2021 NIA 20 Spring Assembly Area Treatment Chair Report

As we approach the one year mark of the onset of the health care crisis, this has been a time of reflection as we look both back and forward to the work of carrying the message into treatment facilities. We are well into the new year and volunteer access to treatment facilities remains a challenge across Northern Illinois Area 20. However, these challenges are not without both small and significant victories, thanks to the persistent efforts of trusted servants working together in both Treatment and Bridging the Gap (BTG) Committees across northern Illinois.

Treatment centers not associated or affiliated with a hospital healthcare system have demonstrated a wider use of in person volunteers since the state implemented Phase 4 without any mitigation measures at the end of January. Many of these residential inpatient treatment centers are allowing, encouraging, and actively seeking in person volunteers. COVID-19 health protocols for these volunteers vary widely, from temperature checks, screening questions (both written and/or verbal) and signing in and out not only for accountability but for contact tracing. In some hospital affiliated treatment centers, volunteers continue to carry the message virtually where there is online patient access. Others are allowing limited in person volunteer opportunities.

What remains one of the greatest needs is connecting patients with an available A.A. member through BTG opportunities. While treatment centers are working on COVID-19 health compliance protocols and a safe return to bringing back the A.A. fellowship to carry the message to their patients within their facilities, those who are being discharged need to find A.A. It's not realistic to expect they are going to find it on their own. If we are not able to be fully available inside treatment facilities to share our experience about A.A. outside of treatment, when individuals leave the facility they are disadvantaged, especially during COVID-19 where the world of virtual meetings can be confusing to a newcomer. There are opportunities for collaboration, cooperation, and partnership between Treatment and BTG today like never before.

One of these opportunities presented itself recently on a larger scale with an invitation to participate in a virtual US/Canada Treatment Forum involving Treatment and Bridging the Gap Chairs exchanging information and sharing best practices on carrying the message into treatment centers from Brooklyn, NY to Maui, HI. Treatment Chairs in Alberta, Canada addressed Canada's federal law, the Personal Information Protection and Electronic Documents Act (PIPEDA), as comparable in many ways to the Health Insurance Portability and Accountability Act (HIPAA) in the United States. Also discussed is the use of state supported and funded recovery coaches and their role/responsibility within the context of A.A. sponsorship. The group will meet again virtually at the end of the February to discuss Conference agenda items to better inform district treatment chairs and communicate information back to their respective areas. Following the meeting in February the group will meet quarterly. Both myself and Alternate Treatment Chair Richard H. were part of the inaugural meeting and we look forward to being a part of the ongoing quarterly sessions as well.

In love of service,

Lisa S. NIA 20 Treatment Chair

Richard H.
NIA 20 Alternate Treatment Chair