



Vermont Recovery Network
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Recovery Coaching Agreement

This document for participants receiving peer recovery support services clarifies what you can expect from your peer recovery support experience. Recovery coaches and recovery support workers (staff and volunteers) in recovery centers do not provide formal clinical assessments, specify any particular level of care, provide clinical treatment services, monitor abstinence, maintain client records, or dispense medications. Our role is to support you in establishing a personal plan for your recovery. Together we will explore what steps and services will help you to succeed in your recovery and to find and access appropriate services. Our job is to support you in prioritizing and following through with taking the actions and steps that will make your recovery successful. We will help you follow your recovery plan, but we remind you that you are responsible for your recovery.

Recovery coaching is a collaborative process between two people who are committed to recovery. We have developed another form, the Recovery Coaching Support Tool, which serves as a guide for providing recovery coaching support. We hope that as a participant you will take the time required to help us collect information at the beginning of, during, and at the end of your recovery coaching experience. We believe that considering the elements in this tool will help us develop your recovery plan. Collecting this information will also help us to examine the effectiveness of providing peer support services. The only personal information on each form will be your initials and age. We are committed to protecting your identity and anonymity; we will keep this information confidential, and use it to develop outcome data, which will not identify you as a participant. You are not required to participate in our data collection process to receive recovery support services.

We will respect your choice to withdraw from the recovery support program at any time. If you choose to do so, we request that you explain your reasons for withdrawing and encourage you to take the time to complete a final recovery support tool form. This completed form will help you see your progress and help us learn about the effectiveness and limitations of the recovery coaching process.

I have reviewed the document above and acknowledge my willingness to accept help from a VRN approved recovery coach. I understand that my recovery is my responsibility and that any decisions I make as a result of considering my options in the recovery coaching process are my decisions and not the responsibility of the person who has been willing to support my recovery process. I understand that a recovery coach is ethically obligated to report child abuse/neglect and threatened self harm or harm to others. I understand and agree that I will not seek to hold my recovery coach, recovery center or Vermont Recovery Network legally responsible for my decisions or actions. I understand that the supervisor who has signed below will welcome any questions or concerns I have about my recovery coaching experience.

I agree to show up for recovery coaching appointments on time and agree to provide notification as soon as possible, if I am unable to attend a scheduled appointment.

Print Name: _____ Recovery Coach Signature: _____

Signature: _____ Supervisor Signature: _____

Contact information: _____ Date: _____
