



ROSC COUNCIL

Strategic Plan

Abstract

The Recovery Oriented System of Care's systematic process of envisioning a desired future, and translating this vision into broadly defined goals or objectives and a sequence of steps to achieve them.

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Recovery Oriented System of Care

Strategic Plan

Purpose

The purpose of establishing the strategic plan below is to provide individualized objectives. These objectives will provide a means for determining the success of the ROSC Council as well as guiding its members.

Strategic planning is an organizational management activity that is used to set priorities, focus energy and resources, strengthen operations, ensure that members and stakeholders are working towards a common goal, establishing agreement around intended outcomes and results, and assess and adjust the council's direction in response to a changing environment.

Mission, Vision, Values and Goals

ROSC Mission:

"Collaborating to build and empower communities of recovery"

ROSC Vision:

- People can and do recover.
- Individuals and families determine the supports and services they need.
- Services and supports are continuous and cohesive across different phases of care and are coordinated across the various agencies involved in their delivery.
- Support of recovery is a community responsibility and value.
- There is inherent flexibility in the system, so it can be responsive to different pathways to recovery.
- Measuring quality and outcomes is a system priority.

ROSC Values:

- Recognize the right of a person to direct their own recovery
- Recognizing that there are many models of, and paths to, recovery
- Operate with integrity and a sense of personal responsibility
- Include the "voice" of peers, family members, and the community in planning and decision-making

- Implement programs with competency and good stewardship
- Empower individuals and families
- Embrace cultural diversity

ROSC Goals:

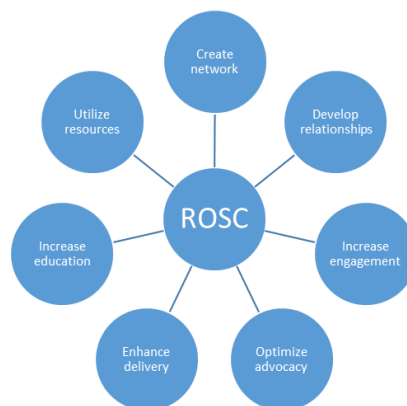
- Inform, educate and empower individuals and communities
- Determine existing services available as well as the needs to expand necessary services in the areas of prevention, treatment, peer recovery support and systems improvement
- Partnerships that are rich and diverse
- Increase in the number of people pursuing recovery, improving recovery capital to strengthen capacity to build and maintain lives in recovery and build recovery sustainability

SWOT



Strengths	Weaknesses
<ul style="list-style-type: none"> • Development of ROSC Council with diverse council members • Henry County Mental Health Alliance • Evaluation/intake services • Individual counseling • Outpatient group therapy • Intensive outpatient treatment • Adolescent services • Insight program • Relapse prevention services • Medication Assisted Treatment <ul style="list-style-type: none"> ▪ Suboxone ▪ Vivitrol ▪ Narcan Trained • AA • NA • Western Illinois Works, Inc. • Parks and recreational opportunities 	<ul style="list-style-type: none"> • Community gaps in services • No detoxification facility • No inpatient • No residential treatment facility • No peer ran sober living with various services offered in house • No certified peer specialists • Lacking other options of sober living • Lack of community awareness of services • Market concentration • Grants could be discontinued • Lack of community education involving substance use and mental health issues as well as recovery • Transportation system • Family support and education • Stigma • Lack of grief support groups • Limited number of providers

