

NO: **R094**

COUNCIL DATE: **May 25, 2015**

REGULAR COUNCIL

TO: **Mayor & Council**

DATE: **May 25, 2015**

FROM: **General Manager, Planning and Development**

FILE: **5080-01**

SUBJECT: **Community Action Initiative on Support Recovery Homes**

RECOMMENDATION

The Planning and Development Department recommends that Council:

1. Receive this report as information; and
2. Authorize the Mayor to send a letter to the Provincial Minister of Health and Community Action Initiative (the "CAI") recommending that the CAI conduct further study toward developing a comprehensive provincial program framework for support recovery homes.

BACKGROUND

The CAI is an independent agency that provides funding for communities in BC to address mental health and substance use concerns. It was established in 2008. More recently, in 2013, the CAI received \$5 million of funding from the Province of British Columbia to support capacity development in non-health authority funded substance use residential service providers, commonly referred to as support recovery homes.

Following receipt of the Provincial grant, CAI established a Support Recovery House Project Advisory Group. The City of Surrey was not invited to participate in the advisory group. This project goal is to strengthen the support recovery home sector in BC with the aim of enhancing positive outcomes for support recovery home clients. Surrey and Prince George were selected as the pilot communities for the project.

The project is currently in the consultation phase and City staff have held meetings with CAI staff and Leadership Council members to discuss the project, goals and objectives and to provide feedback to the CAI team for consideration as they plan on moving forward with their project.

DISCUSSION

Staff received the *Support Recovery Home Project – Summary of Community Consultations* (the "draft report") on April 20, 2015, which includes a summary of consultations and a section with proposed ideas for investing the CAI's \$5 million in capacity development for recovery homes. A copy of the draft report is attached as Appendix I to this report.

The City of Surrey is very familiar with the issues associated with the recovery house system. Since 2008, the City of Surrey has convened a Surrey Recovery House Inter-governmental Stakeholder Group. In addition to City staff and the RCMP, the Group includes representatives of Fraser Health, BC Housing, Ministry of Social Development and Social Innovation (MSDSI), the justice system, and College of Pharmacists.

The purpose of Surrey's Inter-governmental Stakeholder Group is to:

- share information/knowledge about recovery houses in Surrey; and
- identify solutions to problems associated with these houses.

The City's objective has been to balance the urgent need for safe and supportive housing for vulnerable people in addictions recovery with ensuring that neighbourhoods are not negatively impacted.

The CAI's draft report highlights some of the key issues associated with the recovery house sector. These include:

- Practice concerns exist regardless of whether a support recovery home is registered or unregulated (i.e. registration is not necessarily an indicator of the level and quality of the service.);
- Support recovery services that are situated within a large, multi-service agency tend to benefit from having an already existent administrative and operational structure in place. Support recovery homes that are stand-alone operations tend to not have the same resources at their disposal to develop the necessary administrative and operational structure;
- Clients and families lack sufficient knowledge about what a recovery house should offer; and
- Most importantly, the report identifies "*policy challenges related to accountability, including limitations to the existing regulatory framework for support recovery homes, and the need for more proactive monitoring of support recovery home operators and clients*".

Additional City of Surrey comments about the current recovery house system include: The City of Surrey is proposing that the CAI develop a new provincial program framework for support recovery houses. Key considerations include:

- **BC Housing (BCH) Responsibility:** BCH is the logical government agency to assume responsibility for a provincial recovery house system. BCH has program frameworks for their Emergency Shelter Program and other housing programs that support vulnerable populations. BCH could work in partnership with the Ministry of Health and MSDSI to develop a recovery house program framework;
- **Bed-Funding:** Similar to other BCH programs, the recovery home program should provide funds for beds, rather than the current per diem funding that is attached to individuals. Bed-funding would reduce the administrative challenges (of both the funder and the recovery house operator) associated with the current per diem funding;

