

Recovery Guide (Volunteer)

Summary:

A Recovery Guide is an open-minded volunteer who uses strength-based support to promote long-term recovery from mental illness and/or substance use by removing barriers and helping individuals to build recovery capital. Volunteers receive free training and education that will teach the skills needed to be an effective Recovery Guide.

Roles and Responsibilities:

- Assist members to (re) join and (re) build a life in the community
- Provide information and opportunities for members to direct their own recovery
- Listen to members and support the member in actively problem-solving situations
- Empower members by helping them identify strengths and remove barriers to their recovery
- Support members in developing an individualized recovery plan to guide them to their goals
- Promote knowledge of and linkage to community resources and organizations to help foster and sustain long-term recovery
- Teach and support acquisition and utilization of skills needed to live in recovery
- Provide a role model of recovery and facilitate the development of a sense of wellness and self-worth
- Complete all necessary documentation, including contact sheets and assisting members to manage their recovery plans
- Comply with all policies and procedures outlined in the Recovery Guide Handbook and all policies and procedures of Focus on Friends
- Participate in weekly supervision with Recovery Support Supervisor when matched with a member. Bi-weekly or monthly supervision is required for Recovery Guides not currently matched with a member
- Refer individuals to appropriate community and professional resources when needed, or, if unsure of where to refer a member for assistance, contact the Recovery Support Supervisor
- Attend continuing education, seminars, meetings, workshops, and trainings as relevant

Requirements:

- Successful completion of Recovery Guide training and orientation
- Personal or family experience with mental illness and/or substance misuse and a willingness to share your experience, strength, and hope with individuals
- Must possess stable and sustained recovery from mental illness/substance misuse
- Ability to be a positive team player
- Ability to model effective and healthy coping techniques and strategies
- Ability to access community and recovery resources
- Ability to work with a variety of people and remain open-minded and person-centered
- Must practice appropriate ethics and boundaries at all times
- Obtain 5 hours of continuing education, with at least 1 hour completed in ethics per year. Continuing education training will be offered quarterly by the Recovery Support Supervisor.

Time Commitment:

The Recovery Guide training requires a time commitment of 12 hours. It is asked that Recovery Guides commit to at least one hour per week with the individual they are matched with. Recovery Guides must be in communication with the Recovery Support Supervisor weekly.

Benefits of being a Recovery Guide:

- Learn new skills, and/or maintain existing skills
- Professional development and community networking
- Sense of personal accomplishment and satisfaction
- Give back to the community
- Personal growth and opportunity to make a positive impact in Hancock County

Recovery Guide Application, Screening, and Interview Process

1. If you are interested in becoming a Recovery Guide, contact the Focus on Friends Volunteer Coordinator.
2. Complete and turn in the application to the Volunteer Coordinator. If you need assistance completing your application, please ask the Volunteer Coordinator.
3. Within the two weeks of your application being received and screened, the Recovery Support Supervisor will contact you to follow-up or schedule an interview.
4. Upon approval of application and successful completion of the interview, a schedule of Recovery Guide trainings will be provided. You must attend this training to become a Recovery Guide. *****Please note, completing an application does not guarantee that you will become a Recovery Guide. Being a Recovery Guide is not a good fit for everyone, there are many other ways your time, talents, and passions can be used to help promote recovery at Focus on Friends.*****
5. Attend and complete Recovery Guide training.
6. Within one month of attending training, attend an orientation session with the Recovery Support Supervisor to understand program processes, procedures and forms. The Recovery Guide Handbook and Codes of Ethics will also be reviewed.
7. After you have completed training and orientation, the Recovery Support Supervisor will match you with at least one participant for the Recovery Guide Program.
 - a. Matches will be based on the interests, skills, desires, and needs of both the Recovery Guide and the participant
 - b. When a tentative match has been made, the Recovery Support Supervisor will set up a meeting to introduce you to the participant. If the match does not seem like a good one by assessment of you, the participant, or Recovery Support Supervisor, a new match can be attempted. At the initial meeting, all forms will be explained.
 - c. Recovery Guides must then schedule a next time to meet with the participant. Recovery Guide documentation must be submitted to the Recovery Support Supervisor weekly.

CONTACT INFORMATION

Name

Address

City State Zip Code

Phone Email

EMERGENCY CONTACT INFORMATION

Name

Relationship to you

Home Phone Cell Phone

HISTORY

Are you in recovery from any or all of the following? (Check all that apply)

- Mental Illness Substance Misuse

Do any of the following apply to you? (Check all that apply)

- I am a family member/loved one of someone in recovery from a mental illness.
- I am a family member/loved one of someone in recovery from substance misuse.
- I am a family member/loved one of someone in recovery from both mental illness and substance misuse.

