



SAMHSA-HRSA CENTER for INTEGRATED HEALTH SOLUTIONS

Hiring and Supervising Peer Providers to Support Integrated Care

Larry Fricks
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Setting the Stage: Today's Moderator



Madhana Pandian
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**Slides for today's webinar
will be available on the CIHS
website:**

www.integration.samhsa.gov

**Under About Us/
Innovation Communities**

Our format:



Structure

Presentations from experts

Polling You

At designated intervals

Asking Questions

Responding to your written questions

Follow-up and Evaluation

Ask what you want/expect
and presentation evaluation

Listserv

Look for updates from:
hiring_supervising_peers_ic

Setting the Stage: Today's Facilitator



Larry Fricks
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SAMHSA-HRSA Center for Integrated Health Solutions

Peer Provider Innovation Community Objectives:

- A. Successful hiring of peer providers
- B. Quality supervision of peer providers
- C. Developing/Strengthening a culture of recovery/resiliency

Quality Supervision of Peer Providers

The 6th Annual Pillars of Peer Support Services Summit held at The Carter Presidential Center in 2014 focused on Peer Provider Supervision.

The summit participants were representatives from 21 states selected because of creative and cutting edge work in peer provider supervision.

Quality Supervision of Peer Providers cont.

Supervision of peer specialists is most effective when the peer specialist supervisor...

- is trained in quality supervision skills.
- understands and supports the role of peer specialists;
- understands and promotes recovery;
- advocates for peer specialist services and recovery across the organization; and
- promotes the professional growth of the peer specialist.

Role of Supervision:

Supervision - (Dictionary definition) – The process of observing, evaluating and directing an action or process.

Broadly speaking, it is to observe, evaluate and direct the work of another person in order to increase that person's productivity in relation to the agency's mission statement.

Basic Knowledge Needed to Supervise

- The work and/or the job description of the person being supervised
- The mission statement of the agency and what the agency wants from its employees
- Basic supervisory skills

Basic Knowledge Needed to Supervise cont.

- Point out areas of needed growth in a helpful and supportive manner
- Understand the ‘culture’ of their employees
- Be available for regularly scheduled supervision and unscheduled emergencies
- Communicate to the employee a sense of purpose and value related to role

Primary Role of Peer Provider

Peer specialists do many jobs, work in many positions and do many things, but...

- The primary role of the peer provider is to promote and support the recovery of their peers (the clients).
- Peer Specialists' job descriptions need to be written with the understanding that no matter where they are assigned to work or what they are expected to do their major responsibility is to promote and support the recovery of their peers.

Challenges for Peer Provider Supervision

- Other staff attitudes towards peer workers and recovery – some staff believe that people with mental illness problems are “too sick to work.”
- Role transformation and conflict – some staff pathologize the behaviors of peer workers as symptoms of illness or relapse rather than typical work related stress.
- Lack of clarity about confidentiality – Some staff perceptions is peer providers should not have access to client records because they believe peers are less trustworthy in relation to confidentiality.

Challenges for Peer Provider Supervision cont.

- Peer Jobs and salary range not well defined – Integrating the peer provider within the agency can be difficult when they are not compensated at the same level as other comparable jobs, lack clear performance standards and have no path for promotion.
- Lack of support - Supervision is an important support to peer providers; when it's not taken seriously, peer providers flounder.
- Finding qualified individuals – Some individuals want to be providers but they lack the proper training.

Challenges for Peer Provider Supervision cont.

- Criminal background checks – Some individuals in recovery who are qualified to be providers fail background checks and are not hired.
- Working at the agency where the peer provider receives services – If an individual serves as a supervisor and mental health provider to the same person, an unethical dual relationship on the part of the supervisor is created that loses sight of appropriate boundaries.
- Ethics and Boundaries – Policy and practices regarding ethics and boundaries need to be clarified.

Challenges for Peer Provider Supervision cont.

- The focus on medical necessity often restricts commitment to long-term support of setting, getting and keeping person-centered, recovery-oriented goals.
- While the mission statements of most states and agencies support the focus on recovery, funding sources and grants often force the agency to define productivity as hours of billable services.
- The peer specialist is a new workforce whose roles and gifts are not always understood by their supervisors and those they work with.
- Peer specialists are hired because of their lived experience and not their clinical training. Yet they are working in a system that has traditionally valued clinical education.