- **Mandatory Staff Training & Guidelines:** Recovery house staff should be required to have completed some sort of addictions recovery and fire safety training or have some credentials in this regard. A post-secondary institution could work with ShelterNet to develop a curriculum for recovery house staff. In addition, clear guidelines for operators and/or staff are required (e.g. how long do staff need to be in their own recovery and/or not involved in the justice system);
- **Defined Programs & Central Registry:** A provincial program framework would provide clarity regarding each program. A central registry or triaging system would ensure that individuals are referred to the appropriate program;
- **Tracking Outcomes:** One of the advantages of a provincial program framework is that outcomes could be tracked. Currently there is no tracking of the effectiveness of recovery house programs;
- **A Province-wide System:** A provincial system would support the distribution of recovery houses throughout BC enabling people to stay in their own community; and
- **The Province Amend the *Fire Services Act*:** The enforcement of basic life safety in these homes has proven to be problematic, so much so the BC Coroner has on several occasions pointed out there is a need for authority to issue immediate penalties and that the risk levels be reduced in the *Fire Services Act* from "Imminent life threat" to " life threat" for consideration to evacuate a building.

CONCLUSION

Relative to addictions beds that are funded and licensed by health authorities, support recovery homes offer a cost-effective approach for supporting people in addictions recovery. Unfortunately, the current system of regulation through the ALR and per diem funding through MSDI is not creating a province-wide recovery house system that individuals, families, communities, and health, social service and justice system referral agencies can trust.

The City of Surrey is proposing that the CAI work toward the development of a provincial program framework for support recovery homes. Similar to BCH supportive housing programs, the provincial support recovery home framework should include: clear program guidelines, a central registry/referral system, required credentials for staff, and per-bed funding.

Based on the above discussion it is recommended that Council authorize the Mayor to send a letter to the Provincial Minister of Health and CAI recommending that the CAI conduct further study toward developing a comprehensive provincial program framework for support recovery homes.

Original signed by
Jean Lamontagne
General Manager,
Planning and Development

JLL:saw

Attachment:

Appendix I Draft Report *Support Recovery Home Project – Summary of Community Consultations*

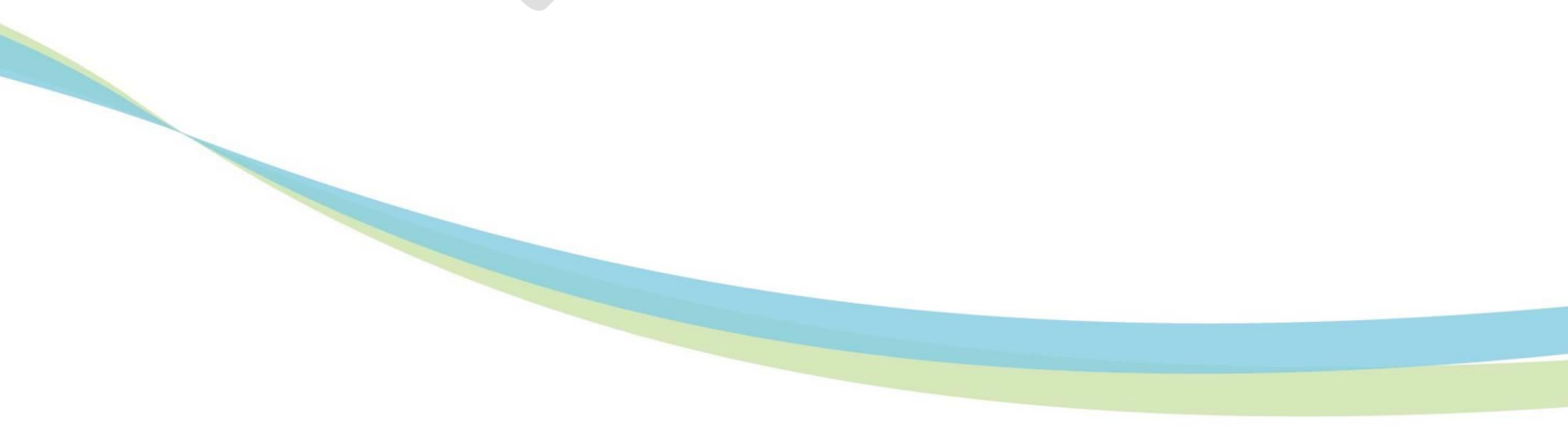


Support Recovery Home Project

Summary of Community Consultations

April, 2015

DRAFT



Glossary of Terms

Assisted Living Registrar (ALR)

