

5th Annual
RECOVERY
CAPITAL
SUMMIT



2022



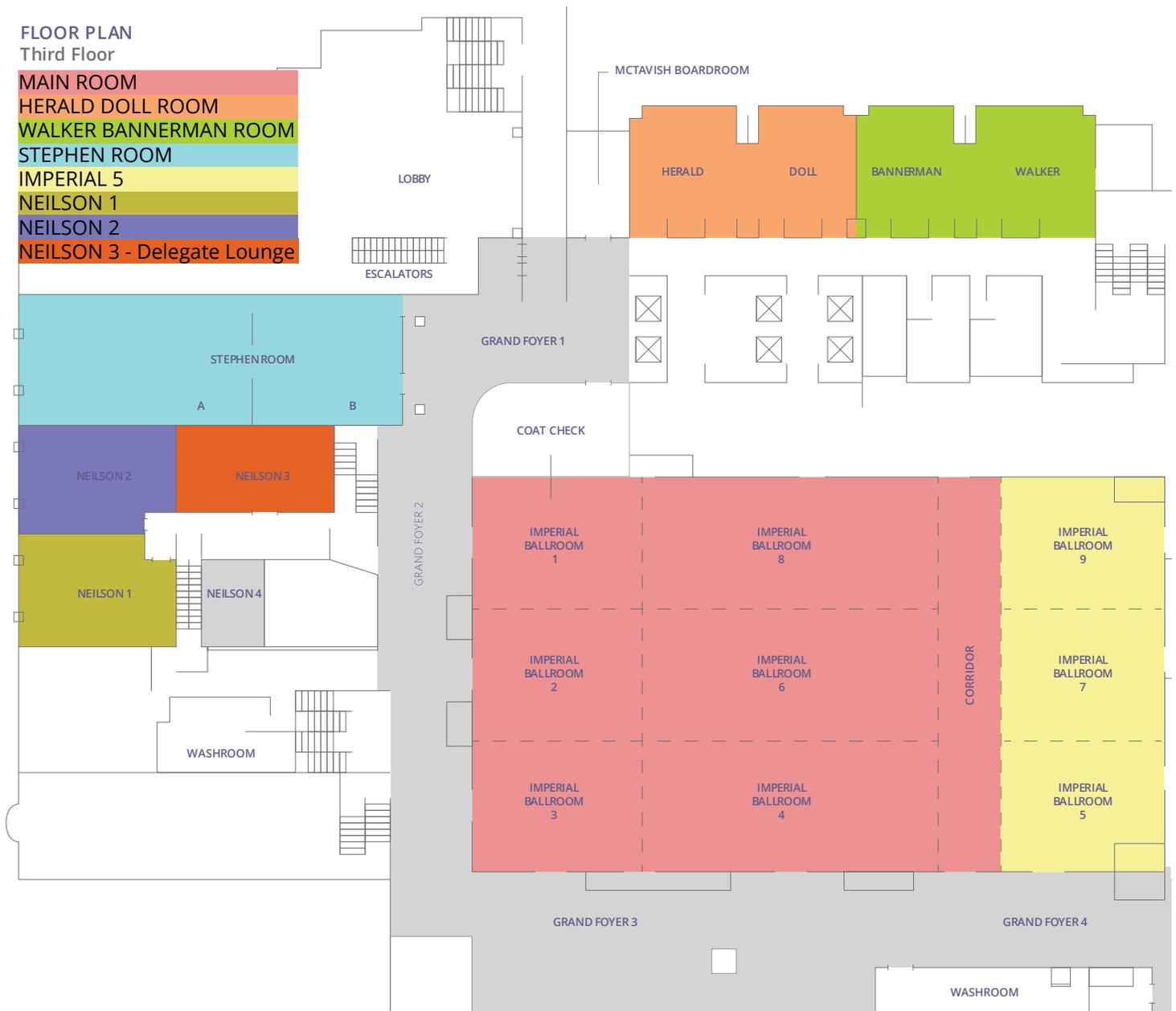
Recovery Oriented Systems of Care
that Build Recovery Capital
Hyatt Regency Calgary, April 12-13, 2022

**SCHEDULE
INSIDE**

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FLOOR PLAN





MESSAGE FROM THE PREMIER OF ALBERTA

On behalf of the Government of Alberta, welcome to the fifth annual Building Recovery Capital in Canada Conference, Canada's Addiction Recovery Summit. Alberta is proud to host this summit with policy makers and industry leaders from across the country.

Addiction is an illness that not only harms the individual who is struggling, but it also destroys families while tearing communities and workplaces apart. We know from the thousands of men and women in recovery here in Alberta and across Canada that recovery from addiction is possible for everyone.

When we were elected in 2019, we began transforming Alberta's mental health and addiction care system toward recovery-oriented care. This means that recovery is always recognized as a realistic and achievable goal and every person is supported in their pursuit of recovery. This is a big shift and a big opportunity for all of us. It will have a profound impact on people who are living with addiction, and on their families, communities, and workplaces.

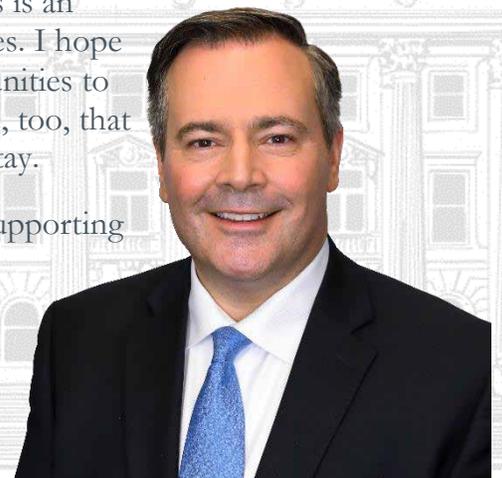
Recovery from addiction is not just about living a life free of drug use. It is also about improving quality of life by seeking balance and healing in all aspects of health and wellness, which is achieved through building recovery capital. Building recovery capital is not limited to the health-care system; it also includes families, communities, and workplaces.

I encourage everyone to participate fully in the conference. This is an exciting opportunity to share ideas, knowledge and best practices. I hope you will be inspired to take what you learn back to your communities to support recovery here in Alberta and across the country. I hope, too, that you will take advantage of all Calgary has to offer during your stay.

Welcome to Alberta, and thank you for your contributions to supporting people in their pursuit of recovery from the illness of addiction.

A blue ink signature of Jason Kenney, written in a cursive style.

Hon Jason Kenney, Premier of Alberta





MESSAGE FROM THE ASSOCIATE MINISTER

I would like to welcome everyone to my home city of Calgary for the fifth Annual Building Recovery Capital in Canada Conference, Canada's Addiction Recovery Summit.

As Alberta's Associate Minister of Mental Health and Addiction I am honoured to lead Alberta's shift toward a recovery-oriented system of care.

We know that recovery is possible for everyone. It is a pursuit that is ultimately measured by improvements in an individual's whole life, not just a life free of drug use. Developing recovery capital – the resources a person can draw on to begin and maintain their recovery – is key to success.

A recovery-oriented system of care can also be viewed as an outcomes-oriented system of care or a holistic system of care. Our focus is on supporting services that improve recovery capital, and therefore the lives of people struggling with and recovering from addiction.

I have seen for myself just how important it is to support the pursuit of recovery. Albertans have shared with me how they are transforming their lives, how they feel renewed hope for the future, and how they can finally envision living a life free from the illness of addiction in recovery.

