Archways' Alternative Peer Groups continue to reach youth within schools with 21 sessions and a combined attendance of 31 participants. • Parent Education continued this quarter with 12 Families in Recovery sessions and a total combined attendance of 21. • Homeless Outreach continued strong this quarter with 292 sessions (Brief check-ins and Recovery Planning Sessions combined), with 38 unique individuals in our communities who are experiencing homelessness. We were able to provide 432 items and supplies to 59 individuals experiencing homelessness. • Archways participated in a few community events in our areas as well: ○ Winni River Days – A Franklin event where the greater Franklin community comes together for community outreach and awareness. Archways contacted 87 members of our community during this event to spread awareness of who we are and what we do. ○ Franklin Community Day – A Franklin event where the greater Franklin community comes together for community outreach and awareness. Archways was able to connect with 205 members of our community. • Pedal it Purple – An event held in Lincoln for the lower white mountains region we were happy to attend with our new location in Plymouth being opening soon. We were able to connect with 69 members of the community. • Additionally, Archways was able to distribute many items to various community members in need: ○ 59 food/snacks were distributed to 31 individuals. ○ 612 diapers were distributed to 26 individuals. ○ 177 articles of clothing were distributed to 23 individuals. ○ 50 units of harm reduction supplies including Narcan, drug disposal bags, fentanyl and xylazine test strips, and wound care kits were distributed this quarter. ○ 55 hygiene kits/personal care items were distributed to 10 individuals.
Quarter Highlights	Program Highlights: • Our biggest and most exciting news this quarter is that we have officially secured a location for our new Plymouth Center! Our Plymouth location served 23 unique individuals over 109 sessions this quarter, and there continues to be great need in the greater Plymouth area. Our President/CEO and PRRT Peer Recovery Support Worker attended the State Court Intercept Mapping for Grafton County and connected with Diversion and Probation & Parole to discuss future collaboration. Three staff attended the Communities for Alcohol and Drug-Free Youth (CADY) hosted Prevention Summit at Plymouth State University where connections were made with the Superintendent of SAU 48 and the incoming new Principal of Plymouth Highschool

	where alternative to suspension was discussed. Archways was invited to make contact to discuss duplication of the Newfound program. Two area businesses, Phat Boyz and the Woodstock Inn are hosting a fundraiser “river float” to benefit Archways. • The NH Charitable Foundation has provided \$2,500 for our open house. The landlord of the Plymouth Location donated 40 chairs we refinished to support the center’s activities. Furniture donated to the Plymouth Area Recovery Center has been provided to Archways for the reception area. Tables were donated from the local business, the Grotto. Two individuals in recovery spent one month working on the fit up of the center with the President and CEO, doing all the window cleaning, painting, floors, and general face lift process. • Advertising for a local Peer Support Recovery Coach has begun. Currently we are ‘open for business’ while six offices are being framed by a local basketball coach/school teacher who does carpentry over the summers. The permit for the sign was approved. Parking signs have been ordered. Currently, we plan to host an open house October 1, as an exciting commencement activity wrapping up the festivities of Recovery Month. • Archways was able to maintain appropriate staffing this quarter by replacing departing staff with qualified and ambitious new hires. We currently have 12 CRSW credentialed staff members and more in training! • In June, we were able to hire a full-time permanent workforce specialist to take over for our staff member who was filling in after the departure of our previous workforce specialist. Our newest addition to the recovery support program brings many years of experience in both a personal recovery journey as well as work experience in the recovery field. • This quarter we achieved a 37% BARC10 completion rate across all locations including brief check ins and recovery planning sessions. • Archways Family Threads program, which combines both peer recovery support as well as family support has seen tremendous growth this past quarter. We currently have 29 participants enrolled in Family Threads who meet regularly with their recovery coach as well as their family support worker. This dynamic approach has enabled us to better address the unique needs of families that have at least one member of the family unit experiencing substance use and recovery concerns. We are partnered with the OMNI Institute for data collection and analysis as we are working toward credentialing this model as evidence based. Just as our recovery support program considers the whole-person in recovery, the Family Threads program considers and digs in from a family-unit perspective. • Archways’ Legal System Involved programming continued expanding during this past quarter. Still a program which is just lifting off the ground, we now have four established branches of this program, which are designed to help individuals with problematic substance at various stages of legal system involvement: • Peer Recovery Response Team (PRRT): A collaborative effort between Archways and local law enforcement agencies to be a resource for substance use affected members of our communities who come into contact with police. This program is made possible with the assistance and referrals from Tilton and Alexandria Police Departments, promoting peer-based intervention before substance use become a larger problem for individuals who are referred to Archways. • Community Corrections: for participants who are currently involved with probation, parole, pretrial supervision, and all those who are awaiting charges or sentencing. • Peer Recovery Inside and Out: for participants who are currently residing within a New Hampshire Department of Corrections facility. These facilities currently include the New Hampshire State Prison (men and women), and multiple transitional living/halfway houses in our area. Archways works closely with case workers inside the DOC. • Re-entry support for Empowered Transitions (RESET): We have joined Dartmouth Hitchcock as a collaborating partner in assisting them with the peer recovery support portion of their RESET program. The aim of this program is to provide community connections for high recidivism risk DOC residents who will soon be transitioning back
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	into the community, and we have been thrilled to be a part of this very important work. Archways was able to assist 8 unique individuals across 29 sessions this quarter, helping to prepare them to maintain their recovery post-incarceration, and currently are working on enrolling four more. • Being a Family Resource Center as well as a Recovery Community Organization, Archways again received additional funding from the NH Children's Trust Trestle Fund program to offer acute financial assistance needs for families in our catchment area who have children under the age of eighteen. This funding has proven invaluable as we have been able to extend much needed help to our communities in the forms of rent/mortgage payments, food, transportation, utility payments, and so much more. Even as inflation is beginning to slow, wages and entitlements payments simply cannot keep up with dramatic price increases our communities face. We have been able to assist 35 families with approximately \$11,000.00 to help meet various needs, keep their homes, and keep their children safe. • We are proud to announce that our President and Chief Executive Officer, Michelle Lennon was selected as the recipient of the 2024 Sandi Van Scoyoc Legacy Award by the New Hampshire Children's Health Foundation. Specifically, Michelle was recognized for her work in integrating family and peer support and in advancing best practices in preventing and reducing childhood trauma—one of the New Hampshire Children's Health Foundation's priority areas. Further details of the award can be seen at the following link: https://nhchildrenshealthfoundation.org/visionary-leader-of-family-support-and-recovery-program-honored-with-van-scoyoc-award/ • In collaboration with Health Market Connect, our Insurance Navigation Program assists many members of our communities find the right coverage at the right price. Archways currently has three certified Insurance Navigators working within this program. Healthcare coverage is a crucial part of our work, as overall health and wellness contribute greatly to increased recovery capital. This especially beneficial for participants who lose Medicaid coverage after returning to work, as well as individuals reentering into society from incarceration. • Alternative Peer Groups continue to reach youth in schools. Many staff are fully trained through the UNH Institute on Disability to facilitate the groups which are taking place in Franklin Middle School and Newfound Regional High School. Since inception, our Alternative Peer Group program has maintained steady attendance, and a total of 36 unique youth have attended at least one group. This quarter one youth attended five times at Franklin Middle School, and nine youth attended a combined 30 groups at Newfound High School. Newfound High school has elected to use Archways APGs as an alternative to suspension, requiring 6 group sessions. Excitingly, many of the youth who attend as an alternative to suspension have chosen to continue group attendance even after their requirement set by the school has been fulfilled. Additionally, Archways will be facilitating summer APG groups at the Newfound High School, which are open to youth in Newfound and many surrounding small towns with limited recovery resources. • Archways' Seven Challenges youth counseling program has reached some important milestones this quarter which include: increased community engagement, growing demand for youth counseling programs, and collaborative partnerships. Archways has recently been in communication with the Merrimack County juvenile diversion program and many local school districts to increase reach. We are also in beginning stages of working with social workers and probation and parole officers to explore obtaining justice system referrals. • Archways' Forever Hope Training Center held an entire CRSW training curriculum this quarter which included: • Art and Science Peer Assisted Recovery • HIV/AIDS • Ethical Considerations • Suicide Prevention • Co-Occurring Disorders
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- With the end of FY24, Archways officially completed our first year of the Building Communities of Recovery (BCOR) grant provided by the Substance Abuse and Mental Health Administration. Archways continues to partner with SAMHSA monthly to review contract deliverable performance, one of which is GPRA survey captures. The GPRA survey, as is well known, can be a bit intimidating. This can cause discomfort in the participants being asked the questions, as well as on the part of the coach administering the survey. However, what once appeared to be a challenge, is now a strength of our coaching staff, and the GPRA survey is now one of many tools Archways uses to facilitate effective recovery conversations with participants. In our most recent meeting with our SAMHSA representative, we were able to proudly report that we achieved over 100% intake GPRA survey capture, as well as over 100% follow up survey capture, placing Archways far above the average performance of all other providers under BCOR grants.

Participant Successes:

- We recently had a participant come in after a two year stretch of problematic substance use and prolonged employment inconsistency. The participant was referred by one of the local recovery houses to Archways. We were able to connect them with our interim Workforce specialist who took the time to get to know their wants and needs, helped them find a job they enjoy, and reports that they continue to be free of substances, is sustaining employment, and continues to check in with Archways every couple of weeks.
- One of our APG students decided to stay in group even after their 6-group minimum set by the school and has developed a strong sense of trust in our group facilitators. They state that they are trusted adults they can talk honestly with. In addition to this, they have chosen to continue attending group through the summer. Attendance reflects increased protective factors in their life.
- A participant came to Archways requesting to do community service. This was not mandated by court or probation, but rather, was a desire within the participant to give to the recovery community. While volunteering, the participant expressed a desire to maintain a substance-free lifestyle and asked for advice. The participant enrolled in our peer recovery support program, regularly sets and achieves recovery plan goals, and reports that they are still substance free and continues to give to the recovery community in more ways than before.
- We received a referral from the Alexandria Police Department to the Peer Recovery Response Team (PRRT) program for whom we helped facilitate treatment rather than arrest. When this participant completed treatment, the officer from Alexandria also helped them remove illicit paraphernalia from their vehicle, ensuring it was safe for the participant to enter and drive, being so early in recovery. The chief's advocacy in the State Intercept Mapping meeting has led to other PDs being interested in working with us.
- A participant who was referred to Archways through the Dartmouth RESET (Reentry Support for Empowering Transition) Program worked with us for a couple of months prior to their release from the Concord State prison where they lived for the past 26 years. They connected weekly with their recovery coach planning a safe release. The connection of this participant through the Dartmouth RESET program has proven invaluable for this individual since they maxed out their sentence. As a result of maxing out, not only did they lose the accountability that comes from parole, but they also lost the support that parole can offer. Archways assisted them in a safe transition from incarceration to living in recovery in the community.
- A youth who is enrolled in the Seven Challenges youth counseling program came to Archways struggling with severe substance use concerns, foster care concerns, and DCYF involvement. This youth participant worked diligently in the Seven Challenges counseling journal challenges, leading to the youth viewing themselves and the world around them in a positive light. This youth is now nearing completion of the Seven Challenges program, is making significant strides toward goals such as graduating high school. In addition to reaching and working toward goals, this youth has also been

