

**Forum on Integrating Peer Services in Community  
and Inpatient Settings in Vermont's Mental Health  
System of Care**

May 29 - May 30, 2008

Presented to:

Vermont Psychiatric Survivors  
Vermont Council of Developmental & Mental Health  
Services

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## **Introduction:**

Gayle Bluebird and Holly Dixon were invited to Vermont to provide training on developing peer roles both in inpatient settings, and in community settings for new integrated (both peer and non-peer) and fully peer-run programs. The consultation took place over two days, May 29<sup>th</sup> and 30<sup>th</sup>, with the first day in Montpelier, VT, and the second day in Berlin, VT. Each day had a different mix of participants who included both peers and providers.

The audience for the 29<sup>th</sup> included psychiatric inpatient staff and administrators, residential and crisis treatment staff, and interested peers or consumer/survivors. Approximately 25 people attended. On the second day there was a crowd of over 50 people representing consumer advocates and professional and peer agencies. They included members of the Vermont Protection and Advocacy organization, Another Way, the Good Samaritan Shelter, Vermont Psychiatric Survivors (VPS), the Vermont Department of Mental Health, the Vermont Council of Developmental and Mental Health Services, and others. All of the ten community mental health agencies in Vermont were represented.

Gayle's and Holly's particular expertise was sought in part because of the rapid changes to mental health services occurring in Vermont. Many of the philosophical questions about the meaning of recovery and peer support were already covered by other consultants. The information that seemed to be needed was the 'nuts and bolts' of how to develop new peer programs. Questions obtained from attendees prior to the training served as a guide for the types of information needed. Numerous phone discussions and emails also helped to shape the content of the trainings. Both consultants wish to thank the many people who helped organize the events and made them comfortable. In particular they wish to thank Linda Corey for doing much of the coordination, Jane Winterling for being a superb onsite host and tour guide, and both Nick Nichols and Nick Emlin for helping develop the agendas and coordination with the provider community. Lest they be forgotten, thanks are also owed to the agency that made and served lunch!

The following report reflects issues that were covered and discussed on both days. The consultants chose to do one report with some sections that are applicable for both days, and other sections that are designated for either day one or two. The hope is to provide the State with practical information that can be used and further explored. At the end of the report are attachments which include a list of additional resources, job descriptions, interviewing questions, a list of peer ethics and bylaws, and other materials that the State might find helpful.

On both days the video, *"Paving New Ground: a dialogue with Peers and Family members"* was shown during the lunch hour. Each participant was also given a copy of the guidebook edited by Gayle Bluebird with a similar title: *"Paving New Ground: Peers Working in Inpatient Settings."*

**Background:**

It is always important to honor our history. Gayle took time to honor some of the early activists in Vermont that she has known: Paul Dorfner (Engels), Paul Carling, and Laurie Curtis. Others that she has worked with were present at the training, including Morgan Brown, Bill Newhall, and Laura Ziegler. Vermont is also home to Mary Ellen Copeland, whose name is a household name nationally and internationally for being the founder of WRAP, now being taught widely by Peer Specialists/providers. Vermont has much to be proud of.

Vermont has traditionally been a champion of human rights for persons receiving mental health services, including those served in the state hospital. While the hospital's average census is no more than 50, probably the smallest number of any state hospital in the nation, there is an initiative under consideration to close it and replace the hospital with a variety of enhanced community programs and supports. Community hospitals in the state would be asked to increase their inpatient beds to accommodate persons who might otherwise need admission to the state hospital. Members of a statewide project called the *Futures Project* meets regularly to make recommendations and set timelines for implementation. Among the projects under discussion is a peer-run crisis alternative program, which would serve up to five individuals for up to several weeks. This project has been widely endorsed among department administrators and community providers.

Many community agencies have hired peers, while a few remain reluctant, possibly due to anxiety and fear. A warm-line implemented as a peer program in Rutland has had mixed success, with the community agency there not always being supportive. This program is operating, but under the auspices of Vermont Psychiatric Survivors, and is growing under the leadership of Kitty Gallagher.

One of the highlights for peer involvement is the Vermont Psychiatric Survivors, a 501c3 organization in Vermont that was initiated in the late 1980's. This organization sponsors and co-sponsors several community projects for inpatients, and two projects around specific topics, such as dual diagnosis and physical health. The state mental health consumer paper, *Counterpoint*, evolved under VPS in the early 1990's and continues as a major news outlet for cutting edge mental health news. A very successful project co-sponsored by VPS is the *Safe Haven* in Orange County that supports up to six homeless individuals for up to two years. The program operates in cooperation with the Clara Martin Center where people receive their mental health services.