<ul style="list-style-type: none"> • Knox County Drug Court • Henry County Drug Court • Warren/Henderson County Drug Court • OSF Resource Link • OSF Navigation Link • Prairie State Legal Services • Crossroads • La Grace Hall of Hope • Oxford House • Supportive Community • 2-1-1 • Silvercloud App • Celebrate Recovery support groups • Mental Health First Aid • Faith based support • Older Adult Behavioral Health Unit • Collaboration with EMS and Police Department • 708 Boards (Knox, Warren & Henry) 	<ul style="list-style-type: none"> • Lack of sober activities • Lack of employment, housing and other resource opportunities • Homeless • Poverty
Opportunities	Threats
<ul style="list-style-type: none"> • Community involvement • Community education • Networking with community stakeholders • Initiatives • Building a culture that nurtures recovery • Building rich and diverse community partnerships and collaborations • Increase the number of individuals pursuing recovery • Advocate for needed services • Connecting communities • Making our communities healthier and stronger • Recognizing successful recovery stories • Treatment program for adolescents • Telehealth options • Faith based opportunities • More outpatient treatment options • Positive attitude towards our communities future • Future grants/funding • Increase in sober activities 	<ul style="list-style-type: none"> • Funding • Stigmas • Lack of consistent, ongoing collaboration • Rural demographics (recruitment challenges) • State of Illinois legislative changes • Lack of understanding of rural challenges for treatment • Apathy • Growing opioid epidemic • Absent parents/family



On-going Strategic Goal:

Goal A: Maintain local ROSC Council meetings

Objective 1: The ROSC Council will continue to meet monthly and increase member attendance.

Activity 1: ROSC Council meets monthly, every 3rd Thursday of the month on zoom.

Activity 2: Continue to update contact email list

Activity 3: Email blasts sent out monthly to remind members

Activity 4: Two weeks prior to meeting, send out an email invite

Activity 5: ROSC Council website will be kept up to date

Activity 6: West Central Illinois ROSC Facebook page to be updated regularly.

Goal A met. Zoom meetings have been successful.

Goal B: Apply for Rural Communities Opioid Response Program-Planning Grant

Objective 2: This grant will support treatment for and prevention of substance use disorder, including opioid use disorder, in rural counties at the highest risk for substance use disorder.

Activity 7: Due date January 15, 2019

Goal B met 2019. Applied for grant but did not receive funding.

Goal B met 2020. Re-applied and received funding. This is how we funded one of our peer support specialists hired in January 2021.

Goal C: Cheri Bustos to speak at ROSC Council

Objective 3: Cheri Bustos, local congress women, will inform educate and empower members of the ROSC Council.

Activity 8: Contacted office November 2018

Activity 9: Contacted office 1/7/2019

Goal not met in 2020 or 2021. We are re-evaluating this goal.

Goal D: Community Awareness and Education through media appearances.

Objective 4: Inform, educate and empower through local television show: Paula Sands Live, as well as local newspapers, local radio and social media.

Activity 9: Applied for TV segment on 12/12/2018, Spoke to producer on 12/28/2018, emailed producer 1/21/2019 about interviews and questions leading up to TV segment.

Activity 10: Begin radio spots once a month.

Activity 11: Contact local newspapers to be featured

Activity 12: Utilize social media platforms

Goal was partially met in 2021. We were not picked for a TV show. We did have several newspaper articles featuring the ROSC and the work we are doing. Our events were also announced on the radio.

Goal E: Hire peer support specialist

Objective 5: To provide peer support to persons who are in or recently experienced a mental health or substance use disorder. This is a critical role in the continuum of care for Behavioral Health Services.

Activity 13: Hire by January 2021

Goal E met and exceeded expectation 2021.

We were able to secure funding through our 708 mental health board and a HRSA grant to be able to hire 2 peer support specialists.

Goal F: Involvement of all schools in Henry, Henderson, Knox and Warren counties in a prevention program through Bridgeway.

Objective 6: Adolescence is the critical period to prevent substance use disorders. Implement this program in all schools for the 2019-2020 school year.

Activity 14: Speak with school administration and ROE to establish an ongoing relationship.

Activity 15: Develop a plan/program that will be sustainable

Goal F was not met in 2021 due to Covid-19 restrictions. In the past month we have been more active with the schools.

Goal G: Family support groups

Objective 7: Support groups for families of addicts can be helpful for anyone who has an addict in your life.

Activity 16: Develop support group

Activity 17: Recruit families with lived experience

Goal not met. This will be a goal for 2022 and will incorporate the peer support specialist to find the best candidate to run this support group.