Alberta's government will continue taking action to make recovery a realistic and achievable goal for all Albertans. We've funded over 8,000 additional annual treatment spaces, removed user fees for publicly funded residential addiction treatment, and we are building more treatment capacity that includes virtual options.

Alberta's government is proud to be leading the country supporting recovery from addiction and making sure every Albertan has the opportunity to pursue recovery.

I am so grateful to everyone who is participating in this year's conference. Thank you for the role you play in supporting people in their recovery from addiction, and helping families, communities, and workplaces to support the pursuit of long-term recovery for everyone.

I hope you have a great and productive conference.

A handwritten signature in black ink, appearing to read "Mike Ellis".

Hon Mike Ellis, Associate Minister of Mental Health and Addiction, Alberta



MEET THE ADVISORY COMMITTEE



Giuseppe Ganci
Conference Co-chair



Jordan Bowman
Speaker and Presenters Coordinator



Jessica Cooksey, MA CCS-AC ICADC
Conference Co-chair



Parker Mackay
Registration Coordinator



Matthew Kalenuik, CCS-AC ICADC
Communications Coordinator



Dr. David Best
Research and Recovery Capital Clinical Lead

WELCOME TO THE CONFERENCE

Last Door Recovery Society acknowledges that the Recovery Capital Summit is being held on the traditional territories of the peoples of the Treaty 7 region in Southern Alberta, which includes the Blackfoot First Nation tribes of Siksika, the Piikuni, the Kainai; the Stoney Nakoda First Nation tribes of Chiniki, Bearspaw, and Wesley; the Tsuut'ina First Nation and the Northwest Métis – Region 3. We honour and give respect to these traditional caretakers of this land.

Last Door proudly presents our 5th Recovery Capital Conference of Canada which has become a national summit. The Summit started in 2017, and service providers from across Canada were intrigued by Recovery Orientated Systems of Care (ROSC). The event grew to the national stage where six cities across Canada participated and learned how recovery capital and ROSC supports communities and individuals suffering from mental health and addiction.

On Behalf of the Organizing Committee and Last Door Recovery Society's Board we would like to welcome all the mental health and addiction professionals to the year's Summit hosted in Calgary, Alberta, April 12-13, 2022.

Building on the success of previous conferences, the theme for 2022 is Recovery Orientated Systems of Care that build Recovery Capital to overcome addiction. We hope you learn from our global experts and our lived experience speakers. We are indeed in a time of great innovation with Recovery Orientated Systems of Care.

The program is shaped to be excellent, and the networking opportunities will be outstanding. The conference topics genuinely reflect the current trends, recent advances, and new approaches in mental health and addiction.

I am incredibly proud of the employees of LDRS who have been instrumental and tirelessly educating service providers across Canada about recovery capital and ROSC. We welcome everyone attending the Recovery Capital Summit.

Jared Nilsson, Executive
Director of Last Door
Recovery Society



THE PANDEMIC OF ADDICTION

Crystal Smalldon, RSSW, Psychotherapist, CCAC, CIAC, CCTACP, ICADC, CADCI(GA) ADCR(MN) CAC(FL), Certified Medication Assisted Treatment Specialist (MATS)

This pandemic has seen so many suffer. Many have gotten sick from COVID with thousands dying. Many, many more have suffered through this pandemic with their pre-existing mental health illnesses getting worse and for some first-time mental health sufferers, new territory and challenges have been felt. This pandemic is tragic. The other pandemic of people who are dying of drug related illnesses is what I am equally concerned about. We need to have a variety of solutions for the secondary pandemic of Substance Use that is plaguing our country right now.

Since the pandemic started, over 22,000 people across Canada have died from drug-related deaths with over 6007 in British Columbia alone. This figure does not include alcohol or tobacco related deaths nor deaths from addiction related self-harm.

We have a crisis on our hands. Having only one or two approaches is costing taxpayers more. Because drugs like the powerful opioid fentanyl are so prevalent, we are seeing a high rate of overdoses and deaths. With the onset of social isolation through the pandemic, many users' risks of overdosing grew because they used alone - as no one is with them to administer naloxone. Just as we see with naloxone that having one tool in our toolbox for overdose prevention is helpful but not the whole story, we need a variety of solutions, not just on overdose prevention but also management of drug use.

Despite the need for a variety of options, funding in our country for people who use drugs and alcohol is severely lacking. With a severely under funded system comes solutions that do not meet the complex needs of the population, hampering recovery efforts.

Recovery does not have a singular consensus definition within the addiction field. Many people interpret recovery to be complete abstinence, while others believe this term is synonymous with remission, and still others associate recovery with quality-of-life indicators. No matter your vision of recovery, recovery is the imperative outcome we all strive to achieve in every case possible.

Recovery is described as a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

We must include recovery and recovery capital as it addresses several factors, we all want in the medical system. A mental health lens of recovery does not equate recovery with "cure," but refers to "living a satisfying, hopeful and contributing life, even when there are ongoing limitations caused by mental health.

Canada needs an approach to drug, alcohol and tobacco use that includes a recovery-oriented approach.

Recovery has several principles we can all agree are vital. Recovery emerges from hope, is person-driven, occurs via many pathways, is holistic, is supported by peers and allies, is supported through relationship and social networks, is culturally based, and influenced, is supported by addressing trauma, it involves individual, family and community strengths and responsibility and is based on respect.

Michael Dennis wrote that (there) "...is recognition that recovery is a journey and not an event, and that it takes around five years before recovery can be regarded as self-sustaining." This concept of a journey was originally

considered in terms of reduced likelihood of relapse but has been redefined as the “sum of resources that an individual can draw on to support their recovery pathway”.

When speaking of recovery capital, there are numerous people with lived experience.

“I appreciate the scientific approach to solving a problem that has affected my family and I so deeply. Being able to assess my recovery strengths and barriers...allows me to track my progress to overcome my addiction” - Ron P

Over the past decade, healthcare providers have been tireless in their quest for solutions to the overdose crisis, and because of their efforts, the recovery capital movement in communities throughout Canada has gained momentum. Canadian communities have benefited from recovery-oriented partnerships fostered and initiated by recovery capital community practice, including referral agents, family counselling, outpatient counselling, wellness, and addiction recovery treatment providers. With the help of recovery capital, conferences, workshops, and the commemoration of recovery days across Canada, Addiction Counsellors have been provided opportunities for development and increased recovery knowledge, to help facilitate a successful outcome for those seeking recovery.

As the long time Executive Director of Canada’s Addiction Workforce Regulator, The Canadian Addiction Counsellors Certification Federation (CACCF), I am honoured to work alongside thousands of professionals daily in the quest for long term recovery for each client Canadian Addiction Counsellors serve. CACCF is proud to support the training and activities of Recovery

Capital and will continue to strive for long term successful recovery outcomes for all those suffering from this complex human issue.

Therefore, I am calling on our municipal, provincial, and federal leaders to do more for people suffering from the emerging pandemic that has taken a tight grip around our communities. The Pandemic of Addiction needs to be given a priority status so that we do not lose another brother, sister, friend or loved one to this dreadful disease.



