

# Title

A Presentation to the Members of the  
Increase Community Services and Caregiver Supports  
Task Force

By

Leaders of the  
Association of South Dakota Peer Supporters (ASDPS)  
November 4<sup>th</sup>, 2019

# Introductions

- Loran Harris
  - ☐ 23 years of lived experience as a mental health consumer;
  - ☐ NAMI Northern Hills Connections Recovery Support Group Co-Facilitator (8 years);
  - ☐ NAMI In Our Own Voice Trainer;
  - ☐ 35 years experience business and restaurant management; World Class horse trainer
- Faith Goehring, B.S.
  - ☐ 23 years of lived experience as a mental health consumer;
  - ☐ NAMI fundraiser;
  - ☐ Pastor; Music Director and Instructor; Curriculum Writer
  - ☐ Sign Language Instructor
  - ☐ Business Owner: Wedding Industry (Black Hills Wedding Chapel)

# Introductions

- John Ferrone, MBA, MA, BA:
  - ❑ 31 years of lived experience as a person with mental health challenges, and 8 years as a parent of a child who is a mental health consumer;
  - ❑ Management Consultant specializing in voice-driven organizational capacity-building;
  - ❑ SAMHSA TA provider to mental health peer-run organizations via Café TAC.
  - ❑ “Neighbor” ... live in south central Nebraska

Why is  
“lived experience”  
so important?

Hint: We are discussing  
Peer Support today, correct?

# Peer Support is **Only Possible** when there is Shared Lived Experience

- ❑ Mental Health Consumers (i.e., Peers) are willing to engage and receive non-clinical supports BECAUSE they're coming from a fellow Peer.
- ❑ Shared Lived Experience generates an instant bridge, and rapport, and trust between the Peer and the Peer Supporter.

These key principles are what make Peer Support possible and successful...  
let's look at the Task Force's definitions.

# The Task Force's Insights...

## Peer Support Services

### Definition:

- A peer support specialist, or peer specialist, is someone with lived experience who has been successful in the recovery process who provides non-clinical supports to individuals receiving treatment for behavioral health issues.
- 
- ☐ It's a great definition of Peer Support!
  - ☐ What's implied is that a person with mental health challenges is **choosing** to engage in and receive the offered non-clinical supports. This choice is because of trust, which comes from shared lived experience.

# The Task Force's Insights...

## **Role of Peer Support Specialist:**

- To share resources and build skills to support individuals in recovery through facilitation of recovery groups or one-on-one mentoring meetings

☐ Great statement of the scope of the role.

☐ We'd like to add... Peer supporters:

- ❖ Provide training
- ❖ Build family and community supports
- ❖ Empower the Peer
- ❖ Create bridges with professional service providers
- ❖ Complement service providers (e.g., first responders, hospital ER)
- ❖ Create hope, and assist Peers to define and pursue their Recovery Plan

# The Task Force's Insights...

## Centers for Medicare & Medicaid Services (CMS) Requirements:

- *Supervision* by a competent mental health professional, as defined by the State;
- *Care Coordination* within a comprehensive, individualized treatment plan with specific goals and measurable results; and
- *Training and Credentialing*, as defined by the State, to ensure peer support specialists have a basic set of competencies necessary to perform the peer support function, including continuing education requirements.

- ☐ Definitely agree!
- ☐ The only item we'd suggest adding is that Peers are involved in the creation of the policies and protocols involved in each of these. That is what is meant by **Peer Engagement** and **Peer Inclusion**.  
**We want to be on the Team.**



# The Task Force's Definitions...

## **Training of Peer Support Specialists:**

- Several training and credentialing resources are available nationally, ranging from 40-80 hours of in-person training. Many include a code of ethics. Continuing education is required to maintain certification.

- ☐ Very true.
- ☐ We hope that the Task Force recommends that ASDPS leaders would now be an equal participant in the follow-up action items, such as choosing a curriculum, that will be recommended by this Task Force.

# The Task Force's Definitions...

## Comparison to Case Management:

- In behavioral health care, a case manager performs a clinical role in the treatment of an individual by assessing, planning, implementing, coordinating, monitoring and evaluating the services needed to meet the individual's behavioral health needs, as identified in the treatment plan.
- A peer support specialist functions in a non-clinical role, also as identified in the treatment plan, to help individuals in treatment become and stay engaged in the recovery process and reduce the likelihood of relapse through shared understanding, respect, and mutual empowerment. Peer support services can extend the reach of treatment beyond the clinical setting into the everyday environment of those in treatment.

