

# Support Mechanisms for Peer Practitioners

Welcome and Introductions

## Welcome

- Timothy Jeffries, Senior Policy Advisor, BJA
- Elizabeth Burden, Technical Assistance Director, Altarum
- Erin Etwaroo, LCPC, Analyst, Altarum
- Tom Hill, M.S.W.
- Ruth Riddick, CARC-RCP
- Linda Sarage, M.Ed., M.A.



## Guest Presenter – Linda Sarage



• Linda Sarage has been in recovery for over 35 years and is a passionate advocate for the peer recovery movement. Linda is former Director of the RECOVER Project, a peer recovery support center in Greenfield, MA. She has supported recovery coaching statewide with the Bureau of Substance Addiction Services (BSAS) and is a lead trainer for the Recovery Coach Academy and Ethical Considerations for Recovery Coaches. She provides technical assistance to recovery community organizations locally and nationally. Linda is the Director of the Addiction Recovery Coach Certificate program at Westfield State University.



## Guest Presenter – Ruth Riddick

 Ruth Riddick is a certified addiction recovery coach (CARC) with a coaching, training, and mentoring practice at Sobriety Together. She serves as a community outreach worker at the New York Association of Alcoholism and Substance Abuse Providers (ASAP), a curriculum developer and trainer at ASAP's Peer Workforce Initiative (PWI), and a peer ethics advisor to ASAP's New York Certification Board (NYCB). Ruth has also served as a recovery subject-matter expert at the International Certification & Reciprocity Consortium (IC&RC) and the Opioid Response Network (ORN STR-TA).





## Guest Presenter – Tom Hill

 Tom is the Senior Advisor for Addiction and Recovery at the National Council for Behavioral Health. He is a person in longterm recovery from addiction and has professional experience spanning from grassroots community and federal systems organizing. Tom has worked to enhance lives and promote recovery through improved addiction treatment (including with medication), peer and other recovery support services, and harm reduction.





## **Self-Care and Work-Life Balance**



## Importance of Self-Care

Self-care—nested in healthy work environment, supportive colleagues Self-care—fundamental to work of peer practitioners

Peer practitioners' role on front lines of changing landscape

- Connecting to recovery communities
- Connecting to resources
- Identifying and overcoming obstacles
  - Opioid epidemic—overdoses, fatalities
  - Treatment system lagging behind demand
  - Economic realities—limited housing, transportation, parent support



## Self-Care – A Closer Look

- Burnout—Often structural, management style, unclear job description
- Compassion fatigue—Passion, competency, demand
- Persistent stress—Many factors, culture, perception, lifestyle
- Self-care—Process of replenishing self to avoid depletion and exhaustion

#### **Self-care** is not:

- A buzzword
- A list of 100 ways to feel good

#### **Self-care is:**

- Individualized
- A way of life
- Attitude, optimism, perspective



## Self-Care and the Stress of Everyday Life

## H.A.L.T.

Hungry Angry Lonely Tired

## Pillars of Well-Being

\*Nutrition

\*Exercise

\*Connection

\*Sleep

\*Creative Play

\*Meditation

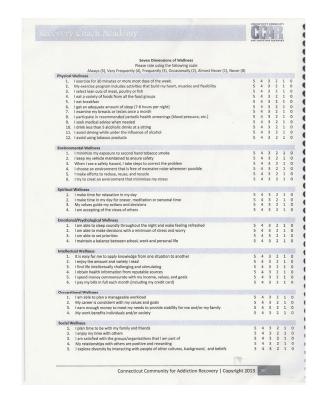


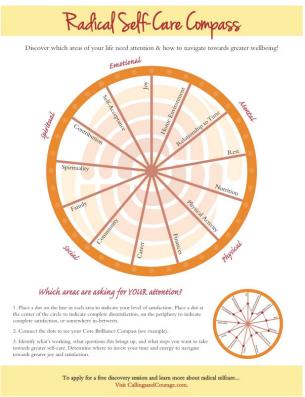


## Self-Care Reflection for Work-Life Balance

#### **Seven Dimensions of Wellness**

- Physical wellness
- Environmental wellness
- Spiritual wellness
- Emotional/psychological wellness
- Intellectual wellness
- Occupational wellness
- Social wellness