Under the *Community Care and Assisted Living Act* (CCALA), the Assisted Living Registrar's mandate is to promote the health and safety of residents in assisted living residences, including support recovery homes. In order to be eligible for registration with the Assisted Living Registrar, support recovery homes must meet health and safety standards and guidelines related to service delivery, living conditions and staffing, and provide 1-2 prescribed services (e.g., psychosocial support, medication management).

Registration with the Assisted Living Registrar is mandatory for all support recovery homes that meet the registration criteria. To become and remain registered with the Assisted Living Registrar, support recovery homes must demonstrate that they meet provincial health and safety standards pertaining to the safe administration and operation of a home.¹

Support Recovery Home (SRH)

A temporary residential, substance-free setting for individuals who are experiencing substance use problems. Support Recovery Homes deliver low-to-moderate, time-limited supports and services. Activities may include coaching for daily living, community reintegration, vocational and educational planning, and participation in community mutual aid groups such as Alcoholics Anonymous (AA) or Narcotics Anonymous (NA). Support recovery homes may be registered non-profit societies, while others may be private, for-profit residences.

Registered Support Recovery Home (SRH)

Support Recovery Homes that are registered with the Assisted Living Registrar.

Unregulated Support Recovery Home (SRH)

Self-identified Support Recovery Homes that are not registered or otherwise regulated (i.e., licensed), and which may or may not meet the criteria for registration with the Assisted Living Registrar.

¹ For more information on the Assisted Living Registrar, please visit:
<http://www2.gov.bc.ca/gov/topic.page?id=1B1D4C8F65FF4D7D8262CF876235A29F>

Introduction & Overview

The Community Action Initiative (CAI) is an independent agency that provides funding for communities in BC to address mental health and substance use concerns. Our agency was launched in 2008 by the BC Alliance for Mental Health/Illness and Addictions, aided by an initial \$10M grant from the Province of BC. Decision makers at our Leadership Council table (the equivalent of a Board of Directors) include representatives from non-profit agencies, labour unions, businesses, Aboriginal, First Nations and Métis groups, a private family foundation, and three non-voting provincial government representatives.

CAI provides Convening Grants to help community partners connect with each other to collaborate and develop action plans; Service Innovation Grants to enable communities to take innovative approaches to address mental health and substance use challenges; and Training Grants to increase the capacity of community members and service providers to better support individuals and families struggling with mental health and substance use issues.

In 2013, the Community Action Initiative (CAI) received funding (\$5M) from the Province of British Columbia to support capacity development in non-health authority funded substance use residential service providers, in particular those operating support recovery homes (SRH). The funding was envisioned to go toward supporting networking, shared opportunities, education, and community engagement.

Under the guidance of a special Reference Group comprised of 13 members representing substance use and mental health organizations, Aboriginal and Métis organizations, RCMP, business, and the Ministry of Health (MoH) and Ministry of Social Development and Social Innovation (MSDSI), the CAI initiated the **Support Recovery Home Project**. The project seeks to strengthen the support recovery home sector in BC, in order to enhance positive outcomes for support recovery home clients and their families.

This report summarizes key findings from the consultation phase of the CAI's *Support Recovery Home Project*, and presents the operational ideas being considered for implementation in future phases of the project.

Work completed to date

The *Support Recovery Home Project* follows a five-phase process (see Figure 1).

In the **Preliminary Research Phase** (March, 2014 – September, 2014), The CAI hired a consulting team to conduct 31 in-depth interviews with staff from support recovery homes, treatment centres, regional health authorities, non-profit agencies, and government in order to learn more about the support recovery home sector. This targeted research was intended to give us a broad overview of the sector, and was not an exhaustive study. We learned that the support recovery home sector is diverse, and that there is a spectrum of service models and philosophies designed to respond to an array of client needs (e.g., life skills, housing, and mental health).

