



# Opportunities for Utilizing Peer Support and other Meaningful Peer Roles in Coordinated Specialty Care (CSC) Programs

Wednesday, April 29, 2015 – 2pm Eastern





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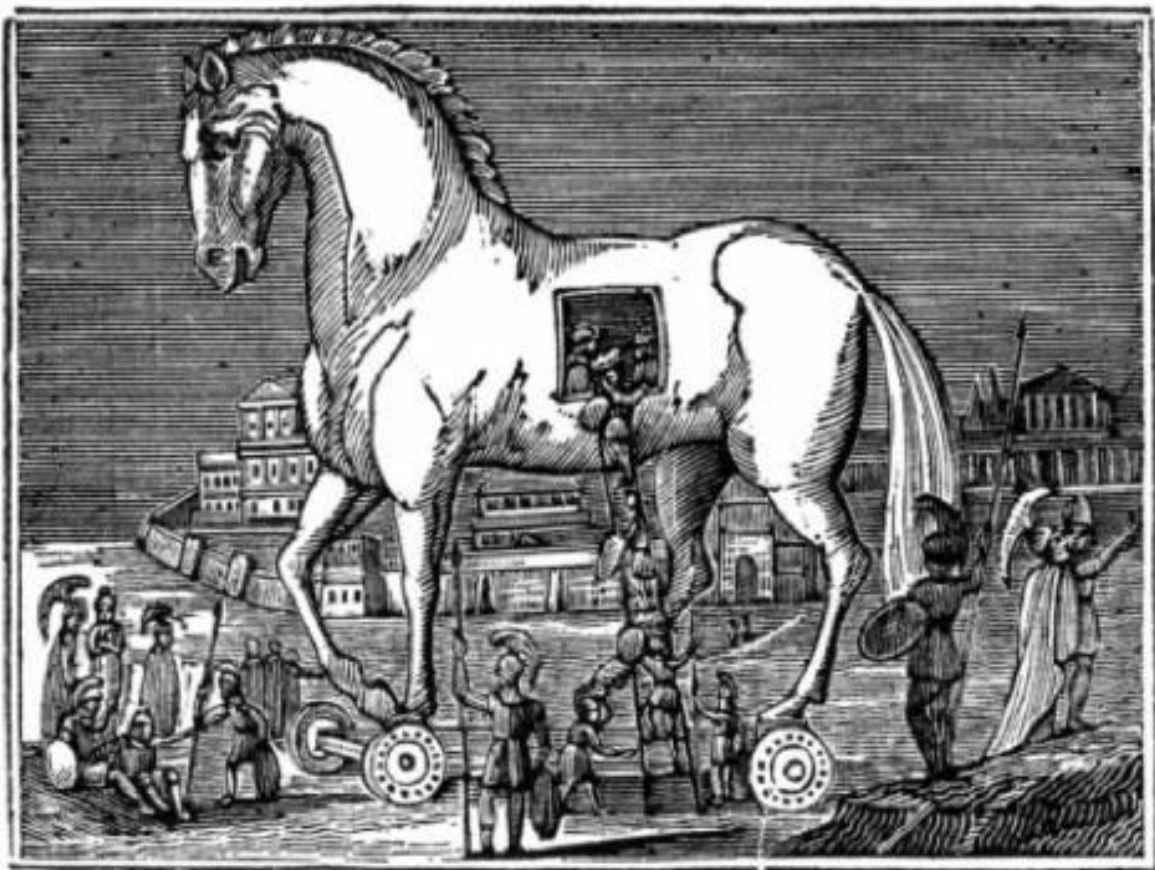
# Early Psychosis