Crystal Smalldon, Executive Director
Canadian Addiction Counsellors Certification
Federation (CACCF) - Canada’s Addiction Work-
force Regulator | www.caccf.ca

VOPD: SAME DAY MEDICATION

Dr. Nathaniel Day, MD CCFP ABAM

Alberta's VODP: One Piece in the Design of a Recovery Oriented System of Care:

About 5 years ago I was sitting across the table from a young woman who had recently tried to kill herself. She had been in early recovery, using medication assistance for fentanyl addiction and had delivered a healthy baby. She moved away from the city to be near family supports in a rural community and was cut off treatment medication. She went into serious withdrawal, relapsed and her child was apprehended. Despite significant effort on her part, she did not overcome a sudden and misguided cancellation of that part of her treatment.

Despite working in one of the best funded health care systems in the world, we did not meet her where she was at. Our system did not respect her desire for treatment at home, and we did not know about her crisis until after its consequences brought her to the hospital. If we were designing a better recovery-oriented system of care, to meet her needs, and the needs of thousands of other Albertans like her, what could it look like?

We believe in hope. We value urgent access for people in need. We see merit in individualized care. We believe in meaningful recovery. Could we offer clinical excellence while using technology to break down unnecessary barriers?

The Virtual Opioid Dependency Program is a public, not for profit program, that is successfully providing entry into recovery for many people in communities across our province. Today, anyone, anywhere in Alberta, can call 1-844-383-7688 and get connected with our same day start team to get treatment right away. Our

median wait time is 0 days. We offer treatment on demand. Once we achieve a measure of stability with that person, we work with them to map out next steps. Our transitions team helps engage people with other services, and local providers. We stay with them, checking in, advising, encouraging them, until they are connected. Our intake and ongoing care teams bring people into care with psychosocial and medical supports to continue their recoveries.

For people who struggle along the way, we approach them with compassion and individualized care trying to maximize opportunities for stability and enhance their safety. We also have developed a low barrier team, knowing that some of our most vulnerable neighbors will struggle to make needed connections. Surely, we could walk alongside them, helping whenever we can. It is my experience that individuals and families want recovery. We can and should continue to meet people where they are and offer evidence-based options to empower them with the tools they will need to build the healthy lives they desperately want.

Despite the illness of addiction, we have hope, thanks to the courage of the people we see who just keep pressing forward, towards their individual recovery.



RECOVERY COACHES ALBERTA

Steve Gaspar, MSc., BSc.

Recovery Coaches Alberta (RCA) is pilot project designed to offer recovery coach training and coaching services, at no-cost, to citizens of Alberta (18+ years of age). Though recovery coaching is not, necessarily, a new idea or approach I believe RCA is offering a unique opportunity for how we develop coaches and how we offer recovery coaching across Alberta.

In the summer of 2021 RCA contracted the services of Dr. Ray Baker and ORCA consultants (<https://www.optimalrecovery.ca/>) to assist RCA by providing a 40-hour learning objective based training. This includes developing our staff to become trainers so we can offer training as needed. The training is comprehensive and focuses specific areas including:

- Motivational Interviewing
- Recovery Capital
- Appreciative Inquiry
- Conducting a Coaching Sessions
- Ethics and Competencies
- Continuing Education

The participants are wide ranging in terms of their experiences in recovery. Including many with long term 12-step meeting experience (25-35 years), executive directors of treatments centers, alumni, health professionals (e.g., nurses) and people in recovery not associated with recovery-oriented services and wanting to learn how to coach.

So how is RCA unique? First, since we offer no-cost training and services we needed a pool of recovery coaches. Since it would not be financially viable to have 50+ paid staff we went with the volunteer/staff mix. To ensure volunteers didn't take the course and leave we require a time commitment, consisting of 4 months and 4 hours per week. Also, we

feel it's necessary any new/developing coach must have a coach. Each coach participates in a minimum of 60 minutes of coaching every 6 weeks (coaches are provided). In these sessions coaches can work on their goals and use their coach as a mentor.

Second, after the training, many coaches still lack the confidence/competence to coach. Though continuing education is stated amongst many recovery coaching trainings its incumbent for new coaches to seek resources out individually. With RCA this aspect is built into the program. When we formally went live (November 2021) there were not many recovery coaches. To keep them engaged, and honouring their time commitment, RCA created 14 possible hours per week where the new coaches can embed their learning and develop confidence/competence. We began, very loosely, having a semi-structured curriculum to a more formally monthly curriculum where coaches can partake in. These sessions also have the side effect of creating a community of practice.

Third, we offer coaching across Alberta via zoom, phone, or in-person to people in active addiction or any stage of recovery (early to late stage). Anyone using a coach from RCA can be assured our coaches are working on their skillset and have other coaches to assist their development.

If you would like to learn more about services, please email

info@recoverycoachesalberta.ca



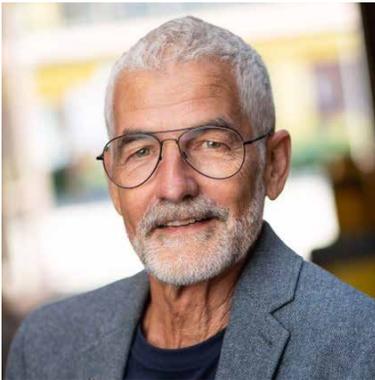
S P E A K E R S



The Alberta Model

ASSOCIATE MINISTER OF MENTAL HEALTH AND ADDICTIONS MIKE ELLIS

Alberta's government is transforming our health system to a new Alberta model of care that adopts a recovery-oriented approach to improve addiction and mental health outcomes. In the past, Alberta's approach focused heavily on acute interventions designed to manage the negative health effects of addiction and mental health challenges. The recovery-oriented system we are building expands our focus to include prevention, intervention, treatment, and recovery. The Alberta model of care is based on the belief that recovery is possible and that everyone should have the opportunity to pursue recovery.



Recovery Coaches: Connecting with People, Treatment and Community

DR. RAY BAKER

An essential component in the transformation to a Recovery Oriented System of Care, Recovery Coaching offers a unique set of competencies, roles, activities and locations of services. Recovery coaching compliments existing treatment modalities, helping them achieve better outcomes. Using solid theoretical approaches early research is showing benefits multiple measures of recovery. Attendees will learn to distinguish between roles of therapists or counsellors and Recovery Coaches, discuss the theoretical basis for techniques used in Recovery Coaching, and outline the current outcome-related scientific evidence on the effectiveness of Recovery Coaching



Ink Spots and Ice Cream: A framework and Method for Building Recovery Capital

DR. DAVID BEST

The presentation will be split into three sections. In the first section, the presentation will focus on theories and models of recovery and recovery capital, with a particular focus on challenges and barriers to recovery and how they are overcome, based on international evidence. The second section will provide a theoretical framework, drawing on two models – desistance theory and macrocriminology – to make sense of the social and community components of recovery. Finally, the third section will examine one approach to mapping and building recovery capital in individuals and communities, based on the REC-CAP and its translation into My Recovery Plan



Become an Iron Giant: Tackling Addiction using Endurance Sport

VANISHA BREAULT

Exercise: the most under-utilized modality of therapy, and in the case of treating addiction and mental health issues is one of the greatest and most highly effective tools that has the potential to transform lives. How do we know it works? Because we have seen it work multiple times over with some of the worst cases of addiction imaginable. Addict to ironman is not just a phrase or a cool slogan for us, it is a reality. There are tremendous challenges in the early stages of addiction recovery and some of the biggest hurdles to even getting through the day is the belief in oneself that staying sober could ever be a reality, especially if or when relapse seems to be the norm.



