My Recovery Plan: FAQs for Navigators

This Frequently Asked Questions (FAQ) is intended to provide general information and guidelines for contracted service providers when introducing Navigators to My Recovery Plan (MRP). If you have specific questions not answered in this FAQ, email:myrecoveryplan@ahs.ca

Introduction

A Mental Health and Addiction Advisory Council (MHAAC) was appointed in November 2019 to provide the Minister of Health and the Associate Minister of Mental Health and Addictions with recommended strategic actions to increase access to recovery-oriented addiction and mental health services, which are already being implemented by cross-government partners.

The MHAAC submitted its final report, Toward an Alberta Model of Wellness, to inform this approach. This report provides three recommendations and a framework for transformative change to build a recovery-oriented system of care:

- Establish a shared vision and collective commitment to recovery
- Improve foundational supports by enabling policy, consistent processes, service integration and information technology
- Strengthen recovery-oriented systems of care by building capacity in communities and filling gaps in community supports

My Recovery Plan (MRP) supports the shift toward a recovery-oriented system of care by helping Albertans personalize and have more ownership of their recovery journey, improving continuity of services and connections to broader social supports and services, and providing government with evidence to guide future policy and funding decisions.

In particular, MRP supports our Government in achieving Recommendation 2 “Improving Foundational Support” by creating a provincial waitlist, tracking treatment and recovery outcomes, identifying effective interventions, and allowing clients to share their data across service providers

Frequently Asked Questions for Navigator

How can I access My Recover Plan (MRP)?

You will have a personal username and password to access the My Recover Plan (MRP) portal. You can access MRP through any device such as a laptop, iPad, phone or desktop computer. Google Chrome is the preferred web browser, but other browsers will also work. You can access MRP through this landing page: www.alberta.ca/my-recovery-plan.aspx

My Recovery Plan helps people build recovery capital. What is recovery capital?

Recovery capital can help a person achieve and sustain recovery. It is the combination of personal, social, community and other supports that a person can draw upon to begin and sustain their recovery from addiction. In the past, recovery was focused on stopping drug use. However, the latest research shows that recovery can be achieved most effectively if it involves improving multiple aspects of a person's health and wellbeing and by approaching recovery in a more holistic manner.

What is negative and positive recovery capital?

MRP will help Albertans build their recovery capital using a strengths based approach in seven domains of recovery capital:

- Negative Recovery Capital:
    1. unmet needs
    2. barriers to recovery
- Positive Recovery Capital:
    3. personal capital
    4. social capital
    5. community capital
    6. commitment to recovery
    7. quality of life and satisfaction

Am I required to use My Recovery Plan with clients?

Contracted service providers who have publicly funded beds are expected to introduce MRP to all new publicly funded clients during intake. The expectation is that MRP assessments will be completed at intake, mid-point (at the 30-45 day mark for programs longer than 45 days), and discharge.

What if a client refuses to use My Recovery Plan?

The expectation is that service providers present the tool as part of intake. If a client refuses to use MRP and complete the assessment on intake, navigators should continue to work with clients to encourage use. The navigator should take the time to explain how the tool works and to address any concerns the client might have regarding its use. If a client continues to choose not to use the tool, they should not be refused treatment.

Am I expected to use My Recovery Plan for all treatment planning and service delivery?

At this time, it is only required that service providers use MRP for basic patient information and outcomes data (including the REC-CAP). Beyond these assessments, service providers can choose the degree to which they will incorporate the platform into their treatment planning and service delivery. Service providers are encouraged to fully incorporate the MRP assessments into their service delivery to support clients in their recovery and measure outcomes based on the recovery capital domains. MRP provides an opportunity to digitize treatment programs including referrals through the use of the resource library.

Will people or service providers need to pay to use My Recovery Plan?

Alberta's publicly funded residential addiction service providers and their clients will be able to access MRP for free as the tool becomes available across Alberta.

Who will be able to use My Recovery Plan?

MRP will be rolled out in phases. The intent is that the tool will be implemented across all publicly funded residential addiction service providers in Alberta in 2022/23. Service providers will be contacted by their AHS Zone Contract Manager to prepare to be on-boarded with MRP. Trained staff at each site will be able to use MRP.

How do I use My Recovery Plan?

