

Attachment #: SLA Scope of Work for Behavioral Health Services: Mental Health Promotion, Prevention, Treatment, and Recovery Supports

Tribal Plan and Program Instructions

Section 1. Contact Information

Fill in information regarding the contact information including:

- Sovereign Nation's Name
- Sovereign Nation's Address
- Sovereign Nation's Main Telephone
- Person(s) completing the Tribal Plan and contact information
- Person(s) to be contacted for further information regarding the Tribal Plan.

Section 2. Funding Resources

Check the box for each funding resource the Tribal Nation will use for the state fiscal year. The Tribal Nation can choose any or all funding resources applicable if the Tribal Plan is approved for Sections 4-10.

Funding resources include:

- Mental Health Promotion and/or Suicide Prevention Funds (MHPP)
- Substance Use Prevention, Treatment, and Recovery Services Block Grants (SUPTRS) General Funds
- Dedicated Cannabis Account (DCA) Funds
- SUPTRS Opioid Response Funds

Section 3. Service Categories

Check the appropriate boxes to indicate which service categories the Tribal Nation will implement using Behavioral Health funds through the various funding resources.

Options include:

- Mental Health Promotion/Suicide Prevention Services (MHPP Funds only)
- Substance Use Disorder (SUD) Primary Prevention Services (SABG and DCA funds for youth)
- SUD Treatment Services (SABG and DCA for youth only)
- SUD Recovery Support Services (SABG)

Section 4. Budget

Complete a summary of your budget to include all the services to be delivered outlined in Section 3. Each overall program the Sovereign Nation chooses to implement should be listed in the Program Budget Grid. For each program, indicate the total amount of funding in the appropriate funding source column. Add more columns in each section if there are more than two programs identified per category.

For example, if the Tribal Nation implements Healing of the Canoe using \$3,000 in DCA funds, list the program in the row for SUD Prevention Services and include the amount (\$3,000) in the appropriate funding source(s) (DCA column).

Section 5. Mental Health Promotion and Suicide Prevention

Complete section for mental health promotion and suicide prevention programs. Funding is provided to increase mental health promotion services to Indian Nations in the State of Washington. Tribal Nations may support their programs.

Mental health promotion works at three levels: strengthening individuals, strengthening communities, and reducing structural barriers to mental health. Promotion of mental health can be achieved by working to improve your community in a variety of ways.

Here are a few examples:

- Early childhood interventions (e.g., home visiting for pregnant women, pre-school psychosocial interventions, combined nutritional and psychosocial interventions among disadvantaged populations);
- Mental health promotion activities in schools or communities (e.g., programs supporting normal transitions and changes in schools, increasing the atmosphere of child-friendly schools, outreach);
- Family education programs (e.g., increasing child parent bonding, child transitions, communication skills, problem solving skills, disciplinary skills);
- Suicide prevention programs (e.g., community or individual training on signs of suicide and how to provide appropriate referrals); and
- Mental health interventions at work (e.g., stress prevention programs).
- Mental health outreach, support group programs and early interventions, none of which may be considered mental health treatment services, for selective or indicated individuals at a higher risk for suicide ideation, mental health disorder, or substance use disorder.

You can find a [list](#) of best practice prevention programs located on the Excellence in Prevention website on the Athena Forum. Answer the questions in the template for each program you intend to support using MHPP dollars. If the Indian Nation plans to implement, more than 2 programs in this section, please copy, paste, and complete another set of the MHPP set of questions.

Section 6. Substance Use Disorder Primary Prevention

Complete section on primary prevention programs. Prevention programs should be directed towards working with individuals, communities, and families in preventative efforts addressing substance use disorders. Prevention programming should enhance resilient factors and decrease risk factors associated with youth substance use and substance use disorders. Strategies include youth programs, parenting programs, community strategic planning strategies.

A. Strategies within the SAMHSA's Center for Substance Abuse Prevention including information dissemination strategies, environmental, education, problem identification, and referral alternatives, and community-based processes. Definitions are listed below.