Building Bridges not Road Blocks, Alberta's Virtual Opioid Dependency Program

DR. NATHANIEL DAY

Alberta is an innovation leader in improving access to opioid dependency treatment. Alberta's Virtual Opioid Dependency Program (VODP) is a publicly administered Alberta Health Services program and has been designed to reduce barriers to care. Today anyone in Alberta who is using street opioids like fentanyl can receive same day treatment. Anyone in Alberta receiving care in corrections, halfway houses, detox, rehab centers, hospitals or emergency departments can be referred to VODP for ongoing or transitional care. For too long, access to safe and effective treatment has been limited by the person's proximity to rare bricks and mortar addictions clinics. Thanks to technology, the barrier of geography no longer needs to stop people from accessing recovery.



Recovery Coaches of Alberta

STEVE GASPAR

Recovery Coaches of Alberta is a new initiative intended to provide certified recovery coaches as a resource for people on their recovery journey. This discussion will discuss how the new initiative will operate in Alberta. Steve Gaspar is the project lead for Recovery Coaches of Alberta. He has a Master's degree from the Faculty of Health Sciences at Simon Fraser University. He spent the last decade developing and overseeing several housing first and harm reduction programs in Calgary. He's also a person in recovery with over 22 years of sustained recovery.



Building Recovery Capital by Engaging Families and Youth in Community Services

DR. EMILY ALDEN HENNESSY

The Recovery Capital for Adolescents Model (RCAM) is a framework for identifying assets to enhance and barriers to address in supporting youth's treatment and recovery from alcohol and drug misuse. The RCAM identifies internal resources (coping, motivation, and resilience), financial resources (transportation, access to treatment), social resources (peers, family), and community resources (recovery oriented programming) that youth can use in their recovery journey. I will illustrate the RCAM and detail specific strategies and community support models to support the recovery of young people.



Addiction-focused Mutual Help Groups and the Professional Health Care System (1)

Applying Contingency Management in Criminal Justice: Swift, certain, and fair responses to substance use (2)

DR. KEITH HUMPHREYS

(1) This presentation reviews research on the benefits of attending mutual help groups and then turns to the cost-savings health care systems can achieve by connecting patients to groups. It then describes policies that can nurture a robust mutual help ecosystem without putting it under professional control.

(2) This presentation will highlight evidence-based approaches to applying swift, certain, and fair sanctions for substance use to people on parole or probation, presenting evidence that such programs dramatically reduce substance use, crime, and incarceration, as well as having radiating public health and safety benefits.

S P E A K E R S



The New Science on Addiction Recovery

DR. JOHN KELLY

During the past 50 years a great deal has been learned about how to provide acute care services for those suffering from addiction, but there has been relatively little emphasis on how best to help individuals attain and maintain remission and recovery over the long-term. Greater recognition of the persistence of post-acute withdrawal phenomena and increased sensitivity to biobehavioral stress had indicated a need for ongoing social and other support infrastructures to enhance coping and resilience and reduce relapse risk. This talk will review the scientific rationale for the need for ongoing recovery monitoring and management services and the recent evidence investigating novel recovery support services.



The Heroism of Recovery

MICHAEL SHELLENBERGER

Since 2000, harm reduction advocates have argued that their approach saves lives. But during that time, drug deaths rose from 17,000 to 100,000 deaths, in the U.S. alone. Harm reduction no doubt plays an important role through needle exchange and opioid replacement therapy. But the goal of addiction treatment should be recovery, as it is Portugal, the Netherlands, and other pioneers in drug treatment. In this talk, Michael Shellenberger, the best-selling author of San Fransicko will describe why he views those who have recovered from addiction as heroes who offer great insights into the human condition that are of value to all of us, whether or not we have suffered from addiction.



Recovery Oriented Corrections

CHRISTINE BOOTSMA

Looking at a strengths based approach to involvement with the criminal justice system. How correctional centres can build bridges into the community based on strengths and partnerships. Lastly, looking at the affects on those who participate in the therapeutic community (outcomes) compared to others.



Kottakinoona Awaahkapiiyaawa “Bringing the Spirits Home” through Siksikaitsitapiiyssini: Blackfoot Ways of Knowing: A Framework for Reconnection

TAATSIIKIPOYII “CHIEF” CHARLES WEASEL HEAD

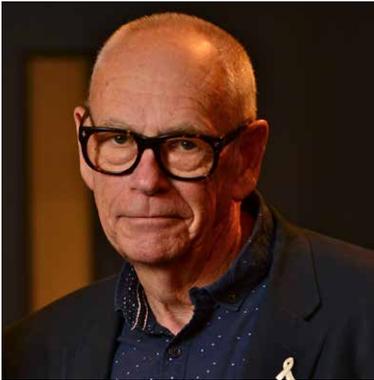
Taatsiikiipoyii, Charles Weasel Head is the Chancellor of the University of Lethbridge and currently Co-Chair for the Blood Tribe Department of Health Inc. Board of Directors. Charles was Head Chief of the Blood Tribe (Kainai) from November 2004 to November 2016 and Treaty No. 7 Grand Chief Charles Weasel Head during much of his Chieftainship. Presenter Charles Weasel Head will discuss the work being done with all levels of governments, health agencies, tribal government and health experts to continue to fight and take action on the opioid crisis to prevent further tragedy and to ensure safety and security for our children and families.



Women and Alcohol: Epidemic in a Pandemic

ANN DOWSETT JOHNSTON

With the pinking of the alcohol industry, women have been in the crosshairs of marketing for decades. Indeed, marketing has played a huge role in selling alcohol as a decompression tool to women, and the message has stuck: mommy-drinking dates, and more. That's the bad news. The good news? Zoom brought recovery into women's homes, and a new, largely female-led modern recovery movement has evolved, from The Luckiest Club out of Boston to Hola Sober out of Madrid, plus regular 12-step meetings. This is a fresh development, enticing many women to seek help in a revolutionary new way. Join Ann for a fulsome discussion of this compelling public health issue, where she asks the question: Where do women go from here?



Adventures in the Teenage Brain - Drug use, Recovery and Adolescent Brain Development

RAND TEED

This presentation will look at the impact of cannabis use on the developing brain. In particular how it impacts stress management capacity as well as self-assessment and self-esteem. The presentation will look at myths and misinformation around cannabis use and how to help teens better assess their approach to this drug. Attendees will: Understand how cannabis impacts two important developmental processes; myelination and pruning. Understand how to better discuss and educate teens about cannabis use. Understand how to assess adolescent cannabis use disorder. Be able to help teens understand recovery and self care options.



Family and Recovery Orientated Systems of Care

LINDA LANE DEVLIN

The new paradigm shift to a Recovery Oriented Systems of Care (ROSC) model highlights new needs: Just as the "recover-er" needs support and direction so does the "family" of the recover-er. The idea is to help families dealing with substance use disorder gain an understanding of the family dynamics that go on in a substance use disorder family system. These include co-dependency, differentiation, triangulation, stigma, emotional buttons. ROSC can support a continuum of services rather than crises-oriented care, with possible care in the person's community and home using natural supports and services provided to families during the initiation, ongoing and post-acute stages of their recovery.



How to Build a Brain

NANCY MANNIX

Lifelong health is determined by more than just our genes. Converging lines of evidence from neuroscience, molecular biology, genetics, and the social sciences tell us that early experiences are literally built into our brains and bodies to affect life course trajectories, for good or for ill. Significant adversity in childhood increases the risk of addictions, mental health problems, and several chronic diseases, sometimes only decades later in life. In this session, you will learn how brains are built: what kind of experiences promote healthy brain architecture, what kind of experiences derail it, and how these experiences get "under our skins" to affect learning, health, and social outcomes across the life span. This information has profound implications for health care professionals across all aspects of the care continuum.