VPS director Linda Corey serves as the Office of Consumer Affairs Director of the state, though her title does not reflect that. Linda indicated that they have received three statewide networking grants. VPS also co-sponsors other projects, including a position that was created at the state hospital for a Peer Specialist. Unfortunately, the person most recently holding that position left, and currently there is no one at the hospital filling this role.

## **Overview: A History of Peer Roles**

(This presentation was given to audiences on both days one and two).

Some of the first statewide consumer roles were as Directors of State Offices of Consumer Affairs. These positions began to appear in the early 1990's. Advocacy positions at state hospitals were also often set aside or made available to persons with psychiatric disabilities, and protection and advocacy agencies often made similar positions available. Consumer Satisfaction Teams were first developed in the state of Pennsylvania, and then spread to other states as a means of having consumers meet directly with other consumers to learn about their satisfaction/dissatisfaction with services.

Today peers are employed in all types of venues: ACT teams, Community Mental Health agencies, in "Peer Bridger" programs (hospital and community based), inpatient settings, crisis centers, emergency rooms, Community Integration Team (CITs), and in peer-run or independently run consumer-operated programs. Peer-run programs have proliferated to include many different types of programs, most recently including programs based on wellness and holistic health.

Requirements for peer positions differ according to the type of position, but central to all peer positions is self-disclosure. Peer support is based on people helping each other who share similar mental health experiences. There are jobs that are established specifically requiring a peer applicant, others that can be filled by a peer or non-peer, and others that are generically designed for anyone to apply, but which are done so with the intention to place job-announcements where peers might find them.

Job descriptions/advertisements may often include wording that requires someone willing to self-disclose their history of mental illness or mental health experiences, though state and local standards vary as to how this may be communicated, and whether doing so is discriminatory or violates confidentiality.

*Following is a recent example of direct wording in a job description:*

*Person required to have...Personal experience as a current or past recipient of services for a serious mental illness and any combination of education and experience equivalent to a bachelor's degree with major work in psychology, social work, counseling, or a related behavioral science field. (VA Job announcement—received April 30, 2008)*

Some of the common terms for peer positions may include Peer Counselor, Peer Advocate, Peer Specialist, Peer Case Manager, Client Liaison, Recovery Specialist, Consumer Coordinator or Director. Today there are many more terms and combinations of terms that are too numerous to list. In some places the term Peer Specialist (the most

common) is being avoided in favor of “Recovery Specialist,” due to the fact that the term “peer” identifies a person as a consumer of mental health services, which they might not want in the future if/when they apply for a job outside the mental health system. There are also examples of professionals adding “peer” to their title, or self-disclosing in order to be more honest and open with persons they serve. Many peer providers have professional degrees (including Gayle and Holly). Unfortunately the term Peer Specialist has begun to be synonymous with someone with minimal skills or education beyond their mental health experiences, and who comes into a position at the bottom rung of the ladder. Many peer- professionals are concerned that there not be a permanent stereotype of the Peer Specialist position.

(See Attachment I on Hiring Process Recommendations)

**Specialized Positions:**

(Following are examples of several positions designed specifically for peers in inpatient settings).

*“Debriefers” or Patient Liaison:* A position created in Massachusetts and now held by individuals in two state hospitals in that state. These positions were created to focus on persons who have frequent crises and wind up in seclusion and restraints. The De-briefer is the one who responds to a patient following a restraint/seclusion event, but now that the frequency of such events have decreased, individuals in these positions place more emphasis on working with patients preventatively.

*Drop-in Center positions:* Positions that are created for peers working in Drop-in Centers located in the setting of a state hospital. The consultant recently learned that two state hospitals in Pennsylvania have these programs, as do two in Florida. Many more hospitals have shown an interest in developing such positions. Some of these Drop-in Centers are independently run, while others are administered by the state hospital and directed by consumers. Generally persons with grounds privileges are permitted to go to the Drop-in Centers during non-treatment hours when the Centers are open.