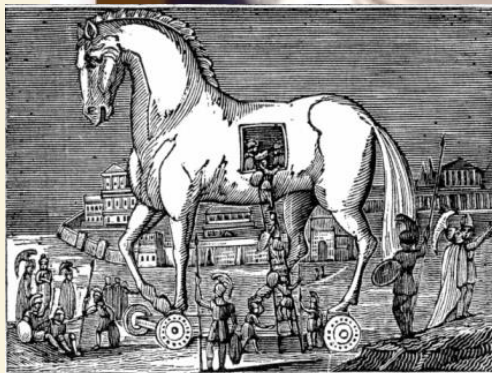
# Prognosis of Doom



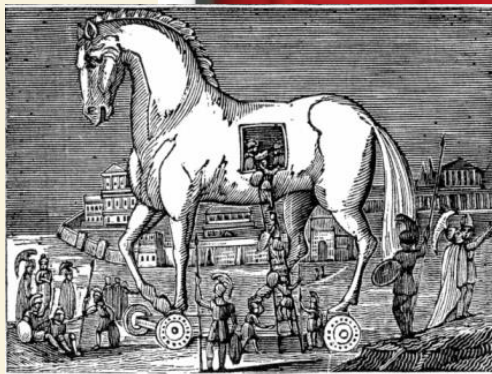
# Peer Support: A Disruptive Innovation



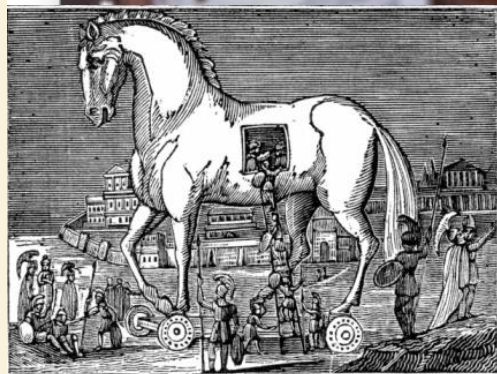
# Disruption #1: We are the evidence that recovery is real



# Disruption #2: We blur the boundaries between health and sickness



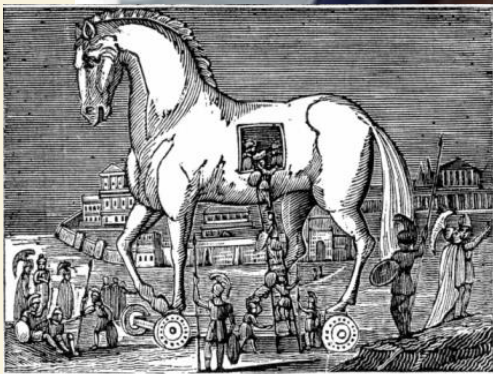
# Can you find the staff?



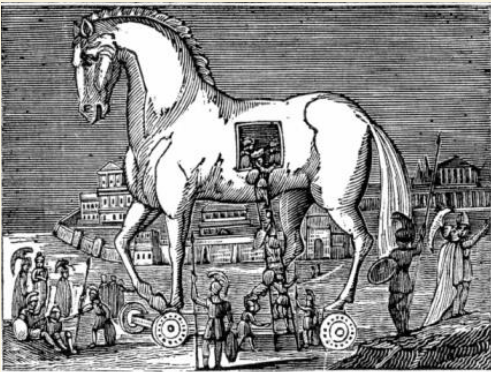
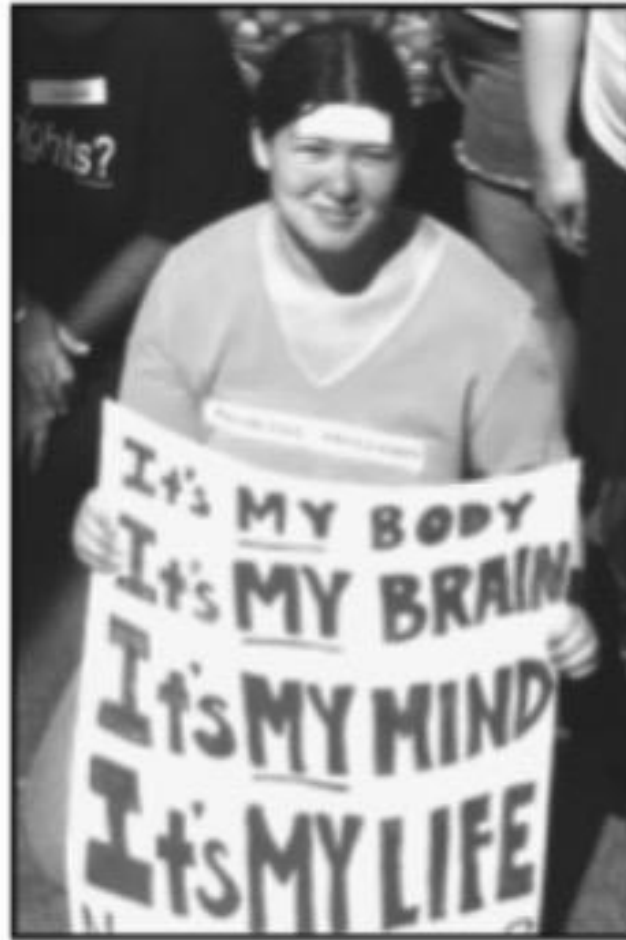
# Can you find the staff?