- Information dissemination – Increase knowledge and change attitudes through communication. This method is one-way, and provides prevention and health-promotion related information. Examples of these strategies include, media campaigns, information sharing, speaking engagements, and websites.
- Environmental – Aim to address the settings and conditions in which people live, work, and socialize. These strategies involve establishing or changing written and unwritten attitudes, norms, standards, codes, and policies that influence the use of substances.
- Education – Two-way approach, involving an educator, to build skills through structured learning processes. Critical life and social skills that include decision making, peer resistance and refusal, coping with stress, problem solving, interpersonal communication, and systematic and judgmental capabilities. Examples of these strategies may be family and parent services, cultural and traditional teachings, ongoing small group sessions in a school, college, or community setting, and peer leader/helper programs.
- Problem identification and referral – Process to determine when a behavior requires referral to services, or other intensive interventions with education and motivational strategies.

- Alternatives – Provide structured activities for specific groups/individuals that purposefully exclude substances. These activities help people – particularly young people – have healthy, pro-social alternatives to substance use and misuse.
- Community-based process – Provide ongoing networking and technical assistance within community groups or agencies. It encompasses neighborhood based, grassroots empowerment models using action planning and collaborative systems planning.

B. IOM Strategies

- Universal-Direct (Direct and Indirect) – Designed for the general public or whole population, these interventions are based on evidence that they are likely to reduce risk and increase protective factors for all recipients, regardless of group or individual risk.
- Universal-Indirect - Designed to reach the general public or whole population not identified on the basis of risk for a behavioral health disorder and includes efforts that are offered to the entire population that reduce the overall probability of behavioral health disorders within that population.
- Selective – Designed to reach groups or individuals with an elevated risk for developing a substance use disorder or adverse change in behavioral health status that is significantly higher than average. The elevated risk may be identified on the basis of biological, psychological, or social risk factors with a known association for a behavioral health disorder.
- Indicated – Designed to reach individuals with early symptoms or behaviors that have been identified for an increased risk of developing a behavioral health disorder but are not yet diagnosable.

You can find a [list](#) of best practice prevention programs located on the Excellence in Prevention website on the Athena Forum.

C. Tribal Prevention Best Practices Development and List Strategies below are shown to be effective at reducing youth opioid and/or prescription drug misuse and/or associated risk factors in Tribal communities. For a complete list, visit [Tribal prevention and wellness programs | The Athena Forum](#)

Tier 1: Research-based Programs - Strongest Available Evidence

- 1) American Indian Life Skills Development/Zuni Life Skills Development
- 2) Bicultural Competence Skills Approach
- 3) Families and Schools Together (FAST) for American Indian Children
- 4) Family Spirit
- 5) Healing of the Canoe
- 6) Cherokee Talking Circle
- 7) Red Cliff Wellness School Curriculum
- 8) Native FACETS
- 9) Project Venture

Tier 2: Promising Programs - Limited Available Evidence

- 10) Our Life
- 11) Protecting You/Protecting Me for American Indian Children
- 12) Reward and Reminder Program
- 13) Connect Program
- 14) FACE (Family and Child Education Program)
- 15) Gathering of Native Americans
- 16) Model Adolescent Suicide Prevention Program

D. Youth Marijuana Prevention Services: View the [list](#) of programs specific to reducing youth marijuana use and abuse and/or associated risk factors in the general population.