	reunited with their father and siblings, is working, and is now diligently saving for a vehicle. • A member of our community was referred to our Family Threads program from our ACERT (Adverse Childhood Experiences Response Team) specialist. This participant presented to Archways without any income and was in active use. Archways was able to assist them in connecting with a medically assisted recovery program to help stabilize their recovery, and reports that they have been substance free ever since. As well as maintaining recovery, this participant and their children are now all receiving mental health counseling, was approved for TANF (Temporary Assistance for Needy Families), has a new lease agreement for an apartment they were at risk of losing, and is awaiting a decision on an application for SSDI (Social Security Disability). This participant is working incredibly hard on their family support and recovery support goals with a coach from each program and is saving toward their own vehicle. • Archways was given a unique opportunity to connect with a member of the community in need of our services who had no idea who we are or what we do. One day our coaches were filling the role of support people in family court for a participant. On the bench outside the courtroom was a person who was having a difficult time. One of the coaches stayed back to offer the person support, spoke briefly about happenings in their life, and came to Archways to enroll in the Family Threads program. Sometimes we all need to be in the right place at the right time, and for this person, we hope to offer some hope to them and their family because we happened to be in the right place at the right time!
Challenges	• The biggest challenge we are facing in providing optimal peer recovery support services is housing insecurity. Too often, we are seeing participants come into our centers who are experiencing homelessness or are at very high risk of homelessness, many of them having been in this situation for several months or years. With a median rental home costing over \$2000.00 monthly, this can feel completely out of reach for members of our communities, which can lead to feelings of hopelessness and desperation, preventing individuals from being able to focus on recovery simply because they are too busy worrying about where they will sleep, if they can afford their utility payments, or where their next meal is coming from. This is felt especially acutely by individuals with criminal backgrounds, poor credit scores, and those with previous evictions on their rental history. When basic needs are not met, this is paramount, above all else, in the minds of individuals we try to serve in our recovery program. • Over the past multiple years, wages in our general area for entry level positions have increased dramatically, making it difficult to remain competitive and hire new staff. For example, McDonalds is hiring new staff at approximately \$17.00/hr. in our area. Archways currently pays new recovery support staff at \$15.00/hr., which bumps to \$20.00/hr. upon obtaining a CRSW credential. With so many employers hiring at wages more than what we can offer, we are working to restructure pay ranges and seek funding to accommodate higher wages. Additionally, the compression of leadership salaries means there is no room for growth at the middle management and executive levels as the pay differential of a management position with no degree and minimal experience, is nearly the equivalent of someone with a doctorate degree, decades of experience and executive responsibilities. The COO has been charged with using a consultant to do an industry study across the country, and to look at similar fields to discover what the pay ranges should be to accomplish multiple goals. ○ 1) Ensure staff of Archways have a livable wage. Even if the industry average is lower than Archways' support staff currently earn, if a single person cannot survive on that pay in our area, it is not enough for Archways leadership to feel comfortable. Leadership is committed to find ways to subsidize salaries when necessary to meet a livable wage as well as to consider the industry pay rates. ○ 2) Ensure Executive Leadership, and mid-level management are paid commensurate with their educational background, lived experience and position. We don't want to invest in leadership to have them move on to another center or agency offering higher wages if they are top notch leadership for our

	agency. Our last Director of Operations left specifically because she could not afford childcare for two children after having her second baby. She was hired by the Children's Trust at a much higher rate of pay after being trained in the field of family support by our organization. Room for growth, and paying slightly better than equivalent positions, would help to reach this goal. Archways leadership is committed to finding ways to subsidize positions, if necessary, once the restructuring and pay range determinations are complete. • The cost of doing business continues to rise. We have been grateful to diversify our funding and have increases in our backbone contract for peer recovery support services through Harbor Care. Contract labor has been added to account for some of the demands of accounts payable/receivable, Medicaid Billing, some tech support, BOD management, contract management, staff and HR management and some grant writing. We still need to add positions for communications/tech/web/social media management, administrative assistance, and facilities support. As we look to address this, we are doing some restructuring. We are hoping to integrate some pieces of added responsibility to center coordinators and program leaders who have the experience and desire to mentor others coming up in the work. While we have a consultant to help with BOD management and support for some of the demanding work of federal platforms for some funding, we continue to piece out some of the facilities work. We are leaning on the need for more structured position to take on the responsibilities of maintaining the wellbeing of the facilities-- especially as we now own two of our site locations. We currently are advertising for that position as the cleaning and maintenance of 4 sites has grown the need. • Staff continues to report difficulty in working with other local resource agencies and some town welfare offices regarding the duty to support individuals experiencing homelessness. It is nearly impossible to reach anyone at the CAP (Community Action Program) offices, and town welfare offices often require exhaustive and time-consuming proofs which cause tremendous strain for individuals in emergent situations. Unfortunately, there have been times when Archways has had to involve 603 Legal Aid to assist participants obtain the services they seek through the town welfare offices. Archways will continue to strive for collaborative relationships with these agencies and offices. Despite the issues with access, when we do connect, CAP, has been outstanding boots on the ground, and we find they are doing the best they can with the staffing issues they experience in this often-difficult field. There are just not enough resources. • Transportation continues to be a struggle for many of our participants who are in early recovery. Archways works to help participants with transportation when possible, however, circumstances often prevent us from being able to transport participants. This has become most evident from the limitations placed on the ability for participants interested in our REPS (Recovery Exercise Program for long term Success) program. As mentioned above, we held 22 REPS sessions this quarter, but many enrolled participants were not able to attend or to complete the program due to transportation limitations. Additionally, we did have 23 more participants who were interested in the REPS program but were not able to join at all because they could not commit to specific session times due to lack of transportation.
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Addiction Recovery Coalition of New Hampshire

Quarterly Progress Report

REPORT DATE	REPORTING PERIOD	PREPARED BY
July 8, 2024	April-June 2024/ Q4 2024	Gray Somers

BASELINE UPDATES

RCC Information

Recovery Center (s) Name	Address	Hours of Operation
Addiction Recovery Coalition of New Hampshire	180 Elm St., Ste. E, Milford, NH 03055	M-F 8:00am to 6:00pm, Saturday 8:00am to 4:00pm

PRSS Expertise

Specified Field/Topic	Level of Expertise	Details/Notes
Harm Reduction	Expert in field	Staff have been fully trained in Harm Reduction and use it as a pathway to recovery in some cases. At its core, ARCNH emphasizes Harm Reduction to decrease overdoses/deaths. Our Executive Director, Gray Somers, was interviewed on the United Way’s Community Connections radio program (1590 AM) on 6/3 and he spoke to this. Additionally, ARCNH conducts weekly Narcan training on Tuesdays. Our Overdose Awareness and Prevention kits include two doses of Narcan, an Overdose Prevention Pocket Guide, an ARCNH information postcard and two fentanyl test strips. We’ll be adding xylazine test strips to the kits as well once they arrive. ARCNH also has HIV test kits and male and female condoms for distribution at the Center.
Criminal Justice	Expert in field	ARCNH is a member of the Milford Adverse Childhood Experiences Response Team (ACERT). This is a local group that partners with First Responders to educate and assist with navigating the treatment system particularly for those in crisis. ARCNH also partners with the Souhegan Valley Outreach Team (SVOT) which is a Christian-based group to help individuals with a Christian orientation into recovery who may come in through law enforcement. ARCNH also works closely with the Milford Police Department’s prosecutor, Karinne Brobst, to work closely with Milford High School students who have court-ordered community service.
Hospital/ED Integration	Some experience	ARCNH has met with representatives from both St. Joseph’s Hospital and Southern NH Hospital to review their MOSAIC programs. The MOSAIC programs embed Certified Recovery Support Workers into the Emergency Department who work alongside Emergency Medicine physicians and nurses. This is a good referral avenue both to and from these hospitals. ARCNH will continue to meet with representatives of the MOSAIC program at both hospitals to enhance the referral relationship.
Crisis Intervention	Expert in field	All ARCNH’s staff have been trained and certified in the Crisis Prevention Institute (CPI) training. In addition to Milford ACERT and SVOT, ARCNH also works closely with Milford High School’s Assistant Principal to engage students in crisis.
Parenting/Family Support	Some experience	ARCNH holds a weekly Family Support group on Wednesdays

		at 6:00pm. Additionally, most of our recovery coaches have lived experience as parents of children with SUD. Also, one of our recovery coaches is a current student at UNH's Building Futures Together Program and will graduate next year with another bachelor's degree with this concentration. ARCNH is also looking at reprising a grief group for parents, loved ones and friends who have suffered losses due to SUD.
Prevention	Some experience	ARCNH is partnered with the CAST Coalition (Community Action for Safe Teens). This group meets monthly at the Milford Boys' and Girls' Club and is designed to reduce substance misuse/abuse by bringing attention to activities and events that are substance-free. ARCNH also has a veterans' coalition (Stronger Together Veterans' Coalition) that works with veterans' organizations to promote substance-free activities for veterans and their families.
Recovery Friendly Workplace	Expert in field	ARCNH became a Recovery Friendly Workplace on June 4, 2020. Our Executive Director, Gray Somers, is also working with the Greater Merrimack/Souhegan Valley Chamber of Commerce to present how to become an RFW to Chamber members and interested businesses. A presentation is scheduled for Wednesday September 11, 2024.
System Navigation	Some experience	All ARCNH staff are competent in understanding how to assist participants select and participate in the most meaningful services available for SUD. This includes detoxification and inpatient treatment facilities, Intensive Outpatient and Partial Hospitalization Programs, and other resources and assets to support recovery. A new volunteer has begun working (as of June 26th) at ARCNH to update our Resource Directory. This will allow ARCNH staff to instantaneously locate services and the right people to contact at recovery organizations and resources.
Veteran Support	Some experience	ARCNH's Stronger Together Veterans' Coalition (STVC) meets on the last Monday of every month at 6:00pm. This is a pan-veterans group that includes representation from the Manchester VA, mental health counselors with specific experience in treating veterans and numerous representatives from a diverse array of veterans' organizations including the VFW, American Legion, Clear Path for Veterans, Camp Resilience and Equine Therapy programs. Currently, we're focused on the "Ask the Question" campaign to provide healthcare providers with information to ask if their patients/clients are veterans. ARCNH's Executive Director is also working on visiting the other seven veterans' coalitions in NH. He visited the Capitol Area Veterans' Suicide Coalition on 6/25. Veterans continue to be a primary focus for ARCNH. A QPR (Question, Persuade, Refer) Suicide Training facilitated by Harbor Care was held on 5/22.
Mental Health	Expert in field	All ARCNH recovery coaches are completing training in the Intentional Peer Support training course to become certified in IPS. This is seen as the premier mental health training available for recovery coaches and combined with other training our staff have done, makes ARCNH an expert in the field.
LGBTQIA+	Some experience	ARCNH has started an LGBTQIA+ support group weekly on Thursdays at 6:00pm. One of our volunteers is facilitating the group. We recently participated in an LGBTQIA+ NAMI Roundtable on 6/27 to promote awareness of the group and

		the needs of this vulnerable population.
Art	Some experience	ARC�H recognizes the value of self-expression for those in recovery. We're holding another Paint Night on Friday 7/27 at 6:30pm and are also scheduling a Pastel Drawing event and conducting a paid Stained-Glass training class.

Capacity

Current # of Staff:	4
# of Staff w/CRSWs:	1
Current # of Volunteers:	6
# of Volunteers w/CRSWs:	0

Contract Deliverables Status Updates

Contract Deliverable	Status	Notes
Meets NH RCO Standards of Excellence (NHRCSOE) and/or CAPRSS Accredited.	In progress	ARC�H is working with Harbor Care on meeting the Standards of Excellence (SOE).
Currently delivering Recovery Coaching services.	Yes	Currently we have 41 active participants. This is an increase of 11% over the last quarter.
Currently delivering Telephone Recovery Support services.	Yes	Telephone Recovery Support Services are available and utilized by all participants when needed.
Does the RCO have a Medicaid ID?	Yes	Yes
Is the RCO enrolled with MCOs?	Yes	ARC�H's Executive Director is working toward becoming a certified Health Navigator through NH Health Market Connect to enable Medicaid enrollment for eligible participants
Actively billing Medicaid for PRSS?	In progress	Not yet
Does the RCO have an active sustainability plan?	In progress	ARC�H attended a nine-week Sustainability Training series during May and June 2024. Additionally, we'll be attending the Sustainability Training being facilitated by Harbor Care in July and August.
Is supervision being provided to CRSWs on staff in compliance with the NH Licensing Board.	Yes	Kathie Saari, CRSW-S, is providing supervision on the first and third Thursdays of each month. Matt Bohannon, CRSW-S, is providing supervision on the second and fourth Thursdays of every month.
Engage with Regional Public Health Network.	Yes	Nashua Division of Public Health
Engage with Regional Doorway.	Yes	The Doorway of Greater Nashua
Coordinate with local Mental Health Peer Support Center(s).	Yes	Greater Nashua Mental Health Center