*Crisis Workers:* For those interested in crisis alternatives, *The Living Room* is an excellent example of one within a crisis center in Phoenix, AZ. This particular crisis program operates as part of a freestanding crisis center, but has separate space within the center’s building. The entire program centers on recovery-delivered services and has been amazingly successful and impressive. (See information in Attachment X “Resources” for contact information)

*Advocates:* Many peers continue to work as advocates in state hospital settings. Some serve dual purposes. They provide limited recovery-oriented services, but their primary work is focused on advocacy, enforcing rights, and investigating complaints. Sometimes advocates in these positions will work closely with Peer Specialists. (It is often best, however, to keep advocacy services separate to avoid conflicts of interest. This is

because Peer Specialists often have responsibilities to help maintain a peaceful environment).

*Peer Administrators/Coordinators/Directors:* Many Peer Specialists work at administrative levels to be a voice for patients at all major committee meetings, edit and improve policies, involve consumers in decision-making, and to organize and implement new programs that may include hiring other peers and/or supervising them.

*WRAP Facilitators:* Some positions are created for peers specifically as WRAP facilitators. One recent example is a person being served in a state hospital setting who was trained and paid to do WRAP training while still an inpatient.

### **Peaks and Pitfalls:**

(Following are some recommended actions and concerns to look out for when implementing Peer Specialist positions in new settings, including both inpatient or outpatient settings).

### ***Ingredients for success:***

- Preparation of *all* staff—Train, Train, Train. This involves many different layers of training, and on a variety of subjects to prepare staff for having individuals in these positions among them
- Staff need to be taught to understand the principles of recovery, and some fundamentals about what is needed to implement them
- Good job descriptions should be developed prior to hiring for positions, and allowances should be made for flexibility and revision of position responsibilities after individuals are hired
- Positions should be placed at appropriate levels of supervision—make sure supervisors are strong supporters of the roles; whenever possible supervisors should be peers themselves
- There need to be Advisory and Support Groups for peers in these positions, both within and outside of the hospitals
- More than one Peer/Recovery Specialist should be hired for any given setting, particularly if they are hired into entry level positions
- Newly hired peers should be assigned initially to only one unit, with supervision from a staff person who has a clear understanding of their roles
- There needs to be a good interview process throughout the hiring process, including some task-oriented questions (i.e. what would they do in a given situation)
- The development of a professional association of Peer Specialists should be promoted and encouraged where they can discuss their experiences and gain mutual support
- Peer Specialists should have regularly scheduled meetings with their supervisor—at first this may be every other day

- A supportive staff person should be assigned to shadow new employees, and to provide them with orientation
- Peers should be supported to go to conferences that provide additional training and information

***Examples of common requirements to be hired for a Peer Specialist position:***

- May include high school diploma or GED
- One or more years of advocacy experience OR six months or more working in a consumer run organization
- Self-identification as a current or former recipient of mental health services
- Understanding of the history of the consumer movement (this is often missed)
- Depending on position, a college degree or equivalent
- One to two years of personal recovery experience—(note that determination of this can be tricky)

(See Attachment 1 on the *Hiring Process Recommendations* for more information about interviewing and information gathering during the hiring process)

Note also that questions related to skills should always take precedence when interviewing potential candidates for a position.

***Pitfalls:***

(Following are several concerns which, if not addressed, can make the implementation of peer positions difficult).

- Staff not trained adequately, and/or not having any idea what the person should do
- Staff not familiar with recovery or practicing recovery principles
- Lack of built-in supports specifically for new peer employees
- Staff who are distrustful of peer employees—keeping or looking at them as in token positions
- Peer employees filling traditional staff roles and not exercising the recovery roles for which they are trained and hired
- Peer workers who are too ambitious and overwork themselves
- Peer employees who are not prepared to work as part of team
- Inflexible job descriptions
- Staff who are afraid that a Peer Specialist will become ill
- Staff who are afraid that peers will take over

**Boundary Issues:**

(An emphasis on boundary issues was prioritized during both training days. The consultants developed a list of typical boundary issues and some typical scenarios that could be role-played. While neither day allowed enough time to act out these role plays, there was a lively discussion of these issues among all participants. The following information spells out many of the issues that may be encountered, however it is

important to note that while some boundary lines and ethics rules need to be drawn for all staff, including peer staff, there needs to be some flexibility allowed for peer roles, with individual situations carefully evaluated on their own merit. Note that many of these concerns are the same as those for any mental health service provider).

