

Albany County Opioid Settlement Fund

Albany County Recovery Support Programs Funding Opportunity

Capital District Recovery Center (CDRC) is requesting to be considered for the RFP to obtain a non-competitive grant up to \$50,000 for being a recovery support service center. CDRC is requesting a budget of \$50,000. The center was founded by Barry Levine in 2015, as a not-for-profit organization whose vision was to have the capital region have a hub of recovery support for all types of 12 step support meetings. In 2017 the center found its first home at 45 Colvin Ave in Albany, New York. The center gain popularity due to offering a one stop shop of 12 step meetings- AA, NA, Overeaters, Nicotine, Heroin, Gambling, Hoarding, SLAA (sex and love and alcohol anonymous), SA (sex anonymous) Codependency Anonymous, Young People AA, and CRAYPAA (capital region area of young people in AA). In 2022, the center expanded its services to harm reduction, trauma informed workshops, recovery coach certifications and the family living improvement program.

CDRC mission is providing a support service center that has a safe environment for individuals seeking additional resources to support their recovery, creating pathways to gain long term clean time, and transition into their communities with support with 12 step recovery meetings, family unification support, trauma informed workshops, obtaining certification to become a peer support specialist, recovery coach and a community navigator. Our principles are embedded in the concepts that supportive services are available in a wider continuum of recovery, such as various trauma informed health and wellness groups and activities, prevention programming, improving the social determinants of health challenges and being engaged in workforce initiatives to support them being productive members of society.

Currently, CDRC recovery support services offered are 12- Step meetings 7 days a week, Trauma Informed Workshops, scholarships to obtain recovery coach certification and a peer support specialist, Harm Reduction Programming, Social Determinants of Health programs, The FLIP (family living improvement program), Young Peoples Recovery programs, and Social Club House(every weekend individuals come to CDRC to play games such as chess, spades, Big Whis, are some of the examples), and the children room is open for kids to play and socialize while parents are also socializing. At social club events there is usually music playing, kids laughing and adults having a good time clean. These events are supervised by peer support specialists and recovery coaches. It is also an opportunity to network with other recovering addicts to obtain more information and knowledge on staying clean.

CDRC recovery support services contribute by offering:

- ❖ Continuity of Care- after treatment addicts need continued support to maintain their clean time and sobriety.
- ❖ Reintegration support- addressing formerly incarcerated individuals with navigating housing, employment, and social integration, reduce barriers that could lead to re-offense or relapse.
- ❖ Monitoring accountability- recovery coaches or peer specialists can provide accountability and encouragement, helping them to stay on track with their recovery goals while navigating systems of care and social services.

- ❖ Supporting addicts through trauma issues, misplaced agendas due to addiction to family and community
- ❖ Legislative advocacy to align what is needed to keep real time with laws, legislation to support addicts to thrive and obtain improved health and wellness.

The CDRC staff are the following: The paid staff- Executive Director, Program Manager, Harm Reduction Coordinator and Harm Reduction community engagement specialist and unpaid staff are 1 community navigator volunteer, and 6 volunteers that have scheduled shifts for the center. Some of the unpaid staff are receiving hours to get their peer support or recovery coach certification hours. These positions were just a vision 5 years ago and due to obtaining funding from the ARPA, Broadview Bank, NYS OASAS, Eric King family Equinox companies, Tri-City Rentals, Tut Hill Foundation, Munson Family Foundation, ChangeMakers of United Way and United Way the center has been staffed since 2021. The center has 9 board members who meet bi-monthly to guide, professionally instruct, monitor, and lead CDRC to its ongoing mission and future sustainability.

CDRC new initiative is the Prevention Programming

CDRC definition of the center's prevention program is embedded in concepts that refer to the fundamental ideas and strategies used to design and implement programs aimed at preventing negative outcomes before they occur. These concepts focus on proactive approaches to minimize risks and promote positive behaviors within individuals and communities.