PROGRAM UPDATES

Service Delivery	- Hired new full-time recovery coach (CRSW-S) effective May 6, 2024. - Two recovery coaches, Rick Murphy and Shaun Keeney successfully passed the CRSW examination and will receive their CRSW designation in the next several weeks. - Began four new support groups including LGBTQIA+ (Thursdays, weekly at 6:00pm), Veterans' Coffee Drop (Fridays, weekly at 9:00am), MARA Recovery (Saturdays, weekly at 12:00pm) and Refuge Recovery (Saturdays, weekly at 1:00pm). - Began weekly, on Tuesdays, Narcan training at ARC�H. - ARC�H staff facilitated four-hundred and thirty-six (436) individual sessions with participants from April 1st through June 30th, 2024. - Held twenty-six (26) mutual aid meetings, increased active participants to forty-
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	one (41), attended six (6) tabling events and five (5) outreach meetings.
Quarter Highlights	• Hired IT consultant to harden cybersecurity. ARCNH will migrate from Google Workspace to Microsoft 365 in July providing better cloud security and ease of access and utilization of apps for staff. • Completed nine-week Sustainability Training facilitated by the University of Wisconsin with over thirty (30) other RCO across the US. • Submitted application to receive funding from Sen. Jeanne Shaheen's Congressionally Directed Funding grant beginning in September 2024. This will provide funding for two full-time recovery coaches and an office administrator. • Participated in NH Gives on 11-12 June. ARCNH placed in the top fifty (50) for donations of not-for-profits from over six-hundred and sixty (660) organizations total. • Two (2) ARCNH staff members attended the Recovery, Inclusion, Community, and Harm Reduction (RICH) conference on 9-10 April in Portsmouth • Recruited volunteer with Revenue Cycle Management (RCM) consulting background to help build out Resource Directory to aid staff in connecting participants to appropriate resource(s). This will be shared with other RCOs for comment and review. • ARCNH's Executive Director testified on behalf of HB 1521 on May 7th. • Attended and staffed a table at the NH Juvenile Court Diversion Summit at the Grappone Center on June 11th. ARCNH's Rick Murphy presented at the Building Futures Together session. • ARCNH began the Standards of Excellence (SOE) review preparation process with Harbor Care. • Question, Persuade, Refer (QPR) Suicide Training held at ARCNH on 22 May • Attended and staffed a table at the GMSV Chamber of Commerce Mini-Business Expo on April 17th and participated in the Nashua Chamber of Commerce "After-Hours" business event at St. Joseph's Hospital on June 12th. • Sponsored ten (10) veterans to attend NH Fisher Cats Veterans' Night baseball game on May 24th. • Attended the "Artists in Recovery" event at Milford Wadleigh Library on May 9th. • Attended the Greater Nashua Mental Health 5k Thrive/Stride on May 18th. • Attended the AHEPA Manor 35 Health Fair on May 30th. • Attended Milford PRIDE Fest on June 1st. • Attended Town of Wilton Summerfest on June 22nd. • Participated in the Capitol Area Veteran's Suicide Coalition meeting on June 25th. • Staffed the first of six (6) weekly Souhegan Valley Outreach Team (SVOT) Community Connection events at Keyes Memorial Park on June 26th. • Held three Stronger Together Veterans' Coalition meetings at ARCNH. Also attended one monthly all-NH Veterans' Coalitions Leadership meeting • ARCNH's Executive Director was interviewed on the United Way's Community Connections radio show (1590 AM, 93.5 FM) on June 3rd. • Hired social marketing firm, Social Butterfly, to support all ARCNH social media activities. Focus will be on developing videos to help educate the public on SUD and on ARCNH services and capabilities. • ARCNH's Executive Director is training to become certified Health Navigator through NH Health Market Connect. This will support Medicaid enrollment of eligible participants. • ARCNH has been preparing for its Annual Golf Tournament on August 26th at the Amherst Country Club. • ARCNH has scheduled a Recovery Walk and Rally on September 8th in Milford in honor of those lost to SUD; interest is very high. • Updating and finalizing ARCNH's Strategic Plan with Board input is the top agenda item for the next Board meeting on July 30th.

Challenges	• Continuing to promote awareness of ARCNH in the community is critical. Many community members are simply unaware of what ARCNH provides (including that services are free) and stigma is a hurdle for many in the community seeking treatment and/or support. • ARCNH would like to hire one part-time and two full-time recovery coaches to start in late July or early August. Expanding physical space for new hires is required. • Sourcing sustainable funding is a challenge. ARCNH is working to identify foundations and benefactors with a particular focus on addiction/recovery. The end goal is to generate a “rainy day” fund to provide a financial cushion to support operational expense variances. • Developing Medicaid reimbursement for peer recovery support services for participants with Medicaid. • Developing a Sustainability Plan.
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Hope For NH Recovery

Quarterly Progress Report

REPORT DATE	REPORTING PERIOD	PREPARED BY
July 2024	April-June 2024	Dave Cote

BASELINE UPDATES

RCC Information

Recovery Center (s) Name	Address	Hours of Operation
Hope For NH Recovery	293 Wilson St. Manchester NH 03103	Mon – Sat 11:30-9pm

PRSS Expertise

Specified Field/Topic	Level of Expertise	Details/Notes
Harm Reduction	Some Experience	All staff support harm reduction when working with members. It is at the core of our approach to recovery.
Criminal Justice	Expert in Field	Several of our staff have been or are currently involved with the Criminal Justice system. Weekly coaching groups are attended by members currently involved with the Criminal Justice system. We have a strong partnership with the Manchester Police Department and have provided statewide police training on working with people with co-occurring disorders.
Hospital/ED Integration	Some Experience	Hope worked with Catholic Medical Center’s Emergency Department from 2017 to early 2019, providing roughly 200 visits between ED and in-hospital patients.
Crisis Intervention	Expert in Field	Our staff regularly work with people in crisis. They are aware of their roles as peer support and are well versed in resource navigation. The staff have on several occasions contacted the Mobile Crisis team, walked members to the Doorway, and arranged for rides to the hospital.
Parenting/Family Support	Expert in Field	A staff member has extensive lived and professional experience in family separation and unification. She has worked closely with DCYF and other agencies and will continue to do so as part of her job at Hope. Hope offers a safe place for visitation, offering parents a place to meet with their children.
Prevention	Some Experience	Hosted an Alternative Peer Group in conjunction with the University of New Hampshire.
Recovery Friendly Workplace	Expert in Field	Hope is a Recovery Friendly Workplace, and our director was employed with the Governor's RFW Program.
System Navigation	Expert in Field	Our staff works extensively helping members find and apply for treatment, find food, housing/sober living, and connect with others in recovery.
Advocacy	Expert in Field	Hope's former Director was a member of the Governor's Commission on Alcohol and Other Drugs. Hope participated in the Governor's Stimulant Task Force, Manchester SUD Collaborative and the National Peer Recovery Center for Excellence

LGBTQ+	<i>Some Experience</i>	Fierce and Fabulous, a 12-step LGBTQ meeting, happens weekly at the center. Hope as a community continues to be supportive of the LGBTQ community. Our end-of -year demographics report listed 16% of our population identified as having some other sexual orientation besides heterosexual – more than twice the national average.
Homeless Outreach	<i>Expert in Field</i>	In 2022 and 2023, in partnership with 1269 Café, Hope ran a warming station for homeless folks, Hope for the Winter at the Twelve. Currently, our outreach coordinator works with the unhoused population at the Beech Street Shelter three times a week. She also attends the monthly Resource fair at the FIT Adult Emergency Shelter.
Art	<i>Expert in Field</i>	Art, particularly painting, is central to what we do at Hope. With more than six hundred (600) member-created paintings on our walls and new ones created daily the message every artist transmits is: "I was here, and I matter." In addition to individual works, we also have seven group creations on themes ranging from injecting positivity into daily life, the differences between addiction and recovery, the interplay between poetry and painting and the uniqueness of each person's recovery. A weekly 12-step based art meeting continues to thrive where participants paint as they discuss recovery topics.
Music	<i>Expert in Field</i>	Music is a part of Hope's environment/culture. We have musical instruments including pianos, drums, and guitars on hand for members to use. We have a few regular members that will arrive early to be able to play the piano, guitar or drums before their recovery meetings or meeting with the staff.
Community building	<i>Expert in Field</i>	Currently, we average between nine-hundred and one thousand (900-1000) visits to the center weekly. Of those visits, there is a core group of more than seventy-five (75) members that return three (3) or more times a week to participate in meetings, meet with other members for coffee and conversation, create art, focus on recovery work (step work), play games, and make music. Community building is at the heart of all we do, from art to meditation to music to juggling lessons. Our goal is that every person walking into Hope is welcomed, celebrated, and introduced to others.
Special Events	<i>Expert in Field</i>	Hope has a history of offering: open mic events "Sicker Than Most," "Addicted 2 Talent," and "Addict's Got Talent" monthly game nights, pancake breakfasts and more. Last year, Hope's 9 th Annual Recovery Festival was the best-attended ever, with more than eight hundred (800) attendees and sixty-five (65) booths. Plans have begun for 2024 – the best is yet to come. An activities coordinator was added to our team and events like afternoon tea, chess club, a book swap, yoga, a Mother's Day make-and-take, a matinee movie and other activities have been added to our schedule.
Veterans	<i>Expert in Field</i>	We Have provided support to a number of veterans and worked closely with the Veterans Administration on particular cases.

Capacity

Current # of Staff:	9
# of Staff w/CRSWs:	3
Current # of Volunteers:	8
# of Volunteers w/CRSWs:	0

Contract Deliverables Status Updates

Contract Deliverable	Status	Notes
Meets NH RCO Standards of Excellence (NHCOSOE) and/or CAPRSS Accredited.	Yes	
Currently delivering Recovery Coaching services.	Yes	Our staff had six-hundred and twenty-two (622) Recovery Planning Sessions working with two-hundred and thirty-six (236) engaged members seeking services.
Currently delivering Telephone Recovery Support services.	Yes	Of the six-hundred and thirteen (613) brief check-ins; two-hundred and eighty-two (282) were TRS calls with thirty-eight (38) successful contacts.
Does the RCO have a Medicaid ID?	Yes	
Is the RCO enrolled with MCOs?	Yes	We are enrolled with all of them.
Actively billing Medicaid for PRSS?	Yes	
Does the RCO have an active sustainability plan?	In Progress	Working with the FO TA team.
Is supervision being provided to CRSWs on staff in compliance with the NH Licensing Board?	Yes	
Engage with Regional Public Health Network.	Yes	
Engage with Regional Doorway.	Yes	Our staff regularly walk people over to the Doorway to connect them to services. We have a memorandum of understanding and collaborate successfully.
Coordinate with local Mental Health Peer Support Center(s).	Yes	

