

Pennsylvania's Recovery Rising

PHASE 2 REPORT

December 2022



Introduction

In January 2021, the Pennsylvania Department of Drug and Alcohol Programs (DDAP) launched an initiative called **Recovery Rising** to foster a resilient, diverse, and accessible recovery environment in Pennsylvania to support

- multiple pathways to improved health and personal wellness;
- diversity, equity, and inclusion;
- community acceptance; and
- personal autonomy and empowerment.

Recovery Rising provides an opportunity to exchange differing viewpoints and experiences to deepen awareness of the full range of recovery services for OUD. The initiative also builds momentum toward a shared vision to make these options available to all. *Recovery Rising* is guided by an Advisory Commission of 24 influencers spanning peer, clinical, policy, family, and community roles.

During *Phase 1 of Recovery Rising*, DDAP received input from over 180 recovery stakeholders via regional and statewide meetings, as well as through 1:1 conversations. C4 organized the information into eight broad categories. The three bold categories below were prioritized for action in July 2021 by the 24-member *Recovery Rising* Advisory Commission (RRAC).

1. **Create Equitable, Sustainable, and Flexible Funding for Recovery Supports**
2. Build the Capacity and Expand the Role of Recovery Community Organizations (RCOs)
3. **Commit to Ensure Diversity, Equity, and Inclusion**
4. Make Person-centered and Recovery-oriented Care the Norm
5. Provide the Critical Recovery Support Services Needed in Pennsylvania
6. Improve Access in Rural Areas
7. Provide Education and Training to Reduce Stigma and Equip People to Support All Pathways to Recovery
8. **Build the State-level Infrastructure to Support Recovery**

Partners for this project include DDAP, SAMHSA's Opioid Response Network (ORN), and C4 Innovations (C4).

About DDAP

DDAP was formerly under the Pennsylvania (PA) Department of Health and became a separate department in 2012. This change reflects a strong commitment by the Commonwealth to provide education, intervention, and treatment programs to reduce drug and alcohol misuse and dependency for all Pennsylvanians. In 2021, DDAP launched *Recovery Rising*. Learn more at <https://www.ddap.pa.gov/Pages/RecoveryRising.aspx>.

About the Opioid Response Network (ORN)

SAMHSA established the ORN to help address the opioid misuse public health crisis. ORN aids individuals, organizations, and states by providing local resources and technical assistance to address OUD and stimulant use. Learn more at www.OpioidResponseNetwork.org.

About C4 Innovations

C4 Innovations (C4) advances recovery, wellness, and housing stability for people who are systematically underrepresented. C4 is committed to reducing disparities and achieving equitable and lasting outcomes. To do this, C4 partners with service organizations, communities, states, and systems to develop and implement research-based solutions that are equitable, person-centered, recovery-oriented, and trauma-informed. Learn more at <https://c4innovates.com/>.