During intake, a navigator, who is trained to use MRP and understands Recovery Capital, will do a first assessment using MRP to obtain a baseline RCI score (Recommended within 48 hours of intake). The navigator will walk through the questions with the client, which takes 20 to 40 minutes, depending on the client's understanding of the questions.

Who is responsible for completing the questions in My Recovery Plan?

The navigator will walk through the questions with the client and will complete the questions on their behalf. Once a client has been in treatment for 3 months or more the navigator can use their discretion to determine whether the navigator or client input the information.

What's the next step after completing an assessment?

Once the assessment is completed, suggested recovery goals are offered, where the navigator and client decide on what goals to do for the next 30 days. The client will be able to check off goals and tasks they have been asked to do between assessment intervals. Clients are able to rate the resources attached to recovery goals and tasks by providing feedback about how helpful they found these supports and services.

How is an RCI Score calculated?

The Recovery Capital Index (RCI) score is the sum of positive and negative recovery capital scores. These scores are calculated when answering questions in the REC-CAP Assessment that is used in the MRP software.

MRP measures seven 7 domains (catergories), five of which are positive and two of which are negative., These categories are:

- Negative Recovery Capital:
  1. unmet needs
  2. barriers to recovery
- Positive Recovery Capital:
  3. personal capital
  4. social capital
  5. community capital
  6. commitment to recovery
  7. quality of life and satisfaction

Upon completing a client's assessment, which is made up of 121 questions, the software calculates a client's RCI. This score serves a dual purpose: the primary purpose is to assess recovery capital to inform recovery planning and the secondary purpose is to measure change over time (recovery capital outcomes).

How does the My Recovery Plan recovery capital (REC-CAP) score work?

An overall recovery capital score and scores on various domains will be generated based on the assessment. MRP will use the scores and the specific responses provided by the client to the various questions to generate treatment goals and tasks. As the personalized goals are completed by the client, the recovery capital score will increase, leading to further adjustments in the treatment plan and goals.

What is positive/high and negative/low recovery capital Index?

It is common when a person initiates their recovery journey from addiction they have a lower score. People entering a service can see scores between -60 and -20 as their baseline scores; however recovery can start no matter what your score is.

Having a score in the negatives means the individual may have many barriers to achieve and sustain recovery, such as housing, mental health needs, medication stabilization. As an individual participates and engages in recovery plans, their RCI score will increase. This means they may have stabilized their housing, their medication needs are met, and they have participated in mental health services that meet their needs.

It is common for people who are engaged in recovery services to increase their RCI over time. Despite their RCI Score, building recovery capital is a constant action, regular action is required to maintain their increased recovery capital. In the event their score goes down in one area of their life, they can target those issues immediately. A high score (50+) does not mean they are cured; it only means they are doing the work to consistently achieve better health outcomes.

Is the My Recovery Plan recovery capital (REC-CAP) tool validated?

REC-CAP reliability is validated through a psychometric study. Findings indicate a pathway to recovery capital that involves greater time in residence ('retention') is linked to an increase in meaningful activities and a reduction in barriers to recovery and unmet needs that, in turn, promote recovery capital and positive wellbeing.

More information about the science behind recovery capital can be found online.

What is the cycle for completing an assessment?

After the first assessment, there will be successive assessments that allow clients to see whether completing assigned tasks has increased or decreased their recovery capital. Adjustments to suggested treatment goals and tasks will be based on the new scores. Navigators are expected to have clients complete a recovery capital assessment at least twice, upon admission and discharge. For treatment programs longer than 45 days, assessments should be completed every 30-45 days. For subsequent assessments, navigators can use their discretion to determine if they or the client will input the assessment responses into My Recovery Plan.

Can a client suggest a task or goal that is not already listed?

Yes. A navigator can add an ad hoc goal that is unique to the individual and their current needs, that may not be part of the organization's goal library. If an organization finds certain ad hoc goals of the same nature keep getting added, then they can make it a new goal template.

Do navigators need to have a specific designation to assist clients in completing My Recovery Plan? (i.e., addiction counsellor, social worker etc.?)

There is no specific designation required, but navigators are expected to undergo training regarding the use of MRP. The tool is designed to be flexible enough to allow for a wide group of clinicians or therapists to develop treatment plans and goals using the tool.