PROGRAM UPDATES

Service Delivery	• Activities ○ Two-hundred and ninety-three (293) mutual aid meetings attended by seven-thousand, one-hundred, and eighty (7180) people. ○ Twenty-eight (28) Pro Social/physical events attended by two-hundred and sixty-six (266) people. ○ Twenty-eight (28) wellness groups/events serving one-hundred and seventy (170) people ○ Fourteen (14) CRSW peer supervision meetings. ○ Six-hundred and twenty-two (622) Recovery Planning Sessions working with two-hundred and thirty-six (236) participants. ○ Of the six-hundred and thirteen (613) brief check-ins, two-hundred and eighty-two (282) were TRS calls with thirty-eight (38) successful contacts. ○ More than seven hundred (700) referrals made through Recovery planning sessions, contacts, and ad-hoc. ○ Four-hundred and seventy-eight (478) contacts were made with more than six hundred (600) referrals.
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	○ Thirteen (13) distribution events serving two-hundred and twenty-three (223) people including fifty-three (53) Narcan, one-hundred and fifty-one (151) safe sex kits, and twelve (12) basic needs.
Quarter Highlights	• Maintained positive relationships with the new Mayor of Manchester, both by telephone and through a series of in-person meetings. • Hosted a brunch meeting highlighting Hope offering and our vision for the future; attendance included Manchester's Mayor, several city Aldermen, the City Solicitor, the Chief of and Assistance Chief of Police, and the Fire Chief. • Began a new recovery yoga group, meditation group, chess club, HiSET/GED study group, as well as wellness groups and meetings. • A new Spanish speaking only NA group began meeting on Sunday nights. • Promoted our lead Peer to Center Manager. • Promoted three staff to coordinator positions in Outreach, Activities, and Wellness. • Began work in a wellness clinic offering things like chair massage, reiki, meditation, yoga, wellness workshops, ear acupuncture, and meditation through art to begin. Soft opening is scheduled in July, with an early August grand opening event. • Held an ear seeding auricular therapy training for the staff. • Held our first Job Fair attended by fifty-three (53) people including six tables of hiring organizations/businesses, resume building, and mock interviews. • Hosted a Community Clean-up Day for Earth Day where more than ninety (90) members of the Hope community picked up more than seventy (70) bags of trash around our neighborhood. • Participated in the Data Quality Community Forum. • Two staff have met all requirements and submitted their applications for CRSW; will schedule testing in July. • Continued participation in the Greater Manchester SUD Collaborative. • Continue to invite community partners for information sessions with the staff Granite Recovery Centers, Manchester Health Department, Acorn Recovery Services, Addiction Recovery Services, Healthcare for the Homeless, and Work Path. • Participated in Growth Partners, PRSS Community of Practice (CoP). • Attended PRSS Continuum of Care. • Provided space for parents involved with DCYF who have identified SUD working on restoration/reunification. • Provided space for "Advocacy in Me" to hold eight sessions on youth social change and advocacy. • Maintained partnerships with local recovery housing programs by: ○ Hosting Starting Point sober living's monthly meeting ○ Hosting into Action Sober Living's bi-monthly pizza party and meeting • Continue to provide space and technical support for weekly hybrid Gamblers Anonymous meeting. • Put together a benefits package for Hope staff. • Recreated a new Policies and Procedures document. • Trained staff to run group coaching meetings. • Began offering three group coaching sessions weekly – sixteen (16) were held in total and served one-hundred and eleven (111) participants. • Attended Mayor's press conference announcing the resource fairs at the Engagement Center at the Beech Street Shelter. • Presented and participated in Peer Workforce ECHO.

	• Met with the City Solicitor to see how we could better serve the community. • Hope joined the Manchester Chamber of Commerce to better form partnerships with local community leaders. • The Executive Director was accepted into the Granite Leaders Program. • Began weekly Leadership team meetings. • Hosted Rock Painting with Adira Recovery. • Met with Fire Chief Cashin to discuss ways to collaborate with the fire department to better serve the community. • Continue to host WellSense NH to inform and assist members get access to insurance • Facebook Page Quarterly Stats: ○ Total Page Likes: 9,712 ○ New Page Likes: 926 ○ Post Reaches: 58,100 • Hope continues to provide space for a variety of recovery meetings as well as wellness groups with thirty-seven (37) meetings held at the center weekly. • Continued to work with the FO Technical Assistance team to improve on our NH Recovery Community Standards of Excellence (NHRCOE). • Requested the FO TA for BARC-10 RecoveryLink training. • Ongoing participation in the Bi-Weekly Overdose Incident Updates with other Manchester nonprofits and city officials. • Continue to hone a proposal for the Manchester Opioid Abatement Committee asking for funding to begin a deeper commitment for outreach in the community. • Continued communications with Queerlective and the New England Teaching Artists Collaboration to bring more creativity to our community. • Began discussion on bringing a more formal art program to Hope and ways to fund a rotating Artist of the Month Studio Guest. • MAT Care Clinic continues providing services to their patients at Hope once a week. • September 28th, 2024 has been selected for this year's Recovery Festival. We continue to meet to plan the day's events. • Brought on an New Hampshire Technical Institute (NHTI) student for a 15-week internship. • Partnered with Calumet House, NH Department of Corrections to allow their residents to attend weekly group coaching sessions "in addition to" their recovery meetings. • Began participating in weekly Care Fairs at the Beech Street Shelter. • Partnered with Makin' it Happen to assist with their three summer outreach events.
Challenges	• Our challenge has been trying to shift the mindset of our coaches from treating their employment with Hope from a "temporary get-well job" into something that looks more like a career position. ○ Hope has created a benefits package for all staff and is working on expanding benefits soon. We have extended our hours to allow for 8-hour days to reflect 36.5/40-hour workweeks. Hope has made positive changes that include a more comprehensive professional development program, offering trainings, individualized mentorship and professional guidance. We have promoted our lead peer to Center Manager and three peers to Outreach, Wellness, and Activities Coordinator positions. • Another challenge we face regularly is maintaining the quality, quantity, and precision of data collection and contract deliverables while maintaining our unique culture of community. ○ We have begun setting aside time from both our staff meetings as well as supervision to focus on improving and maintaining consistency. Part of this shift is accepting that this effort will be a part of every staff meeting moving forward.

Keene Serenity Center

Quarterly Progress Report

REPORT DATE	REPORTING PERIOD	PREPARED BY
July 2024	April-June 2024	Sam Lake

BASELINE UPDATES

RCC Information

Recovery Center (s) Name	Address	Hours of Operation
Keene Serenity Center	24 Vernon Street, Keene, NH 03431	Office-Mon-Fri 9-5 Transports- Mon-Fri 7-5 Sat 7-10 (Transportation only) Nights & Weekends for events

PRSS Expertise

Specified Field/Topic	Level of Expertise	Details/Notes
Harm Reduction	Expert in Field	The center provides harm reduction support including a Syringe Service Program. We offer Naloxone/ overdose training in house and through community outreach. Currently under contract with NH Harm Reduction Coalition. Staff go out in the community 3 times weekly to offer syringe exchange services as an outreach service and by request. The center offers a specific phone number and social media page to allow members to reach out in a way that maintains their privacy and reduces barriers to services. KSC staff have made the commitment to clean up any reported supplies that have been left, including needles. The center has increased their harm reduction offerings to include safer snorting and safer smoking kits. KSC has worked with the City of Keen to hang a syringe disposal container in Patricia Russell Park and on the rail trail near the basketball courts. The Keene Public Library and City Hall have partnered with KSC to provide onsite disposal containers for sharps and help to support recycling of the containers. The center staff has worked with the Keene Police Department and provided them with multiple sizes of disposal containers and permission to drop them off at the center during business hours.
Criminal Justice	Some Experience	We currently go to Cheshire County Corrections and offer recovery coaching and support groups on the female side. Many of the inmates are Federal, which creates challenges for offering referrals as the inmates do not remain in the area upon release. We offer transportation support and collaboration with inmates going from DOC to recovery supports, like treatment or sober living. The center was approved to begin offering SMART Recovery into DOC. We provide support for Drug Court by offering coaching and transportation to participants. Drug court coach uses our office for engagements. KSC collaborates extensively with local police and the probation office.
Hospital/ED Integration	Some Experience	Work with COC, Center for population health facilitator.

		Currently collaborating with Director of Behavioral Science Education. Met with entire team that is facilitating the new Residential program for primary care physicians at Cheshire Medical. Collaborated with the clinic with putting together the Community Conversation hosted by Growth Partners on secondhand trauma.
Crisis Intervention	Expert in Field	Our direct neighbor is the Fire Department, and we are fortunate to have a great working relationship with the department. Collaboration and support happen easily. All staff are CPI (Crisis Prevention Intervention) Certified. Have a working relationship with first responders and partnerships with other mental health agencies.
Parenting/Family Support	Some Experience	We host a Friends and Family group every Wednesday night from 6:30-7:30 that is led by two trained facilitators. One staff member is trained in Parenting Journey in Recovery facilitation, but the center is not actively offering PJR. We maintain a child friendly space so that families can come into the Center for services with children. Parents and guardians are always responsible for the minors.
Prevention	Some Experience	We regularly do outreach at local sports events and youth are part of our targeted audience. Seeing teens with our t-shirt that says "peer support works" is a delight. We can engage with a broad range of people about harm reduction, prevention and support services.
Recovery Friendly Workplace	Some Experience	Partnered with Reality Check to coordinate Recovery Friendly Workplace training for Cheshire County. The center regularly collaborates with Working Fields, a mission-based job placement organization.
System Navigation	Expert in Field	Regularly assists people access a variety of services. Collaboration with Doorway, Better Life Partners, New Seasons Methadone Clinic, Housing Supports, Mental Health Supports and Department of Health and Human Services.
Homeless Outreach	Expert in Field	We partner with every supporting agency possible to have all resources at hand such as, Monadnock Family Services Outreach team, Southwestern Community Services Homeless Outreach and CAP agency, Love They Neighbor Outreach, Hundred Nights Shelter, the Greater Keene Homeless Coalition, Keene Mutual Aid, and the City of Keene Human Services Department Receiving funding through the FO for Homeless Outreach. This has allowed us to be more consistent with supplies and offer additional support. Coalition member for Cheshire County Mobile Outreach with several local agencies that have the intended purpose of ensuring there are no gaps, and our agencies are limiting duplication of efforts. We host Serenity Street Support and offering products and support to those needing housing support.

Capacity

Current # of Staff:	5
# of Staff w/CRSWs:	2
Current # of Volunteers:	8
# of Volunteers w/CRSWs:	1

Contract Deliverables Status Updates

Contract Deliverable	Status	Notes
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Currently meeting CAPRSS standards as determined by achieving CAPRSS Accreditation or by FO/BDAS evaluation.	Yes	CAPRSS Accredited July 2019 (3-year accreditation) Needs Recertification for SOE
Currently delivering Recovery Coaching services.	Yes	
Currently delivering Telephone Recovery Support services.	Yes	
Does the RCO have a Medicaid ID?	Yes	
Is the RCO enrolled with MCOs?	Yes	
Actively billing Medicaid for PRSS?	No	
Does the RCO have an active sustainability plan?	In Progress	
Is supervision being provided to CRSWs on staff in compliance with the NH Licensing Board.	Yes	Sarah Johnston
Engage with Regional Public Health Network.	Yes	Cheshire Medical Center
Engage with Regional Doorway.	Yes	Doorway of Cheshire Medical Center
Coordinate with local Mental Health Peer Support Center(s).	Yes	Monadnock Peer Support – Daily coordination.

PROGRAM UPDATES

Service Delivery	- Our center hosts mutual aid meetings such as AA, All Recovery, Mental Health and Wellness in Recovery. - A new YOGA group was started and is led by a new teacher that just graduated with a YOGA teaching certification. - Supporting community partners to host twenty-eight (28) AA groups and thirty-nine (39) Meetings and five (5) NA groups. - We offer a transportation program for people in recovery called “Road to Recovery” and it is currently at full capacity offering eighty (80) rides per week. We offer local MAT rides six (6) days a week. We partner with DOC to offer rides to graduating inmates who are leaving for treatment or sober living. We also support individuals in long term recovery with specific health appointments. - We offer Harm Reduction services, including a syringe services program called GROW SSP. We receive support and funding from NH Harm Reduction Coalition. - Homeless outreach. All our staff engage directly with a multitude of individuals and organizations to help gain some form of housing security for individuals.
Quarter Highlights	- We cohosted “Community Partners” with Growth Partners, DHHS and Healthy Monadnock Alliance. This consisted of two online data/experience gathering groups and an event that was led by NH TAC to ask questions and gather information on what the next funding focus for Secondhand Trauma should look like. - We hosted two SMART Recovery groups at the Live Free IOP Center. Each group has 15-20 participants. - We added a past employee and CRSW to our volunteer support list. She is helping with our SSP outreach.
Challenges	- It continues to be a challenge to increase engagements with participants. It is difficult to engage individuals beyond initial contact and to build recovery capital. We have a new CRSW supervisor that can help continue guiding the group and finding methods for engagement. - The increase of housing support needs continues to increase and the number of unsheltered is rising. Our local shelter, respite, Community Action Program (CAP) and city supported hotel vouchers are at capacity which is deeply concerning. Additional homeless outreach funding and support will help; however, the crisis is in safe, care managed housing opportunities.