Advisory Commission Members

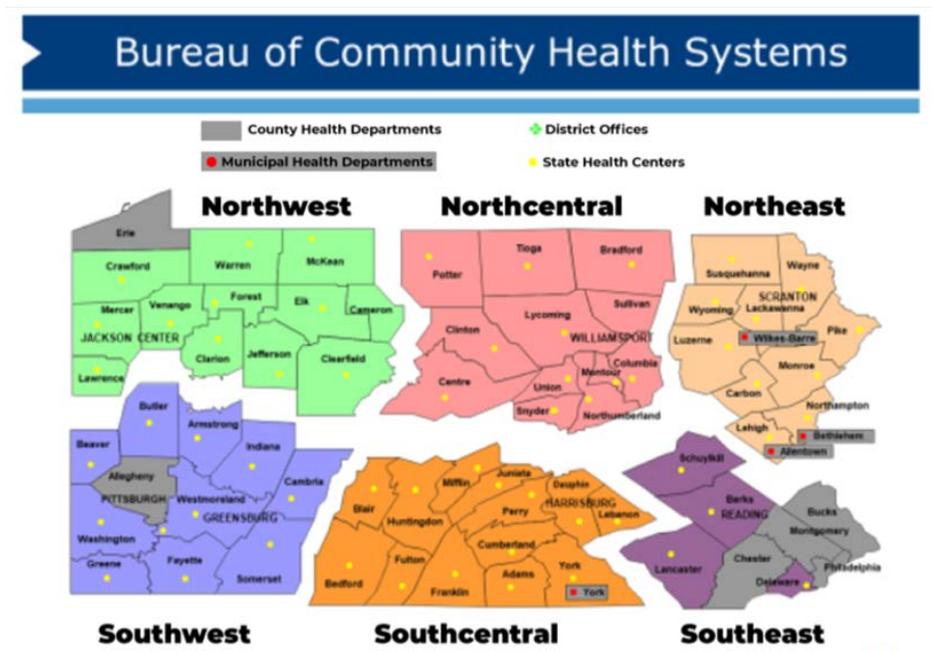
H. Harrington “Bo” Cleveland	Penn State University
Rosa Davis	Pennsylvania Organization for Women in Early Recovery (POWER)
Jamie Drake	Carbon-Monroe-Pike Drug and Alcohol Commission
Gloria Gallagher	PA Department of Drug and Alcohol Programs
Denise Holden	The RASE Project
Robin Horston Spencer	Person in Long-term Recovery
Commissioner Donna Iannone	Sullivan County
Bobbie Johnson	Parent
Laurie Johnson-Wade	Lost Dreams Awakening
Jennifer King	Pennsylvania Recovery Organization—Achieving Community Together (PRO-ACT)
David Kelley	PA Office of Medical Assistance Programs
Dale Klatzker	Gaudenzia
David Loveland	Community Care Behavioral Health
Michael Lynch	University of Pittsburgh School of Medicine & Pittsburgh Poison Center
Nancy Marcus Newman	Bridge Foundation
Kathleen Mastendrea	Narcotics Anonymous (NA)
Patty McCarthy	Faces and Voices of Recovery
John Petruzzelli	Kolbe Academy
Jason Snyder	Rehabilitation and Community Providers Association (RCPA)
Bill Stauffer	Pennsylvania Recovery Organizations Alliance (PRO-A)
Fred Way	Pennsylvania Alliance of Recovery Residences (PARR)
Mel Wells	One Day At A Time (ODAAT)
Laurie Wicks	Parent
Jennifer Zampogna	Lawyers for Lawyers

Phase 2 Launch

C4 and DDAP came together in fall 2021 to begin *Recovery Rising* Phase 2 and conducted preliminary work towards the top three priorities, prior to re-convening the RRAC.

To take next steps towards **building the state-level infrastructure to support recovery (#8 above)**, DDAP worked internally to finalize job classifications and prepare draft job descriptions for two new recovery-focused roles, which were then shared with the RRAC for feedback. As part of that process, C4 invited Sarah Saint Laurent, Senior Public Health Promotion Specialist with the Rhode Island Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals, to talk with DDAP about her role providing oversight to recovery services and supports at the state level in Rhode Island. Ms. Saint Laurent described her day-to-day responsibilities and shared training documents she found helpful when she started in her role, to be shared with the new hires in Pennsylvania. DDAP also committed to adding a new Recovery Section to the department.

To support the **creation of equitable, sustainable, and flexible funding for recovery supports (#1 above)** the team considered how best to define smaller geographic regions within Pennsylvania, with an eye on allocating funds for recovery supports to each region based on assessed and anticipated needs and current capacity. The team considered population factors and mapped more than 300 recovery service providers, including recovery residences, community centers, and RCOs. Ultimately, the team decided to use the current [Bureau of Community Health](#) regional boundaries, which included nine regions – six based on cardinal directions plus the three metropolitan areas of Philadelphia, Pittsburgh, and Erie.



Building on the strong commitment from RRAC from Phase 1 to “*Acknowledge and address the existence of past and current policies and norms that have explicitly enacted, enabled, or implicitly allowed anti-Black racism, including but not limited to systemic, institutional, programmatic, and individual anti-Black racism,*” the team met to discuss establishing nine regional Equity Coalitions as well as a Racial Equity Advisory Commission Workgroup. At the request of the RRAC, the team met with members to build knowledge that will support members to contribute concretely to reducing anti-Black racism. Lastly, the team met to start discussions on how DDAP as a whole would **support the longer-term goal of increasing equity, diversity, and inclusion in recovery service delivery (#3 above)**. C4 created a graphic to illustrate the goals and demonstrate the overlap and connections among these parties (see below).