S P E A K E R S



Healing through Breath, Land and Culture

AVIS O'BRIEN

This 1-hour presentation will strengthen our knowledge of how breath, embodiment & land-based cultural forms of healing can help folks to heal from addictions and mental health struggles. Learning the importance of externalizing the pathologies that have been placed on us by the mental health system, and in turn centre the strength, resilience and connection to land and culture. Creating a culture of belonging amongst Indigenous folks. This work aims to highlight the collective struggle we are all in as Indigenous people to help folks know they are not alone.



Frontline Workers and Trauma

DR. JOHANNA O'FLAHERTY

Psychological stress in response to critical incidents such as emergencies, disasters, traumatic events, COVID, terrorism, or catastrophes is called a psychological crisis. Discuss the correlation between extreme ongoing stress, trauma, and substance abuse, burnout, and PTSD. Attendees will: Understand and discuss the natures & definitions of a psychological crisis, trauma, and psychological intervention. Understand and discuss the nature and definition of critical incident stress management and its role as a continuum of care. Understand and discuss the correlation between trauma and subsequent addiction. Understand and discuss the resistance, resiliency, recovery continuum.



Developing Recovery Communities

DAVID PAVLUS

David Pavlus is the founder of the Last Door Recovery Society, a New Westminster non-profit organization that has been providing long term residential addiction treatment and adjunct family services for over 35 years. David had a vision founded on his own experience that it takes a community to heal addiction. Thirty years later we witness the vibrant and amazing New West Recovery Community. This community is filled with people who believe in and support recovery and owes its underpinnings to David's ideas, beliefs, and willingness.



The Icelandic Prevention Model and the Planet Youth guidance program

DR. PÁLL MELSTED RÍKHARÐSSON

The Icelandic Prevention Model (IPM) for substance use is a process framework for data driven, community based, primary prevention. It is based on several guiding principles and a series of implementation steps focusing on defining and implementing initiatives that strengthen community protective factors and mitigate risk factors. The Planet Youth guidance program is a platform for adapting and implementing the IPM to other national, social and cultural contexts. Currently, hundreds of communities around the world are implementing the Planet Youth guidance program. This presentation explains the principles of the IPM, describes the Planet Youth Guidance Program and gives examples of implementation experiences from around the world.

P A N E L S



Evidence Based Medications in a Recovery Oriented System of Care

DR. LAUNETTE RIEB, DR. MELDON KAHAN, AND DR. ROB TANGUAY

Medications for Opioid Use Disorder are the Gold Standard and First-Line for treatment initiation. National guidelines do not support detoxification “without immediate transition to long term addiction treatment”. The panel will review buprenorphine-naloxone, the preferred option, followed by methadone and other alternatives, as well as review the possible harms from current practices in Canada such as the practice of safe supply. The practice of Addiction Medicine will be discussed along with common misconceptions about OAT including initiation, maintenance, and tapering.



Healing - Recovery and Indigenous People

JORDAN BARESHINBONE, GERI BEMISTER, AND EARL THIESSEN

Culturally appropriate treatment interventions are a way to help Indigenous clients start their individual healing processes. Utilizing ceremony, cultural teachings, and an emphasis on spirituality and reconnection to their identity. Sunrise supports individuals to start their recovery journey using the 12 Steps of AA, with ceremony and spiritual teachings allowing clients the space to connect to their own Higher Power. Clients are taught about the Three Pillars of Healing; Reclaiming History, Therapeutic Healing, and Cultural Inclusion. Through these Three Pillars, clients can begin learning about the past and how it has impacted them and their families and communities, how to begin the healing process, and how to move forward by being active in their culture and beliefs.



Healthcare Under the Influence

DR. JEREMY BEACH AND DR. CHARL ELS

Substance Use Disorders / SUD are expressed within most age, cultural, economic, gender, and occupational cohorts. Physicians are not immune to the disease of addiction regardless of any special knowledge, skills, or experience they may hold by virtue of their profession. When a SUD is expressed within a health care professional, the delivery of safe, effective, competent, compassionate, and ethical care is placed at risk. This session explores the current approaches to treating addiction in the health profession and also addresses alternatives to discipline policies.



Clinical Practice of My Recovery Plan: Recovery Management and Outcomes in Alberta

JESSICA COOKSEY

Explore My Recovery Plan (MRP) as a means to building recovery-oriented capacities in individuals, families, communities and provincial systems necessary to maintain a recovery-oriented ecosystem. MRP, a key component of Alberta’s shift toward a recovery-oriented system of addiction and mental health care, includes a shift in focus from reporting on outputs to outcomes. The web-based platform helps providers to assess a client’s recovery capital, identify recovery goals, monitor progress toward these goals, and identify challenges while enabling clients to take an active role in their recovery. This data will enable government to identify systemic gaps and understand system demand to support planning and inform future investment decisions.

P A N E L S



Intensive Outpatient Addiction Programs: The Future of Recovery?

COLONEL (RET'D) DR. RAKESH JETLY AND DR. ROBERT TANGUAY

Intensive Outpatient Programs for addiction and mental health are an important fixture in a Recovery Orientated System of Care. Concurrent programs are the gold standard but is also often not available. Trauma and PTSD are often co-morbid with addiction, especially in our first responders, yet little research and little access to trauma therapy is available. Chronic pain is often ignored yet has significant effect on prognosis. We will discuss treatment options for recovery from addiction, operational stress injuries and PTSD, and chronic pain, enhancing a ROSC.



Our Collective Journey, Where Lived Experience Meets Clinical Support

RICK ARMSTRONG, DAMYAN DAVIS, AND RYAN OSCAR

After a recent contagion of suicides in Medicine Hat, AB, there were noticeable gaps in pre and postvention. Three local men in recovery came together in search of tangible action steps that could be taken to bridge the gaps and help those struggling. Addiction, mental health, and suicide were common threads in their personal journeys, and each of them were impacted along their own journeys by someone with shared experience. The commonality was found and Our Collective Journey (OCJ) was created. What started as three men with a big idea quickly developed into OCJ present day: a network of people with lived experience and community-oriented partners offering collaboration pathways to create recovery orientated safe spaces for individuals.



Recovering through Diversity

GANESH ALAGH, HARMAN BATH, AND ROBBY SIDHU

The stigma attached to Addiction is a huge barrier when it comes to finding support. A larger barrier is found in the South Asian community where being an addict or an alcoholic is looked down upon and sometimes hidden by not only the person affected but also the family. Drinking is a widely accepted part of the functions throughout the year in the community and the behaviours that comes along with it as well. Multi-day open bar wedding celebrations, birthday parties etc. sometimes leading to drug use that goes unnoticed until the lives of the affected and their families start to unravel. The available supports and how they can be used by the community will be discussed As well as different approaches to recovery such as 12 step and holistic treatments.



Addiction, Recovery and the Safety Sensitive Workplace: Current Reality and a Path Forward

DR. CARSON MCPHERSON, DR. PAUL SOBEY, DARREN ERICKSON AND EILEEN MAHONEY-WHITE

Those working in the construction sector are disproportionately impacted by substance use and related challenges. Construction workers are also at higher risk for disability compared to the general workforce. Just as the workplace can exacerbate substance use and related challenges, such environments can and should be conducive to initiating and maintaining recovery. This presentation will provide a comprehensive review of the challenges facing the construction and other safety/decision sensitive sectors as well as strategies and best practice models to initiate and maintain recovery-oriented initiatives in the workplace.