Navigating Recovery Lakes Region

Quarterly Progress Report

REPORT DATE	REPORTING PERIOD	PREPARED BY
July 2024	April-June 2024	Daisy Pierce, Executive Director

BASELINE UPDATES

RCC Information

Recovery Center (s) Name	Address	Hours of Operation
Navigating Recovery of the Lakes Region	102 Court Street Laconia, NH 03246	M-F, 9am-5pm Sat 9am-1pm

PRSS Expertise

Specified Field/Topic	Level of Expertise	Details/Notes
Harm Reduction	Expert in Field	Provide naloxone kits & training, provide test strips, support harm reduction pathways, and run Laconia Exchange (LEX) since April 2023.
Criminal Justice	Expert in Field	Provide in-person group coaching to residents at Belknap County Corrections (since 2017); collaborate with Probation & Parole.
Hospital/ED Integration	Expert in Field	Provide 24/7 support to patients at Concord Hospital – Laconia and Franklin (since 2017).
Crisis Intervention	Expert in Field	Provide crisis support and facilitate access to treatment and withdrawal management; all staff have received Crisis Intervention training
Parenting/Family Support	Expert in Field	Facilitate Parenting Journey in Recovery, PJ II, Families in Recovery, and offer one-on-one and group family support services.
Prevention	Expert in Field	On the board for Laconia Youth Alliance (DFC); provide youth coaching for 12+ both one-on-one and in local schools.
Recovery Friendly Workplace	Some Experience	Recipient of the RFW grant and worked on helping businesses become RFW. Executive Director appointed to the Recovery Friendly Workplace Advisory Council. Continue to support local businesses with training and services becoming RFW.
System Navigation	Expert in Field	Staff are very knowledgeable about treatment and recovery options statewide, benefits navigation, and many other community resources; subcontract with The Doorway since 2020. Two staff members are trained health marketplace navigators.
Homelessness Outreach	Expert in Field	Provide street outreach to housing insecure and unsheltered neighbors three days per week (since 2020); distribute survival items: tents, sleeping bags, tarps, blankets, sleeping pads, heated sleeping pads, mummy bags, hats, gloves, etc.; collaborate with BM-CAP and LRMHC outreach staff; Executive Director is Chair of Laconia Mayor’s Housing Taskforce

SMART Recovery	<i>Expert in Field</i>	NRLR staff member facilitates SMART Recovery and SMART Recovery for Family & Friends weekly meetings
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Capacity

Current # of Staff:	10
# of Staff w/CRSWs:	6
Current # of Volunteers:	5
# of Volunteers w/CRSWs:	0

Contract Deliverables Status Updates

Contract Deliverable	Status	Notes
Meets NH RCO Standards of Excellence (NHRCSOE) and/or CAPRSS Accredited.	Yes	Completed SOE review in 2023
Currently delivering Recovery Coaching services.	Yes	Provide one-on-one and group coaching for recovery wellness plans
Currently delivering Telephone Recovery Support services.	Yes	Provide one-on-one brief check-ins as needed
Does the RCO have a Medicaid ID?	Yes	3111715
Is the RCO enrolled with MCOs?	Yes	All 3 MCOs in NH
Actively billing Medicaid for PRSS?	Yes	Utilizes East Coast Reimbursement as 3 rd party biller
Does the RCO have an active sustainability plan?	Yes	Working to update in 2024
Is supervision being provided to CRSWs on staff in compliance with the NH Licensing Board.	Yes	<i>Jacqui Abikoff, MLADC</i> <i>Corey Gately, MLADC</i> <i>Mike Gallagher, CRSW-S</i>
Engage with Regional Public Health Network.	Yes	Partnership for Public Health; Executive Director sits on Winnepesaukee Public Health Council
Engage with Regional Doorway.	Yes	Subcontracted to provide CRSW coverage M-F, 8am-5pm since January 2020
Coordinate with local Mental Health Peer Support Center(s).	Yes	One Peer to Another

PROGRAM UPDATES

Service Delivery	- PRSS & TRS: The primary service we offer to participants is one-on-one peer supports, either in person, over the phone, or via Zoom. PRSS & TRS includes brief check-ins, follow-up engagements, helping participants achieve goals set in their recovery wellness plans, and providing case management/system navigation. - Street Outreach: Three days a week, the coaches go out in pairs to provide street reach to people experiencing housing insecurity and homelessness. Coaches offer treatment and recovery resources, hand out tents, blankets, socks, naloxone, personal hygiene products, etc., and provide PPE, rapid COVID tests, and vaccine information. - Compass House: We continue to provide weekly house meetings and one-on-one coaching to the eight women at Compass House. - CORE Groups: Weekly group meetings are held at Belknap County Corrections for the Correctional Opportunity for Recovery and Education Program residents. 24/7 Hospital Support: This quarter we saw eighty-three (83) patients in the hospital and referred patients to withdrawal management, treatment (all levels of care), sober living, group meetings, The Doorway, and peer support services. - Families in Recovery: Weeks 1-10 were held this quarter. - Parenting Journey in Recovery: Weeks 9-11 were held this quarter.
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	• LEX (Laconia Exchange): This quarter, we collected 13,335 syringes and distributed 13,691 (97% return rate). We also distributed two-hundred and fifty-six (256) safer smoking kits. In addition to the safe use kits, we also distribute wound care kits, Xylazine test strips, condoms, HIV at-home test kits, and other essential items. • Youth Coaching: “Building Futures Together” trained coaches run groups at Belmont High School and Inter-Lakes Middle/High School, and provide one-on-one coaching to participants 12+.
Quarter Highlights	• Our Saturday bagged lunch program grew from ninety (90) lunches to one-hundred, twenty-five (125) or more distributed each week. We distributed 2,088 lunches this quarter. • Male participant finished his school year and began his first ever job working full time in construction. • Male participant just celebrated 3 years of sobriety from alcohol. • Male participant connected to Major Choice program for work support of folks with disabilities. Also moved into sober living, first time. • Male participant received brand new prosthetics as a bilateral amputee. • Male participant just had an annual physical, the participant has cirrhosis and had a bleak physical health outlook a year ago. His choice of recovery, exercise and diet has increased his quality of life and improved his health numbers via his doctor. • Female participant gained full time employment that is first shift. The participant was working a part-time 3rd shift position that was difficult for her to sustain. • Female participant got her criminal record annulled. • Female participant completed and graduated the DUI course through Chrysalis Recovery. • Female participant just celebrated one-year of continuous recovery. • Female participant left the Butterfly House and moved into her own place and is regaining custody of her daughter. • Female participant has become employed, working on where she left off with getting her license back and just got a scholarship for the recovery coach training series in September with SOS. • Female participant got her 12-month chip from home group, got married, and moved out of sober living. • Female participant completed recovery coach boot camp and just received her 10-month chip from her home group.
Challenges	• A large percentage of participants struggle with major mental health disorders that make it challenging to provide optimal PRSS and create barriers to accessing SUD treatment. ○ We work closely with The Doorway to identify resources and make referrals to the peer based mental health center; however, CRSWs need more training on co-occurring major mental health disorders and the State needs more treatment options.

Revive Recovery Resource Center

Quarterly Progress Report

Report Date	reporting period	Prepared By
July 2024	April-June 2024	Jessica Carter

BASELINE UPDATES

RCC Information

Recovery Center (s) Name	Address	Hours of Operation
Revive-South	263 Main St. Nashua	8a-5p
Revive-East	6 Railroad Ave. Derry	11a-3p
Revive-North	293 Elm St. Manchester (moved to 99 Blaine St in Manchester)	9a-5p

PRSS Expertise

Specified Field/Topic	Level of Expertise	Details/Notes
Harm Reduction	Expert in Field	Revive provides a comprehensive harm reduction program to The Greater Nashua community with the collaboration of The Doorway of Greater Nashua and The City of Nashua’s Division of Public Health & Community Services. The Syringe Services Alliance of the Nashua Area (SSANA) conducts harm reduction-specific outreach to the community for two hours per day, five days per week. Revive provides overdose prevention education training to the public and naloxone free of charge. Revive/SSANA has expanded supply offerings to include safer smoking (meth, fentanyl, and cocaine), safer snorting kits, and non-IV injection kits. SSANA also distributes personal hygiene items, feminine care kits, safer sex kits for both females and males, fentanyl test strip kits, xylazine test strip kits, CPR face shields, wound care kits, stay warm bags as well as water and snacks when available or requested. St. Joseph’s Mobile Health Care Clinic also attends outreach two days per week.
Criminal Justice	Expert in Field	Revive sits on both Hillsborough County (South & North) recovery/drug court teams and has been providing Peer Recovery Support Services to these programs since 2018:2020. The organization has partnered with the NH Department of Corrections and engages with inmates within transitional living unit for women. Revive has been conducting outreach to the NH DOC since 2021, where they hold monthly Peer Recovery Support Services Informational Sessions. Revive has a relationship with The Hillsborough County House of Corrections and has been working with all populations at Valley Street Jail including the ACT program and anyone who puts in a request slip to attend Recovery Support Groups in person at the jail. Revive partners with The City of Manchester, to provide these groups weekly.

Hospital/ED Integration	<i>Expert in Field</i>	Revive has been providing Peer Recovery Support Services to inpatient admissions at Southern New Hampshire Medical Center since 2018. Revive works with The Doorway of Greater Nashua, a program of Southern New Hampshire Health Systems closely for collaboration with SSANA and assistance with System Navigation. This quarter, Revive has continued conducting Outreach to SNHHS. Revive has partnered with The St. Joe's Mobile Health Clinic to collaborate with SSANA on Harm Reduction Outreach several days per week
Crisis Intervention	<i>Expert in Field</i>	Revive engages in crisis intervention through a partnership with Greater Nashua Mental Health Center to serve the communities of Nashua, Hudson, and Milford in collaboration with The Adverse Childhood Experiences Response Team and has been working on rebuilding relationships with the Police Department in Nashua to get this team more active in the community. This quarter, RRRC has been a part of the Merrimack ACERT Team launch, serving the Merrimack Community. Revive has continued building relationships with the NH Rapid Response Teams/Crisis Units in the various locations served to help support the crisis response needs of the participants we serve.
Parenting/Family Support	<i>Expert in Field</i>	RRRC currently provides a Family Support Group to community members monthly. Revive currently provides individual family peer recovery support services. RRRC offers community members the Families in Recovery Program at the Cynthia Day Family Center. Revive currently has three facilitators for the Families in Recovery program and is providing this program at the Cynthia Day Family Center in Nashua.
Prevention	<i>Expert in Field</i>	RRRC is present in the Nashua Prevention Coalition. RRRC provides community members with overdose prevention & language training. Revive has also worked with The Boys and Girls Club of Greater Nashua to provide opiate training to youth, parents, and staff at their Camp Mariposa program.
Recovery Friendly Workplace	<i>Expert in Field</i>	RRRC engages the Recovery Friendly Workplaces by serving on lived experience panels, assisting with recovery-friendly workplace orientations, providing peer recovery support services to local Recovery-Friendly Workplaces, referring participants to recovery-friendly workplaces in the area, and providing naloxone & language training to Recovery Friendly Workplaces.
System Navigation	<i>Expert in Field</i>	RRRC facilitates system navigation for its community members in Greater Nashua, Greater Manchester & Greater Derry. This practice has been improved by partnering with The Doorway of Greater Nashua to help facilitate the SUD needs of community members. RRRC supports system navigation through its ACEs Mobile Response Team in collaboration with GNMHC, Bridges, The Souhegan Valley Boys and Girls Club, and Police Departments in Milford, Merrimack, Nashua & Hudson. This team reduces barriers and meets with

		participants out in the community to help them navigate recovery-oriented systems of care.
Youth Programming	<i>Expert in Field</i>	Revive offers a “Youth in Recovery”, an Alternative Peer Group for youth directly or indirectly impacted by substance use between the ages of 12-25. Revive currently has 5 trained facilitators for the Alternative Peer Group. The Facilitator has been trained in the youth-specific curriculum provided by UNH's Institute of Disability and their CRSW training. RRRC has been building relationships with community partners and promoting this new program to enhance referrals. Revive is in discussions with UNH Manchester to collaborate on an APG tailored to the college-aged population at UNH Manchester.
Trainings	<i>Expert in Field</i>	Revive currently provides all the trainings required for someone to become a Certified Recovery Support Worker. This quarter, Revive provided the three-hour Mental Health/Co-Occurring training and offered it to anyone interested for free. Revive offers SOS The Art & Science of Peer-Assisted-Recovery, Ethical Considerations in PAR, Suicide Prevention in PAR, HIV & Other Infectious Diseases in PAR, Overdose Prevention Trainings, and Harm Reduction Outreach Worker Trainings for anyone interested.

