



Recovery as a guiding principle in organisations

Applying recovery-oriented thinking at a team level

Nice to meet you!

Allow us to introduce ourselves 😊

CARE as
standard
methodology

70% of staff
trained

kwintes



Annelies

Michelle



- Supports people with psychosocial challenges & psychiatric vulnerabilities
- Assisted living & home-based care
- Housing, daily living, working and learning
- Broad target group, including people facing mental health issues, addiction, homelessness, forensic care, or overlapping challenges

Experiential Expertise within Kwintess

- Experiential knowledge in policy making
- Long term strategy on recovery-oriented care



- Focus on peer support & self-help
- Promote recovery-thinking in region

- Contact with clients
- Experiential knowledge in teams

Scientific knowledge

From research, theory, evidence and literature

- Situations arise in the interaction between several parties (clients, professionals, organisations)
- Lack of co-operation between all parties involved
- Working elements: **relationship is the core!**

What helps some teams to carry such complexity, while others get stuck?

“Our clients are becoming increasingly more complex...”

Practical / professional knowledge

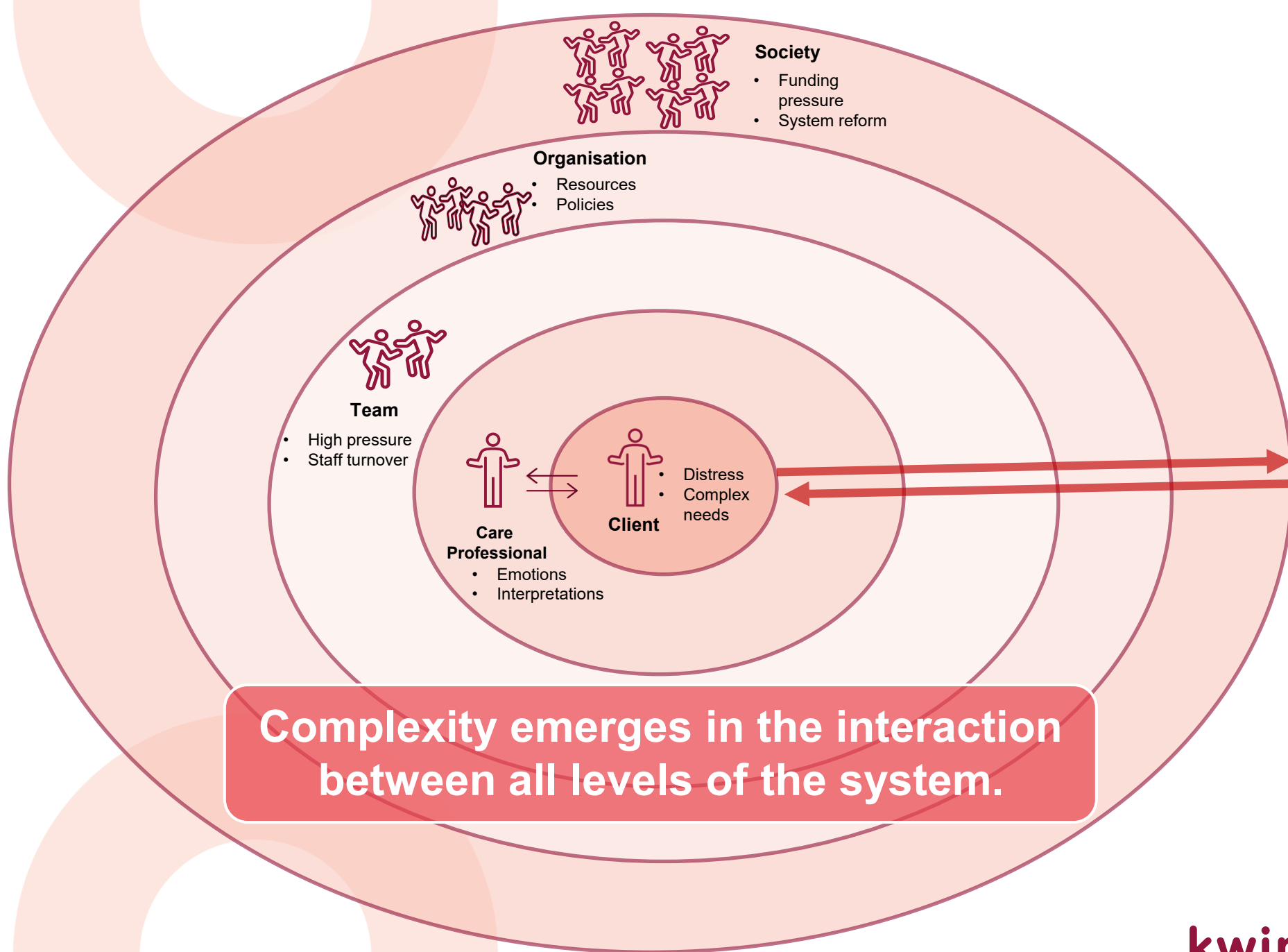
Gained through training, daily practice and reflection

- Different problems often come together and overlap
- Teams don't always know which direction to take
- Care staff are working under high pressure

Experiential knowledge

From lived experiences with (mental health) issues and recovery. Important: **collective** knowledge.