Summary of Workgroup Activities and Accomplishments

Workgroup 1: Building Regional Recovery Community Organizations (RCOs)

Building on feedback from Phase 1, DDAP is committing resources to support nine Regional Recovery Hubs throughout Pennsylvania. Throughout Phase 1, *Recovery Rising* received feedback on the unique needs of various regions of Pennsylvania. As noted earlier, nine regions were identified using the [Bureau of Community Health Systems map](#) as a foundation and overlaying information about peer-led recovery support providers (RCOs, community-based organizations (CBOs), and recovery residences). These future Hubs will assess and support the recovery needs of their region. DDAP is preparing a funding opportunity to be awarded via a competitive application process that includes additional consideration for entities that are Black, Indigenous, and People of Color (BIPOC)-led or serve the BIPOC community. The notification of the competitive application opportunity is expected early 2023. This deliverable is reflected in the process graphic below, which describes the dialogue steps that led to this outcome.

Dialogue Process to Develop Vision for Sustained Recovery Across Pennsylvania



Dialogue: "... a conversation in which people who have different beliefs and perspectives seek to develop mutual understanding."¹

Facilitated dialogue is at the heart of C4 Innovations transformation efforts with teams. To guide our facilitated dialogues, we use an approach that blends elements from Appreciative Inquiry, Deliberate Framing, Collective Impact, The Table Group, and Theory of Aligned Contributions. Our goal is to generate a productive dialogue that builds shared understanding and promotes learning, rather than debates positions, to arrive at a solution to the identified challenge.

<p>Define <i>Create equitable, sustainable, and flexible funding for recovery supports.</i></p> <p>Goals</p> <p>Support nine regional Recovery Community Organizations (RCOs)</p> <p>Develop an RCO Workgroup of the RRAC to solicit information about the regions' needs</p> <p>Share the opportunity with recovery and other community-based organizations ensuring the inclusion of BIPOC-led and supporting organizations</p>	<p>Discover <i>Learn about perspectives, values, concerns, priorities, and resources.</i></p> <p>At each RRAC RCO Workgroup meeting, facilitated dialogues and communication agreements will guide a process that:</p> <ul style="list-style-type: none"> ⇒ Supports and provides space for reflecting, listening, learning, and asking questions ⇒ Encourages genuine inquiry ⇒ Engages stakeholders to speak from the full range of their experiences ⇒ Provides a safe space for sharing lived experience ⇒ Explores and captures ideas for collaboration that ensure equitable representation of all community-based organizations 	<p>Dream <i>Begin to envision how regional RCOs can benefit people in recovery in all regions of Pennsylvania.</i></p> <p>Workgroup will meet up to 4 times between March – June 2022 to:</p> <ul style="list-style-type: none"> ⇒ Learn about how Regional RCOs in Pennsylvania could help fill regional needs related to recovery and recovery support services ⇒ Gather suggestions from the RRAC RCO Workgroup on subject themes and areas of interest from the recovery community that reflects the needs of communities to be served 	<p>Design <i>Workgroup will participate in a facilitated consensus-building process to:</i></p> <ul style="list-style-type: none"> ⇒ Give feedback to assist DDAP to finalize each region ⇒ Give feedback on regional needs to assist DDAP in identifying core services or functions a RCO would need to fulfill <p>Deliver <i>DDAP will deliver a funding opportunity with a defined reviewing and scoring process that meets regional needs and gives additional consideration to BIPOC serving organizations.</i></p>
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¹ *Fostering Dialogue Across Divides: A Nuts and Bolts Guide*. Essential Partners, 2017

The members of the RRAC Regional RCO Workgroup included:

- Jamie Drake, Carbon-Monroe-Pike Drug and Alcohol Commission
- Gloria Gallagher, DDAP
- Denise Holden, The RASE Project
- Robin Horston Spencer, Person in Long-term Recovery
- Laurie Johnson-Wade, Lost Dreams Awakening
- Jennifer King, Pennsylvania Recovery Organization – Achieving Community Together (PRO-ACT)

- David Loveland, Community Care Behavioral Health
- Michael Lynch, University of Pittsburgh School of Medicine & Pittsburgh Poison Center
- Kathleen Mastendrea, Narcotics Anonymous (NA)
- Patty McCarthy, Faces and Voices of Recovery
- Nancy Marcus Newman, The Bridge Foundation
- Bill Stauffer, Pennsylvania Recovery Organizations Alliance (PRO-A)
- Laurie Wicks, Parent
- Jennifer Zapogna, Lawyers for Lawyers

This RRAC Workgroup met three times between April and June 2022 and offered feedback on:

- Identifying regional needs related to recovery support services,
- Identifying the core functions and services a regional Hub would deliver, and
- How to share this opportunity with BIPOC-led RCOs and CBO networks once it has been finalized.