Capacity

Current # of Staff:	8
# of Staff w/CRSWs:	6
Current # of Volunteers:	13
# of Volunteers w/CRSWs:	0

Contract Deliverables Status Updates

Contract Deliverable	Status	Notes
Meets NH RCO Standards of Excellence (NHRCSOE) and/or CAPRSS Accredited.	Yes	
Currently delivering Recovery Coaching services.	Yes	
Currently delivering Telephone Recovery Support services.	Yes	
Does the RCO have a Medicaid ID?	Yes	
Is the RCO enrolled with MCOs?	Yes	
Actively billing Medicaid for PRSS?	Yes	
Does the RCO have an active sustainability plan?	Yes	
Is supervision being provided to CRSWs on staff in compliance with the NH Licensing Board.	Yes	Jessica Carter, CRSW-S, Marshall Wood, CRSW-S, Traci Weaver, MLADC
Engage with Regional Public Health Network.	Yes	
Engage with Regional Doorway.	Yes	

Coordinate with local Mental Health Peer Support Center(s).	Yes	
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PROGRAM UPDATES

Service Delivery	• In its Nashua location, Revive conducted one-hundred and thirty-one (131) Brief Check-Ins, thirty-three (33) New Intakes, and two-hundred and twenty-five (225) Recovery Planning Sessions. • In its Manchester location, Revive conducted one-hundred and nine (109) Brief Check-Ins, seventy-one (71) New intakes, and one-hundred and nine (109) Recovery Planning Sessions. • In its Derry location, Revive conducted seven (7) Brief Check-Ins. • Revive provided two-hundred and eight (208) groups to the Greater Manchester Community, seventy-seven (77) groups in the Greater Nashua Community, and three (3) groups at the State of NH Department of Corrections in Concord. • Revive served one-thousand, six-hundred, and nineteen (1,619) Organizational Activities out of its Nashua location, seven-hundred and fifteen (715) out of its Manchester location, and one-hundred and thirty-three (133) out of its Derry location. • Revive served six-hundred and ninety-five (695) individuals through Partner Organization Activities out of its Derry location, two-thousand, six-hundred and seventy-eight (2,678) individuals out of its Nashua location and one-hundred and thirty-one (131) out of its Manchester location. • This quarter Revive has continued its relationship with Better Life Partners to help meet the MAR needs of community members in Nashua • Revive continues to provide transportation, free cell phones with minutes, food, stay warm bags, shelter supplies, and clothing to participants in need. • Revive has continued to partner with a Nurse Practitioner who uses Center space to continue to help support the primary care needs of individuals in the Greater Manchester area • Revive provides Comprehensive Harm Reduction Services 5 days a week for two hours each day. • Revive distributed 44,790 Short Tip Syringes and collected 43,523 syringes off the street for a return rate of 97% for the quarter. • Five-hundred and fifty-six (556) Nasal Kits of naloxone were distributed by The Syringe Service Alliance of the Nashua Area this quarter and participants reported using our naloxone to reverse an opioid overdose in sixty-five (65) instances. • SSANA performed seven-hundred and ninety-two (792) total transactions, served one-thousand, two-hundred and fourteen (1,214) through secondary exchange with a total of two-hundred and eighty-five (285) unique individuals with substance use disorder served • Throughout the quarter; participants reported five-hundred and seventy-three (573) instances of cocaine usage, seven-hundred and nine (709) instances of opiate usage, and five-hundred and fifty-four (554) instances of methamphetamine use • Revive distributed two-hundred and fifty-three (253) Fentanyl test strip kits, one-hundred and ninety-eight (198) Xylazine Test Strip Kits, three-hundred and forty (340) Wound Care Kits, seven-hundred and thirty-one (731) Safer Smoking Bubble Kits, six-hundred and ninety-nine (699) Safer Smoking Stem Kits, five-hundred and eighty-six (586) Safer Smoking Foil Kits, three-hundred and twenty-two (322) Safer Snorting Kits, two-hundred and forty-three (243) Non-IV Injection Kits, ten (10) Hygiene Kits, eight (8) Stay Warm Bags, sixty-one (61) Feminine Hygiene Kits, and one-thousand, eight-hundred and twenty-six (1,826) Safer Injection Kits
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	• This quarter, Revive served one-thousand, four-hundred and forty-nine (1,449) on Outreach out of its Nashua location and five-hundred and ninety (590) out of its Manchester location. • This quarter Revive continued conducting outreach to encampments and other locations as needed/requested by community partners to engage folks in recovery-related conversations or help to connect with other community partners based on needs while out in the community. • Revive coordinated two separate syringe pick-up events in the community to help support the safety of the community in which more than five-hundred and fifty (550) syringes were picked up. • Revive continued providing PRSS to all inmates interested at the Hillsborough County House of Corrections and provides 4-5 separate groups to males and females within the walls on a weekly basis. This quarter Revive provided one-hundred and forty-five (145) groups inside the Walls serving one-hundred and eighty-four (184) unique individuals through the groups provided. • Revive continued outreach to Gatehouse Treatment Centers and began providing Recovery Support Informational Sessions to the Nashua Soup Kitchen and Warming/Cooling Centers • This quarter Revive continued to engage with the Milford ACERT team through collaboration with Milford PD, GNMH & Bridges and did not meet with any families impacted by substance use in the Milford Community this quarter, but participated in team meetings • Revive continues to be active team members for the Hillsborough County South Adult Recovery Court Program and The Hillsborough County North Adult Drug Court Programs. • This quarter, Revive continued providing Families in Recovery at the Cynthia Day Family Center and this quarter has graduated five (5) women from the program. One success of this program is that participants will continue to come to group even after completion of the 17-week program
Quarter Highlights	• A participant in the Manchester location has been coming to the center for a few months now. At first, this participant utilized the center as a drop-in / shelter-in-place rather than taking advantage of the resources provided at Revive. This quarter, the participant has begun to show positive improvements in their recovery outcomes and is developing trust with the center staff • A participant has successfully found employment after several months of unemployment and engaging with the center for resources. The participant found employment that could accommodate a language barrier and is reporting to continue to build recovery and maintain compliance with drug court. • Revive staff participated in two Project ECHO's this quarter on Recovery Workforce as a Subject Matter Expert • This quarter Revive had two staff members obtain their CRSW, despite several hiccups throughout the process for both • Revive hosted its first Murder Mystery Fundraiser Event. The event was a success, and tickets were sold out and a significant amount of funds were raised for the center • This year, Revive participated in the NH Gives fundraiser and raised some unrestricted funds to help support operations • Revive partnered with ARCNH to provide all training required for someone to apply for their CRSW Certification. This quarter about twelve people were trained in The Art & Science of Peer Assisted Recovery, Ethical Considerations in PAR, Suicide Prevention in Peer-Assisted Recovery, HIV and other infectious diseases in PAR as well as Mental Health and Co-occurring disorders for Peers • Revive participated in the City of Nashua's Public Health Week Health Fair

	• At the beginning of this quarter, Revive moved its Manchester location from 293 Elm St. to 99 Blaine St in Manchester • Revive participated in the Salem High School Mental Health Fair • Revive Recovery was able to send two staff members to the SOS RICH Conference • This quarter, Revive hosted its Alternative Peer Group for Youth and participated in the Learning Community Meetings • Revive worked closely with their Grant Writer and applied for several grants that can help with long-term sustainability of the organization • Revive attended a 42 CFR Part 2 and HIPAA Training facilitated by Jacqui Abikoff at NHADACA • Revive helped support the Community Baby Shower hosted by the United Way that served about one-hundred and twenty-three (123) families with children under the age of two and/or expecting mothers • Revive attended the PRSS COP on Mental Health & Co-Occurring Disorders • Revive staff participated in an orientation for the Department of Corrections • Review participated in a HIV Update training with NHADACA
Challenges	• <i>Maintaining appropriate staffing levels to not only keep operations running smoothly in all three of our centers, but to continue fulfilling all our obligations to community partners</i> ○ <i>Look to hire staff that fit the role well and can adapt to any/all conditions</i> ○ <i>Focus on prioritizing most important needs of the organization and relationships of Revive</i> ○ <i>Focus on self-care and making sure staff are feeling fulfilled with their role</i> ○ <i>Work to foster positive communication with staff, participants and community partners</i> ○ <i>Don't be afraid to ask for help when needed from community partners and staff</i> ○ <i>Always have several back up plans for staffing</i> ○ <i>Make sure staff are taking lunches and breaks when needed</i> ○ <i>Address performance issues in the moment</i> ○ <i>Remain supportive of self and others</i> ○ <i>Work to promote a more positive work environment where staff use constructive, positive communications with coworkers</i> ○ <i>Revisit self-care tasks within the organization</i> ○ <i>Work to promote work/life balance and encourage staff to be vigilant about self-care</i> • <i>Maintaining appropriate behavior in the centers</i> ○ <i>Make sure all staff are aware of ethical standards and are on the same page with enforcing the rules</i> ○ <i>Staff and volunteers are to model appropriate behaviors</i> ○ <i>Revisit code of ethics and make edits that might promote a more productive environment</i> ○ <i>Training staff to address behavioral issues in the moment and who they can reach out to for help</i> ○ <i>Familiarize staff and volunteers with policies and procedures</i> ○ <i>Role play scenarios before-hand to help support staff in feeling more comfortable addressing issues in the moment</i> ○ <i>Look to see how other centers are handling challenging behavioral concerns and adjust policies and procedures as needed</i> ○ <i>Make sure ethical challenges are addressed in supervision and staff feel supported by their supervisor(s)</i> • <i>Maintaining accurate data entry, in a timely manner</i> ○ <i>Ensure all staff are completing staff weekly reports and turning in to supervisor on time</i>

	○ <i>Supervisors need to be reviewing all data on staff weekly report and verifying that weekly report matches what has been entered into Recovery Link</i> ○ <i>Reinforce the timelines for which data must be entered frequently</i> ○ <i>Provide reminders of when, where and how data should be entered</i> ○ <i>Provide performance improvement plans in a timely manner when things aren't being entered accurately or timely by all staff</i> ○ <i>Provide written, verbal, and kinesthetic direction to staff identifying that everyone learns differently</i> ○ <i>Ensure staff are going to appropriate supervisor seeking guidance with data entry when there are questions</i> ○ <i>Oversee all data reports on a consistent basis to ensure data has been entered correctly</i>
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Safe Harbor

Quarterly Progress Report

REPORT DATE	REPORTING PERIOD	PREPARED BY
July 2024	April-June 2024	Whitney Brown

BASELINE UPDATES

RCC Information

Recovery Center (s) Name	Address	Hours of Operation
Safe Harbor Recovery Center	865 Islington Street, Portsmouth, NH 03801	M-F 8:30-6p Sat 8:30-2 Sat 2-5p Youth Only Hours

PRSS Expertise

Specified Field/Topic	Level of Expertise	Details/Notes
Harm Reduction	Some Experience	Continue to provide harm reduction kits and naloxone; submitted SSP registration.
Criminal Justice	Some Experience	Volunteer service program partners with Drug Court and Job Launch works with Probation Officers, Diversion and Pre-Trial services, met with youth justice program in area for youth Alternative Peer Group (APG).
Hospital/ED Integration	Some Experience	Bi-weekly visits to Behavioral Health Unit of Portsmouth Hospital and strategizing for dispatch recovery coaching service at Portsmouth Regional Hospital.
Crisis Intervention	Expert in Field	We have experts at employing de-escalation techniques and responding to complex crises on staff at the center.
Parenting/Family Support	Expert in Field	Group Nurturing Parenting/Families in Recovery.
Prevention	Some Experience	APG programming supports youth affected by substance misuse on Saturdays during youth only hours.
Recovery Friendly Workplace	Some Experience	Job Launch partners and collaborates closely with RFW Initiative.
System Navigation	Expert in Field	Integrated into PRSS.
Recovery Vocational Services	Some Experience	DHHS workforce readiness; Job Launch
Holistic wellness services	Some Experience	Reiki and Auricular Acupuncure (detox protocol) services since 2019.
Art in Recovery program	Some Experience	Creative expression as a pathway; established in 2016.