***Some typical boundary issues:***

- Dual roles: Friendships between consumers and peer-providers that existed prior to the peer being hired
- Pre-existing relationships between peers that are hired in the same workplace
- Peer providers accepting gifts with value from clients
- Lending money to clients when asked
- Breaching confidentiality in outside settings
- Visiting patients in the hospital when they were admitted for medical reasons
- Giving out home phone numbers
- Peer providers sharing too much of their own stories (this is an important issue to address in training)
- Peer providers developing friendships with persons they are serving
- Non-consumer staff reading peer-providers' records in situations where they were previous patients
- Breaches of intimacy, sexual or otherwise
- Touching that is inappropriate
- Cultural discrimination or biases
- Questions about what to document, and what not to document
- Role confusion: Peers representing agency vs. representing the peers they are serving
- Peers being viewed as clients by colleagues, and not as equals

(See Attachment III for scenarios of boundary issues which could be used in role-plays; also Attachment IX, which is a list of ethics for peer specialists in Hawaii).

**Riverview Experience:**

(Following is a synopsis of how peer-delivered services were implemented at Riverview Psychiatric Center in Maine).

Riverview Psychiatric Center is the larger of two state hospitals in Maine with 92 beds (forensic and civil). In 2004, the hospital was placed under receivership after it did not make significant progress toward the goals outlined in a Consent Decree (a plan established after a lawsuit to provide more humane conditions in the state hospital). The receiver, after hearing about peer support at Amistad (Maine's largest peer support and recovery center), asked that a peer support program be established at Riverview. Amistad contracted with Riverview to provide services.

An oversight committee was established at the hospital to guide the program's development. The committee was made up of three hospital staff and 5 clients (past and present patients from the hospital). They helped establish the role of peer support, were involved in hiring the peer staff, and in guiding an educational process for hospital staff. Group facilitators were brought in to educate staff and clients on concepts of recovery and the consumer movement.

The program began in May of 2004 with four full-time Peer Specialists and a half-time supervisor. In the beginning, the Peer Specialists were not welcomed by staff, and were actively targeted with hostile messages of, "go away we don't want you." Staff feared that Peer Specialists were going to take their jobs from them and/or tell them how to do their jobs. Today Peer Specialists are involved in all aspects of client care and in all levels of the hospital's operations (see Attachment II PowerPoint slides). They provide four services at the hospital: inpatient peer support, transportation/peer support for clients attending outside appointments, recovery/peer support groups, and peer support and case management on the hospital's ACT team. There are 16 peer staff, including seven full-time, four part-time, and five contracted consultants. Peer support is available to inpatient clients Monday thru Friday 8:00 AM to 8:00 PM and Saturday and Sunday 12:00 PM to 4:00 PM.

*There are many benefits to using an outside contractor to provide peer services:*

- Peer specialists are not hospital employees
  - Peers can advocate for change without repercussion
  - They are an independent voice
  - Disciplinary action is not the responsibility of the hospital (no state employee union rules to consider)
- The program is managed by a peer organization
  - Ensures supervision of peers by peers
  - Ensures that recovery principles are the core of all practices
  - Peers can learn ways from supervisors to share their personal histories in ways that are helpful
  - Supervisors can teach how to use physical touch in more nurturing ways

The role of peer support is one of low-level advocacy for clients, sharing their lived experiences, helping clients become empowered, integrating consumer voices into treatment, hospital policy, and daily operations, and assisting clients in formulating concerns/suggestions/grievances (see Attachment VIII on Job Descriptions). Peer support's boundaries are slightly different than that of traditional hospital staff. Peer Specialists are encouraged to share their personal recovery histories with clients, they are able to touch clients in a therapeutic way, and they are encouraged to develop mutually responsible relationships with clients. Peer Specialists do not document discussions with clients except for certain situations, allowing for more trusting relationships to be established. All documentation is done with the client so they can see, read, sign, and make suggestions to the information that is documented.

### **Statewide Warm Line: AMISTAD**

Amistad runs a statewide WarmLine in Maine—a peer-to-peer phone-support service serving adults. The WarmLine began in 2004 as a local warm line in the Portland area. They used an answering service that relayed messages to a Peer Specialist who carried a cell phone assigned to him or her for each shift. After proven success as a grant-funded program, the state began contracting with Amistad for this service on a statewide level in 2005. The statewide WarmLine has a toll-free number that can be called from anywhere in the state, reaching out to those in the most rural areas of Maine where there are little support services. During its first three months of operation, it was estimated that 500 calls would be taken—they took over 1500 calls. The WarmLine currently operates from 5:00 PM to 8:00 AM, 7 days a week. The WarmLine averages between 2600 and 3000 calls per month, but loses almost 1000 calls per month because there is just not enough staff to take all the calls.

