

Supporting Peer Specialists on Case Management Teams

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Objectives

- Understand the competencies and professional identity of the Peer and Wellness specialist workforce
- Understand the value added of Peer Specialists on a Case Management Team
- Understand the support Peer Specialists need when they are on a Case Management Team
- Explore current models of case manager and Peer collaboration in the field.

Order of presentation

- Who are peer Specialists in Mental Health and co existing disorders? What is their training, certification and job description?
- The Community Alliance SEMA Model of Peer support
- Engaging Peers through Hope and Empowerment from Peer Recovery stories, connecting to Resources , Peer education about thriving, Social support and Peer Advocacy.
- Value added from the Peer workforce
- Supporting the Peer workforce on Case Management teams at Community Alliance, Salvation Army, DCH and other locations.
- Q&A and Wrap-up



Peer Support work in Nebraska-Nebraska Administrative Code(NAC)

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Peer Support Services means individualized, recovery-focused services based on a mutual relationship between consumers that allows a consumer the opportunity to learn to manage his/her own recovery and advocacy process.



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Activities of Peer Support serve to demonstrate that recovery and wellness are possible, sharing of wellness planning tools, group facilitation, empowering the individual with advocacy and self-help skills and supports, relaxation response training...



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...engaging individuals with natural supports,
understanding the importance of shared decision-
making, self-advocacy, communication, creating
relationships of quality, and education of training staff
about the importance of the individual's needs to
enhance wellness and recovery.

A decorative graphic at the top of the slide consisting of several overlapping, wavy lines in shades of blue and teal, creating a sense of movement and depth.

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Unique services include but are not limited to peer perspective crisis prevention, smoking cessation, peer-run respite, support groups, relaxation response training, and warm lines.



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Psychological Trauma means events or experiences that confront the person directly or as a witness where there exists an immediate perceived threat of death, extreme human suffering, severe bodily harm or injury, coercive exploitation or harassment, or sexual violation.



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Response to traumatic event involves intense fear, helplessness, or horror. Psychological trauma has a direct impact on the brain, body, and stress response system. This disrupts the cognitive, emotional, physical, spiritual, and relational functioning.



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Persons with severe and persistent behavioral health problems, including mental illness, and/or substance use disorders, often have experienced trauma. Many suffer from post-traumatic symptoms which exacerbate their other behavioral health problems, impair their psychosocial functioning, and interfere with the quality of their lives.



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Traumatic events may include rape, physical, emotional, or sexual abuse, war combat, urban street violence, torture, motor vehicle accidents, natural disasters and violence associated with crime.

Peer Specialists Scope of Practice in NE.

- Peer Specialists are not Therapists, Sponsors or Mentors
- Certification by DHHS-OCA
- Peer Specialists are Members of a Mental Health team
- Peer Specialists are Experts in Recovery and Thriving for persons with Serious mental Illness or Co-occurring Disorders
- Expertise is informed by personal experiences and stories, training in Georgia, CA-SEMA and IPS models of providing Mutually Supportive helping, “co-supervision” and continued education and practices based on evidence based trends in the field.
- Recall NAC 2.- 6/14/2014

SAMHSA : PSS Core Competencies Categories (12/07/2015)

C-1: Engages peers in collaborative and caring relationships.

C2:Provides Support.

C3:Shares lived experiences of Recovery.

C4:Personalises peer support.

C5:Supports Recovery Planning.

C6:Links to Resources, services and supports.

SAMHSA_continued

C7:Provides information about Skills related to Health, Wellness and Recovery.

C8:Helps Peers to Manage Crises.

C9:Values Communication.

C10:Supports Collaboration and teamwork.

C11:Promotes leadership and Advocacy.

C12:Promotes Growth and development.

Key Skills

- Engages and listens ...Models empowerment
- Acts to validate, encourage, heal Trauma, inspires hope...
- Shares Recovery experiences & wisdom ...
- Appreciates, respects and tailors care /recovery dialogues
- Helps with goal oriented Recovery planning ...Advocate.

Key practices

- Experience based familiarity with treatment and other community resources and services related to health, housing, crisis management, relapse prevention, connecting to natural supports and community life and thriving in the community of choice.
- Is respectful, uses person first language, observes boundaries, keeps confidences , informs about the duty to warn and protect, documents services realistically-includes strengths and positive qualities, assures the dignity of their peer.