Opioid Use Disorder Prevention Services: View the [list](#) of programs specific to reducing youth OUD and our associated risk factors in the general population:

- Class Action (as a booster to Project Northland)
- Community-based Mentoring (e.g., Big Brothers/Big Sisters of America or innovative design)
- Communities That Care (CTC)
- Familias Unidas
- Getting Connected (SAMSHA toolkit)
- Good Behavior Game – PAX
- Guiding Good Choices
- LifeSkills Training (Botvin Middle School Version, Grades 6, 7 and 8)
- Local Prescriber Education ***
- Nurse Family Partnership (NFP)
- Positive Action
- Prevention-Intervention Specialist
- Prevention Training*
- Promotion of Prescription Drug Monitoring Program ***
- Promotion of Prescription Drug/Opioid Prevention Media Campaign(s) (***)
- Project Northland
- Project Towards No Drug Abuse
- Raising Healthy Children
- Secure/Safe Home Storage (Lockbox Distribution) ***
- Secure Medicine Return Program (located in pharmacy/law enforcement) ***
- Secure Medicine Take-back Events ***
- SPORT Prevention Plus Wellness
- Staff to deliver prevention services (policy review/development)
- Strengthening Families Program: For Parents & Youth 10-14 (Iowa Version)
- Strong African American Families
- Strong African American Families - Teen

*** Prevention strategies/practices from the Governor's Executive Order 16-09-Addressing the Opioid Use Public Health Crisis the State Opioid and Overdose [Response Plan](#):

F. Prevention Staff - General Prevention Coordination

Prevention coordination is a time that a dedicated prevention staff dedicate time to the coordination of prevention services within the Tribal Community. These activities include:

- Coalition Capacity Development - Refers to the time spent strengthening the effectiveness of a coalition, or community partnerships to achieve prevention science outcomes. These include actions that increase the ability of a coalition, or Tribe/UIO prevention and wellness planning workgroup to address the prevention of complex behavioral health concerns.
- Coalition/Tribal Communication - Refers to internal communication within a coalition or Tribe/UIO prevention and wellness planning workgroup.
- Community Outreach Service Type refers to the to the time
- Community Outreach - Refers to the time spent developing clear, transparent, and locally relevant communication channels and practices; ongoing communication externally between a staff member and a community member or partner to disseminate information about community or community coalition prevention efforts, to build and sustain relationships, and/or share in local decision-making.
- Development - Reflect specific actions delivered or facilitated by Tribe/UIO Partners to enhance the capacity and readiness of a tribe to achieve prevention science outcomes.
- Key Leader Engagement/Relationship Building - Refers to the time spent actively involving the cooperation and collaboration of influential members of the community to champion prevention efforts. This includes time spent securing involvement of key leaders to provide strategic direction, allocate resources, and facilitate organizational, policy, system, or community-wide change.
- Membership Recruitment and Retention - Refers to the time spent identifying and recruiting prospective members, communicating the "why" and "what's in it for you" benefits of membership, as well as activities that foster a sense of belonging among members' over time. This involves actions focused primarily on actively seeking and welcoming participation across sectors, with community stakeholders with varied backgrounds, experiences, perspectives, and identities.
- Organization Support - Refers to the time spent strengthening the functioning, effectiveness and sustainability of organizations or fiscal agents to support coalition, community, or Tribal/UIO prevention and wellness planning workgroup efforts, such as attending internal staff meetings and working within internal capacities and structures for subcontracting, fiscal and billing, financial and budget development, equipment, and technology.
- Training - This refers to delivery designed to equip individuals or groups with tools or information in the field of prevention and/or necessary to meet contractual requirements.
- Program Start-Up - refers to any service-related expense(s) during a month *before* a Program & Strategy is active or in a month where a Program & Strategy is *inactive*. The *Program Start-Up Service Type* is an expense-only *Service Type* only to be used as needed for the purpose of expense reimbursement. For details please review the [Program Cost Clarification Memo](#).
- Strategic planning - Refers to the time spent to increase the knowledge, skills, and resources necessary to engage in local strategic planning, such as following the Strategic Prevention Framework (SPF), Community Prevention and Wellness Initiative Planning Framework (CPWI-PF) and Gathering of Native Americans (GONA). This encompasses time facilitating, developing, and documenting the strategic planning processes, including but not limited to, developing an annual Action Plan or Tribal Plan, and/or Strategic Plan. Technical Assistance to coalition strategy implementation - This refers to specialized support, guidance, and expertise received by a Tribe/UIO Partners.