Based on the preliminary research findings, the Reference Group decided to complete in-depth consultation work in two communities, and pilot the capacity development ideas that emerged from the process before expanding to other areas of the province. Surrey and Prince George were selected as the pilot communities.

The **Consultation Phase** (October, 2014 – February, 2015) in Surrey and Prince George sought input from a diverse array of stakeholders with personal or professional insights about support recovery homes, in order to generate ideas and strategies on how to build capacity within the support recovery home sector. The project team, comprised of consultants and CAI staff, undertook interviews and focus groups with a total of **161** participants, including: people who use substances or are in recovery, clients and service providers of homeless shelters, support recovery home operators, allied service providers, and municipal stakeholders (see Table 1).

When consulting with support recovery home operators, the project team was careful to ensure that all support recovery home operators who were registered with the Assisted Living Registry in the two pilot communities were invited to participate in the consultation process. Great effort was also made to include unregulated homes that were not on the Assisted Living Registry in the consultation process, to ensure that these operators had an opportunity to share their views with the project team.

Table 1. Participants in CAI Support Recovery Home Project Consultation Phase (n=161)

48	Support Recovery Home clients, including current and former clients.
38	Support Recovery Home operators and staff
24	Municipal staff and stakeholders
18	Emergency shelter service staff
13	Users of emergency shelter services
11	Family members of Support Recovery Home clients
9	Allied health professionals, including addictions specialists, outreach staff, and mental health and substance use service staff.

The consultation phase focused on the following questions:

- What are the experiences of support recovery home clients and their families?
- What are service providers’ priorities in relation to service delivery, administration, governance, and networking?
- What are potential opportunities and challenges to service providers’ participation in future CAI-funded capacity development initiatives?

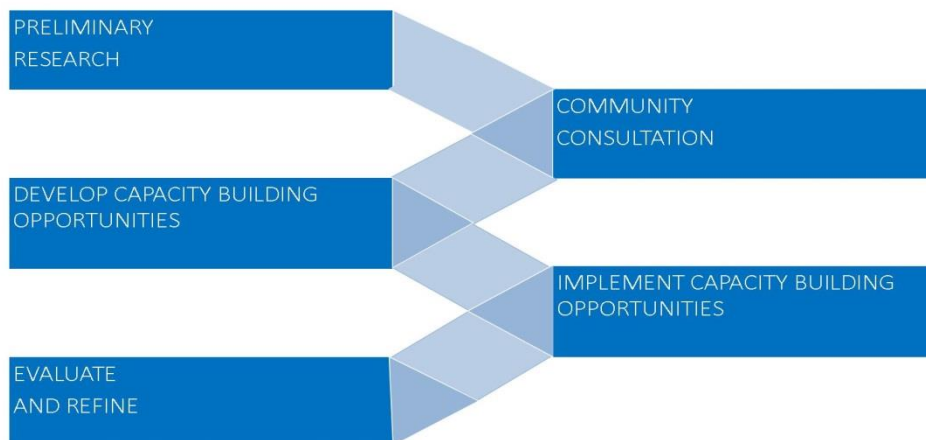


Figure 1. Phases of CAI Support Recovery Home Project (Pilot Communities)

Key Observations

The following observations summarize the major themes from our consultation sessions in Surrey and Prince George. These observations were used to identify three (3) focal areas for the types of capacity development opportunities CAI may be able to enable through the *Support Recovery Home Project*.