Five Keys to Developing and Sustaining a Quality Relationship

- 1) The agency and supervisor understand the philosophy of peer support and what peer specialists do well, which is promoting and supporting the recovery of their peers.
- 2) Peer specialist's job description, position in the agency and employment responsibilities allows, supports and encourages them to regularly do what they do well.
- 3) There is an early discussion between the supervisor and the peer specialist regarding expectations, which might include at the peer specialist's discretion, what the peer specialist wants if mental health issues arise at work.
- 4) The supervisor has on-going conversations with the peer specialist as to the value of lived experience.
- 5) Each person in the relationship is sensitive to the possible 'slippery slopes' within the relationship.

Reflection Questions on Supporting Peer Providers

Does the peer provider have regular and ongoing opportunities to...

...use their recovery story to create and strengthen their relationships with peers?

...help peers see possibilities for improving their lives?

Reflection Questions on Supporting Peer Providers

Does the peer provider have regular and ongoing opportunities to...

...teach wellness self-management skills?

...bring peers' concerns to the attention of clinical staff?

...train peers in self-advocacy?

Reflection Questions on Supporting Peer Providers

Does the peer provider have regular and ongoing opportunities to...

...support peers in accomplishing their goals?

...hold the peer perspective at team meetings?

...help peers develop wellness toolboxes?

Reflection Questions on Supporting Peer Providers

Does the peer provider have regular and ongoing opportunities to...

...help peers develop support groups and support networks?

...try creative approaches to developing recovery groups and activities?

...have conversations about possible goals not currently in the peer's treatment plan and support incorporating a new goal into the treatment plan in a timely manner?

Expectation Questions

- Do you understand the difference in supervision and therapy? (If not, let's talk about it.)
- What has been helpful and not helpful in your recovery – especially from agencies and providers?
- How could what you have learned about recovery be helpful to a client here?

Expectation Questions

- Could you teach someone what your experience has taught you? What could I, or the agency, do to help create opportunities for you to do this?
- What do you anticipate being your greatest challenge working here?
- What do you see as your strengths? Where can these strengths best be used in this agency? What do you see as possible challenges?

Lived Experience On-going Conversations

- What has your lived experience taught you about _____? (Recovery, taking care of yourself, dealing with stigma, etc.)
- What skills have you had to develop or strengthen because of your lived experience with a mental illness?
- What has your lived experience pushed you to do in order to function effectively?

Lived Experience On-going Conversations

- How has your lived experience made you a stronger person?
- What was helpful in getting you to decide to take responsibility for managing your own life?
- From my clinical training, this is what I see going on in this situation. What does your lived experience tell you?

Actions for Possible ‘Slippery Slopes’

Supervisors, being aware that peer specialists may have been out of workforce for a while, review and discuss general workplace expectations – written and unwritten policies and procedures, office codes of conduct, etc.

Actions for Possible ‘Slippery Slopes’

Supervisors know the difference in supervision and therapy and focus on mental health issues only as they negatively impact the peer specialist’s work and refer the peer specialist to the appropriate clinician when necessary.

Actions for Possible ‘Slippery Slopes’

Supervisors need to be aware of the, often subtle, nature of stigma and how it can negatively impact the supervisory relationship and the work of the peer specialist.

Actions for Possible ‘Slippery Slopes’

The behavioral health system need to create opportunities at both the state and local level to have dialogue around the question “In providing services, how do you balance what the system wants (billable hours) and what the peer (client) wants (a life of meaning and purpose)?”

Webinar Schedule

Webinar Number	Date	Time
March #3	Mar. 18	1 - 2pm
April #4	Apr. 29	1 - 2pm
May #5	May 27	1 - 2pm
June #6	Jun. 24	1 - 2pm
July #7	Jul. 29	1 - 2pm
August #8	Aug. 26	1 - 2pm

Listserv Update

Look for updates from:
hiring supervising peers ic

Time for
Q & A

Thank you for joining us today.
**Please take a moment to provide
feedback by completing survey at the
end of today's webinar.**

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