

META:PHI

Implementing Peer Support in Addictions Care Settings



1-833-845-WELL (9355) Ext 390
supporthouse.ca | centreinfo@supporthouse.ca

Centre Possesses No of Conflicts of Interest

- The Centre has not received external financial support
- Centre presenters have no relationships to disclose



Support House's **Centre for Innovation in Peer Support** provides wellness based, peer-led self-help and social connections programming to community members; and support to organizations who have peer staff, through training in peer-support program implementation, capacity-building, evaluation, research, knowledge brokerage, and quality improvement.



Key Messages

- Its not about US and THEM...its about all of us.
- We all want the best care possible for those we love and ourselves
- Our system is always growing.





Understanding Peer Support



Our Definitions

What is peer support?

“Peer support is intended to be rooted in hope through an empowering and empathetic relationship between people who have a similar life experience or circumstance in common”

Who is a peer worker?

“Someone who has a similar life experience or circumstances to yours. They have engaged in special training and skill development to enhance their ability to support you in living the life you want.”

Guiding Standards of Peer Support

Peer Support Values in Action

Centre for Innovation in Peer Support

Principles of Practice

Peer Support Canada

Code of Conduct

Peer Support Canada

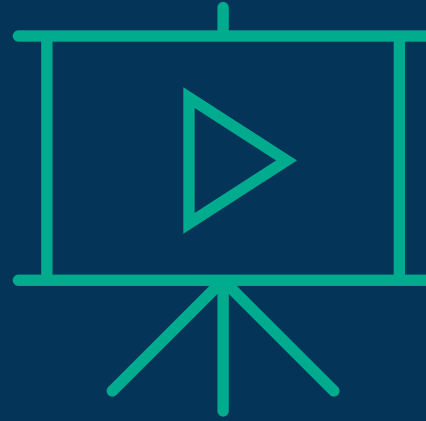
Values of Peer Support

Mental Health Commission of
Canada

Core Competencies

Peer Support Canada

RESOURCE:
Guiding Standards
of Peer Support



Values of Peer Support & Peer Support Values in Action

Support / **House**



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Why Implement Peer Support?



Recognition of Peer Support in Ontario

2010 - “Mental Health and Addictions Ontario should ensure that institutional and community-based service providers actively seek to involve peer support workers in all aspects of service delivery” (Ontario Select Committee on Mental Health and Addictions, 2010).

2011 - In the pursuit of timely, high-quality, integrated, and person-directed service developing and implementing best practices and standards across sectors to support peer and family support was identified as a key strategy (Ontario Ministry of Health and Long-Term Care, 2011).

2012 - Recognizing peer support as an essential component of mental health services was identified as a priority (Mental Health Commission of Canada, 2012).

2020 - Ontario’s *Roadmap to Wellness: A Plan to Build Ontario’s Mental Health and Addictions System* identifies peer support as a proposed core service for people with low to severe or complex needs (Government of Ontario, 2020).

Peer Support Outcomes and Impact



(Frontenac Lennox & Addington Ontario Health Team)

- Reduction in symptoms
- Decreased substance use
- Increased medication adherence
- Increased self-efficacy
- Development of coping and interpersonal skills
- Adoption of healthy behaviours Improved daily functioning and quality of life
- Increased goal setting and recovery planning
- Improved social functioning and expanded social networks
- Increased ability to reframe experience and re-construct identity
- More empowered and hopeful

(CMHA Waterloo Wellington)

Impact on Mental Health and Addiction System



(Frontenac Lennox & Addington Ontario Health Team)

- Fewer and shorter hospitalizations
- A reduced need for intensive mental health services
- Increased service-user satisfaction with treatment
- Better communication with service providers
- Peer supporters model recovery, decreasing stigma and altering attitudes among mental health providers
- Services become more recovery-oriented and person-centered when they employ peer staff
- Involving peer staff in systems-level planning leads to more innovative policies and programs

(CMHA Waterloo Wellington)



Attitudes Regarding Addiction



Stigma and Peer Support

Examples of social and structural stigma:

- Not viewing peer work as a skilled profession with value
- Attributing challenges within the role to lived/living experiences
- Inappropriate questions about a person's lived experience
- Seeing peer workers as clients or fragile
- Requiring a certain period of time in "recovery" in order to be hired
- Lack of access to resources (space, technology, access codes etc.)
- Not valuing the expertise and perspectives of peer support workers
- Lack of pay equity