Results of Sessions

The Workgroup explored different ways to name these new regional entities and decided on “Regional Recovery Hubs.” From there, the Workgroup focused their discussions on clarifying the role of the Hubs. DDAP noted the requirement to keep recommendations focused on needs and avoid conversation specific to content of the upcoming competitive grant opportunity.

It was agreed that the Hubs should not take work away from established recovery support providers, but rather focus on activities such as conducting needs assessments in their regions, identifying gaps, collaborating with recovery providers on solutions, and offering general oversight pertaining to recovery needs and services. The Hubs will also be expected to collaborate with the equity coalitions to align efforts to facilitate equitable access to recovery support services. The Hubs will also be responsible for developing capacity and relationships to ensure that recovery support services are widely available and accessible. DDAP noted that funding needed to fill identified gaps and to sustain existing recovery services would come from additional sources and not be part of the RFP that establishes the Hubs.

Some themes and questions that arose from the Workgroup’s discussions included:

- Recovery support services under the regional model should be available to all regardless of geographic boundaries.
- How will Hubs serve people who exit the ‘region’ to get their recovery services and supports, because they live on the boundary of this region?
- Regional Recovery Hubs can be organizations that also provide recovery support services but do not have to be.
- Recovery support providers know best concerning their local community.
- Focus on people entering recovery as well as people in long-term recovery.
- If possible, treatment facilities should be excluded from applying to be a Regional Recovery Hub.
- How do we ensure that this effort does not result in “clinicalizing recovery?”
- The Workgroup strongly recommended that only RCOs be able to apply. DDAP clarified that due to resource and geographic constraints, the department would pursue a broader applicant pool but prioritize recovery community organizations as part of the review process.

DDAP staff met with representatives in Indiana where a similar regional recovery model is used and will incorporate insights from those conversations into the final RFP.

Below are summary slides showing the projected primary responsibilities for the Hubs as well as some projected restrictions for the Hubs.

Regional Recovery Hubs - Responsibilities



- Conduct recovery needs assessment of the region.
- Identify all recovery support services that currently exist within the region.
- Identify regional gaps that exist in the provision of recovery support services.
- Collaborate with the existing recovery organizations in the region to build and ensure sufficient capacity that meets needs.
- Garner relationships necessary to harness and advertise all the recovery support services available.
- Provide technical assistance to recovery organizations that have grant writing needs.
- Develop partnerships within the region that ensure options are available to address varying pathways to recovery.
- Provide for collaborative discussions with various payor groups on funding for recovery support services.
- Work to develop a model of "what services are offered and can be monitored" to sell to the various funders to engage in funding opportunities.

What will NOT be done by Regional Recovery hubs?



- Oversight of the recovery organizations within the region. Recovery providers will operate autonomously.
- Act as a pass through of funds to the various recovery organizations.

The agreed next steps when the Regional RCO Workgroup concluded were:

- Identify additional core functions to be led by the Regional Hubs.
- Share the work done by this Workgroup with the full RRAC for any additional feedback.
- Share this opportunity with organizations once it has been finalized.

Workgroup 2: Supporting Diversity, Equity, and Inclusion in Recovery Support Services

During *Recovery Rising* Phase 1, a subcommittee was formed that met three times to draft language that strengthened the project's commitment to addressing anti-Black racism. In June 2021, the RRAC voted to adopt the following commitments:

- Identify and eliminate barriers to sustainable recovery from substance use disorders.
- Acknowledge and address the existence of past and current policies and norms that have explicitly enacted, enabled, or implicitly allowed anti-Black racism, including but not limited to systemic, institutional, programmatic, and individual anti-Black racism.

A RRAC Racial Equity Workgroup was formed to generate ideas to operationalize DDAP’s and the RRAC’s commitment to address anti-Black racism specifically, to:

- Increase knowledge that will support members to contribute concretely to reducing anti-Black racism, such as:
 - provide definitions for terms, concepts, phenomena, and theories associated with racial equity work
 - provide spaces that prioritize and seek out lived experience
 - conduct needs assessments
 - conduct organizational assessments to engage in racial equity work
- Take part in a “Possibility Audit” to assess opportunities to increase equity
- Review DDAP funding protocols and policies to create recommendations to develop more inclusive review criteria
- Conduct racial equity audits to enhance understanding of how BIPOC stakeholders perceive their public-facing virtual presence.