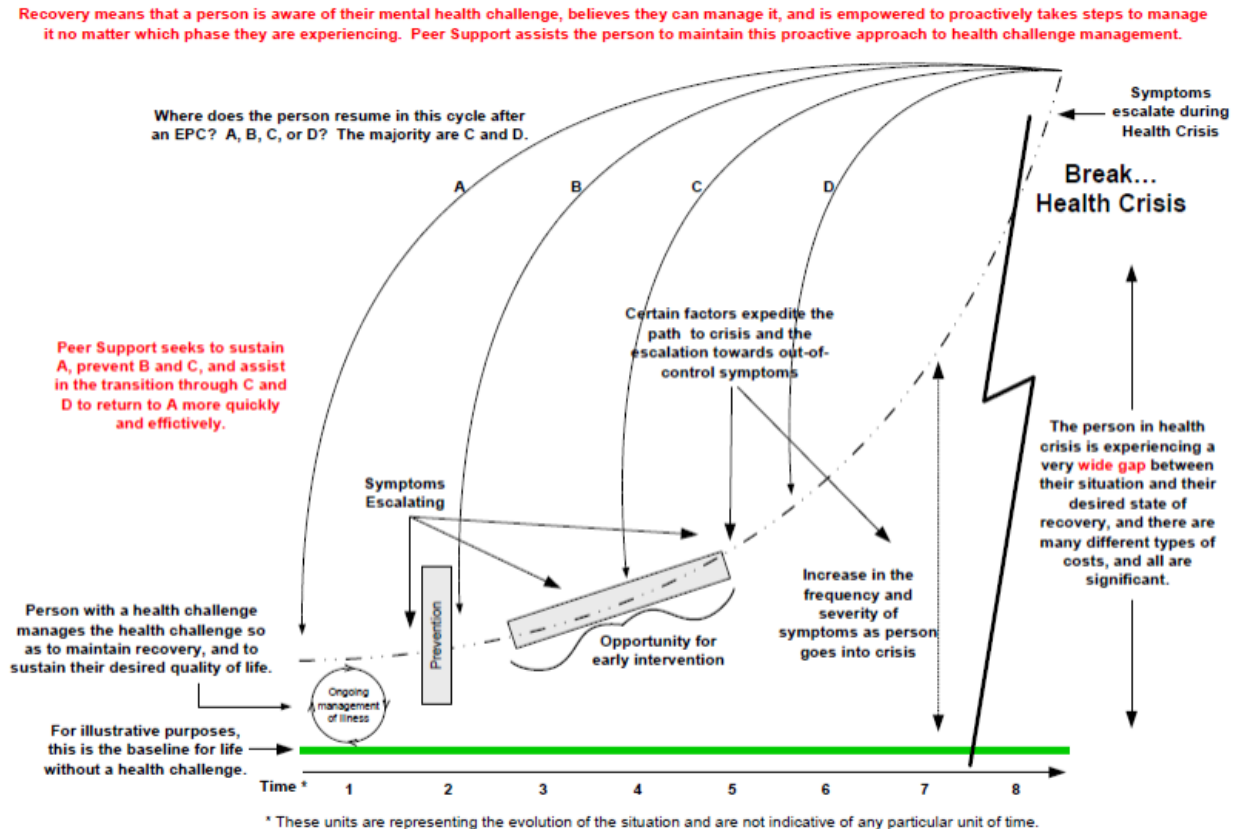
□ One of the barriers that often arises is that Case Managers feel threatened rather than enhanced by a Peer Support Specialist. We want to help create the a paradigm of complementary perspectives towards helping achieve the best outcome possible for a Peer.

# From the Perspective of the Peer

This is what peer support looks like from the perspective of a mental health consumer sustaining his or her recovery (see the Symptom Escalation Model).

The vertical “Prevention” rectangle and the horizontal “Opportunity for Early Intervention” rectangle are where all of the previous points come together in Peer Support to help a person sustain their recovery. If needed, we meet them during and after Crisis, as well.

In A, B, and C is where the proactive Peer Support is offered.



# How Important is it to Engage a Peer in A, B, and C on that Diagram?

This spot where they sustain their recovery... it's where a person with mental health challenges want to be—they don't want to go into crisis. When they do, they hurt, their families hurt, their communities and employers hurt, the tax payer hurts, hospitals hurt... everyone hurts.

So we are all behooved to offer the right resources to assist peer to sustain their recovery.

Peer Support is a missing asset right now in South Dakota... and it is an asset/resource that would greatly enhance our system and its capacity to help mental health consumers sustain their recovery.

We all agree that Peer Support is valuable—it's why we are here, and why the Task Force has been discussing it.

How do we bring it to South Dakota, and implement it successfully?