### **Looking at Community Peer Programs:**

(The following programs were discussed with participants on the second day of training).

#### ***Amistad Inc:***

(Many different types of programs are available to consumers that are peer-run. Holly talked about Amistad and its array of services).

Amistad began in 1982 when concerned family members wanted a safe place for their loved ones who suffered from mental illnesses to go during the day. It began in a small apartment and now occupies one floor of an office building in Portland, Maine. Amistad has grown to be the largest peer support and recovery center in the state, and the largest employer of consumers in the state. Amistad is funded primarily by its contracts with the state of Maine, United Way, the city of Portland, and various grant funding. It is a consumer-run nonprofit organization.

The peer support and recovery center is located in downtown Portland and offers many activities and services for its members. Members have access to laundry and shower facilities, computer, internet, phone, recreational activities, wellness and recovery classes, and many other services. Amistad offers several services, including peer support in the emergency rooms in Maine's largest traditional hospital and largest state hospital (Riverview), the statewide Warm Line, representative-payee services, Healthy Amistad initiative, bus passes, citizen verification services for MaineCare (Medicaid), and it houses a member-operated restaurant on site.

The emergency room peer support program began in 2002. A Peer Specialist is on site at the emergency room at Maine Medical Center from 5:00 PM to 11:00 PM, 7-days a

week, the busiest time for psychiatric evaluations. Peers sit with people awaiting psychiatric assessment to keep them busy and make sure their basic needs are being met. Many people do not get admitted to the hospital after such visits because all they needed was someone to talk to. Medical staff decides who is appropriate to be seen, and the person served has the choice of whether or not they want to see someone from the peer support team. Peer Specialists are not allowed to visit with people who are intoxicated or extremely violent. The program was originally funded by grant monies, but after proven success, the state began contracting for this service to be provided in two hospitals (Another company, Sweetsers, provides the services at MidCoast Hospital's emergency room).

The Healthy Amistad initiative is the newest of Amistad's services. The program is based on recent research that people who suffer from severe mental illness die, on average, 25 years younger than the average population. The program targets those people who have both severe mental illnesses and chronic medical conditions. This program brings nutrition and exercise classes to members of the center, and some individuals may be referred for more intense support with a Peer Patient Navigator. The Peer Patient Navigator provides a small caseload of people with support in finding medical care, getting to doctor's appointments, following through with medical care, and finding the resources needed to improve their health. Through this effort, members are exercising more, eating healthier, quitting smoking, and living healthier lives.

***PEER Center:***

Because Gayle was involved in the development of the PEER Center in Broward County, Florida, she used it as an example to illustrate how important peer run programs can be, but how challenging they can be if all of the ingredients for success are not present. The PEER Center has been in existence since 1992 when there were few examples to follow as role models. Most important at that time was that drop-in centers operated completely independently of providers—and sometimes by people who lacked experience. In Broward County, the Adult Mental Health Office took seriously the word “empowerment” when they provided funds that were a result of a lawsuit settlement involving the state hospital.

In the beginning the center operated in a downtown building and served 30 people per day. The numbers expanded quickly, and a new location was secured in a shopping center. Finally, there was a building with several bays that became available in an industrial area, where PEER Center has been for the last ten years. For many years (and currently), over 100 people are served per day, and membership stands at 3,000. Many programs have been added, and some that provided crucial services but lacked continued funding were terminated for a variety of reasons. Some of the programs available include housing location and moving services, and a separate crisis respite house that was funded with money from a trust fund left by a member who died. There is also a thrift store, a print shop, computer lab, and counseling services available. A Federal research project (Consumer Operated Service Programs—COSP) was added at

one point, and also there are two programs that used the PEER Center as an umbrella agency before they could obtain their own tax-exempt status. One of these programs is a drop-in center for seniors called *Silver Center* that continues to be successful and is an independent peer run program. Another was a drop-in center called *Forest Park*, which operates on the grounds of the state hospital. It, too, is now independently peer run.

Everyone would probably agree that PEER Center is a success story—a PEER Print business serves a large clientele; the computer lab is popular; and new programs are being discussed. There have been many challenges, including directors that either left or were removed by a board not always following by-laws, in-fighting among staff and the board (not surprising for any agency); a lack of infrastructure for the numbers of programs; and staff burned out from working too many hours. The department of mental health stayed involved, set high expectations, monitored progress, but did not always have the technical assistance that was needed available. Despite any challenges, consumers/peers are always at decision making tables. The voice of the consumers are always taken seriously and heard.