Recovery Oriented Policing

CHIEF MARK NEUFELD, CHIEF DALE MCFEE, CHIEF DEAN LAGRANGE, AND CHIEF MICHAEL WORDEN



Law enforcement responds to behavioural health crisis calls every day. Recovery Oriented Policing can be a key systems navigator for people who experience mental health and substance-use related health emergencies. A panel of Police Chiefs discuss building a system with what their jurisdictions have and approaching reforms from the lens of recovery-oriented systems of care domains.



Families and Their Recovery Journeys

WENDY ARNOLD, JILL KLEMICK, JEN ZURFLUH, NEETU SIDHU



Emerging Recovery definitions emphasize that recovery is more than the removal of destructive alcohol and/or drug use from an otherwise unchanged life. Recovery is a broader process that involves a radical reconstruction of the person-drug relationship, progressive improvement in global health and the reconstruction of the person-community relationships including family. The process of recovery is supported through relationships and social networks, this often involves family members who become the champions of their loved one's recovery. Attendees will learn about the growing role for families in recovery support and shared lived experiences.



Recovery Management and Assessing Recovery Capital

DR. DAVID BEST, JORDAN BOWMAN, PAUL SIBLEY, MARC MAJOREL AND REBECCA COCHRANE



The presentation will provide an overview of the concept of recovery capital and its three component parts – personal, social and community capital. It will also cover the My Recovery Plan software, recovery capital index scoring system, features, on-boarding organizations, and will have real life experience with users of the Recovery Management tool. Attendees will learn about using technology to manage recovery. The presentation will then discuss the growing evidence base around recovery capital measurement and in particular the use of the REC-CAP measurement system and its translation to routine practice in community. Learn about Alberta's implementation of the My Recovery Plan software across the province as part of their commitment to Recovery Oriented Systems of Care.



DAY 1 MORNING

CALGARY - APRIL 12, 2022

8:00am to 9:00am	Breakfast and Registration	Main Room
9:00am to 11:00am	Hon. Mike Ellis - Associate Minister of Mental Health and Addictions, Recovery Oriented Systems of Care that Build Recovery Capital	Main Room
	Dr. David Best - Ink Spots and Ice Cream: A framework and method for Building Recovery Capital	
11:00am to 11:30am	Break	Foyer
11:30am to 12:30pm	Dr. Ray Baker - Recovery Coaches: Connecting with People, Treatment and Community	Imperial Room 5
	Dr. Páll Melsted Ríkharrðsson - The Icelandic Prevention Model and the Planet Youth Guidance Program	Stephen Room
	Rick Armstrong, Damyan Davis, Ryan Oscar - Our Collective Journey, Where Lived Experience Meets Clinical Support	Neilson Room 1
	Robby Sidhu, Ganesh Alagh and Harman Batth - Recovering Through Diversity	Neilson Room 2
	Dr. Nathaniel Day - Building Bridges not Road Blocks, Alberta's Virtual Opioid Dependency Program	Walker Bannerman Room
	Dr. Charl Els and Dr. Jeremy Beach - Healthcare Under the Influence	Herald Doll Room
12:30pm to 1:30pm	Lunch	Main Room

DAY 1 AFTERNOON

CALGARY - APRIL 12, 2022

1:30pm to 2:30pm	Linda Lane Devlin - Recovery Oriented Systems of Care and Family Recovery Journeys Panel	Imperial Room 5
	Rand Teed - Adventures in The Teenage Brain - Drug Use and Recovery and the Adolescent Brain Development	Stephen Room
	Christine Bootsma - Recovery Oriented Corrections	Neilson Room 1
	Vanisha Breault - Become an Iron Giant - Tackling Addiction using Endurance Sport	Neilson Room 2
	Dr. Robert L. Tanguay and Colonel (Ret'd) Dr. Rakesh Jetly - Intensive Outpatient Addiction Programs: The Future of Recovery?	Walker Bannerman Room
	Steve Gaspar - Recovery Coaches of Alberta	Herald Doll Room
2:30pm to 3:00pm	Break	Foyer
3:00pm to 5:00pm	David Pavlus - Developing a Recovery Community	Main Room
	Michael Shellenberger - The Heroism of Recovery	

DAY 2 MORNING

CALGARY - APRIL 13, 2022

7:30am	Mutual Support Group Meeting, All Fellowships Welcome	Neilson Room 3
8:00am to 9:00am	Breakfast and Registration	Main Room
9:00am to 11:00am	Jessica Cooksey - Clinical Practice Lead, My Recovery Plan	Main Room
	Taatsiikiipoyii "Chief" Charles Weasel Head - Kottakinoona Awaahkapiiyaawa "Bringing the Spirits Home" through Siksikaitsitapiiyssini A Framework for Reconnection	
11:00am to 11:30am	Break	Foyer
11:30am to 12:30pm	Dr. Emily Alden Hennessy - Building Recovery Capital by Engaging Families and Youth in Community Services	Walker Bannerman Room
	Dr. Paul Sobey and Dr. Carson McPherson - Addiction, Recovery and the Safety Sensitive Workplace PART 1	Stephen Room
	Earl Thiessen, Jordan Bareshinbone and Geri Bemister - Healing, Recovery and Indigenous People	Imperial Room 5
	Dr. David Best, Paul Sibley, Marc Majorel, and Jordan Bowman - Recovery Management and Assessing Recovery Capital	Neilson Room 2
	Chief Mark Neufeld, Chief Dale Mcfee, Chief Dean Lagrange, and Chief Michael Worden - Recovery Oriented Policing	Herald Doll Room
	Dr. Launette Rieb, Dr. Rob Tanguay, and Dr. Meldon Kahan - Evidence Based Medications in a Recovery Oriented System of Care	Neilson Room 1
12:30pm to 1:30pm	Lunch	Main Room

DAY 2 AFTERNOON

CALGARY - APRIL 13, 2022

1:30pm to 2:30pm	Ann Dowsett Johnston - Women and Alcohol: Epidemic in a Pandemic	Neilson Room 1
	Dr. Paul Sobey, Dr. Carson McPherson, Eileen Maloney-White, and Darren Erickson - Addiction, Recovery and the Safety Sensitive Workplace PART 2	Stephen Room
	Avis O'Brien - Healing through Breath, Land & Culture, Indigenous Speaker	Imperial Room 5
	Dr. David Best, Paul Sibley, Rebecca Cochrane, and Jordan Bowman - Recovery Management and Assessing Recovery Capital	Neilson Room 2
	Dr. Keith Humphreys - Addiction Focused Mutual Help Groups and the Professional Health Care System	Walker Bannerman Room
	Dr. Johanna O'Flaherty - Frontline Workers and Trauma	Herald Doll Room
2:30pm to 3:00pm	Break	Foyer
3:00pm to 5:00pm	Nancy Mannix - Chair and Patron of the Palix Foundation - How to Build a Brain	Main Room
	Dr. John Kelly - The New Science on Addiction Recovery	



CONTINUING EDUCATION INFO

The following certification bodies have approved CE Units

Organization	Credits	
CACCF	11	Canadian Addiction Counsellor Certification Federation
CCPA	11	Canadian Counselling and Psychotherapy Association
NAADAC	11	The National Association for Addiction Professionals
MDPAC	12	Medical Psychotherapy Association of Canada
VRAC	11	Vocational Rehabilitation Association of Canada

As more Continuing Education information is provided by various certification bodies it will be made available on the Recovery Capital Conference of Canada website at www.RecoveryCapitalConference.com

Please check our website for additional information on claiming your continuing education units with individual certification bodies, as each have their own requirements and prerequisites.