Our Model: S.E.M.A

- Levels of helping:
 - **Support** during Illness and Recovery
 - **Encouragement, Empathy and Education** to hope and empowerment
 - **Motivation to Recovery** through Self control and Self Regulated Learning and action plans for Symptom Management and work.
 - **Advocacy** for Services and Inclusion to achieve, maintain and exceed Recovery Goals

State of Ne. PSS training and Certification

- Overview of training and certification process.
- Code of ethics.
- Professional Standards of conduct
- Trauma Education.
- Special skills

What Peers teach

- SAMHSA Recovery Handout Discussion
- Description of Recovery oriented Activities and groups
- Personal Recovery plan
- Revising personal plans
- Implementing personal plans
- Support , encourage , empowerment
- Modeling desired behaviors.

Peers teach a recovery lifestyle

- Brain Health & recovery lifestyle
- Fitness: exercise, nutrition, rest. Manage stress
- Doing that which is meaningful
- Housing and community connections
- Fulfilling relationships
- An informed conscience driven life

Peers group work

Peer Specialists Recovery oriented activities in Health, Housing, community connections and overall sense of purpose:

- WRAP, WHAM, Living Well, Illness management, Resiliency,
- RentWise,
- Community Connections groups- peer run support groups, natural supports (family & friends) and community self help or support groups.
- Self & system Advocacy

Peers are familiar with Mental Illnesses

Concepts ...

- MH, MI, Co Occurring Disorders
- Schizophrenia, Major Depression Schizoaffective Disorder
- Bipolar Disorder
- Anxiety Disorders, Personality Disorders
- PTSD
- DSM-IV and DSM V

The Practice of Shared decision Making

- The process of SDM, as identified by Simon et al. (2006), includes several steps:
- Recognition that a decision needs to be made;
- Identification of partners in the process as equals;
- Statement of the options as equal;
- Exploration of understanding and expectations;

The Practice of Shared decision Making... (continued)

- Identifying preferences;
- Negotiating options/concordance;
- Sharing the decision; and
- Arranging follow-up to evaluate decision-making outcomes.
- **Including family and others identified by the peer as part of the treatment team.**

Cultural Competency in healing relationships

Keys in culture sensitive conduct:

- **Valuing diversity and acknowledging differences.**
- **Valuing the persons strengths, interests, personal vision and life goals they have for themselves.**
- **Narrowing our involvement only to those areas in which the person is willing to allow our involvement**

American Institute of Health Care Professionals

A case manager oversees the processes of care delivered to patients, works collaboratively and provides leadership to the health care team, and is committed to the organization's goals for professional case management services.

Definition of Case Management.

Case management is a collaborative process of assessment, planning, facilitation, care coordination, evaluation, and advocacy for options and services to meet an individual's and family's comprehensive health needs through communication and available resources to promote quality, cost-effective outcomes. (Case Management Society of America).

Example of Peer engagement with Case management

- The Community Alliance model- assignment to a team and case manager e.g. ACT, Community Support...
- Role on the team-education about peer preferences, advocates for peer input...(SDM), helps to form treatment approach
- Helps to promote peer engagement with the Team.
- 1:1 with peer for social support, skill building, recovery planning- prepares the peer to participate in treatment and to collaborate with the team and others.
- Provides team based services e.g. Medication transport.
- Group work- WRAP, Rentwise, Health Education....
- Documentation

Supporting Case manager

- *...case management, better coordination and organization of the services around the needs of individuals ... (Challis and Davies, 1986).*
 - PSS role in engaging consumer... promote peer engagement with the Team... build consensus- (consumer and team) for work to be done... prepares the peer to participate in treatment and to collaborate with the team ...provides wellness training e.g. WRAP, Rentwise, Health Education.... To strengthen service effectiveness....value added to coordination and organization of services.
 - PSS documentation supports consumer self satisfaction and quality of life rating.
 - Peer role is a face to face service.

Case Manager and team support for Peer role

- Vision of success for the peer specialist, Peer client and case management team.
- Commitment to the peer role and encouraging contributions
- Developing a consensus on the team and its role
- Acting to build consensus for work to be done
- Developing valued relationships
- Changing expectations about what is possible
- Gradually gaining a sense of the work flow and process
- Developing new approaches, meaning and purpose in work
- Persevering through pain, symptoms, setbacks, struggle.

Wrap-up

- **Overall discussion, comments and questions.**
- **For further information please contact
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Resources

- Mental Health: A Report of the Surgeon General (1999) Washington, DC.
- Achieving the Promise: Transforming Mental Health Care in America (2003): The President's New Freedom commission on Mental Health. Washington, DC.
- Emotional Intelligence: (1995) Daniel Coleman, Bantam books, New York
- Principles of Psychiatric Rehabilitation 2nd ed. (1916) Guilford Press New York.
- Other references as noted in presentation.