

# Telephone Recovery Support

## What is Telephone Recovery Support?

MRC's Telephone Recovery Support program is a peer-to-peer recovery support program that allows recovering people a way to give back, strengthen their own recovery, and support others who are seeking recovery.

Through this program, trained MRC volunteers call individuals seeking recovery who have requested this service, to ask how their recovery is progressing and to connect them to the resources they need to achieve and maintain recovery.

### Telephone Recovery Support:

- It is completely free and confidential.
- All calls are made from the MRC offices, Monday to Friday between 9 am and 6 pm.
- The program is available to anyone who lives in the state of Minnesota.
- Contact is only on the phone (If you need in-person peer support or resource navigation, please contact Minnesota Recovery Connection and ask for a Recovery Navigator).
- At any time, an individual receiving Telephone Recovery Support can discontinue service by letting Minnesota Recovery Connection know that they want to discontinue.
- Calls are made by volunteers with at least six months of recovery experience and that have had at least six hours of training.

## How does Someone Get Telephone Recovery Support?

Complete the Telephone Recovery Support Consent Form and return to MRC by mail, email, or fax.

### The Telephone Recovery Support Consent Form:

- Is downloadable from the MRC website and is located on the homepage under Peer-to-Peer Support Consent Forms.
- If individuals in a residential (inpatient) treatment setting or in a correctional facility complete consent forms, encourage them to indicate on the Discharge/Release Date line their discharge or release date, then the MRC office knows to contact them after that.

## FAQ's

Q: What happens when a recoveree completes and turns in their consent form?

A: A staff member or volunteer will contact the individual and enroll them in Telephone Recovery Support.

Q: How long is the Telephone Recovery Support program?

A: It goes for as long or as short as the individual would like to receive it.



**MINNESOTA RECOVERY CONNECTION**  
connect. recover. advocate. serve.

**Telephone Recovery Support Consent Form**

I, \_\_\_\_\_, authorize **Minnesota Recovery Connection (MRC)** to  
(Name)

place a phone call to me on a weekly basis at the number provided below.

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Date of Birth \_\_\_\_\_ Referred by \_\_\_\_\_ Alt. Phone# \_\_\_\_\_

Best time of day to be contacted: (circle) Morning Afternoon Evening Anytime

**Ok to leave message? (circle) YES or NO**

Discharge or Release date (if applicable) \_\_\_\_\_

The purpose of the disclosure authorized in this consent is to: **Provide telephone recovery support.**

I understand that my alcohol and/or drug treatment records are protected under the Federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records, 42 C.F.R. Part 2, and the Health Insurance Portability and Accountability Act of 1996 (HIPAA), 45 C.F.R. Pts. 160 & 164 and cannot be disclosed without my written consent unless otherwise provided for in the regulations. I also understand that I may revoke this consent at any time. This consent expires automatically as follows:

I understand and agree to the following:

1. I grant permission for a volunteer from Minnesota Recovery Connection (MRC) to call me at the above phone number and address to support me in my recovery.
2. Each time the MRC volunteer calls, he/she will be asking me how my recovery is progressing and if I am in need of additional support (i.e., meetings in area, recovery community centers, safe/sober housing, social events, other resources)
3. At the time of the call, if I am in need of a referral to a treatment program or detox unit, I will be assisted in finding a program, if I so desire.
4. If at any time I decide not to take part in this program, I will call MRC at (612) 584-4158 or tell the volunteer when he/she calls.

Date \_\_\_\_\_ Signature of client \_\_\_\_\_

**Please Return to Minnesota Recovery Connection**  
**Phone (612)-584-4158 Fax (612) 886-3940**  
**2446 University Avenue West, Saint Paul, MN 55114**  
**SCAN & EMAIL - volunteercoordinator@minnesotarecovery.org**