Capacity

Current # of Staff:	6
# of Staff w/CRSWs:	4
Current # of Volunteers:	21
# of Volunteers w/CRSWs:	0

Contract Deliverables Status Updates

Contract Deliverable	Status	Notes
Meets NH RCO Standards of Excellence (NHRCOSOE) and/or CAPRSS Accredited.	In Progress	Working with FO to prepare for NH RCO Standards of Excellence Review.
Currently delivering Recovery Coaching services.	Yes	
Currently delivering Telephone Recovery Support services.	Yes	

Does the RCO have a Medicaid ID?	Yes	
Is the RCO enrolled with MCOs?	Yes	
Actively billing Medicaid for PRSS?	Yes	
Does the RCO have an active sustainability plan?	In Progress	
Is supervision being provided to CRSWs on staff in compliance with the NH Licensing Board.	Yes	<i>Dawna Jones, MLDAC and Whitney Brown, CRSW Teresa Varney pursuing CRSW Supervisor certification</i>
Engage with Regional Public Health Network.	Yes	
Engage with Regional Doorway.	Yes	
Coordinate with local Mental Health Peer Support Center(s).	Yes	

PROGRAM UPDATES

Service Delivery	- Families in Recovery/NP completed its seventeen (17) sessions in June 2024. - Open distribution hours resulted in many items distributed this quarter for the unhoused and individuals experiencing homelessness. - Gave thousands of dollars of transportation subsidy and work outfit subsidy to help individuals get employed. - Program Coordinator (federal contract) Mike Whitehouse has started and is doing well and pursuing his CRSW. - Rolled out APG youth group at Waypoint in Rochester. - Closed out first year of SAMHSA BCOR contract. - Brought outreach gig back to Addiction Recovery Services after COVID hiatus - Looking for new space. - Recovery choir performed at Recovery Church and Juneteenth celebration in Mass. - Applied to New Hampshire Council for the Arts in partnership with New Hampshire Theatre project for innovative training series.
Quarter Highlights	- Completed Foundations of Motivational Interviewing for SHRC staff in May. - Attended and tabled at Market Square Day, Seacoast Outright Pride Festival. - APG facilitators Mary Sateary and Jordan Trombino presented with UNH IOD at Strafford Country Behavioral Health Summit.
Challenges	- Staffing shortages – Mary S left for graduate school. - Posted position for backfill of Recovery Specialist

SOS Recovery Community Organization

Quarterly Progress Report

REPORT DATE	REPORTING PERIOD	PREPARED BY
July 2024	April-June 2024	John Burns

BASELINE UPDATES

RCC Information

Recovery Center (s) Name	Address	Hours of Operation
SOS Rochester RCC	14 Signal St. Rochester, NH 03867	Mon-Friday 9a-5pm
SOS Dover RCC	4 Broadway Dover, NH 03820	Mon-Friday 9a-5pm Sat 9am – 5pm
SOS Exeter RCC	92 Portsmouth Ave., Suite 10 Exeter, NH 03833	Mon-Friday 9a-5pm

PRSS Expertise

Specified Field/Topic	Level of Expertise	Details/Notes
Harm Reduction	Expert in Field	All centers are syringe service providers.
Criminal Justice	Expert in Field	Peer-Strength program run in SC and RC within probation, parole, correctional facilities and 5 drug courts including Federal Drug Court (LASER program).
Hospital/ED Integration	Expert in Field	Fee-for-service contract w/ Wentworth Douglass Hospital and Exeter Hospital
Crisis Intervention	Expert in Field	Peers are all trained in various crisis intervention and well trained in motivational interviewing.
Parenting/Family Support	Expert in Field	Nurturing Parents program has 3 trained staff. Now hosting “Invitation to Change” weekly with 4 staff trained Level 1 facilitators.
Prevention	Expert in Field	Harm reduction is prevention.
Recovery Friendly Workplace	Expert in Field	Have continued working in this area. In 2017 we added a social enterprise, Fold’d, a restaurant project.
System Navigation	Expert in Field	Worked closely with navigating medical, behavioral health, SUD treatment, housing, public insurance and more.
Distribution	Expert in Field	Distributing several thousand syringes monthly as well as wound care, referrals for care, and other harm reduction supplies and services.
Training	Expert in Field	SOS is a certified education provider at the Association for Addiction Professionals (NAADAC) with 11 NAADAC authorized curriculums and a total of 15 curriculums including Motivational Interviewing intro and advanced curriculums. Director is a member of Motivational Interviewing Network of Trainers (MINT) and two trained on coding in MI under both the Motivational Interviewing Treatment Integrity (MITI) and Motivational Interviewing Competency Assessment (MICA).

Capacity

Current # of Staff:	27
# of Staff w/CRSWs:	4
Current # of Volunteers:	25
# of Volunteers w/CRSWs:	1

Contract Deliverables Status Updates

Contract Deliverable	Status	Notes
Meets NH RCO Standards of Excellence (NHCOSOE) and/or CAPRSS Accredited.	Yes	Need recertification
Currently delivering Recovery Coaching services.	Yes	Staff completes daily
Currently delivering Telephone Recovery Support services.	Yes	Staff completes daily
Does the RCO have a Medicaid ID?	No	Restarting after spin off
Is the RCO enrolled with MCOs?	No	Restarting after spin off
Actively billing Medicaid for PRSS?	No	Restarting after spin off
Does the RCO have an active sustainability plan?	Yes	Reviewed annually by board of directors
Is supervision being provided to CRSWs on staff in compliance with the NH Licensing Board.	Yes	John Burns and Eileen Doyle are both CRSW Supervisors
Engage with Regional Public Health Network.	Yes	Work with them closely
Engage with Regional Doorway.	Yes	Refer individuals to doorway when they are willing to accept them
Coordinate with local Mental Health Peer Support Center(s).	Yes	Work with Infinity regularly

PROGRAM UPDATES

Service Delivery	- SOS is providing 1:1 comprehensive supports and brief check ins. We also provide Families in Recovery Program. We have multiple digital meetings being held 7 days a week and two locations with Invitation to Change, three that offer Harm Reduction Works meetings weekly as well as All Recovery, Dharma Recovery and LGBTQIA+ meetings. - We offer onsite in person meetings and supports at all centers. - SOS is in five county treatment courts through opioid abatement funding program servicing Coos, Carroll, Rockingham, Strafford County and Federal LASER program in Concord. We continue working with both Carroll County Corrections and Coos County Corrections as well as DOC Probation & Parole. - SOS completed Motivational interviewing training for Brattleboro and Bennington VT police departments and EMS as part of training department to build our social enterprise. - Engagement with our fee-for-service recovery coaching contract w/ Exeter Hospital has been increasing. - Ongoing monthly cohorts and training of staff for Youth Homelessness with Heidi Youngs team at DHHS and working with Archways on ongoing Motivational Interviewing training. Motivational Interviewing training scheduled for FY25Q1 for Upper Room.
Quarter Highlights	Relocated our Hampton location to Exeter.

	• SOS continued collaboration with New Hampshire Harm Reduction Coalition (NHHRC) on harm reduction supports and services and is subcontracting opioid abatement funding. • Attended Governors Commission Budget subcommittee and community and coordination subcommittee. • Social enterprise restaurant, Fold'd, is growing with Chef hired in January. Meeting with NH Dept. of Business and Economic Affairs (BEA) and hosted a meeting of philanthropists to explore additional sustainability at Fold'd. • Fold'd Community Diner now employs 10 and is continuing to grow. • SOS had 4 employees complete and graduate from the New England ATTC leadership cohort. • Trained 211 staff on SUD 101 as well as Stigma and Language through 90-minute trainings. • Changed our benefits plan starting in July to Anthem and made dependent co-pay more affordable. • Hired a Director of Marketing and Development.
Challenges	• Challenges continue with availability of workforce. ○ Housing and childcare for our staff continues to strain capacity as so many of them are struggling to find childcare that doesn't interfere with work schedules and are spending entirely too much of their take-home pay on housing in this region. ○ Workforce availability is limited and inexperienced which creates an onerous responsibility on staff development as multiple agencies co-opt and compete with us for recovery support staff.

TLC Recovery Programs

Quarterly Progress Report

REPORT DATE	REPORTING PERIOD	PREPARED BY
July 2024	April-June 2024	Dan Wargo

BASELINE UPDATES

RCC Information

Recovery Center (s) Name	Address	Hours of Operation
TLC Recovery Programs Central Location	62 Pleasant St Claremont, NH 03743	Mon-Friday 8:00am-4:30pm
TLC Recovery Programs Satellite Location	24 Hanover St. Lebanon, NH 03766	Mon-Friday 8:00am-4:30pm
TLC Recovery Programs Satellite Location	John Stark Highway Newport, NH 03773	By appointment only

PRSS Expertise

Specified Field/Topic	Level of Expertise	Details/Notes
Harm Reduction	Expert in Field	TLC provides community Narcan, fentanyl test strips, and Xylazine test strips internally and through street outreach. We are partnered with the local needle exchange program and provide direct referrals. We partner with DHMC to provide bi-monthly Hep. C testing events at our Claremont and Lebanon TLC locations.
Criminal Justice	Expert in Field	TLC provides two recovery-based groups at Sullivan County DOC per week. We facilitate the Sullivan County DOC aftercare program and supervise the LADC, which facilitates it. We have two PRSS embedded in the Family Treatment Court. We have referral partnerships with Sullivan County DOC and Probation. We have memorandum of understandings (MOUs) in place for Collaborative Outpatient Services with Sullivan County DOC and Probation.
Hospital/ED Integration	Expert in Field	TLC has partnerships and MOUs with Valley Regional Hospital ED, DHMC ED, the HIV/HPV Program, and the Dartmouth Doorway. With the referrals received by these programs, TLC provides direct recovery support and/or resource navigation.
Crisis Intervention	Some Experience	TLC has developed partnerships with NH Tx Centers to provide quick, efficient admissions to treatment. Some TLC staff are trained in de-escalation and conflict resolution skills.
Parenting/Family Support	Expert in Field	TLC has programming specific to parenting and family support. It offers individual family support, parenting groups, and family counseling. TLC offers Parenting Journey in Recovery multiple times a year at the RCO.
Prevention	Some Experience	Parent and child therapy are offered at TLC. We have sexual health prevention courses conducted at the local middle school. We have staff trained to provide Adverse

		Childhood Experiences (ACE) screenings and proper referral processes upon their completion.
Recovery Friendly Workplace	<i>Some Experience</i>	TLC is a designated Recovery Friendly Workplace and has worked in the past under contract with Granite United Way to better connect employers to TLC services.
System Navigation	<i>Some Experience</i>	TLC is a designated resource navigator under the Health and Disparities Grant. All TLC staff are trained in using NH Easy. TLC has two Resource Navigation Specialist positions at both location sites.
Counseling	<i>Some Experience</i>	TLC has a Licensed Drug and Alcohol (LADC) counselor on site and another staff working towards their licensure. The LADC team provides clinical support groups and individual counseling for the Sullivan County DOC. TLC also has a clinical team that offers family and mental health therapy.