A summary of the RRAC Workgroup and dialogue process is below:

Dialogue Process to Develop Vision for Sustained Recovery Across Pennsylvania



Dialogue: “ . . . a conversation in which people who have different beliefs and perspectives seek to develop mutual understanding.”¹

Facilitated dialogue is at the heart of C4 Innovations transformation efforts with teams. To guide our facilitated dialogues, we use an approach that blends elements from Appreciative Inquiry, Deliberate Framing, Collective Impact, The Table Group, and the Equitable Results Framework. Our goal is to generate a productive dialogue that builds shared understanding and promotes learning, rather than debates positions, to arrive at a solution to the identified challenge.

Define	Discover	Dream	Design
<p>Commit to Ensure Diversity, Equity, and Inclusion</p> <p>Goals Operationalize the following Recovery Rising Phase 1 goal: <i>Acknowledge and address the existence of past and current policies and norms that have explicitly enacted, enabled, or implicitly allowed anti-Black racism, including but not limited to systemic, institutional, programmatic, and individual anti-Black racism</i></p> <p>Establish the Recovery Rising Advisory Commission (RRAC) Racial Equity Workgroup to 1) Support recovery leaders to reduce anti-Black racism, and 2) support and champion the work of the Equity Coalitions</p> <p>Establish and train the Equity Coalitions Workgroup (comprising 2 people from each region)</p> <p>Establish nine regional Equity Coalitions to identify and address inequities that prevent equitable access to recovery support services</p>	<p>Learn about perspectives, values, concerns, priorities, and resources.</p> <p>The RRAC Racial Equity Workgroup will support recovery leaders to contribute concretely to reducing systemic, institutionalized, programmatic, and individual level anti-Black racism. Responsibilities include:</p> <ul style="list-style-type: none"> ⇒ Take part in a “Possibility Audit” to assess opportunities to increase equity in concrete ways ⇒ Develop a shared vision to support concrete change ⇒ Review DDAP funding protocols and policies to create recommendations to develop more inclusive review criteria and policies that directly address racism and intersectional forms of oppression ⇒ Increase knowledge to conduct racial equity audits to support recovery stakeholders in understanding how BIPOC stakeholders perceive their public-facing virtual presence ⇒ Define how best to support and champion the work carried out by Equity Coalitions 	<p>Equity Coalitions will participate in trainings to lead their regions to reduce inequities preventing access to recovery support services</p> <p>The Equity Coalitions will be led by people trained in the Equitable Results Framework (designed to achieve better outcomes for all while addressing factors that contribute to racial inequities and block access to opportunity)</p> <ul style="list-style-type: none"> ⇒ Leaders of the Equity Coalitions will be invited to take part in the Equity Coalitions Workgroup. Up to nine Equity Coalitions is envisioned, and up to 25 members in the Equity Coalitions Workgroup total (2 members from each region plus facilitators) ⇒ All members of the Equity Coalitions Workgroup will be trained in the Equitable Results Framework to lead work in their regions ⇒ The Equity Coalitions Workgroup will support all members to see themselves as a critical role in change, provide peer-to-peer support, develop a shared vision to support concrete change collectively, brainstorm strategies to overcome challenges, share lessons learned, and share strategies with the DDAP that can inform racial equity systems transformation initiatives 	<p>Support Equity Coalitions to develop Performance Measures as it relates to equitable access to recovery support services in all regions in Pennsylvania.</p> <ul style="list-style-type: none"> ⇒ Define metrics to measure progress and results ⇒ Feature specific, measurable, achievable, results-focused, timebound and equity-centered goals Performance Measures will answer the following questions: <ul style="list-style-type: none"> ⇒ Who’s better off? ⇒ How much did we do? ⇒ What difference did we make? ⇒ How well did we do it?