CDRC key principles to having a prevention program are understanding of the sound developmental and prevention theory, having clear goals and objectives, having multiple layers of access and support to address different ages, cultures, recovery timeline, family, and environments of violence. The center has a captivated audience, access to the population and strongly believes that prevention is the key that is missing in our support services. CDRC is capable, reliable, and accountable to the mission that any addict can stop using and find a new way of life.

This prevention program will have a community navigator that will access individuals who are struggling with drug use, seeking prevention services, and accessing the communities that are filled with violence, illegal drug sales, human trafficking, engaging with probation and parole, need support with mental health, and having challenges with trauma and homelessness. CDRC began organically being aligned with the SAMSHA key points to recovery support services (Health, Home, Purpose, and Community) by understanding that recovery is a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential. An essential part of the continuum of care, recovery support services address an individual's environment and provide emotional and practical support to attain and sustain recovery from substance use disorders. The center has also embarked on other 12 step meetings to help support overeating, gambling, nicotine, and sex.

CDRC mission is embedded in filling the gap with individuals leaving treatment, needing treatment, completing treatment, being released from incarceration, graduating from long term halfway houses, and coming back from a relapse and do not want to go to treatment. These individuals need support to stay on track in their recovery, address their trauma, disappointments, reunification of family challenges, find employment, gain access to mental health or long-term therapy. This is why

CDRC is a one stop shop recovery support service because addiction is multifaceted and needs ongoing support to address the different level of needs of individuals. There is no cookie cutter approach to addiction. Addiction is addressed at CDRC as being person centered and is a non-clinical approach which makes us different from treatment.

Due to CDRC playing a crucial role in bridging the gap between treatment, homelessness, and transitioning out of long term half way houses by providing ongoing, community- based assistance that facilitates sustained recovery and reduces recidivism, over usage of Medicaid or health insurance, and staying in real time about the challenges of the social determinants of health a recovering addict has a higher propensity to not relapse, gain access to resources, connect to professional help, and obtain a passage to various recovery pathways has identified and documented that recovery support works through proving the impact that it makes on addicts lives that are dealing with many systems and have faces many failures before obtaining recovery support.

CDRC has obtained clients in various ways. First, according to the center survey data it has 84 people a day coming through the center in 2024. Usually, they are invited to the center for a 12-step meeting seeking out help to stop using drugs, needed help accessing treatment, and looking for sponsorship or peer support. The center has community navigators who reach out to individuals that are struggling with drug addiction, and they offer supportive services at CDRC. Halfway houses that use our trauma informed workshops, addicts signing up for peer support, and seeking certification to be a recovery coach.

The goal in implementing this prevention program will be to have the opportunity to have a separate community navigator just for prevention. These are some points of contact for obtaining clients to use our supportive services. We get referrals through other organizations sending their clients to our programs that are staff supervised or not, agencies seeking social support for their clients, families seeking support of dealing with an active addict or trying to understand the disease and how they can get support. And of course, by word of mouth has produced individuals just walking in the door stating I heard you have this to offer. The center has also sponsored recovery events, speaker jams, spiritual principles workshops, women's focus groups, men's workshops, holiday programming, and various social determinants of health events that give us access to those who are in need in recovery or seeking recovery.

CDRC provides and sponsors individual groups, harm reduction programming, 12 step services and activities that have drawn individuals to come to the center. These services are wrapped in the following: information and referral, certification and educational opportunities, workforce development initiatives, peer-led services, young people programming, LGBT programs, social support and social inclusion along with other SUD involved connections. We are mirroring there is no wrong door view of engaging at the center.

The Opioid Settlement funds will be used to start our first prevention programming. The goal is to have a paid community navigator in this position and use this funding for one year. CDRC feels that to truly implement a prevention program all these funds will be needed to substantiate a well-rounded and effective program.