Goal H: Develop list of transportation options for people in treatment and recovery

Objective 8: People who need substance use treatment may not get the help they need because they cannot get to the treatment facility or service providers. Rural communities are more geographically dispersed and have fewer public transportation options. A lack of treatment options nearby often means that people must travel great distances, often to neighboring counties, in order to access services.

Activity 18: Meet with local public transportation options

Activity 19: Develop list and distribute throughout communities

Goal not met: This goal was put on hold during Covid-19. An increase in participation in treatment services for substance use was accomplished though a virtual platform, overcoming a transportation barrier. We are hopeful that virtual platforms and telehealth will still be available for SU services.

We also created a buddy transportation system made up of people with lived experience to help get people to and from treatment. This is helping our community with the transportation barrier.

Goal I: Increase the amount of peer supported activities in all 4 counties.

Objective 9: Peer activities provide opportunities for peers to interact with each other in a fun, community-based setting that allows for social support and friendships to flourish.

Activity 20: Offer education opportunities presented by person's with lived experience in a centralized location.

Activity 21: Develop peer run activity schedule

Goal met. We have had several successful events this year. (Yoga Seminar, IOAD Candle Light Vigil, Recovery Walk, etc.) We also hold a Mediation Monday group and peer support groups led by our peer support specialists.

Goal J: Develop data and quality management system

Objective 10: Individually, organizations and council/consortium members collect their own data and within various systems that do not have the capability to communicate. Providers work to measure progress independently based on the service they alone provide. Outcome data is shared sporadically and only for specific identified needs. Providers do produce data, which is available for review but do not collectively utilize or share data to assist with managing progress or to implement necessary changes. This development will allow for the sharing of information and assist with future planning.

Activity 23: Develop a collaborative data system for input, tracking and reporting in order to manage data and quality measurements.

Activity 24: Participation from council members to develop a data and quality management system.

Activity 25: The council members will determine data metrics and quality measurements.

Activity 26: As a true collaboration, collectively input data across programs to see outcomes and assist with further needs assessments and strategic planning.

Update: Change to 5 year goal

Goal K: Open Methadone Clinic

Objective 11: When people become addicted to heroin, they crave the drug so strongly that, even when they know what consequences they face as a result of their heroin use, they are unable to stay away from the drug. This makes relapse to heroin use incredibly likely after detox. Often, those struggling with heroin addiction experience multiple episodes of relapse on their road to recovery. In some instances, methadone can help these people to avoid relapse.

Activity 27: Complete needs assessment.

Activity 28: Determine program development.

Activity 29: Complete cost analysis.

Activity 30: Determine necessary licensure, certification and regulations.

Update: Change to 5 year goal

Goal L: Open a Recovery Community Center

Objective 12: A Recovery Community Center (RCC) is a resource for skill-building education, information, support and socialization for those in recovery and their loved ones. It makes real the belief that recovery from addictive disorders is possible. The basis for available services and programming through an RCC are Peer Based Recovery Support Services (P-BRSS)

Activity 31: Apply for funding

Activity 32: Establish residency of the RCC

Activity 33: Recruit volunteers to run center activities

Activity 34: Develop schedule

Update: Change to 5 year goal.

Strategic Plan 2020

On-going Strategic Goal:

Goal A: Maintain local ROSC Council meetings

Objective 1: The ROSC Council will continue to meet monthly and increase member attendance.

Activity 1: ROSC Council meets monthly, every 3rd Thursday of the month in the Bridgeway Boardroom, 2323 Windish Drive, Galesburg, Illinois.

Activity 2: Continue to update contact email list

Activity 3: Email blasts sent out monthly to remind members through Constant Contact

Activity 4: Two weeks prior to meeting, send out an email invite

Activity 5: ROSC Council website will be kept up to date

Activity 6: West Central Illinois ROSC Facebook page to be updated regularly

Goal B: Cheri Bustos to speak at ROSC Council

Objective 2: Cheri Bustos, local congress women, will inform educate and empower members of the ROSC Council.