Capacity

Current # of Staff:	12
# of Staff w/CRSWs:	5
Current # of Volunteers:	3
# of Volunteers w/CRSWs:	0

Contract Deliverables Status Updates

Contract Deliverable	Status	Notes
Meets NH RCO Standards of Excellence (NHCOSOE) and/or CAPRSS Accredited.	In Progress	TLC is currently working with Harbor Care on preparing for the NH RCO Standards of Excellence review process.
Currently delivering Recovery Coaching services.	Yes	
Currently delivering Telephone Recovery Support services.	Yes	
Does the RCO have a Medicaid ID?	Yes	
Is the RCO enrolled with MCOs?	Yes	
Actively billing Medicaid for PRSS?	Yes	
Does the RCO have an active sustainability plan?	Yes	
Is supervision being provided to CRSWs on staff in compliance with the NH Licensing Board.	Yes	Dan Wargo, LADC Liz Morse, CRSW Both are approved to supervise by the OPLC
Engage with Regional Public Health Network.	Yes	
Engage with Regional Doorway.	Yes	
Coordinate with local Mental Health Peer Support Center(s).	Yes	

PROGRAM UPDATES

Service Delivery	- TLC offers programs such as the Collaborative Outpatient Services, Telephone Recovery Support, Parenting Journey in Recovery, Families in Recovery, Mapping our Recovery, and the Recovery Engagement Incentive Program. All programs have been going strong with consistent referrals and attendance. - TLC's staff facilitated groups and outside group partnerships and maintained consistent attendance. - TLC has multiple contracts and MOUs in place to support other organizations, communities, and programs with peer recovery support. They include Family Treatment Court, Sullivan County DOC, Probation and Parole, Valley Regional
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	Hospital, DHMC Doorway, Headrest, Hope for Freedom Recovery Homes, Wisdom Recovery Home, Sullivan House, the City of Claremont, Better Life Partners, and Groups/Recovery Together. TLC has multiple financial assistance programs to support people in early recovery who have not secured the financial needs to help them successfully improve their lives. The assistance programs are for people engaged in TLC services and include emergency-related funding, standard one-time financial assistance for qualifying applicants, workforce-related needs, and assistance with Straight Talk phone and minutes.
Quarter Highlights	- TLC's new location in Lebanon has been very successful. We are receiving consistent referrals, creating new partnerships with local organizations, hosting events, facilitating groups, and supporting multiple people with recovery support services. - TLC hosted the "Survivor Story" event. This event displays cinematic concept art to promote and educate the community on harm reduction strategies. The event consists of an animated short film and storyboards to generate dialogue and help raise awareness about social issues and factors that can lead to substance use disorders by attendees. Soon afterward, training on harm reduction strategies and administering Narcan is provided. - TLC hosted its first Hepatitis C testing event in May. The event was well attended, and multiple people were tested and referred for infectious disease treatment. - TLC has reopened its quarterly membership meetings with the community. At each meeting, attendees are offered the opportunity to provide feedback and suggest program enhancements and improvements.
Challenges	The needs in our communities continue to rise, and our reputation continues to increase referral and walk-in rates. As the recovery program expands and grows, finding long-term and sustaining funding for our multiple locations remains an ongoing concern.

White Horse Recovery

Quarterly Progress Report

REPORT DATE	REPORTING PERIOD	PREPARED BY
July 1st, 2024	April-June 2024	Vanessa Smith, Mitchell Henderson, Erika Sturgeon, Billy Burke, Eric Moran, Matt Plache

BASELINE UPDATES

RCC Information

Recovery Center (s) Name	Address	Hours of Operation
The Shed	70 RT 16B Center Ossipee NH 03814	Monday 12-5 Tuesday-Friday 9-5
Shed North	2977 White Mountain Highway, North Conway NH 03860	Monday 12-5 Tuesday-Friday 9-5
Shed at Serenity Center	45 Union Street, Littleton NH 03561	Monday-Friday 9-5
Shed at Berlin	38 Glen Ave. Berlin, NH 03570	Monday – Friday 9-5

PRSS Expertise

Specified Field/Topic	Level of Expertise	Details/Notes
Harm Reduction	Expert in Field	All Locations distribute both Narcan and Fentanyl testing strips, referrals to MAT providers, CRSW’s trained in Coaching a Harm Reduction pathway. N Conway recently began to provide Xylazine test strips and limited wound care supplies.

Criminal Justice	<i>Expert in Field</i>	Ossipee: Working with local probation, parole and Drug court for transportation to appointments and assisting with community service hours. Ossipee continues to work with Carrol County DOC Case Manager assisting in transportation to treatment as well as providing items from our thrift store as needed. Smart Recovery and Recovery Coaching continues in The Carroll County House of Corrections, two days a week and on an as needed basis. Littleton: Continues to work with Grafton County DOC Alternative sentencing programs including Drug Treatment Court, Mental Health Court and FIRRM. We also provide tasks for community service hours to be done. Berlin: We continue to Build our relationship with Local law enforcement to help break the stigmas on both sides of the fence. Coos county drug court came in to see the Center and we look forward to the relationship with them.
Hospital/ED Integration	<i>Expert in Field</i>	Have been responding 24/7 to Memorial Hospital in Conway and Huggins Hospital for a few years now. The program is doing well. N Conway: Have referral connection with Primary Care/Behavioral Health at Memorial Hospital. Facilitate SMART Recovery weekly at Memorial Hospital. Littleton: Have been coordinating with NHS Care Coordinators to assist with patients seeking SUD services. Littleton has been referring people to WMMH for mental health treatment.
Parenting/Family Support	<i>Expert in Field</i>	Ossipee: Shed Some Light Family Support continues the 2nd and 4th Monday of the month. Berlin: We have an ongoing relationship with The Family resource Center and that has been going well, they have Recovery meeting in the center every Wednesday. We have partnered with KYC in starting an APG for teens and plan to have CRSW's participate out of each center. This brings resources to parents and teens
Prevention	<i>Expert in Field</i>	Ossipee: Facilitates prevention Wednesdays at the local youth center. Littleton: Attend Alcohol Tobacco and Other Drugs, collaborating with other agencies to work towards youth prevention monthly.
Recovery Friendly Workplace	<i>Expert in Field</i>	All facilities are Recovery Friendly Workplaces. Littleton also participates in RFW advisory group for the area. Participates in outreach events with our local RFW liaison. North Conway: Maintains connections with Work Ready NH and NHES.

System Navigation	<i>Expert in Field</i>	Staff continues to build connections with community stakeholders to create streamlined process for referrals and utilize the Unite Us platform consistently. All staff are experts in navigating on NH Easy, treatment access and our local CAP agency's online programming.
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Capacity

Current # of Staff:	13
# of Staff w/CRSWs:	4
Current # of Volunteers:	11
# of Volunteers w/CRSWs:	0

Contract Deliverables Status Updates

Contract Deliverable	Status	Notes
Currently meeting CAPRSS standards as determined by achieving CAPRSS Accreditation or by FO/BDAS evaluation.	Yes	Ossipee/ Conway: CAPRSS 3-year accreditation, Needs Recertification for NHRC SOE
Currently delivering Recovery Coaching services.	Yes	Staff are trained in Recovery Coaching and Recovery Link
Currently delivering Telephone Recovery Support services.	Yes	Ossipee & N Conway have had no participation, Littleton continues to provide TRS weekly.
Does the RCO have a Medicaid ID?	Yes	All Centers
Is the RCO enrolled with MCOs?	Yes	All Centers
Actively billing Medicaid for PRSS?	Yes	All Centers
Does the RCO have an active sustainability plan?	Yes	All Centers
Is supervision being provided to CRSWs on staff in compliance with the NH Licensing Board.	Yes	Littleton: Angela Thomas Jones MLADC, LCMHC, LCS, Ossipee/Conway/Berlin: Eric Moran CRSW, Ossipee/Conway: Vanessa Smith CRSW Working with Blue Heron to start supervision in Ossipee, Conway and Berlin for billing purposes

Engage with Regional Public Health Network.	Yes	Littleton: Two staff members serve on the BOD for local PHN. Ossipee and N Conway: Staff attend regular meetings for Public Health Coalition (C3PH) networks in Carroll County and the Ossipee Round Table meeting every other week. We have been asked to assist in the planning of SIM mapping in both Carroll County and COOS County. Partnered with NCHC and Colebrook PD for a Reaching Rural Grant that could potentially be 1.4 million dollars.
Engage with Regional Doorway.	Yes	All Centers
Coordinate with local Mental Health Peer Support Center(s).	Yes	Littleton: A meeting with Cheryl from North Country Peer Support Center, and we will be collaborating with them to share resources. We also have connected with WMMH, we have a referral connection. N Conway: Have met with Peer Support Center in Conway to see how our services might connect with one another.

PROGRAM UPDATES

Service Delivery	- All locations continue to provide all aspects of PRSS to participants including recovery coaching, telephone recovery support, crisis intervention, system navigation and care coordination. - Littleton: - Has experienced an increase in volunteerism in recent weeks. Working with volunteers to support professional development and increase workforce capacity. - Graduated a Families in Recovery class in collaboration with the WARM for Women. - We have a food pantry open to all 7 days a week /Phone numbers provided to reach us on weekends. - We have a clothing corner where we recycle clothing donations and give to a local thrift shop that also allows our guests to come get things for free. - Artisans with a mission is doing "Arts, crafts, & journaling" for teens and pre-teens every week for 6 weeks. - Berlin: - The center now provides an Al-Anon meeting on Thursday evenings. - Extended AA meetings to Mondays and Fridays. - Ossipee: - Smart Recovery continues to be held in the CCHC, Monday and Thursday and Recovery Coaching as needed. Smart Recovery is also being offered on Thursday at The Shed and Friday in the clinical building. - We continue to work closely with the CCHC to provide transportation to rehab.
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Quarter Highlights	• Partnered with Kingswood Youth Center to start first APG group in Carroll County. • Created a comprehensive Welcome Packet with resources and information to give to guests upon arrival and to send with guests going to treatment. • Ossipee: ○ We have another staff member that passed the CRSW test and is certified. ○ The Shed Some Light Family Support Group continues the 2nd and 4th Monday of the month, two staff are trained to facilitate. ○ All staff in the Ossipee location have completed the needed introduction to mental health training needed to obtain or maintain our CRSW certification. ○ The community garden was planted shortly after Memorial Day and is thriving. We hope to have a large variety of veggies and herbs to offer those in need. ○ A staff member is currently working with an intern going to school for a degree related to addiction, she has been joining staff in the jail once a week for Smart Recovery. ○ The Rev for Recovery car show and fund raiser is scheduled for July 30th. Fliers were completed this week. • N Conway: ○ All staff members have completed all required education for CRSW. ○ One staff member has completed CRSW exam and is in process for the CRSW application. ○ Launched a 'Recovery Community Group' for people in all stages and pathways of recovery. New groups advertised in the Conway Daily Sun and Charity Chatter Newsletter. ○ Launched a new SMART Recovery meeting in the center and continued to offer SMART Recovery at Memorial Hospital. ○ Partnered with ReCylcled to get bicycles for two participants needing transportation. ○ One staff member is in conversation with NAMI about starting Co-Occurring Disorder peer support groups. ○ Built a visible Community Food Pantry in RCC lobby for participants. ○ Began planning and recruiting for Hope Is Real Event, raising awareness for Recovery, scheduled for September 14th in North Conway. • Littleton: ○ We have partnered with Awam Café and serve Free breakfast/coffee in the RCO Monday – Friday 8am-11am (all are welcome). ○ Presented an educational event on street drugs for students at Woodsville High School, in partnership with NCHC and NH Drug task Force. ○ We went and represented Whitehorse Recovery at the "Pedal It Purple" event to raise awareness for SUD and to raise money for the families that lost their home in a recent fire in Lincoln. Which was organized by The Bridge Project. ○ Worked with NCHC and Growth Partners to put on a Community Conversation. The topic was on burnout, and it was geared toward White Horse staff and how to deal with secondary trauma. ○ Our laundry/shower area is almost completed. ○ We have started to prepare for our "Hope Is Real" event in August, seeking partners, etc. • Berlin: ○ Center continues to grow; first Al-Anon meeting held at center. ○ Center Manager Billy Burke recognized for his work through a Community Member Award from The Family Resource Center. ○ The Family Resource Center also presented the manager of Berlin RCO, at their Re-Unification Ceremony, a Community Member Award.
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Challenges	• Ossipee: ○ As an organization we continue to struggle to find affordable housing for the guests we serve. Food access has also continued to be a struggle. Mental health services have also been harder to find. ○ Our peer support work (both group and one-on-one) at Carroll County House of Corrections is becoming more popular with inmates. All inmates on MAT are required to attend one of our two Smart Recovery group meetings (we hold one for men and one for women). Case management staff at the jail have asked us to add two additional group meetings each week. This work is highly successful and fulfills an important role of reaching individuals while they are incarcerated, helping to sustain successful recovery after release from incarceration, and fostering a significant reduction in recidivism. However, we are having challenges obtaining funding to support this work at the jail. It is not funded through the County budget, cannot be billed to Medicaid, and it takes CRSW staff out of the Ossipee RCO. • North Conway: Affordable housing and reliable year-round transportation seem to be the biggest challenges in this area. Previously, awareness of the N Conway center and attendance have been challenges, but we have started to see progress in this area. • Littleton: We are still struggling with affordable housing and transportation. We also don't have a lot of options for our outside residents and where they can tent without getting into trouble. Littleton PD has been patient with that, and we are all trying to find a proper solution. • Mental health issues are on the rise in all four of our centers, creating challenges in dealing with some guests.
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