- Reporting and Evaluation - Refers to the time spent building the knowledge, skills, and resources necessary to carry out reporting and evaluation activities. This may include training staff, volunteers, establishing appropriate processes, adopting tools and methodologies, and building a data-driven culture. Other Staff Hours - Refers to admin/indirect or sick leave, paid leave, bereavement, jury duty, and holidays. Visit the Athena forum to learn more about [Minerva](#)

Section 7. Substance Use Disorder Treatment Services (alcohol, marijuana, opioid, and other drug use disorders)

Substance use disorder (SUD) means a cluster of cognitive, behavioral, and physiological symptoms indicating that an individual continues using the substance despite significant substance-related problems. The diagnosis of a substance use disorder is based on a pathological pattern of behaviors related to the use of the substances. There is a continuum of care starting with prevention, intervention, screening and treatment referral, aftercare services and recovery support services. Today there are different paths to recovery for everyone and treatment is individualized, holistic and patient driven.

Check the boxes to indicate types of SUD treatment services your Tribe intends to provide using various funding resources.

Allowable Services include:

A. COMMUNITY INTERVENTION AND REFERRAL SERVICES

- Continuing Education/ Training (for staff)***: Costs incurred to support educational programs, training projects, and/or other professional development programs directed toward: (1) improving the professional and clinical expertise of prevention and treatment facility staff, (2) the knowledge base of Indian Nation employees who oversee the scope of work; and (3) to meet minimum standards and contract requirements. Costs could include trainers, transportation, per diem expenses, and tuition.
- Youth, Adult, PPW Outreach, Referral, and Intervention: ***Intervention and referral*** covers the costs incurred to provide services to identify hard-to-reach individuals with substance use assessments and to engage these individuals in ongoing treatment services. Costs can be reimbursed for activities associated with providing information on substance use disorders, the impact of substance use disorders on families, treatment of substance use disorders, and treatment resources that may be available as well as re-engaging individuals in the treatment process. This does not include ongoing therapeutic or rehabilitative services. ***Outreach*** is an activity of providing critical information and referral regarding behavioral health services to people who might not otherwise have access to that information. This may include assisting individuals to navigate through different systems including health care enrollment, scheduling appointments for a substance use disorder assessment and ongoing treatment or providing transportation to appointments. Outreach tasks may include educating communities, family members, significant others, or partners about services and supporting access to services where care coordination may be necessary. Costs to be covered may also include responding to requests for information to be presented both in and out of the treatment facility by individuals, the public and community organizations.
- Other Outreach Activities: Outreach may also be done by clinical or non-clinical staff for the purpose of scheduling, rescheduling and client reminder calls. Administrative staff may contact individuals in order to confirm appointments and to reschedule missed appointments. Non-clinical staff will ensure that any relevant information offered by the client about the reason for missing an appointment is communicated to the assigned clinician for follow-up.