- It is not our **clients** who are complex, but their situations
- The care system itself can be difficult to navigate
- “Problem behaviour” → coping response
- Relationships are central to effective care



RECOVERY AS GUIDING PRINCIPLE

Recovery is a personal and unique process of change.

It involves rebuilding hope, meaning and connection.

Does the team still believe that change is possible?

Can the team reconnect with the purpose of their work?

In a high-pressure environment, do team members still feel connected and supported?

What happens if we translate these principles and apply them to a team level?

What strengths do we have?

- Peer support and methodical self-help
- CARE-model

TEAMKRACHT IN BEELD

(Team Strength in Focus)

- **3-hour team workshop**

Short enough to fit reality, long enough to slow down

- **Based on CARE's four core acts:**

Connecting, Understanding, Ensuring, Strengthening

- **Rooted in methodical self-help**

Knowledge is already present.

We facilitate space to explore it.

- **Practical and interactive**

Simple exercises + visual tool



FIRST EXPERIENCES



Pilot Team

- Works with complex situations
- Known to function well
- Safe place to test and learn

What happened...

- Many strengths visible
- Open conversation
- Unspoken themes surfaced

Even strong teams need space to reflect!

4.50

Average Rating



“We want to keep strengthening our connection as a team,
and stay focused on our shared goals and purpose”

Time for
real contact

CONNECTION

Trusting
each other

Belonging

Feeling like
a unit

Feeling
seen and
heard

UNDERSTANDING

Really
listening

Genuine
curiosity
and interest

Checking
assumptions

WHAT DID WE LEARN?

Ingredients for a healthy team

Openness

ENSURING

Finding
common
direction again

Safety

Feedback &
communication

Humour 😊

STRENGTHS

Knowing and
using each
other's qualities

Supporting
each other

Shared
purpose



YOU ARE HERE

SO... DOES IT WORK?



How can recovery-oriented thinking help teams and organisations move beyond survival mode?

Creating conditions to carry complexity together

Step 1: Connecting



To what degree do you feel connected to your team?

1

10

To what degree do you feel connected to the organization you work for?

Step 2: Understanding

In your organization, which dilemma's do you encounter regarding recovery-oriented care?

Step 3. Ensuring

You may wish to consider the following questions:

- What do I need?
- How do I recognise this?
- What do I sometimes lack?



What do you think is needed to improve recovery-oriented care?

Discuss your findings. How does this translate to your team?

- What do we need as a team? How do we recognise this?
- What do we sometimes lack?

Write down your shared conclusions on post-it notes.

Themes you may wish to consider include:

- Support
 - What support do we need from one another? / How do we support each other?
 - What support do we need from our manager?
 - What support do we need from the organisation?
- Alignment
 - How is our division of tasks organized?
 - Clarity
 - Communication
 - Expectations
- Boundaries
- Capacity / Workload
- Standing up for yourself

Step 4. Strengthening

I want Wishes, ambitions, dreams <i>I want to restore the relationship with my daughter. I want to learn to play the song 'Since I've been loving you' by Led Zeppelin on the electric guitar.</i>	I can Talents and skills <i>I am a passionate handyman with golden hands.</i>
I am Personal characteristics <i>I am caring, I like to help people.</i>	
I have Personal and material resources (people who support me, material resources, etc.) <i>Rita my counsellor, my neighbour, my friends, family, my cat Nelly. Material resources: my house, my allowance, my guitar.</i>	I know Knowledge and personal experiences <i>I know what to do when I feel bad. I have learned what recovery means to me.</i>

Figure 5.6 Example of completed Strengths Matrix

Which strength do you recognize within yourself as individual that could be helpful?

Which strength do you recognize within your organization that could be helpful?

Step 5: Reflection

How can recovery-oriented thinking help teams and organisations move beyond survival mode?

Creating conditions to carry complexity together



Thank you for participating!

Did you discover any insights during this session that you would like to take home with you?