## Self-Care: Awareness and Observation, Rituals and Routines

### **SMART Goals**

- Specific
- Measureable
- Achievable
- Realistic Relevant
- Time bound

## **Guidelines for Achieving Goals**

- 1. Write it down
- 2. Get clear on your WHY
- 3. Itty bitty steps
- 4. Plan for obstacles
- 5. Hold yourself accountable



"Self-care is not selfish. You cannot serve from an empty vessel" – Eleanor Brownn

Almost everything will work again if you unplug it for a few minutes, including YOU" – Annie Lamott



# Supportive Supervision of Peer Leaders



## Supportive Supervision and Peer Practitioners

- Roles
- Expectations
- Opportunities and challenges
- Resources





## **Introducing Peer Practitioners**

### > Peer Recovery Profession:

Education | practice-specific
 Ethics | profession-specific

Board certification | role-specific

### > Role Purpose:

**Building Recovery Capital through** 

- Coaching Skills & Purposeful Conversation
- Strategic Personal Sharing

#### > Role Certifications in NYS:

- Certified Recovery Peer Advocate (CRPA)
   This is the IC&RC peer recovery credential ((Medicaid billing))
- Certified Addiction Recovery Coach (CARC)
- Certified Peer Specialists (mental health system only)



BJA's Comprehensive
Opioid Abuse

## Who are Peer Practitioners?

• **Experience** coming from a personal history of, or exposure to: (i) substance use disorder; (ii) the process of change; and (iii) a sustainable life in recovery

STORY

• **Expertise** requiring application of that knowledge to the skill of helping others establish, and live in, their own definition and pathway of recovery across a lifetime



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## Peer Practitioner Role Competencies





#### The IC&RC Peer Recovery (PR) certification in NYS CERTIFIED RECOVERY PEER ADVOCATE: ROLE KNOWLEDGE | SKILLS | ABILITIES

The International Certification & Reciprocity Consortium's 2013 Peer Recovery (PR) Job Analysis identified four performance domains with the following associated tasks as forming the basis of its peer recovery certification. The IC&RC Peer Recovery Certification is known as Certified Recovery Peer Advocate (CRPA) in New York State where it is exclusively offered by the non-profit New York Certification Board (NYCB) at the New York Association of Addiction Services & Professionals (ASAP). Candidates for this professional certification are required to demonstrate these competencies to NYCB per standards determined by the Board and posted to its website, http://www.asapnys.org/ny-certification-board/nycb-certifications/:

- 1. Relate to the individual [client] as an advocate.
- Advocate within systems to promote person-centered recovery/wellness support services.
- Describe the individual's rights and responsibilities.
- Apply the principles of individual choice and self-determination
- Explain importance of self-advocacy as a component of recovery/wellness.
- Recognize and use person-centered language.
- Practice effective communication skills.
- Differentiate between the types and levels of advocacy.
- Collaborate with individual to identify, link, and coordinate choices with resources.
- 10. Advocate for multiple pathways to recovery/wellness.
- 11. Recognize the importance of a holistic (e.g., mind, body, spirit, environment) approach to

#### Domain 2: Mentoring and Education

- 12. Serve as a role model for an individual.
- 13. Recognize the importance of self-care.
- 14. Establish and maintain a peer relationship rather than a hierarchical relationship. 15. Educate through shared experiences.
- Support the development of healthy behavior that is based on choice.
- 17. Describe the skills needed to self-advocate.
- 18. Assist the individual in identifying and establishing positive relationships.
- 19. Establish a respectful, trusting relationship with the individual.
- 20. Demonstrate consistency by supporting individuals during ordinary and extraordinary times.
- 21. Support the development of effective communication skills. 22. Support the development of conflict resolution skills.
- 23. Support the development of problem-solving skills.
- 25. Provide resource linkage to community supports and professional services.