- **Alcohol/Drug Information School:** Costs incurred for Alcohol/Drug Information schools to provide information regarding the use and abuse of alcohol/drugs in a structured educational setting. Alcohol/Drug Information Schools must meet the certification standards in Chapter 246-341 WAC or its successor.
- **Outreach and Referral to individuals with Opioid Use Disorders:** Costs incurred with outreach and referral services to special populations such as opiate dependent, injecting drug users (IDU), HIV or Hepatitis C-positive individuals. Opiate Dependency/HIV and Hepatitis C Outreach is specifically designed to encourage injecting drug users (IDUs) and other high-risk groups such as opiate dependent and HIV or Hepatitis C-positive individuals to undergo treatment and to reduce transmission of HIV and Hepatitis C disease. Costs include providing information and skills training to non-injecting, drug using sex partners of IDUs and other high-risk groups such as street youths. Programs may employ street outreach activities, as well as more formal education and risk- reduction counseling. Referral services include referral to assessment, treatment, interim services, and other appropriate support services. Costs do not include ongoing therapeutic or rehabilitative services.
- **Medications for Opioid Use Disorder Treatment:** Costs incurred to provide assessment and treatment services to OUD patients. Services include prescribing and dispensing of approved medication, as specified in 21 CFR Part 291, for MOUD services in accordance with chapter 246-341 WAC or its successor. Both detoxification and maintenance are included, as well as physical exams, clinical evaluations, individual or group therapy for the primary patient and their family or significant others. Additional services include guidance counseling, family planning, educational and vocational information. Use of Federal Drug Administration (FDA) approved medications, in combination with counseling and behavioral therapies, to provide "whole patient" approach to the treatment of substance use disorders. MOUD increases treatment engagement, reduces cravings and mortality, and improves psycho-social outcomes.
- **Interim Services:** Services to individuals who have been denied admissions to a treatment program based on the lack of the capacity to reduce the adverse health effects of substance abuse, promote the health of the individual, and reduce the risk of transmission of disease. Such services are provided until the individual is admitted to a treatment program. Services include referral for prenatal care for a pregnant patient, brief screening activities, the development of a service plan, individual or group contacts to assist the person either directly or by way of referral in meeting his/her basic needs, updates to advise him/her of treatment availability, and information to prepare him/her for treatment, counseling, education, and referral regarding HIV and tuberculosis (TB) education, and, if necessary, referral to treatment for HIV and TB.
- **Brief Intervention (including SBIRT screening):** A time limited, structured behavioral intervention using substance use disorder brief intervention techniques, such as evidence-based motivational interviewing techniques, and referral to treatment services when indicated. Services may be provided at, but not limited to, sites exterior to treatment facilities such as hospitals, medical clinics, schools or other non-traditional settings.

B. TRIAGE SERVICES

- **Crisis Services/ Residential Stabilization:** Services provided on a very short-term basis to intoxicated or incapacitated individuals on the streets or in other public places and may include general assessment of the patient's condition, an interview for diagnostic or therapeutic purposes, and transportation home or to an approved treatment facility. Services may be provided by telephone or in person, in a facility or in the field, and may or may not lead to ongoing treatment. This does not include the costs of ongoing therapeutic services.

- **Withdrawal Management (ASAM Levels 3 or higher):** Costs incurred for detoxification services provided to an individual to assist in the process of withdrawal from psychoactive substance in a safe and effective manner. Acute detoxification provides medical care and physician supervision for withdrawal from alcohol or other drugs.
- **Sobering Services:** Costs incurred to provide shelter services for short-term (12 hours or less) emergency shelter, screening, and referral services to people who need to recover from the effects of alcohol. Services include medical screening, observation and referral to continued treatment and other services as appropriate.
- **Involuntary Commitment for SUD:** Costs incurred for services employed to identify and evaluate alcohol and drug involved individuals requiring protective custody, detention, or involuntary commitment services in accordance with chapter 71.05 RCW. Costs include case finding, investigation activities, assessment activities, and legal proceedings associated with these cases.

C. OUTPATIENT TREATMENT SERVICES

- **Outpatient Treatment:** Costs incurred for services provided in a non-residential substance use disorder treatment facility. Outpatient treatment services must meet the criteria in the specific modality provisions set forth in chapter 246-341 WAC. Services are specific to a specific client population and breakout of costs between group and individual therapy.
- **Intensive Outpatient:** Costs incurred for services provided in a non-residential intensive patient centered outpatient program for treatment of alcohol and other drug addiction.
- **Youth, Adult, and PPW individual therapy:** This also includes services to family and significant others of persons in treatment. Outpatient and Intensive Outpatient Individual Therapy.
 - Youth and young adults ages 10 through 20.
 - Women who are pregnant or postpartum (up to one year past delivery, regardless of birth outcome, adoption or foster care placement of child) and women with dependent children.
 - Adults
- **Youth, Adult, and PPW group therapy:** Includes services to family members of persons admitted to treatment and costs incurred to provide supervised recreational activities in conjunction with a substance use disorder outpatient program. Family Services will be coded as family support services and Supervised Therapeutic Recreation will be coded as group therapy. Outpatient youth group and Intensive Outpatient youth group therapy.
 - Women who are pregnant or postpartum (up to one year past delivery, regardless of birth outcome, adoption, or foster care placement of child) and women with dependent children.
- **Youth, adult, and PPW Case Management (ASAM Levels 1 or 2)**
- **Youth, adult, and PPW assessment:** Costs incurred in diagnosis, placement in accordance with the American Society of Addiction Medicine (ASAM) patient placement criteria.