Before a navigator completes the necessary training it is recommended they complete the an online course offered by Last Door Recovery Society (LDRS) to obtain a foundational understanding of Recovery Capital. Upon completion of this course a certificate of completion is offered.

I am a new employee and haven't been trained yet. Can I use the tool if I haven't had the opportunity to take training yet? Can another staff member at my agency train me in the use of the tool?

It is recommend a new employee receive training on MRP, options for this training could be for a new employee to watch a "How To Use MRP" video. At a minimum, a staff member that knows how to use MRP may provide training to the employee before the employee uses the tool.

Employees should be fully informed of any privacy and security related issues and their responsibility with regards to securing personal client data before using the tool. Before a MRP User Account can be created for you, you must complete the AHS privacy and secuity training and submit your Confidentiality and User Agreement and the User Access Form. These forms must be submitted to AHS at myrecoveryplan@ahs.ca.

What specific data elements will be collected in My Recovery Plan?

Specific data elements to be collected in MRP include:

- Name, date of birth, and contact information (phone number, mailing and email address)
- Employment status
- Program information
- Recovery capital assessment data
- Substance use history
- Demographic information (gender, gender identity, ethnicity)
- Discharge information
- Quality of housing
- Legal status

Please take care to go over these specific data elements with clients for their awareness, as well as the protections in place to secure their personal data.

How will a client's personal information be protected?

Client personal information is protected under the *Health Information Act*. It will be stored on a cloud server located in Canada that meets high security standards.

Who will have access to a client's data?

Service providers' access to the client's personal information at the treatment centre will be limited to their navigator or clinician or on a strict need-to-know basis, such as with the management team. Service provider staff can only access the clients they are currently treating. Once a client leaves their treatment facility, they will not have access to their future information.

How will the client's personal information be shared between treatment facilities?

If they choose to, the client will be able to share their recovery capital information with other service providers using MRP; this allows for continuity in treatment and supports as they move along their recovery journey. A client will decide whether their previous health information should be shared with another clinician or therapist when they enter a new treatment centre. Clients will provide consent to the new treatment centre to access old MRP information. The navigator may also generate client reports and forward the reports to other service providers upon the client's approval.

What happens after a client has completed their treatment?

The client will be able to continue accessing their information in MRP after leaving the treatment facility, but this access will be read-only. They will be able to view goals and tasks, but will not be able to mark any goals or tasks as complete or complete any additional assessments unless they are tied to a service provider that uses MRP. All assessments and assigned tasks must be initiated by a service provider.

Does Alberta Health Services (AHS) have direct access to My Recovery Plan data?

Alberta Health Services does not have direct access to clients' personal information in the MRP platform. Clients' personal information will be securely sent to Alberta Health Services from MRP and stored on a password protected server for reporting purposes. Alberta Health Services will never share any personal information. All reporting will be in an aggregate (grouped) format and no names, contact information or other identifying information will be shared.

Does Alberta Health (AH) have direct access to My Recovery Plan data?

Alberta Health will not have access to clients' personal information and will only receive aggregated (grouped) information. Alberta Health will never be able to identify individual people – they will not see any names, contact information, or other identifying information. Alberta Health will use this information to better understand the needs of clients and how to improve addiction services to help people recover.

Does Last Door Recovery Society (LDRS) staff have direct access to My Recovery Plan data?

A limited number of staff at LDRS will have access. Their access will be restricted to helping manage the system on behalf of Alberta Health Services. LDRS does not have the right to access or edit personal health information. The only time LDRS Staff will have access to data is to provide IT support for a navigator who needs assistance with using the software MRP. IT staff are the only individuals with access to data and they have training on how to provide IT support without reading personal data.

How can a navigator monitor a client's progress?

MRP will allow the Navigator and managers to monitor the client's progress and assess the program's impact on the client through a dashboard.

Some of the features in My Recovery Plan overlap with data we are already collecting in our EMR (e.g., care planning). What steps are being taken to avoid duplication in our work?
LDRS staff have experience working with service providers to reduce the duplication related to their specific EMR. When you are onboarded to the MRP software, LDRS staff will work with you to work through any issues that arise.

MRP is aligned with the Medical Detox, Residential Addiction Treatment Expansion (MDRATE) grant, also held and supported by Alberta Health Services. Through this alignment, Alberta Health Services is actively working to minimize reporting burden as new agencies are onboarded. Minimizing reporting burden will take time and will need to be a collaborative process.