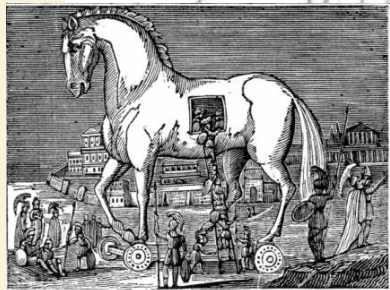
# Disruption #3: We can help each other



# Disruption #4: Rights

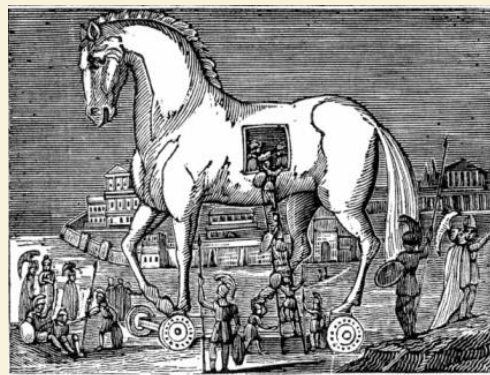


# Disruption #5: Role Strain



# Summary

- We are the evidence for recovery
- We blur the boundaries between health and sickness
- We help each other (and compete for jobs)
- We advocate for rights
- Role strain



# Resistance to Culture Change: Microaggression



“Brief and commonplace daily verbal, behavioral and environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory or negative racial slights to the target person or group.”

*Sue, Capodilupo, Torino, et al. 2007*

# Example #1

I had been a patient in a hospital. Some time later I returned as peer supporter to the same hospital. I overheard staff grumbling that my very presence on the unit was a violation of professional boundaries.



# Example #2



My job was to work with patients in the hospital doing advocacy and peer support. Some staff expressed concern about which bathroom I could use. They questioned if I should use the staff bathroom or the patient bathroom.

# Example #3

Once I went to escort a patient to a peer group meeting off the hospital unit and a staff person said, “Only staff can do that”. I felt like saying, “I am staff”.



# Example #4



When I walk into the building the traditional staff don't even say hello to me. They look down and pass by like I'm not even there.

# Example #5

I was working at a clubhouse and they had a holiday party. There was a keg of beer but they said only staff could have the beer. I figured that meant me so I went and served myself. They said I couldn't have any.



# Example #6



I spoke up passionately during a treatment team meeting because I felt that the client was being treated unfairly. My supervisor told me I was being unprofessional for speaking up like that. He said I had to stop “personalizing the issue”

# Navigating Culture Shift to Embrace Peer Practitioners

- Approach as a systemic issue, not an interpersonal issue
- Involve whole team
- Leadership committed to creating a culture of respect
- Embrace 'different but equal'
- Supervision
- Support for peer practitioners



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# The Evolution of Peer Participation in Development of CSC Programs

Lisa Dixon, M.D.

Director, Center for Practice Innovations

Professor, Columbia University Medical  
Center



# Outline

- Initial peer partnership and participation in the RAISE Connection program
- Evolution to OnTrackNY
- Moving Forward

# Developing the CSC Model

- Literature review at time of proposal did not provide enough evidence for inclusion of peers as part of treatment team, though individuals with lived experience were encouraged to be considered for team jobs
- Stakeholder input on model including consumers and family members
- Dialogue focused on what qualities would be most important in a peer

# Peer Participation in RAISE Connection

- **Creation of recovery videos to create a consumer voice and provide decision support tools**
- **Supervision and consultation: Pat Deegan**

# Peer Participation in RAISE Connection

- **Focus on referral to peer support services in the community**
- **Some experimentation by the teams with regard to peer support-- for example, NY had a peer run weekly group for a while, social events (holiday party, trip to the movies) and also made some 1 to 1 introductions between clients in order to foster peer relationships and peer support.**

# Moving to OnTrackNY: Oversight

- **OnTrackNY Executive Committee:**  
**Joseph Swinford, Deputy Director**  
**of Bureau of Recipient Affairs,**  
**Office of Consumer Affairs**
- **CPI Stakeholder Advisory:**  
**Numerous peer and family**  
**organizations**