CDRC understands that community navigators can be the glue in connecting to continuity of care. The community navigator is a trained professional or volunteer who acts as a guide and advocates for individuals navigating complex systems such as healthcare, social services, housing, and recovery support. The primary role is to help clients understand available resources, connect with appropriate services, and overcome barriers to access. Along with preventing relapses, support for people with mental health, accessing treatment, support complying with parole or probation, incarceration, and accessing healthcare. These agendas deal a lot with the underserved population, uninsured population, and the unhoused.

Program Goals

- ❖ Prevention programming for substance use disorders aims to reduce the incidence and impact of substance misuse through various strategies. Some of our common goals are:
- ❖ Increase knowledge about the risks associated with substance use,
- ❖ Promote understanding of how substances affect health, relationships, and societal functioning. The point of this goal is to be in real time along with healing the trauma that comes along with being an addict seeking recovery and wellness.
- ❖ Building resilience and life skills to enhance coping skills, decision making, and refusal skills to resist peer pressure, environmental pressure, and avoid initiation.
- ❖ Foster safe, drug-free environments in schools, workplaces, and communities discourage substance use.
- ❖ Provide early intervention for those showing signs of potential substance misuse or underlying mental health issues.
- ❖ Encourage participation in sports, arts, and community activities as positive outlets and engagement.

How will the goals be reached:

- Develop and implement a prevention program at the CDRC
- Train staff in harm reduction, prevention program goals, and referrals and intake processes identified
- Community Navigator will complete a 6-week training in resources
- Implement surveys on staff and services from clients who attend the center

How will these goals will be met:

#1 Hire Community Navigator

#2 Build an infrastructure of staffing for the center

#3 Create, direct, and monitor data for the prevention programming and the other programs at the center

#4 Create, develop, and present an evaluation on the program

#5 Seek out funding to make the program sustainable

Performance Measures to show the impact of this grant:

1. Filling the position
 - a. Measure the average number of days from job posting to candidate acceptance
 - b. Indicator of efficient hiring processes
 - c. Community Navigator hired in 90 days

2. Evaluating budget efficiency-review the alignment with budget restrictions and utilizing proper payroll measures.

Specific measurements:

First 30 days after the hire-tracking whether infrastructure projects stay within allocated budgets

- a. Every 60 days-monitoring if infrastructure development milestones are met on schedule
 - b. Every 60 days reviewing measures that show how well the infrastructure supports organizational operations. space utilization, technology responsiveness and supporting administrative interplay with program effectiveness
 - c. Every 60 days reviewing and evaluating assessing optimal use of resources (refunding, staff, materials for infrastructure projects).
3. Stakeholders' satisfaction
 - a. 60 days after hire-Feedback from staff on program operations and effectiveness
 - b. 6 months after program implementation-Surveys from clients
 - Focus group
 - Follow ups within the program goals
 - c. 4 months after program implementation-Surveys from volunteers
 - d. 6 months survey after hire-Feedback from partners or collaboration and/or referral organizations regarding the functionality and adequacy of infrastructure
 - e. Every 2 months survey-Feedback from the board of directors
 - f. Regular communications, and meetings with stakeholders of the grant.
 4. Data Review-
 - a. In 90 days after the program implementation-reviewing the first data form presented to the Board of Directors/ 6 months the first draft of data review.
 - b. 11 months first review of data information
 - c. 12 months Annual report on data, program goals and objectives, and financial review.

Narrative:

When a program is new it is important to stay very close to the program goals and objectives to make sure they can be or will be met. Secondly, the micromanagement in the time frame is all about efficiency checks, reviewing the effectiveness of the processes and positions responsible for the processes of the program infrastructure and the goals that will be obtained to be able to make changes in the program earlier than later.

Prevention Program Budget:

Paid Staff for Prevention Program:

- a. \$31,680-\$22,00 – For the community navigator position which will be 20.0 hours a week for \$22.00 an hour. This position will have sought to find the best candidate in the community
- b. \$4,880- phone, laptop, and tablet – also marketing, professional forms and printing, \$13,440-Community Navigator Supervisor-\$28.00 an hour 10.0 hours a week. D. Eley will be the supervisor of this program.

Total-\$50,000 annual budget