For any inquiries please reach out to community@lastdoor.org



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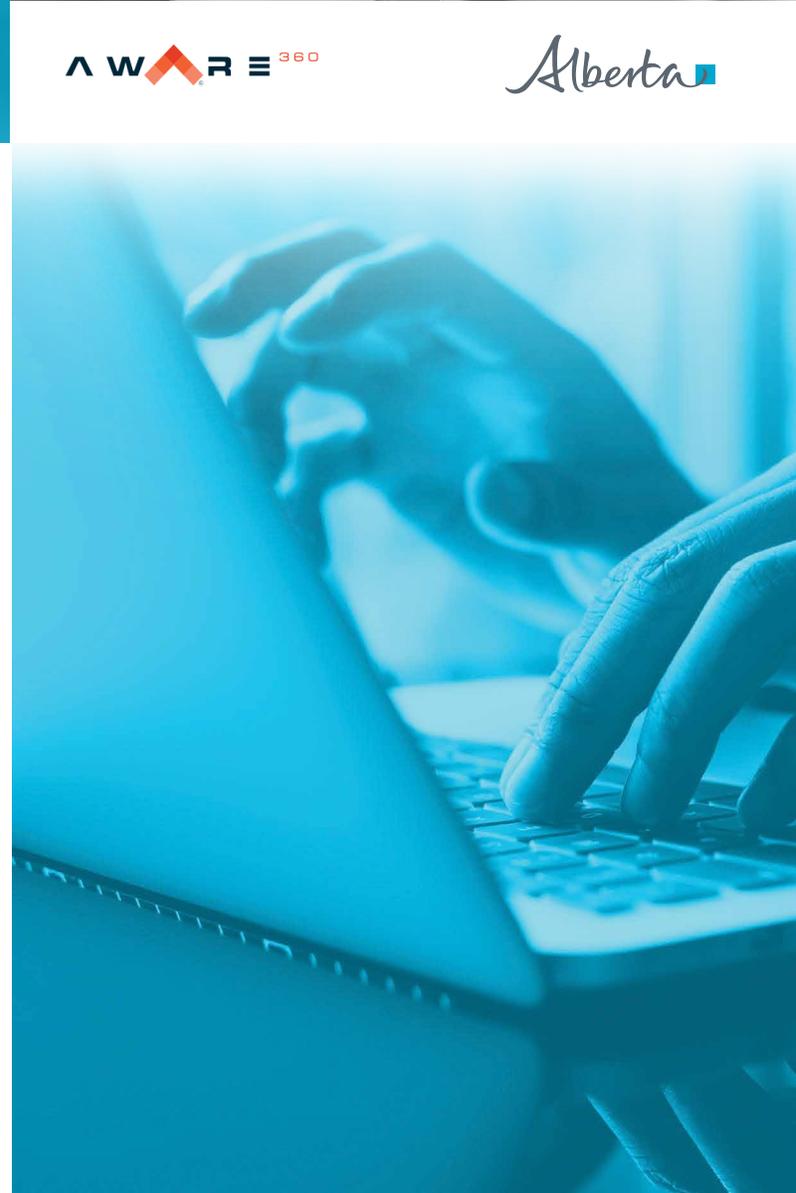
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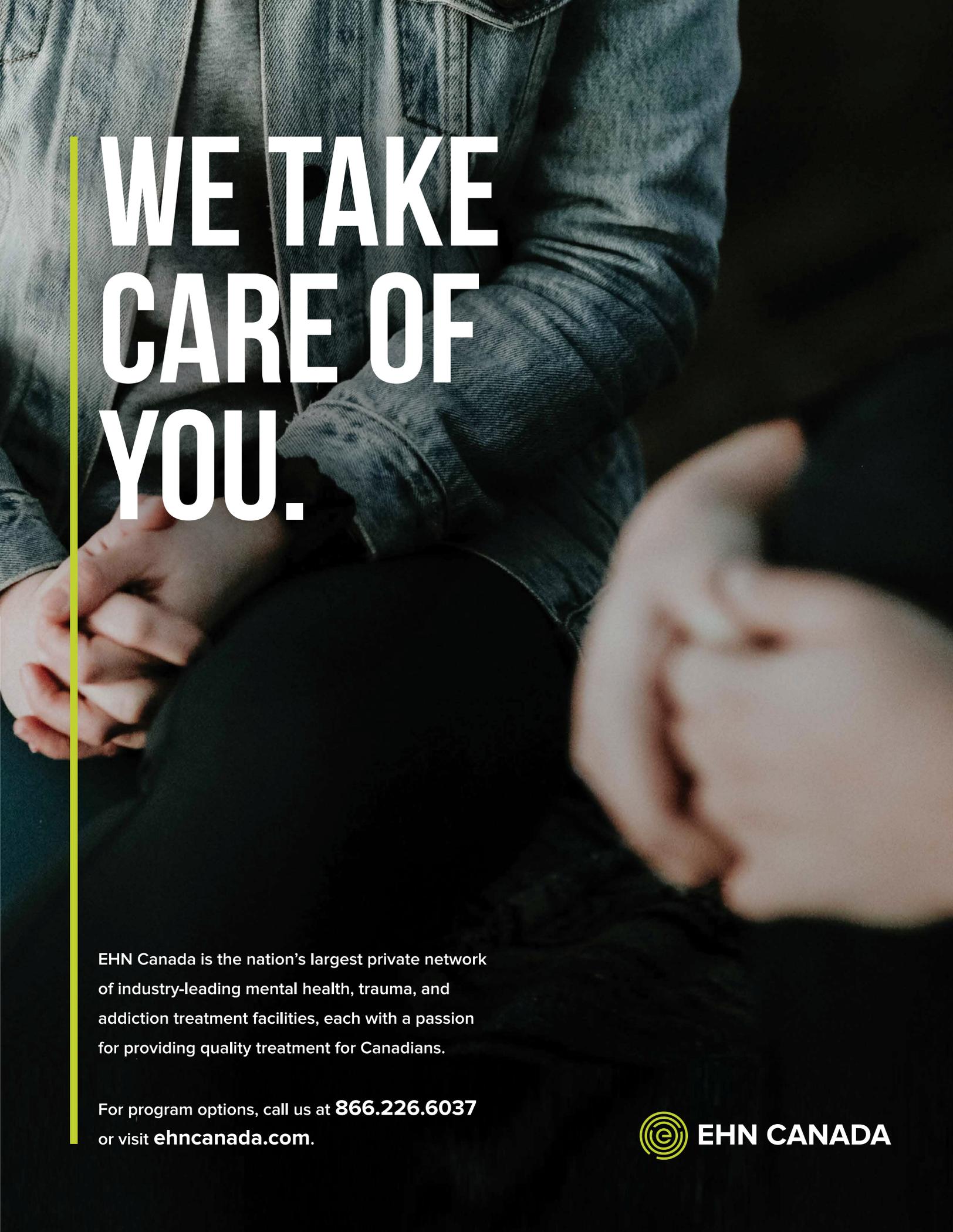