D. SUPPORT SERVICES

- **DUI Assessment:** For DUI assessments, the costs for the assessment services must meet the program approval standards for this service outlined in chapter 246-341 WAC or its successor. Note: While SABG funds may not pay for DUIs, they may pay for DUI assessments and all DUI assessments have DUI evaluations written into the assessments.
- **Urinalysis/Screening Test:** Costs incurred to provide screening tests, such as urinalysis or breathalyzers, to identify a patient's use of drugs or alcohol. There is a maximum limit of eight tests per month for any individual. Note: SUPTRS funds only pay for urinalysis as part of the initial assessment or the SUD treatment plan.
- **Transportation:** Costs incurred to transport patients to and from substance use disorder treatment programs.

- **Childcare Services:** Costs incurred to provide childcare services, when needed, to children of parents in treatment to complete the parent's plan for substance use disorder treatment services. Childcare services must be provided by licensed childcare providers or by providers operating in accordance with the provisions set forth in WAC's published by the Department of Health (DOH) and Department of Children, Youth and Families (DCYF) for the provision of childcare services.
- **Engagement and Screening:** Costs incurred assessing a person's readiness for change and applying appropriate strategies to motivate the client to enter and participate in treatment.
- **Therapeutic Intervention Services for Children:** Cost incurred to provide services promoting the health and welfare of children accompanying parents who participate in the residential substance abuse program. Services include: developmental assessment using recognized, standardized instruments; play therapy; behavioral modification; individual counseling; self-esteem building; and family intervention to modify parenting behavior and/or the child's environment to eliminate/prevent the child's dysfunctional behavior.
- **Naloxone:** Naloxone HCl (trade names: Narcan, Novaplus). This medication is used for the emergency treatment of known or suspected opioid overdose.
- **Tuberculosis Screening:** Costs incurred to provide the Mantoux PPD skin test (standard skin test) when routine TB screening indicates the patient has or is at high risk of TB disease. Costs include conducting a TB risk assessment, symptom screening, and PPD skin test. Includes two visits: one to administer the test and one to read the results.
- **Case Management:** Case management services are services provided by a Substance Use Disorder Professional (SUDP) SUDP Trainee, or person under the clinical supervision of a SUDP who will assist individuals in gaining access to needed medical, social, education, and other services. Does not include direct treatment services in this sub element. This covers costs associated with case planning, case consultation and referral services, and other support services for the purpose of engaging and retaining individuals in treatment or maintaining individuals in treatment. This does not include treatment planning activities required in chapter 246-341 WAC.

E. RESIDENTIAL TREATMENT Funds cannot be used for facilities within an hospital setting.

- **Room and Board:** Costs incurred for a patient's lodging and meals while receiving residential treatment.
- **Intensive Inpatient Residential Treatment Services:** Costs incurred for a concentrated program of substance use disorder treatment, individual and group counseling, education, and related activities for alcoholics and addicts including room and board in a twenty-four-hour-a-day supervised facility in accordance with chapter 246-341 WAC or its successor.
- **Long-Term Residential Treatment Services:** Costs incurred for the care and treatment of chronically impaired alcoholics and addicts with impaired self-maintenance capabilities including personal care services and a concentrated program of substance use disorder treatment, individual and group counseling, education, vocational guidance counseling and related activities for alcoholics and addicts including room and board in a twenty-four-hour-a-day supervised facility in accordance with chapter 246-341 WAC or its successor.
- **Pregnant, Post-Partum, or Parenting (PPW) Women Housing Support Services:** Costs incurred for support services to PPW in a transitional residential housing program designed exclusively for such individuals. Costs include facilitating contacts and appointments for community resources for medical care, financial assistance, social services, vocational, childcare needs, outpatient treatment services, and permanent housing services. This includes services to family or significant others of a person currently in transitional housing. These cases would be coded as Family Support services.
- **Family Hardship:** Costs incurred for family members traveling round trip from and to their home to the treatment facility for distances over 50 miles within Washington State. These funds may only be used for Washington residents, for travel within Washington State, and