- Support recovery home operators and staff want access to training/education opportunities. Most operators do not have a budget that affords these opportunities, but they recognize the value of having access to training for staff.
- Support recovery home operators have ideas and are interested in discussing ways that their sector can be strengthened through networking, shared opportunities, and coalition building.
- Practice concerns exist regardless of whether a support recovery home is registered or unregulated (i.e., registration is not necessarily an indicator of the level and quality of the service).
- Clients and families lack sufficient knowledge about what a registered support recovery home should offer. For example, a complaints process, fire safety measures, psychosocial programming, etc.
- Clients of support recovery homes typically have few other options, and are likely to become homeless without the service.
- Individuals wanting to gain entry to licensed recovery homes, as well as other aspects of the addiction and mental health service continuum can face a lengthy wait list.
- Individuals access support recovery services through a variety of agencies, such as transition houses, shelters, second stage housing, etc., and the distribution of support recovery homes varies across the Province.

Areas for capacity development

Based on the consultation feedback, the project team identified three (3) focal areas that are important for strengthening the non-Health Authority funded support recovery home sector in BC, and enhancing positive outcomes for support recovery home clients and their families, including:

- 1) Governance and accountability
- 2) Administration and operations
- 3) Practice and programming

The next section summarizes the consultation findings, and CAI's vision for strengthening the sector, as they relate to each of the three focal areas.

Governance and accountability

CAI's vision for the sector:
Support recovery homes in BC will have transparent decision-making and accountability processes.

What we heard

During our consultations, we learned about the importance of support recovery homes having governance and accountability mechanisms in place, which staff and residents understood and followed routinely. We heard positive stories and illustrations of support recovery homes in which these practices and mechanisms were well-functioning, and we heard about situations in which these were lacking.

Support recovery home operators, current and former clients, and allied health professionals voiced clearly that having key governance and accountability processes, including a Board of Directors to provide oversight, written policies and procedures, and mechanisms for clients and others to provide feedback and input about the program were essential to quality support recovery home services, and correspondingly, to client safety and well-being.

Consultation participants also identified a number of policy challenges related to accountability, including limitations to the existing regulatory framework for support recovery homes, and the need for more proactive monitoring of support recovery home operators and clients.

“There need to be client feedback opportunities [within the support recovery home itself] that are anonymous, so that clients don’t have a fear of punishment or being kicked out of the house.” - SRH operator

Administration and Operations

*CAI’s vision for the sector:
Support recovery homes in BC
will demonstrate sound
administrative, financial and
operational practices in a safe
facility.*

What we heard

Support recovery homes and substance use services are organized differently across the Province. In the two communities we consulted with, there were distinctly different ways of organizing and delivering support recovery services. Support recovery services that are situated within a large, multi-service agency tend to benefit from having an already existent administrative and operational structure in place.

Support recovery homes that are stand-alone operations tend to not have the same resources at their disposal to develop the necessary administrative and operational structure. For example, several support recovery home operators commented that they are sacrificing their personal funds in order to run a reputable service and program.

“At [name of Support Recovery Home], there was structure and professional staff. They have their certificates and they’re former addicts. I was fed, felt safe and respected. I had structure.”

- Former SRH client

Practice & Programming

CAI's vision for the sector:

Support recovery homes in BC will have a structured program, and staff with the right skills and competencies.

What we heard

We heard during consultations that having trained, knowledgeable staff and a defined, structured program with clearly stated expectations helps set the stage for recovery from addictions. We also heard that it is common practice for support recovery home operators to hire experiential staff – often from within the existing clientele. The experiential model can work very well in the addictions recovery sector; clients appreciated staff with personal understanding of addictions and the recovery process.

However, we also heard that this practice is easily abused. For example, we heard of homes hiring staff still early in their own recovery process, and not yet ready to assume responsibility for the well-being and recovery of others. Lack of programming was another complaint from clients and alumni; as they pointed out, without committed, knowledgeable staff or a structured environment and program, it is exceedingly difficult for them to complete their own recovery.

Housing - or the lack thereof - is another critical dimension that adds to the pressure on support recovery home operators to accept clients who

may not be ready for recovery, or who may have complex needs (e.g., mental health problems). Without support recovery homes, transition homes, and other similar services, many clients would be homeless.