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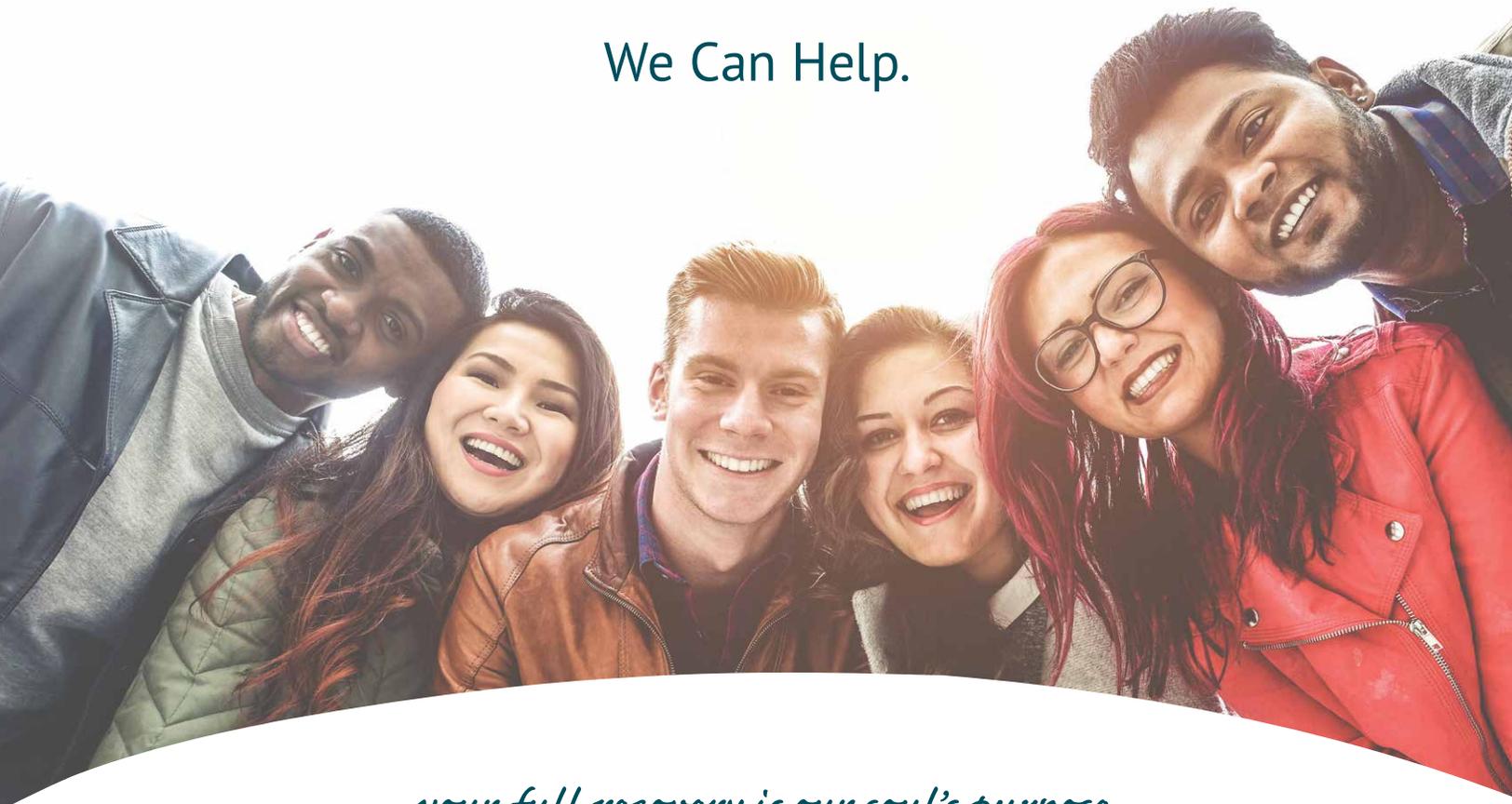
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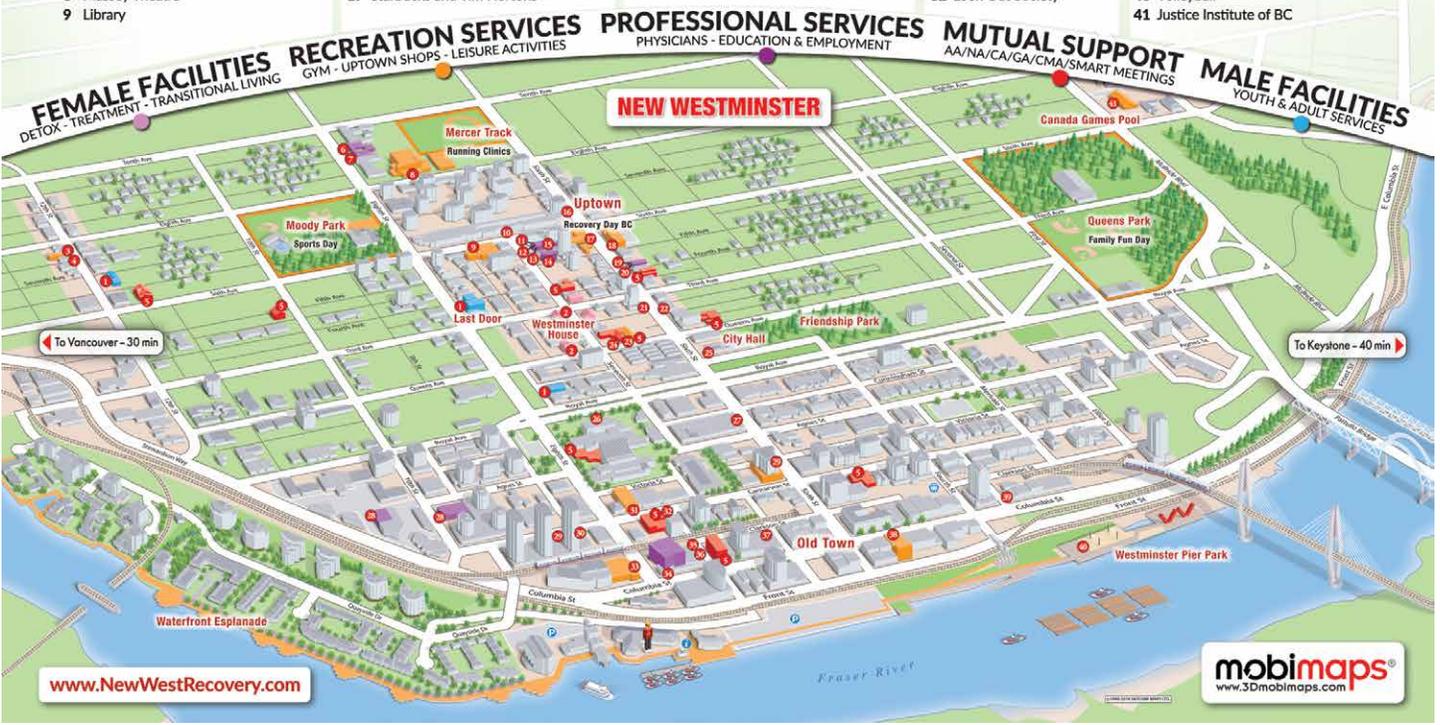
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| 4 Heritage Hall | 13 Employment Services Centre WorkBC | 21 New Westminister Chamber of Commerce | 28 Medical Clinic | 36 Purpose Society, Youth Services |
| 5 Community Support Meeting | 14 MLA Judy Darcy | 22 Parent-to-Parent Support Program | 29 Fitness Centre | 37 Union Gospel Mission (UGM) |
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