Stigma and Peer Support

Social and Structural Stigma can lead to:

- Peer workers being seen as and feeling “less than” their colleagues, or not a valued staff member
 - Conflict – not valuing varying perspectives
 - Isolation and a lack of cohesion among team members
- Peer Drift – expecting peer workers to perform duties outside the scope of their work to better “fit in” with other professional practices
- Reduced opportunities for breaking down barriers and innovative solutions
- Internalized stigma for the peer worker



Introducing Implementation



Implementation Science

Stage 1: Engage and explore

- Define what needs to change and for whom
- Select and adopt program or practice
- Set up an implementation team
- Assess readiness; consider barriers and enablers

Stage 4: Sustain and scale

- Sustain the program or practice, embedding as 'business as usual'
- Scale-up the program or practice



Stage 2: Plan and prepare

- Choose implementation strategies
- Develop an implementation plan
- Decide how to monitor implementation quality
- Build readiness to use program or practice

Stage 3: Initiate and refine

- Start using the program or practice
- Continuously monitor and improve

(Hateley-Browne et al., 2019)

Resource Highlight:
Peer Support Implementation Toolkit

Important Notes

The Centre for Innovation in Peer Support strongly discourages hiring someone to provide peer support and then expecting them to develop and implement a practice or program for your organisation.

The Centre for Innovation in Peer Support is available for consultation alongside your peer support implementation journey.

Email centreinfo@supporthouse.ca to request consultation



Stage One

Explore & Engage the Implementation of Peer Support



1.A - Assessing Organisational Readiness

Motivation	
Relative Advantage	The organization believes implementing peer support will enhance our services
Priority	Implementing peer support is of high priority to the organisation
Resources	
Resource Utilisation	The organisation can acquire and allocate resources including time, money, effort, and technology to implement and sustain a peer support program
Staff Capacity	There is enough staff capacity to make implementation of peer support a workload priority (including planning, implementing, and evaluating)
Awareness	
Understanding of Peer Support	Organisation leadership and those who would be involved with implementation have a robust understanding of peer support
Professional Dynamics	
Organisation Culture	The practice and approach of peer support fits within the shared attitudes, values, goals, beliefs, policies and practices of the organisation
Team Compatibility	Existing staff within the organisation support the implementation of peer support

Reviewing Organisation Culture

When peer support is implemented in organisations with cultures that are **recovery-oriented** and **person-centred**, peer support workers are best positioned to be able to provide authentic, values-based support.

1.B - Establishing an Implementation Team

Team members may include:

- **Organisation leader** - ensure the work being done is in alignment with the wider vision of the organisation.
- **Peer support program supervisor** - ensures a clear vision of the program, while offering them the opportunity to interject if there is a barrier they can foresee.
- **Human resources** - supports the examination of policies and procedures, as well as hiring practices
- Staff who support **data, evaluation, quality improvement and/or project management**.
- **A person with expertise in peer support programming** - ensures fidelity of peer support throughout the process. This person may reside within your organisation or may need to be approached externally
- **Experience-based advisors** - offer a unique perspective and expertise regarding program needs and may be able to “flag” potential barriers unseen by staff.



Stage Two

Plan & Prepare to Implement Peer Support



2.A - Identify Barriers & Enablers

- Stakeholders' understanding of peer support
- Organisation culture
- Policies and procedures
- Funding
- Implementation team workload capacity
- Internal resources available

2.B - Creating an Action Plan

- Implementation strategies your team plans to use
 - Develop the intended scope and outcome of the program
 - Craft the role
 - Explore funding
 - Establish referral pathways
 - Plan for further training and development
 - Allocate physical space and equipment
 - Promoting peer support
- Actions related to overcoming barriers
- Timeframes, milestone and due dates for each action
- Assignment of actions to individual, or multiple team members
- How and when you will connect with the team regarding your progress
- How you will evaluate implementation quality

Develop the Intended Scope & Outcomes of the Program

Consider Scope:

- What population would this program support?
- Where would support be provided (virtual, office, in community)?
- What type of administrative tasks might be associated with the program?

Consider Outcomes:

- What needs might you seeking to meet?

Craft the Role

Consider:

- How many staff would be required to run the program?
 - If only one staff person is designated, what will happen if that person is ill, goes on a leave or your organisation experiences turnover?
- Would this program have part-time or full-time staff? Or both?
- Would administrative staff be needed to support program operations?
- What kinds of workload activities would be required of each staff person?
- How much time a month might need to be set aside for the peer support worker to engage in team meetings, committees and further training?