#### Domain 3: Recovery/Wellness Support

26. Assist the individual with setting goals





#### The IC&RC Peer Recovery (PR) certification in NYS CERTIFIED RECOVERY PEER ADVOCATE: ROLE KNOWLEDGE | SKILLS | ABILITIES

- 27. Recognize that there are multiple pathways to recovery/wellness.
- 28. Contribute to the individual's recovery/wellness team(s).
- 29. Assist the individual to identify and build on their strengths and resiliencies.
- 30. Apply effective coaching techniques such as Motivational Interviewing.
- 31. Recognize the stages of change.
- 32. Recognize the stages of recovery/wellness.
- 33. Recognize signs of distress. 34. Develop tools for effective outreach and continued support
- 35. Assist the individual in identifying support systems.
- 36. Practice a strengths-based approach to recovery/wellness.
- 37. Assist the individual in identifying basic needs.
- 38. Apply basic supportive group facilitation techniques.
- 39. Recognize and understand the impact of trauma.

- 40. Recognize risk indicators that may affect the individual's welfare and safety
- 41. Respond to personal risk indicators to assure welfare and safety.
- 42. Communicate to support network personal issues that impact ability to perform job duties.
- 43. Report suspicions of abuse or neglect to appropriate authority.
- 44. Evaluate the individual's satisfaction with their progress toward recovery/wellness goals.
- 45. Maintain documentation and collect data as required. 46. Adhere to responsibilities and limits of the role.
- 47. Apply fundamentals of cultural competency.
- 48. Recognize and adhere to the rules of confidentiality.
- 49. Recognize and maintain professional and personal boundaries.
- 50. Recognize and address personal and institutional biases and behaviors. 51. Maintain current, accurate knowledge of trends and issues related to wellness and recovery
- 52. Recognize various crisis and emergency situations.
- 53. Use organizational/departmental chain of command to address or resolve issues.
- 54. Practice non-judgmental behavior.

#### see: https://internationalcredentialing.org/creds/pr

#### Requirements for CRPA certification in NYS:

- 18+ years
   High School Diploma (or equivalent)
  - 30 hours NYCB approved training incorporating advocacy (hours), Mentoring & Education (hours), and Recovery Wellness Support (hours) 16 hours NYCB approved training in Peer Ethical Responsibility
     1C&RC Peer Recovery Exam passing grade

Training Opportunities in NYS:

see: https://for-ny.org/upcoming-trainings/



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## Peer Practitioners | Skills Overview

Peer Practitioners are motivators & cheerleaders, allies & confidants, truth-tellers, role models & mentors, problem solvers, resource brokers, advocates, community organizers, lifestyle consultants, friends & companions

- all at the same time!

#### Communications Skills

- setting boundaries & expectations
- listening actively & asking good questions
- » sharing our story & recovery capital
- . managing our own stuff/the conversation

#### **Content Frameworks:**

- Bridging the Gap
- Stages of Change
- Stages of Recovery
- Multiple Pathways

#### Context

- Culture | Power | Privilege
- Ethical Considerations





How do I do Proposition let's balk



"Recovery is a process of change through which

Ionoring People as Resources



## Peer Practitioners | Supervision



#### Peer Recovery Professionals who are:

- 1. CRPA: Work in agencies or centers are encouraged to ask for appropriate supervision from a qualified recovery coach supervisor, who will regularly consult with us about recoveree concerns and issues, assess our competencies, support ethical decision-making, help prevent burnout, and support our ongoing development.
- 2. CARC: Work individually are encouraged to schedule regular mentoring sessions with someone who has more experience, to join qualified supervision groups, or to form peermentoring groups with other peers.



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## Peer Practitioners | Supportive Supervision

#### Supportive Supervision: A Partnership for Success Supervisor: Peer practitioner: Understanding the peer ✓ Putting personal recovery first practitioner role Seeking a thorough orientation at hire Setting realistic expectations and performance goals Agreeing realistic expectations Elevating status of peer & performance goals recovery as a valued resource Engaging in continuing on the continuum of care education Promoting the peer as a Receiving a fair and livable team member, not a career wage or employment threat ✓ Identifying further career goals ✓ Providing appropriate & and a career path informed supervision - adapted from National Council for Behavioral Health, 2018