# The Approach to Implementing Peer Support Includes...

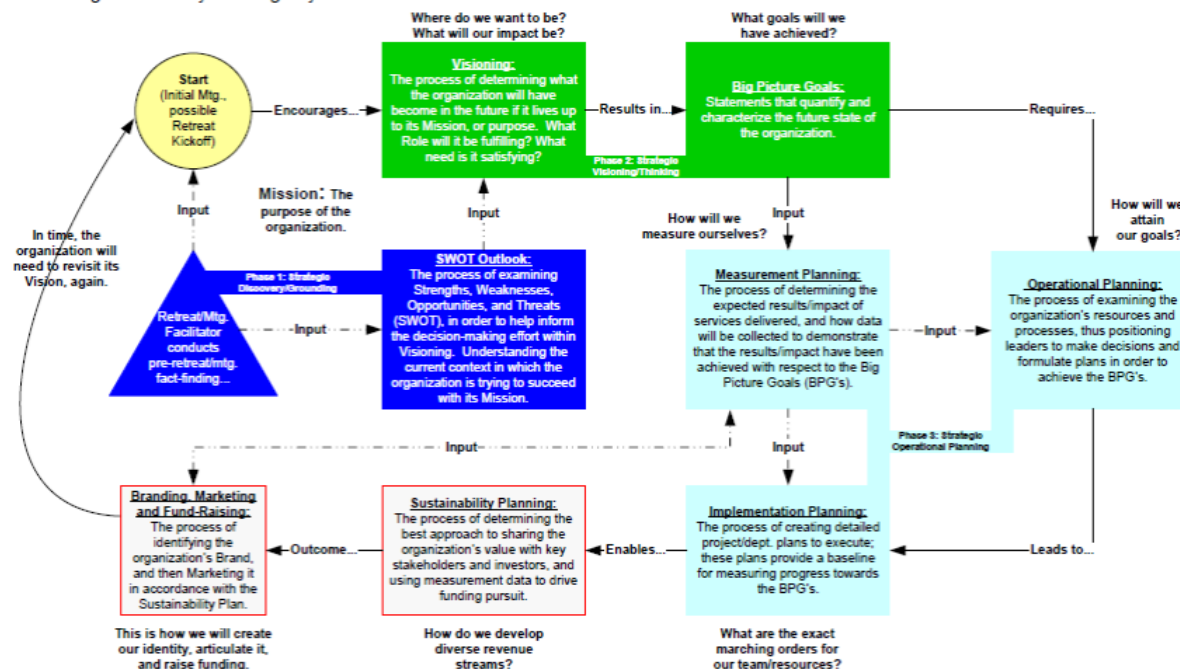
- ❑ Build a Home for the Concept
  - ❖ Provide Management and Oversight
  - ❖ Build the Peer Support Industry (employers, employees, and consumers)
  - ❖ Sustain the Certified Peer Supporters (CPS)
  - ❖ Design and Deliver Peer Support Programs
  - ❖ Build Awareness to Pursue Sustainability
  - ❖ Design and Facilitate Measurement

# The Approach to Implementing Peer Support Includes... (continued)

## ❑ Business and Strategic Plan

### *Elements of Organizational Effectiveness (EOE) Model*

The Elements of Organizational Effectiveness (EOE) Model was designed by Ferrone Associates to assist organizations and agencies to pursue sustainability. By effectively accounting for each Element within the Model, an organization positions itself not only to operate more effectively, but to be able to articulate a convincing story of its capacity to potential donors and other funding sources—in other words, why it is investment-worthy. This business model can serve as a framework for an organization that is intending to formulate a holistic, overarching plan and approach to achieving sustainability and longevity.



# The Approach to Implementing Peer Support Includes... (continued)

## □ Define the Initial Scope

- ❖ Rapid City area
- ❖ Vucurevich Foundation: possible source of financial support to send peers to receive peer support certification and train the trainer credentials
- ❖ BMS: partner who is interested to hire CPS after they are certified
- ❖ Task Force: Exploring the topic of peer support, and possibly may recommend an investment in ASDPS to support its overhead as it develops into the statewide leader to grow and cultivate the peer support community of employers and employees, and the peers who will choose to work with a CPS.



# Conclusion, Q+A

- ❑ ASDPS would very much like to be the tip of the spear for your Peer Support project, and we believe that our initial scope is a good match for your pilot project concept.
- ❑ If this Task Force recommends working with ASDPS to help it launch and build itself towards sustainability, then we would look forward to working with representatives of the Task Force to discern and implement the next steps.
- ❑ Thank you for your time and the opportunity to present to you. What questions may we answer for you?