



MISSION STATEMENT

Bringing
Community
together to build
a recovery
support system
to improve
health, wellness
and quality of
life, through
education,
stigma
reduction, and
access to
resources.

January 2023

SWOT Analysis

Strengths <ul style="list-style-type: none">• Medical professionals at the table• Opioid Coalition• Willingness to participate• Referral network• County government• Dr. Austman- Addictionologist• Strong cross sectors from community wealth of knowledge• Multiple recovery supports (CR, SMART)• Legal representation• Stakeholders with lived experience	Weaknesses <ul style="list-style-type: none">• Marketing of Recovery- ROSC• Lack of awareness• Lack of stakeholder training/education• Lack of NA opportunities• Lack of transportation options• Lack of Broadband/ infrastructure• Lack of support for family members of people with SUD (Alanon and other supports)• Lack of recovery housing- no recovery housing• Distance to a detox facility• Lack of employment for folks in recovery• Lack of activities for people in recovery
Opportunities <ul style="list-style-type: none">• Standard for recovery friendly workplaces• Build transportation options• Broadband expansion• Building recovery capital with in the community• Identify additional community stakeholders to participate• Identify People with lived experience to serve on ROSC• Create activities in the community that supports Recovery• Explore ways to embed peer supports• Increase additional education around SUD/ MH• Continue to build connection between various recovery supports• Recovery Corps embedded locally• Reduce barriers within community	Threats <ul style="list-style-type: none">• STIGMA• Lack of community readiness• Red tape• General barriers, access etc.• Infrastructure• Understanding of roles• COVID- disruption of meetings/ events/etc.• Current lack of sustainability plan

The Ford County ROSC Strategic Plan was developed with community collaboration, data from our Needs Assessment conducted in the fall of 2022, as well as individual and small group discussions. Throughout our planning, the focus has remained on actionable items with the probability for the most impact.

Strategic Planning

GOAL 1: Develop Recovery Support

Objective A: Assess expansion of recovery group options.

Strategy 1: Support the expansion of Recovery group offerings (Ex. Such as NA, etc.)

Strategy 2: Expand current meetings- With a goal to have meetings available to community members every day of the week using varied locations.

Strategy 3: Empower more people to become facilitators of groups through encouragement, training options and funding.

Strategy 4: Identify other types of recovery support (ex. Online, Music and art for people in recovery)

Outcome Measures:

- *Were recovery group offerings expanded?*
- *Did we expand current meeting selection within the County to at least five days per week?*
- *Did we grow the number of recovery facilitators across expanded programs?*
- *Were other types of Recovery Support identified and established within the County?*

Objective B: Expand substance free recreational activities.

Strategy 1: Identify opportunities to provide substance free activities (IE sports league, camping, nature walks, survival classes.)

Outcome Measures:

- *Did we identify two or more substance free activities within Ford County?*

Objective C: Support for families affected by SUD.

Strategy 1: Identify and promote existing supports for families affected by SUD.

Strategy 2: Support the expansion of resources for families affected by SUD.

Outcome Measures:

- *Did we identify and promote supports for families?*

Objective D: Advocate for People with Lived Experience (PLE) to take leadership roles.

Strategy 1: Recruit PLE- to engage with ROSC council

Strategy 2: Encourage CRSS/CPRS certification for PLE.

Strategy 3: Explore advocacy trainings for PLE.

Strategy 4: Explore and advocate for employment opportunities for those with CRSS/CPRS.

Outcome Measures:

- *Did we recruit PLE for ROSC council?*
- *Did we provide one or more advocacy training opportunities for PLE?*
- *Did we provide one or more CRSS/CPRS employment opportunities?*

GOAL 2: Increase Access to Services and Resources for the recovery community.

Objective A: Explore strategies to address transportation barriers.

Strategy 1: Understand current offerings of existing transportation services.

Strategy 2: Research volunteer-based supports.

Strategy 3: Identify community members/organizations to provide sustainable transportation within the SUD/MH community.

Outcome Measures:

- *Did existing services expand or initiate expansion?*
- *Did we research volunteer-based supports?*

Objective B: Explore options for recovery housing.

Strategy 1: Research ways to bring recovery housing to rural areas (*recovery supports, location, staffing*).

Strategy 2: Invite recovery-housing experts to share their knowledge.

Outcome Measures:

- *Did we identify ways to support recovery housing in a rural area?*
- *Did we learn from recovery-housing experts?*

Objective C: Link community members with new and existing resources.

Strategy 1: Promote 211 Resource Directory.

Strategy 2: Advertise/Market all new and existing resources and services for those with SUD/MH. Focus on social and local media.

Strategy 3: Continue to network with Council, Community, and Persons with Lived Experience to bring greater awareness to SUD supports.

Outcome Measures:

- *Did we promote an updated Resource Directory?*
- *Did council members communicate growth in existing services that are offered?*

GOAL 3: Inform and Engage the Community to Increase Awareness and Reduce Stigma around Substance Use Disorder (SUD).

Objective A: Provide SUD education opportunities for the community.

Strategy 1: Offer trainings to community members.

Strategy 2: Host and/or Co-host a minimum of 2 Stigma Reduction community activities in the next year.

Strategy 3: Identify, support, and promote current SUD education initiatives.

Strategy 4: Post testimonials of people with lived experience (PLE) on social media.

Outcome Measures:

- *How many trainings were offered around SUD education?*
- *Did we host/co-host a minimum of 2 stigma reduction activities?*

- *Did our efforts create/increase an awareness of Substance Use Disorder in the community?*
- *Were testimonials posted social media?*

Objective B: Develop and Promote public awareness campaign.

Strategy 1: Create a subcommittee to focus on campaign goals.

Strategy 2: Develop campaign narrative.

Strategy 3: Collect informative data and tools that will be used to build the campaign narrative.

Strategy 4: Identify distribution sources that are popular and credible with the target audience.

Strategy 5: Utilize social media platforms and local media sources.

Outcome Measures:

- *Was a campaign subcommittee formed?*
- *Did we collect all data and tools needed to develop campaign?*
- *Did we develop a public awareness campaign?*
- *Did we utilize media resources? How many and what resources did we use?*

Objective C: Increase education to reduce stigma around the later part of the SUD continuum of care.

Strategy 1: Educate, through data, to increase an understanding of Medication Assisted Recovery (MAR) [to community and council members].

Strategy 2: Raise awareness of existing harm reduction services in the community.

Strategy 3: Invite advocates of Harm Reduction to speak in the community and at ROSC Council meetings.

Strategy 4: Continue to support existing NARCAN® trainings.

Outcome Measures:

- *Did we provide data to increase an understanding of MAR?*
- *Did our efforts bring awareness to existing services in the community?*
- *Did we invite an advocate for harm reduction to speak at a ROSC Council meeting/in the community?*
- *Did we continue to support NARCAN® trainings?*