Activity 7: Continue to contact office

6 month

Goal C: Hire peer support specialist

Objective 3: To provide peer support to persons who are in or recently experienced a mental health or substance use disorder. This is a critical role in the continuum of care for Behavioral Health Services.

Activity 8: Applying for funding for this position in the 2020, 708 Knox County Mental Health Board grant cycle.

Goal D: Involvement of all schools in Henry, Henderson, Knox and Warren counties in a prevention program through Bridgeway.

Objective 4: Adolescence is the critical period to prevent substance use disorders. Implement this program in all schools for the 2019-2020 school year.

Activity 9: Speak with school administration and ROE to establish an ongoing relationship.

Activity 10: Develop a plan/program that will be sustainable

Activity 11: Applied for tMHFA pilot program and was accepted. 4 trainers were sent away for training. We taught 2 out of the 75 high schools that were chosen for this pilot program in the United States. We trained over 400 students on teen Mental Health First Aid. This pilot program is ending in June 2020 and is being opened to all high schools across the United States. We will continue to expand this educational opportunity to other schools in Knox, Warren, Henderson and Henry Counties.

Goal E: Family support groups

Objective 5: Support groups for families of addicts can be helpful for anyone who has an addict in your life.

Activity 12: Develop support group

Activity 13: Recruit families with lived experience

Activity 14: Incorporate the peer support specialist to find the best candidate to run this support group.

Goal F: Develop list of transportation options for people in treatment and recovery

Objective 6 : People who need substance use treatment may not get the help they need because they cannot get to the treatment facility or service providers. Rural communities are more geographically dispersed and have fewer public transportation options. A lack of treatment options nearby often means that people must travel great distances, often to neighboring counties, in order to access services.

Activity 15: Meet with local public transportation options

Activity 16: Develop list and distribute throughout communities

Activity 17: Meet with Knox County after new transportation system is established, will meet to finish transportation list project: Goal to have list to be distributed by August 2020

Goal G: Increase the amount of peer supported activities in all 4 counties.

Objective 7: Peer activities provide opportunities for peers to interact with each other in a fun, community-based setting that allows for social support and friendships to flourish.

Activity 18: Offer educational opportunities present by person's with lived experience in a centralized location. This goal will be met with the hire of a peer support specialist.

Activity 19: Develop Teen ROSC

5 Year

Goal H: Develop data and quality management system

Objective 8: Individually, organizations and council/consortium members collect their own data and within various systems that do not have the capability to communicate. Providers work to measure progress independently based on the service they alone provide. Outcome data is shared sporadically and only for specific identified needs. Providers do produce data, which is available for review but do not collectively utilize or share data to assist with managing progress or to implement necessary changes. This development will allow for the sharing of information and assist with future planning.

Activity 20: Develop a collaborative data system for input, tracking and reporting in order to manage data and quality measurements.

Activity 21: Participation from council members to develop a data and quality management system.

Activity 22: The council members will determine data metrics and quality measurements.

Activity 23: As a true collaboration, collectively input data across programs to see outcomes and assist with further needs assessments and strategic planning.

Goal I: Open Methadone Clinic

Objective 9: When people become addicted to heroin, they crave the drug so strongly that, even when they know what consequences they face as a result of their heroin use, they are unable to stay away from the drug. This makes relapse to heroin use incredibly likely after detox. Often, those struggling with heroin addiction experience multiple episodes of relapse on

their road to recovery. In some instances, methadone can help these people to avoid relapse.

Activity 24: Complete needs assessment.

Activity 25: Determine program development.

Activity 26: Complete cost analysis.

Activity 27: Determine necessary licensure, certification and regulations.

Goal K: Open a Recovery Community Center

Objective 10: A Recovery Community Center (RCC) is a resource for skill-building education, information, support and socialization for those in recovery and their loved ones. It makes real the belief that recovery from addictive disorders is possible. The basis for available services and programming through an RCC are Peer Based Recovery Support Services (P-BRSS)

Activity 28: Apply for funding

Activity 29: Establish residency of the RCC

Activity 30: Recruit volunteers to run center activities

Activity 31: Develop schedule