¹ *Fostering Dialogue Across Divides: A Nuts and Bolts Guide*. Essential Partners, 2017

The members of the RRAC Race Equity Workgroup included:

- Hobart “Bo” Cleveland, Penn State University
- Rosa Davis, Pennsylvania Organization for Women in Early Recovery (POWER)
- Robin Horston Spencer, Person in Long-term Recovery
- Commissioner Diane Iannone, Sullivan County
- Jennifer King, Pennsylvania Recovery Organization Achieving Community Together (PRO-ACT)
- David Loveland, Community Care Behavioral Health
- Fred Way, Pennsylvania Alliance of Recovery Residences (PARR)
- Laurie Wicks, Parent
- Jennifer Zampogna, Lawyers for Lawyers

This RRAC Workgroup met ten times between March and September 2022 and focused on:

- Increasing the group’s knowledge to address anti-Black racism.
- Supporting DDAP by creating recommendations for more inclusive review criteria.
- Action planning for how the Workgroup can support future Equity Coalitions (see below).

Given the request by the RRAC Race Equity Workgroup to focus more training on how to increase the group’s knowledge to address anti-Black racism, the following activities were postponed for Phase 2:

- Take part in a “Possibility Audit” to assess opportunities to increase equity,
- Review DDAP funding protocols and policies to create recommendations to develop more inclusive review criteria,
- Conduct racial equity audits to enhance understanding of how BIPOC stakeholders perceive their public-facing virtual presence.

Nine (9) Equity Coalitions

As part of a Phase 3 for *Recovery Rising*, DDAP plans to establish nine regional Equity Coalitions in Pennsylvania. Leaders of each Equity Coalition will be trained and supported to work with their regions to identify and address inequities that prevent equitable access to recovery support services. As part of this work, the Equity Coalitions will also be supported to develop accountability measures, prioritize lived experience, and ensure all work is data informed.

Results of Sessions

C4 presented educational material each session in order to expand the Workgroup members’ knowledge as leaders addressing anti-Black racism. The Workgroup began with defining and understanding critical concepts such as:

Race, racism, and layers of racism	Intersectionality
Privilege (earned/unearned, identity, positionality)	Critical Race Theory (CRT)
Biases (implicit/explicit/institutional)	Anti-oppression
Microaggression	White dominant cultural norms
Allyship	

The group learned about the Equity First framework and the impact of prioritizing equity as a foundational practice to enhance diversity and inclusion. The group heard about allostatic load – the cumulative burden of chronic stress and Identity-specific forms of traumatic stress including race-based traumatic stress, intergenerational trauma, historical trauma, insidious trauma, and acculturative stress. Members identified examples of systemic racism and reviewed the history of how race was established as a social construct with a specific hierarchical structure. The Workgroup discussed white-dominant culture and how to begin to push back against ingrained systems of norms.

They also conceptualized the five necessary ingredients for change as illustrated below (Vision + Skills + Incentives + Resources + Action Plan).

Necessary Ingredients for Successful Change

SKILLS + INCENTIVES + RESOURCES + ACTION PLAN = CONFUSION

VISION + INCENTIVES + RESOURCES + ACTION PLAN = ANXIETY

VISION + SKILLS + RESOURCES + ACTION PLAN = GRADUAL CHANGE

VISION + SKILLS + INCENTIVES + ACTION PLAN = FRUSTRATION

VISION + SKILLS + INCENTIVES + RESOURCES = FALSE STARTS

VISION + SKILLS + INCENTIVES + RESOURCES + ACTION PLAN = CHANGE

The Workgroup also discussed Kotter’s 8 Steps to Transformation:

- Step 1: Increase Urgency
- Step 2: Build Guiding Coalition
- Step 3: Develop a Vision for Change
- Step 4: Communicate the Vision
- Step 5: Remove Obstacles to Empower Action
- Step 6: Create Short-term Wins
- Step 7: Build on Change
- Step 8: Make Changes Stick

This discussion expanded into exploring how a guiding coalition could support people involved in a transformation process and proactively prepare them to navigate and buffer against change fatigue and burnout. The group also discussed best practices to engage in equity conversations. Members expressed challenges they have encountered when speaking with colleagues and family members about race. They discussed how to communicate change and encourage others to commit to a change plan.

Trainers identified equity pitfalls such as working in silos and seeking change through separate events but not as systemic change. The group considered how to seek success as happenings along a continuum towards a long-term goal rather than seeking quick wins. Trainers also cautioned the group against treating equity as something we do, instead of whole-person transformation. Participants were reminded that the journey toward equity can be variable, and discomfort is a natural part of the growth process toward change.

The Workgroup explored the beginnings of a “Possibility Audit” and the questions that make up a framework for change, to be explored further in a Phase 3 of Recovery Rising:

1. What have you seen done well?
2. What have you done in this area?
3. What common pitfalls have you observed at an organizational level?
4. Where do gaps still exist in your own skill set?
5. What do you think is possible for your organization?