“I believe that onsite supervision by a recovered person is essential – also access to clinical services that are needed for ongoing support and counseling.” – SRH client

Systemic Issues and Challenges

Throughout the consultation phase, informants identified policy and resource-related issues and challenges related to substance use service delivery at a systems-level, which could potentially affect client health and safety. While it was understood by informants that policy change was beyond the scope of the CAI (since CAI does not have a role in policy development), given the importance of these issues, we made a commitment to record and include them in this report.

We recognize that this section reflects the views of a relatively small group of stakeholders, and while important, may only provide a partial lens on a critical challenge. Further research is needed to fully appreciate the range of systemic challenges, and the solution space which different actors may need to occupy.

1.1 *Lack of safe, affordable housing for at-risk populations.* The lack of safe, affordable and/or supported housing is a central issue for many people with substance use issues. Many people turn to support recovery homes to avoid or get relief from periods of homelessness, without necessarily being ready to address their addictions.

1.2 *Perceived need for further accountability and monitoring of support recovery homes.* Consultation participants identified a number of issues related to the perceived need for further accountability and monitoring of support recovery homes. Several stakeholders spoke about the need for additional mechanisms to regulate support recovery homes, including proactive monitoring of operations, and client advocacy mechanisms. It is important to note that not all consultation participants (particularly clients and family members) were aware of the Assisted Living Registrar's health and safety standards and guidelines for support recovery homes.

1.3 *Lack of funding and service coordination for substance use services.* Consultation participants raised a number of systemic issues related to insufficient levels of substance use services (both residential and non-residential) and gaps in services, particular in relation to serving people with mental health and substance use challenges, and inadequate coordination between the various strands of the substance use and mental health service system.

1.4 *Gaps in services for specific populations.* Consultation participants noted that support recovery homes may not meet the needs of specific populations, including women, people with disabilities, Aboriginal, First Nations, and Métis people, senior citizens, and people who are LGBTQ. Consequently, these populations may experience additional challenges in accessing needed substance use services and supports.

Proposed Ideas for Capacity Development

The following proposed operational ideas for capacity development in the non-health authority funded support recovery home sector are drawn directly from the extensive conversations CAI has had with clients, service providers, family members, municipalities, and frontline staff in Surrey and Prince George. These represent ideas that CAI is prepared to implement within this fiscal year (2015-2016), pending input from stakeholders and final endorsement from the CAI Leadership Council.

The list includes a brief description of each proposed operational idea, the pilot site(s) where the proposed idea could be implemented, and the expected time needed to implement each idea. The expected time needed to implement each idea represents the estimated project duration (from start to finish), and *is not a guaranteed completion date*; further, it does not account for competing priorities if multiple projects are implemented concurrently.

Operational Idea	Pilot site(s)	Description	Expected time needed to implement*
Training Bursary Fund	Surrey; Prince George	Establish a training bursary fund (\$300,000) for eligible, SRH operators to apply for funds to complete training identified as necessary and important to their agency. In Surrey, only registered operators would be eligible to apply for bursary funds.	1 year
Non-profit Board Development Training	Surrey; Prince George	Offer bursary funding for a limited number of registered, non-profit SRH agencies to complete Board Development Training.	6 months
Online resource for SRH services in BC	Provincial	Provide guaranteed funding for a three year period for the development of a website to facilitate knowledge sharing, networking, and service linkages for SRH operators and staff in BC.	1 year
SRH Sector Conference	Provincial	Provide funding for the development and delivery of a sector conference to facilitate learning, knowledge sharing, and networking opportunities for registered SRH operators and staff in BC. Conference development and planning will be led by a Conference Advisory Group composed of registered SRH operators and others.	1 year
Public education on Ministry of Health Assisted Living Registry (ALR) Standards and Guidelines	Surrey; Prince George	Work with the Ministry of Health to develop an approach for public education on the ALR standards as they relate to SRH, targeting referral agents, clients, families, and other relevant target groups.	1 year