When our agency is on boarded to My Recovery Plan, should we start using it just with new clients or should we also start using it for clients who are part way through the program?
Ultimately, that decision is up to each service provider. However, it is recommended MRP be used with clients already in the program as there are a number of benefits to doing so:

- Having existing clients do a baseline assessment and start using MRP means all staff and clients have a basic understanding of recovery capital, and new clients will be entering an environment where their peers are using the same platform. This creates momentum for building recovery capital and eliminates divisions based on date of entry into the program.
- Peer support is key to the recovery process, and by having their own RCI scores and recovery plans, current clients will be better able to provide support for new clients as they start the process of recovery planning.
- Building recovery capital in a recovery oriented system of care is already underway in the province, and onboarding current clients as quickly as possible will improve the collective ability to track this for providers, AHS and the policy-makers.
- Using MRP with current clients will provide service providers and decision-makers with valuable data more quickly.
- Staff and client buy-in is expedited by seeing results in the dashboard.

For clients who are already in your program, it is recommended that for their first assessment, navigators ask them to think back to their circumstances when they first started the program. Service providers already using MRP have found this provides them with a baseline quite accurate to clients' true baseline.

What mechanisms are in place for us to convey our feedback on My Recovery Plan and My Recovery Plan implementation to the My Recovery Plan team, AHS, and/or Alberta Health?

There will be both formal and informal opprtunities to convery feedback, including:

- LDRS staff will be conducting an evaluation of user experience, training, and system implementation.
- LDRS staff will monitor tickets for tech support and flag any frequent or emerging issues.
- You can also communicate any questions or concerns directly to LDRS staff or to AHS via myrecoveryplan@ahs.ca or to your contract manager.

Alberta Health Services, the Ministry of Mental Health and Addiction (AMHA), Alberta Health, and LDRS have all been working together to plan and support the implementation of MRP in publicly funded addiction treatment services. Any significant issues identified through the above methods will be brought to the tripartite committee overseeing this work.

How will the My Recovery Plan implementation be evaluated?

The LDRS is working with Alberta Health Services to conduct an evaluation of MRP and its implementation in Alberta. This information will be used to make adjustments to improve the user experience for clients, navigators, and managers and to improve quality and service. The Knowledge Exchange Team within Provincial Addiction and Mental Health (PAMH) will administer the 'Client', 'Navigator', and 'Manager' MRP evaluation surveys developed by LDRS into a secure, online tool called REDCap. REDCap is an AHS-approved tool for electronic data collection.

Timelines

- Manager & Navigator Survey #1: 2 weeks after Navigator training, sent directly to staff via email
- Manager & Navigator Survey #2: 5 weeks after Navigator training, sent directly to staff via email
- Client Survey: 30 days after intake, distributed after mid-point assessment via a QR code or URL from navigator

How have Indigenous People been engaged to ensure MRP is aligned with cultural practices in Alberta?

The MRP Project team is actively consulting with the AHS Indigenous Wellness Core and is highly committed to ensuring the cultural practices of Alberta's Indigenous Communities informs recovery goals and tasks within MRP.

Who do I contact if there are issues and concerns with My Recovery Plan?

For technical support related to software issues, service providers and clients will be able to contact MRP directly through a ticketing system. MRP has indicated that response times will be quick and that they will seek to resolve the issue immediately if practicable. Note that MRP does not have the right to access or edit personal health information.

If there are issues with the government website where the My Recovery Plan portal can be accessed, users should contact the Service Alberta Help Desk.

Help Desk Contact Information

Partners	Roles and Responsibilities	Contact Information
LDRS Team	• Software related issues • Help navigating and using the MRP	MRP ticketing system: https://support.myrecoveryplan.ca/ Email: support@myrecoveryplan.ca Phone: 1-866-380-2303
AHS	• Implementation or clinical related questions related to the use of MRP • Reporting related questions to the use of MRP	MRP Project Team Email: myrecoveryplan@ahs.ca
	• Privacy related questions	AHS Privacy Email: privacy@ahs.ca Number:1-877-476-9874
Service Alberta	• Problems with the alberta.ca landing page	Telephone: 780-427-1462 Toll free: 1-888-427-1462