If you are in recovery, or are a family member/loved on of someone in recovery, please briefly describe your experience:

What is your recovery plan? Or, what do you do for yourself to prevent a lapse/relapse and stay in recovery?

How long have you and/or your family been in sustained recovery?

VOLUNTEER HISTORY

What made you interested in volunteering?

Have you been involved in helping others in recovery in the past or presently?

- Yes (please specify) _____
- No

Do you have any schedule restrictions? Please describe.

SKILLS and INTERESTS

What special skills, interests, and hobbies do you have that you would be willing to share with participants?

- | | | |
|--|--|---|
| <input type="checkbox"/> Gardening/Yard work | <input type="checkbox"/> Model Building | <input type="checkbox"/> Fishing |
| <input type="checkbox"/> Sewing/needle work | <input type="checkbox"/> Television | <input type="checkbox"/> Science |
| <input type="checkbox"/> Playing cards/table games | <input type="checkbox"/> Poetry | <input type="checkbox"/> Leatherwork |
| <input type="checkbox"/> Foreign languages | <input type="checkbox"/> Camping | <input type="checkbox"/> Shopping |
| <input type="checkbox"/> Church activities | <input type="checkbox"/> Politics | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Walking | <input type="checkbox"/> Home Decorating | <input type="checkbox"/> Painting/Drawing |
| <input type="checkbox"/> Car repair | <input type="checkbox"/> Crafts | <input type="checkbox"/> Education |
| <input type="checkbox"/> Writing | <input type="checkbox"/> Cycling | <input type="checkbox"/> Group Facilitation |
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Attending plays | <input type="checkbox"/> Teaching |
| <input type="checkbox"/> Listening to Music/concerts | <input type="checkbox"/> Bird watching | <input type="checkbox"/> Financial Management |
| <input type="checkbox"/> Puzzles | <input type="checkbox"/> Home Repairs | <input type="checkbox"/> Professional |
| <input type="checkbox"/> Pets/livestock | <input type="checkbox"/> Exercise | <input type="checkbox"/> Sports (please specify):
_____ |
| <input type="checkbox"/> Movies | <input type="checkbox"/> Hunting | <input type="checkbox"/> Playing instruments (please specify):
_____ |
| <input type="checkbox"/> Swimming | <input type="checkbox"/> Woodworking | <input type="checkbox"/> Others (please specify):
_____ |
| <input type="checkbox"/> Bowling | <input type="checkbox"/> Pool/Billiards | |
| <input type="checkbox"/> Checkers/Chess | <input type="checkbox"/> Child Care | |
| <input type="checkbox"/> Reading | <input type="checkbox"/> Cooking/Baking | |
| <input type="checkbox"/> Traveling | <input type="checkbox"/> History | |
| <input type="checkbox"/> Housecleaning/Laundry | <input type="checkbox"/> Collecting | |

Each Recovery Guide will be asked to establish a one-on-one relationship with at least one individual seeking to initiate or maintain their recovery. As a Recovery Guide, you will be matched with participants based on similar experiences, interests, and skills, etc. So, is there anything else you would like the staff to know about you before matching you with a participant? Please include any preferences or factors that would impact your comfort level here.

RECOVERY GUIDE COMMITMENTS

Please initial all statements you agree with:

- ___ I agree to commit to be a Recovery Guide for at least one year.
- ___ I agree to commit to attend scheduled supervisory meetings and continuing education.
- ___ I agree to be open-minded about the many pathways of recovery and am willing to support other individual’s choices.

BACKGROUND

It is our mission to provide an environment that is safe and substance-free. A past conviction will not necessarily prohibit an applicant from becoming a Recovery Guide. We strongly believe in a person’s ability to recover and change his or her life for the better. However, we also have an obligation to ensure the safety of participants. We sincerely appreciate your honest answers to following questions:

Are there any charges or convictions we should be aware of?

- Yes
- No

If yes, what was the nature of the charge and when did this happen?

I acknowledge and affirm that the information provided in this application is complete and accurate:

(Please print your name here)

(Your signature)

(Date)

CONFIDENTIALITY AGREEMENT

As a volunteer or Recovery Guide, you are asked to maintain the privacy of others. Any confidential information obtained from observations, conversations, correspondence, and any other source must be kept confidential. Please sign acknowledging your understanding of this policy.

(Please print your name here)

(Your signature)

(Date)