## Peer Practitioners | Supportive Supervision

Supportive Supervision: The Dual Role	
Manager	Mentor
<ul> <li>Helps individuals and team understand performance goals</li> </ul>	Ensures that staff is properly trained for specific roles
<ul> <li>Helps individuals and team understand behavioral expectations, workplace culture and policies</li> </ul>	<ul> <li>Asks for peer's own assessment of personal and professional strengths, concerns, issues</li> <li>Offers options for strengths-</li> </ul>
<ul> <li>Identifies and resolves</li> <li>workplace problems, including</li> <li>conflicts and emergencies</li> </ul>	<ul> <li>building</li> <li>Provides supportive feedback on job and role performance</li> </ul>
<ul> <li>Supports and promotes skills- building for individuals and the team</li> </ul>	<ul> <li>Assists in resolving critical performance issues</li> <li>Proposes continuing education</li> </ul>
Assists with HR, hiring/firing	and career opportunities







## Peer Practitioners | Supportive Supervision

#### **Supportive Supervision: The Transparent Relationship**

#### As the supervisor, I will:

- Keep my word
- . Give credit where it's due
- Ask for input before I make a decision
- Be approachable and willing to help
- Embrace appropriate risk
- Be impartial
- Stay patient
- Act ethically
- Support my team
- Be consistent

#### As the peer practitioner, I will

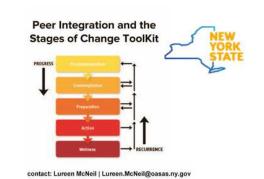
- Ask for quality supervision
- Agree our mutual understanding of my role
- Practice non-defensiveness
- Share my challenges and frustrations
- Alert you to personal issues impacting my performance
- Follow suggestions for performance improvement
- Ask for clarification on any aspect of my job, role or performance, as needed



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## **Supervision Resources**















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## Peer Practitioners | Summary

#### Peer Practitioners are Professionals

- > Practice-specific education
- > Profession-specific ethics
- > Role-specific Board certification

#### **Transparent Practice**

- Trans-systems competencies codified in a national inventory of role knowledge, skills and abilities, and confirmed via a formal competency-based exam
- Partnered with Supportive Supervisors who offer a dual role as managers and mentors

#### **Accountable Practice**

Governed by professional ethics and answerable to the profession's certifying Board

#### **Integrated Professional Workforce**

- > Peer practitioners complete the Prevention-Treatment-Recovery care continuum
- Peer practitioners expect to be integrated into the workforce on the basis of their professional value, not their individual vulnerabilities (including threat of stigma)
- Successful integration hinges on agency and systems-wide health and wellness protocols applicable to the entire workforce



BJA's Comprehensive

Opioid Abuse

Program

# Promoting Wellness Throughout the Organization



- Developing Awareness:
  - Workforce development in a crisis-infused environment
  - Understanding grief as a result of witnessing violence, death, and other chaotic events
  - Potential for (re)traumatization among all lines of staff
  - Traumatic events reinforced by structural trauma: homelessness, poverty, racism, adverse childhood experiences
  - Vehicles to identify, address, and defuse events that may cause activation
  - Elevating and prioritizing self-care as a coping mechanism
  - Self-care as a job requirement for entire workforce: staff at all levels



- Employing Strategies:
  - Articulating self-care as personal and professional responsibility
  - Holding oneself and colleagues accountable
  - Creating systems that reinforce the two points above
  - Codifying self-care as an organizational value and principle
  - Developing philosophies that address the current situation versus the long haul
  - Employing vehicles that address self-care in and outside of the workplace



- Employing Vehicles:
  - Supervision as support
  - Other systems/networks of support
  - Team opportunities for check-ins for emotional temperature
  - Frequent team celebrations
  - Recognizing work-life balance
  - Training and orientation: nutrition, good sleep, exercise, handling conflict, time management
  - Setting self-care norms and expectations: lunch breaks, vacations, sick days, time off
  - Task delegation and workflow



- Creating a Cultural Shift:
  - Dedication to a recovery/wellness-oriented workplace
  - Communication from and between administration leadership
  - Updating policies and procedures
  - Implementation from human resources
  - Identifying champions
  - Peer practitioners as change agents and cultural emissaries



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## Questions?