# Moving to OnTrackNY: Oversight

- **Supervision: Pat Deegan, Cynthia Peterson-Dana**
- **Webinars: e.g., culture of respect**
- **Creation of Training tools: Pat Deegan SDM series, spirit of NY series, tools**
- **Recovery Specialist Full Time trainer: Emily Grossman**

# Moving Forward

- **SAMHSA HT Grant: Hire youth coordinators**
- **Develop peer support role within team: working with OMH**
  - *Considerations include role and function within team, funding, is “youth” more important than “experience”*

# Summary

- **The role of peers and peer support has evolved**
- **Clear vision to include peers within each segment (service delivery, supervision, executive leadership)**
- **Need to remain flexible**



# Peer Support within EASA

**Tamara Sale**

**Director, EASA Center for Excellence**

**Portland State University**

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# Early Assessment and Support Alliance

- **Statewide Oregon early psychosis initiative**
- **Began 2001 in 5 counties**
- **From beginning focused on shared explanatory model, partnership, transparent decision making**

# The Role of Lived Experience in EASA

- People with lived experience played key roles on original design and oversight groups, on hiring committees
- Advisors and teachers
- Advocates and partners
- Clinical team members & community partners
  - *Peer support*
  - *Nursing*
  - *Research roles*
  - *Entering social work & occupational therapy*

# EASA's Young Adult Leadership Council

- Foundation for statewide governance
- Young adults' vision: “creating a thriving community and revolution of hope”
- Continual learning process
- Developing policy, practice recommendations; engaging in training & system redesign



# Peer Support within Coordinated Specialty Care

- **Not a defined role in most models**
  - *Possible for someone to receive treatment but never meet anyone in recovery*
- **2010 became priority for EASA statewide; growing number of programs have formal role**
- **Peer support and participatory decision making included in practice guidelines & fidelity; still evolving**

# Informal Peer Support

- **Speakers**
- **One-time or short-term mentoring**
- **Group gatherings**
- **Community-based peer-to-peer resources**

# Professional Peer Support Roles

- **Equal member of team**
- **Engagement**
- **Education of young people & others**
- **Reinforcing resilience, strengths, hope**
- **Connecting to community resources**
- **Encouraging/facilitating feedback and participatory decision making**



# Selecting the Right Person

- **Supports outside of program**
- **Professional interest and ability**
- **Direct experience with psychosis is important**

# Training

- **Peer support models vary and are quite different from each other**
- **Credentialing training covers “the minimum”- confidentiality, billing**
- **Little training available in actual role but is needed**

# Role Definition

- **Important not to trivialize or to provide inadequate direction**
- **Need meaningful, structured, doable responsibilities**

# Common Stressors

- **Shift into professional role**
- **Often one of first job**
- **Negative attitudes and discrimination (micro-agressions) within the mental health context**
- **If person gets care in same agency lots of opportunity for HIPAA violation & conflicts**

# Challenges

- **When and how much to disclose**
- **Professional boundaries**
  - *Is it ever ok to befriend?*
- **Where does the peer professional get support: supervision, other peers?**
- **Training of whole team & supervisors**

# Benefits of Peer Support

- Often the person who the individual relates to the most
- Direct experience provides irreplaceable knowledge
- Normalizes recovery & provides hope
- Changes the language, assumptions and dynamics of the team



# Working as a Peer in a First Episode Program

**Michael Haines**  
**Peer Support Specialist**



# Outline

- **How peers helped me**
- **Working as a Peer Support specialist**
- **Being supportive of a peer in the workplace**

# Why is it Important?

- **What peers did for me**
- **Relatability through similar experiences**
- **Inspires hope in a hopeless situation**

# How Does One Give “Peer Support?”

- **Defining Peer Support**
- **Activities**
- **Relation to Treatment Plan**
- **Make sure participants voices are heard**

# Supporting Engagement

- **Being able to meet them in the hospital**
- **Provide rides to and from clinicians meetings**
- **Help with stigma reduction from other providers (counselors & prescriber)**
- **Connect when no one else can**

# Supporting Recovery

- **Help participants gain organic social supports**
- **Encourage and facilitate community integration**
- **Being able to understand**

# Supporting a Peer in the Workplace

- **Be open and able listen**
- **Understand challenges they may be facing themselves**
- **Look beyond the title**

# Conclusion

- **As a peer I know the importance peer support plays in recovery**
- **Peer movement like never before seen**
- **Empowers voices through person first mindset**
- **Non-traditional approach**



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# QUESTIONS?