The Workgroup drafted an Action Plan with steps for a future iteration of the Workgroup to support Equity Coalitions, to be formed under *Recovery Rising* Phase 3.

Resources reviewed and discussed with the Race Equity RRAC Workgroup include:

Allyship | The Anti-Oppression Network

<https://theantioppressionnetwork.com/allyship/>

Just Don’t: Common Pitfalls of Equity Practice and How to Avoid Them

<https://research.gsd.harvard.edu/cdli/files/2020/06/JustDont062902.pdf>

Beware of Equity Traps and Tropes

<https://www.ascd.org/el/articles/beware-of-equity-traps-and-tropes>

Podcast: Safety-Pin Solidarity: With Allies, Who Benefits? (30 min)

<https://www.npr.org/2017/03/08/516907017/safety-pin-solidarity-with-allies-who-benefits>

White Dominant Culture or Something Different

<https://www.cacgrants.org/assets/ce/Documents/2019/WhiteDominantCulture.pdf>

Going forward, DDAP is continuing to formulate a launch plan for the Equity Coalitions.

Workgroup 3: Building a Recovery Section Within DDAP

DDAP committed to adding two recovery positions to a new Recovery Section within the Department’s Bureau of County Program Oversight. As of March 2022, DDAP completed draft recovery position descriptions for two positions and has been working to receive all internal approvals needed to post and fill the jobs. Given the feedback from RRAC during Phase 1 that state-level positions include people with lived experience of recovery, DDAP will utilize recruiting measures to prioritize lived experience when the positions are posted.

*Dialogue: "... a conversation in which people who have different beliefs and perspectives seek to develop mutual understanding."*¹

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<p>Define <i>Build state-level infrastructure to support recovery.</i></p> <p>Goals</p> <p>Start a Recovery Division within DDAP by defining two new Recovery Positions that encourage lived experience as a qualification</p> <p>Establish a RRAC Recovery Position Workgroup</p>	<p>Discover <i>Learn about perspectives, values, concerns, priorities, and resources.</i></p> <p>At each RRAC Recovery Position Workgroup meeting, facilitated dialogues and communication agreements will guide a process that:</p> <ul style="list-style-type: none"> ⇒ Supports and provides space for reflecting, listening, learning, and asking questions ⇒ Encourages genuine inquiry ⇒ Engages stakeholders to speak from the full range of their experiences ⇒ Provides a safe space for sharing lived experience ⇒ Explores and captures ideas for collaboration that ensure equitable representation of all community-based organizations 	<p>Dream <i>Begin to envision how to integrate the new role into existing recovery supports in the state.</i></p> <p>Workgroup will meet 2-3 times between March – May 2022 to:</p> <ul style="list-style-type: none"> ⇒ Advise on how these positions can help fulfill unmet needs of the recovery community ⇒ Envision how these positions will work as a lead in SUD recovery efforts within the commonwealth ⇒ Discuss how people serving in similar capacities in other states have developed their roles ⇒ Explore concerns from the Workgroup members about how these roles will interact with the existing recovery structure. ⇒ Consider initial recovery priorities for the role(s) to focus on in year 1 	<p>Design <i>Workgroup will participate in a facilitated consensus-building process to:</i></p> <ul style="list-style-type: none"> ⇒ Promote these open positions and encourage people to apply ⇒ Create a prioritized list of unmet needs that these positions can help address ⇒ Provide recommendations on the places and spaces where these positions should interact with the recovery community <p>Deliver <i>Recommendations for integrating the new positions into the recovery system in PA and how recovery leaders will support the success of these new positions.</i></p>
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¹ *Fostering Dialogue Across Divides: A Nuts and Bolts Guide.* Essential Partners, 2017

The RRAC Recovery Positions Workgroup members included:

- Hobart Cleveland, Penn State University
- Denise Holden, The RASE Project
- Robin Horston Spencer, Person in Long-term Recovery
- Bobbie Johnson, Parent
- Nancy Marcus Newman, The Bridge Foundation
- John Petruzzelli, Kolbe Academy Recovery High School
- Jason Snyder, Rehabilitation and Community Providers Association (RCPA)
- Bill Stauffer, Pennsylvania Recovery Organizations Alliance (PRO-A)
- Jennifer Zampogna, Lawyers for Lawyers

Results of Sessions

DDAP presented the Workgroup with summaries of the key functions of the roles and refrained from sharing the full job descriptions in case any Workgroup members may apply for the jobs when available. DDAP also clarified that a history of criminal justice involvement is not disqualifying.