Establish Referral Pathways



Plan for Further Development

General Considerations

- Training and coaching regarding important organisation policies and procedures
- General skill-building opportunities (Trauma-informed care practices, suicidality support, cultural competency, and more)

Areas that May Require Additional Coaching

- Documentation
- Professional etiquette (emails, meetings etc.)
- Confidentiality

Supervision Discussions

Discuss Regularly:

- Sharing constructive feedback
- Discussing future professional goals and growth
- Checking in with workplace wellness
- Sharing opportunities to learn and professionally develop (technology, Mental Health and Addiction learning, workplace wellness etc.)
- Engaging in reflective practice- Values based reflection and feedback
- Providing role clarity
- Discussing strategies to build relationships with non-peer staff
- Providing guidance and clarity regarding our practice (situations, scenarios)
- Sharing validation and identifying strengths

Supervision Discussions

Discuss as needed:

- Reviewing program goals
- Reviewing current workload
- Discussing policy and procedures (health and safety, documentation, privacy, etc.)
- Discussing administrative practices (data entry, timesheets, vacation etc.)
- Coaching related to professional etiquette
- Discussing time management strategies
- Discussing accommodations (as needed)
- Discussing ethics and boundaries
- Exploring opportunities to be involved in organizational initiatives (committees, working groups etc.)

Allocate Physical Space & Equipment

Workspace Considerations

- Confidentiality
- Space for direct support to take place
- Space for administrative work to be done

Equipment and Resource Considerations

- Laptops
- Phones
- Workplace database login credentials

Promoting Peer Support

Considerations

- Your various audiences / stakeholders
- Methods of promotions
- Use of plain language
- Promotion Content:
 - Highlighting Guiding Standards of Peer Support
 - Defining and describing peer support
 - Program specifics
 - Evidence and impact of peer support
 - Frequently asked questions



Stage Three

Initiate & Refine the Peer Support Program



3.A - Recruitment Considerations

Job Description:

- Clarity
- Fidelity
- Compensation

Applications:

- Sporadic employment history
- Past criminal convictions

Resource Highlights:
Peer Support Hiring Guide & Peer Staff
Job Description

3.B - Onboarding

Onboarding Previous or Ongoing Service Recipients

- Initiate confidentiality mechanisms
- Ensure their work supervisor is not their active supporter.
- Establish clear policies and procedures regarding boundaries and dual relationships

3.C - Piloting the Program

Messaging

- It is encouraged that you initially introduce your program as a pilot, subject to change following quality improvement processes
- This provides your organisation with the freedom to make adjustments without exceptional justification

Start Small

- It is encouraged that your team starts small while you are making changes and adjustments
- This may mean less people being supported initially by a one-to-one support or less group offerings from a group facilitator
- Once your team has found what is working well they can add to your offerings at a sustainable pace

3.D - Relationship Building with Colleagues

CMHA Waterloo Wellington's Implementing Peer Staff Roles: **Critical Reflection Questions**

California Association of Social Rehabilitation Agencies' Meaningful Roles for Peer Providers in Integrated Healthcare: **Staff Concerns Assessment**

CMHA Waterloo Wellington's, Supervising Peer Workers Toolkit: **Myths & Misconceptions About Peer Support and Peer Workers**

Further team conversations and relationship building opportunities are encouraged to support meaningful integration of the peer role.



Stage Four

Sustain & Scale the Peer Support Program



4.A - Sustaining the Program

Supporting Ongoing Practice

To maintain the fidelity of peer support, build capacity within staff, and refine their skillsets ongoing practice support and coaching should occur.

This may include:

- Grounding to the Guiding Standards of Peer Support
- Debriefing challenging situations that have come up recently, discussing what worked well, what did not work and how the response aligned, or did not align with peer support values
- Access to a peer support worker community of practice
- Ongoing peer support trainings
- Partnerships with peer-led services that provide peer-specific supervision and mentoring to the peer support worker
- Training on intersecting identities and experiences that are in spaces
- Attending presentations of community offerings available to those they are supporting

4.B - Scaling the Program

Consider

- How is this new context similar?
- How is this new context different?
- What lessons did your team learn throughout the implementation process?
- Were there any unforeseen barriers and/or enablers that presented themselves?
- Which implementation strategies were vital, and which were less important?

Thank You!

Connect with us!

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<https://supporthouse.ca/peer-services/>

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