Operational Idea	Pilot site(s)	Description	Expected time needed to implement*
Systems navigator positions	Surrey; Prince George	Contract with community non-profit organizations to provide systems navigation support and coaching (two positions) for SRH operators who are registered or in the process of registering with the Assisted Living Registrar on meeting and maintaining the Assisted Living Registrar health and safety standards and guidelines.	1 year
Forum to address referral and reintegration processes for SRH clients involved in the Criminal Justice system	Provincial	Convene a one-day scoping forum with key stakeholders, including representatives from BC Corrections, the Ministry of Justice, Ministry of Social Development and Social Innovation, BC Sheriff Services, Vancouver Downtown Community Court, Aboriginal agencies, such as the Native Courtworker and Counselling Association of BC, and other relevant stakeholders to discuss training, communication and policy needs related to referral and reintegration processes for SRH clients with Criminal Justice involvement.	3 months
Implement recommendations from forum on referral and reintegration processes for SRH clients involved in the Criminal Justice system	Surrey; Prince George	Work with key stakeholders to implement forum recommendations pertaining to referral and reintegration processes for SRH clients involved in the Criminal Justice system – e.g., training and education for SRH operators on working effectively with clients with criminal justice involvement.	6 months
Life Safety Training	Surrey	Work with Surrey Fire and Safety, RCMP, and other First Responders to develop parameters for life safety training targeting unregulated SRH in Surrey that have received multiple calls for service, with the goal of addressing and reducing the immediate life safety risks/harms posed to vulnerable individuals residing in those sites. Ideally this training could be administered by a Surrey-based non-profit agency with a proven ability to identify, and connect with unregulated SRH.	1 year
Training and Convening grant linked to <i>Collective Impact</i> focused on addictions recovery	Prince George	Deliver training on <i>Collective Impact</i> (Tamarack Institute) and provide funding for a convening grant (\$20,000) to support a <i>Collective Impact</i> initiative in Prince George focused on addictions recovery.	1 year

Operational Idea	Pilot site(s)	Description	Expected time needed to implement*
Convening grant on community reintegration for outgoing SRH clients	Surrey; Prince George	Provide funding for seven (7) convening grants (\$10,000) focused on community reintegration for outgoing SRH clients (5 in Surrey and 2 in Prince George). Community reintegration activities could include: facilitating client access to housing, employment or education opportunities, volunteer opportunities, or other social inclusion initiatives.	1 year
Public dialogue on addictions recovery	Surrey	Provide funding for the City of Surrey to facilitate a series of public education events addressing multiple themes related to addictions recovery in Surrey.	1 year
Service Innovation grant for Northern Aboriginal communities	Prince George	Provide a service innovation grant (\$20,000) for Northern Aboriginal communities to address training and education on service delivery for Aboriginal clients seeking SRH services outside of their home communities, and/or supporting transitions back to their home community.	1 year
Research grant on trajectories of care for SRH clients	Provincial	Provide research funding for a senior researcher (PhD or Post-Doctoral student) to conduct independent research to explore: (1) trajectories of care for SRH clients in BC; and (2) client experiences of utilizing SRH services.	1 year
Grant for community-based research on transition planning for SRH clients in Northern BC	Prince George	Provide research funding to support community-based scoping research on transition planning for SRH clients in Northern BC (Prince George and Area), with a particular focus on Aboriginal, First Nation, and Métis clients living on and off-reserve.	1 year
Shelter Net BC Associate Membership	Surrey; Prince George	Provide funding for a one-time, annual Shelter Net BC Associate Membership for eligible SRH agencies to facilitate access to the Shelter Net BC training suite.	1 year
Panel discussion for Shelter Net BC 2015 Conference	Provincial	Develop a panel discussion on best practices for serving clients with substance use challenges for attendees of the Shelter Net BC 2015 Conference. CAI will also provide sponsorships (i.e., registration fees, travel expenses) for a limited number of eligible SRH in Surrey and Prince George to attend the Shelter Net BC 2015 Conference. In Surrey, only registered SRH will be eligible to attend.	4 months

* Represents the estimated project duration (from start to finish), and is not a guaranteed completion date; does not account for competing priorities if projects are implemented concurrently.

DRAFT