DDAP asked the Workgroup for feedback on **how** people in these new roles will accomplish their work, rather than **what** the responsibilities will be. The overall goal for having these new hires is to further support RCOs to deliver services.

A staff member from DDAP noted,

“These are policy positions that could help establish a consistent, evidence-based framework in which these services are provided and reimbursed, especially given the expected interaction with payers. Having dedicated recovery services policy positions, similar to DDAP’s current Director of Intergovernmental Affairs role, gives stakeholders a direct line to influence DDAP as well as a direct source of information coming out of the department.”

The Workgroup was invited to review the descriptions shared by DDAP and provide feedback between meetings. Nine Workgroup members commented. Below is a summary of key points raised.



Selected Workgroup Key Points

“I am truly concerned that this position will have too much authority that may not be authentic from the perspective of persons with lived experiences and the betterment of the RCO's.”

“Overall, these positions should elevate the visibility and credibility of recovery support services and further professionalize them, especially among key decision makers and the individuals and families they intend to serve. Recovery support services will be, for good, bad or both, now more directly in the spotlight.”

“Outreach to colleges and universities is mentioned, but what about high schools? It seems there are an increasing number of high school students making their way into recovery, and I want to be sure we support them as well. Perhaps the role could include working w/ the Dept of Ed. to improve services and education in schools as well as recovery supports. I believe educating students and others about the vital importance of engaging ongoing recovery supports after treatment is imperative.”

“Management of statewide peer services programs - No! The government cannot manage peer services.”
“These appear pretty thorough.”

“I am deeply concerned about the strategy that DDAP has of using existing job descriptions to expedite the process. I don’t think it works in respect to the kinds of things that need to be done to support the recovery community.”

“Also, the idea that what is in writing in these job descriptions would be different than what the people would do (something I thought I heard expressed quite openly as part of the justification for using an existing job description as a template) will not stand the test of time.”

At the time the Workgroup concluded, the Governor’s Office had approved the positions and the Office of Administration Human Resources Division (OAHR) was reviewing. Other potential delays to the recruiting and hiring process DDAP shared:

- Timing of finalized current and future State Fiscal Year budgets can delay GBO approval
- Getting GBO approval (required before moving on to next steps in the process)
- Commonwealth-wide hiring freeze
- Potential candidates may grieve a disqualified employment application
- To further clarify the concern of using existing job descriptions, the position classifications for the established positions needed to be completed using the appropriate job description template and must be written to meet the minimum experience and training requirements. Job descriptions were then written for the specific functions of these positions.

Recovery Rising Advisory Commission (RRAC) Final Review

On October 25, 2022 C4 Innovations and DDAP hosted a meeting of the full Advisory Commission to report on the Workgroups’ activities to date and DDAP’s next steps. The RRAC members present were receptive to the information and reiterated their concerns about treatment organizations being eligible to apply to serve as regional recovery Hubs. Secretary Jennifer Smith was present and assured the group that DDAP is committed to prioritizing peer-led recovery organizations to serve as Hubs and in particular BIPOC-led and BIPOC-serving organizations.

Secretary Smith also shared that DDAP continues work to finalize the funding opportunity to support the establishment of nine recovery Hubs and that DDAP is hopeful for a Phase 3 of *Recovery Rising* to continue the work to establish a new Recovery Section, hire two new recovery positions, and to finalize the strategy to support the establishment and implementation of nine Equity Coalitions.

In Closing

Halting a disease as insidious, persistent, and deadly as OUD takes an unprecedented team—medical experts, payers, peers, individuals and family members with lived experience of recovery, educators, employers, community groups, elected officials, faith-based communities, and committed benefactors. Given the important work that many stake-holders and community leaders have undertaken throughout Pennsylvania, DDAP and *Recovery Rising* commit to continue working together to change how the Commonwealth delivers recovery support services.

Thank You

DDAP, C4, ORN, and *Recovery Rising* thank the many people and organizations involved in preventing and responding to OUD in Pennsylvania who participated in this initiative and shared their experiences to inform this project. We highly value the work you do every day and your contributions to this endeavor.

We are very grateful to those who shared their recovery journeys and lived experiences. Your expertise is invaluable.