for transportation and lodging. Priority is given to travel that is required for clinical participation of the family in the youth's residential treatment, including admission appointment, family treatment activities, visitation and passes, and emergency discharge or other crisis visits.

Additional OUD SUD Treatment Strategies Not Shown Above

- Public Awareness on Medications for Opioid Use Disorder (MOUD) and other OUD treatment including media campaign development.
- Adaptation of statewide Tribal Opioid [For Our Lives](#) Campaign.
- Media campaign development
- Other SUD treatment strategy (please describe): If the Indian Nation, would like to propose an innovative or culturally specific strategy for treatment and/or recovery, describe the "Other opioid treatment strategy."

Section 8. Substance Use Disorder Recovery Support Services (alcohol, marijuana, opioid, and other drug use disorders)

Include information regarding implementation of recovery support services. Include how the Tribe will plan, train, and negotiate with community partners for the provision of recovery support services.

In the Tribal Plan, answer the following questions regarding your recovery support services programs.

1. Describe types of recovery support services that the Indian Nation will implement in their community.
2. Describe how the program will outreach to individuals in recovery.
3. Describe how the program will outreach to the community to increase recovery support services.

SAMHSA defines recovery as "a process of change through which individuals improve their health and wellness, live a self-directed life to the greatest extent possible, and strive to reach their full potential."

Additionally, SAMHSA has developed 10 guiding principles to foster the recovery of individuals from substance use disorders to help guide recovery support programming. These include:

- Recovery emerges from hope;
- Recovery is person-driven;
- Recovery occurs via many pathways;
- Recovery is holistic;
- Recovery is supported by peers and allies;
- Recovery is supported through relationship and social networks;
- Recovery is culturally-based and influenced;
- Recovery is supported by addressing trauma;
- Recovery involves individuals, families, community strengths, and responsibility;
- Recovery is based on respect.

Additionally, SAMHSA outlines four dimensions of recovery that include health, home, purpose, and community. To expand:

- Health refers to supporting the management of an individual's substance use disorder. These include supporting the health and wellness of individuals and promoting ongoing treatment stabilization for individuals in recovery.

- Home refers to supporting individual or recovery community to have a home that is safe and stable.
- Purpose refers to supporting an individual or recovery community with activities that are meaningful to their lives, including education, employment, family relationships, income and support for individuals to participate in the larger community.
- Community refers to supporting an individual or recovery community in enhancing social networks and relationships.

Recovery support services include strategies to promote the health and wellness of individuals recovering from substance use disorders.

Examples of recovery support services include:

- peer services programs including recovery coaching models;
 - peer-to-peer supports for individuals
 - peer-led support group
 - peer-led training or peer certification activity
- supportive housing strategies;
- supportive employment strategies;
- education strategies to support meaningful purpose and community engagement in recovery networks;
 - Recovery networks include youth networks, parent networks and recovery cafés
- recovery support service childcare fee or family caregiver fee;
- recovery support service transportation;
- secondary school, high school, or collegiate recovery program service or activity;
- recovery social support or social inclusion activity;
- other SAMHSA approved recovery support event or activity.

Support for individuals for recovery supports is person-driven, therefore it is important to assess the needs and how support with the individual through a recovery planning process. Programs supporting individuals in recovery should identify a mechanism to establish a recovery plan and provide support as needed.