*Following are some recommendations for starting up a peer-run/consumer-operated program:*

- Careful planning needs to occur at the front end before setting up a peer program
- Research and study other model peer run programs in the country for ideas
- Determine the make-up of a Board of Directors, ensuring that there are persons with various areas of expertise, and that the board is at least half consumers
- Board training is important for all Board members
- Collaborative discussions between funding sources and peers need to occur in order to develop the program and create its standards
- Those starting up the program should determine how many people the program will serve
- By-laws are important to establish, and they need to be followed
- An adequate infrastructure is essential for any new program
- Safeguards should be in place to avoid staff overworking themselves
- There should be a separate grievance procedure for participants and staff
- Set qualifications carefully for a director and conduct a wide search to find the best person
- Determination should be made if some services need to be provided by non-consumers
- A monitoring tool should be developed that is appropriate for a peer program
- There should be a Contract Manager who is consistent in his/her ability to work with others in an unbiased fashion
- There needs to be a department to provide technical assistance, but which remains hands-off for programming needs

***Rebel's Drop-In Center***

This is a program administered by Memorial Hospital, a large public hospital in the southern area of Broward County, Florida. The hospital operates a day program during daytime hours that is run by professional staff. At 3:00 p.m. every weekday, peers take over the program operation, and keep it open until 7:00 p.m. The center is also open from 12:00 p.m. to 7:00 p.m. on weekends, at which times it is run by peers.

This program is more structured than many, and has a variety of workshops and support groups that it offers. There is an emphasis on holistic health, arts, and support groups, including the Depression Bipolar Support Alliance (DBSA), Alcoholics Anonymous (AA), Double Trouble (for individuals with co-occurring mental health and substance use disorders), etc.

This program is very popular and well attended. They do serve a different crowd than Peer Center but both have advantages and disadvantages.

*Some of the advantages to this program being administered by the hospital::*

- Bookkeeping is taken care of by the hospital
- Budgeting and fundraising is handled by the hospital
- Participants at Rebel's receive health care from Memorial Hospital, which makes more consistent transitions in service-delivery
- This program tends to be more stable, though there are occasional issues and problems encountered with members
- Persons in crisis can be referred to professional help quickly when needed

***9Muses Art Center:***

(This is another example of a provider-administrated program).

- Administered by the Mental Health Association of Florida
- An Advisory Board was established, as they decided to operate under the Mental Health Authority (MHA) umbrella
- The Director sits on all committees in the Center's district
- The Center hosts the outside community at art exhibits and fundraisers
- The Center takes non-consumers as members (people who pay for classes)
- There are many classes on different types of art venues
- Most people who go to 9Muses go for the purpose of doing art
- The Center maintains a large membership and provides a large selection of workshops
- The Center is open seven days a week with long hours

There are obviously advantages and disadvantages to each model. This consultant called several of the Department of Children and Families district supervisors and administrators, current and past, to see whether they felt there was a reason to favor one model over the other. While they all seem to recognize the value of all models,

there was a sense of pride that shined through regarding the work done to develop and sustain the independently-run programs.

*Following are their comments:*

From Valerie Allen, Coordinator, Adult Mental Health Services, Circuit 17, Broward County:

“Conceptually if you have ownership of something management will be more involved. Peer run organizations are not the only ones with problems. Look at Mom and Pop organizations.... It is good to have a mixture of programs in the community; not to be hard and fast.”

From Norma Wagner, Planning Director for Substance Abuse and Mental Health Services:

“Huge value in truly run consumer operated programs. Takes more work, more difficult to maintain, but worth the effort. If you truly want to hear from consumers they have to be truly free to be able to speak without strings attached.”

From Kevin Huckshorn, Director NASMHPD/OTA, Program Supervisor, District 10 (1992-1995):

“There is risk in everything; recovery-oriented means taking risks. It takes courage to move away from being a strictly medical model....Don't not do it because of fear.”

Each day ended with open-ended discussions, followed by a facilitated discussion from local leaders about their next steps. (The list of “Next Steps” from June 30 follows). Both consultants offered to answer questions at the end of the day as well as to provide follow-up by email and phone calls.

**Next Steps:**

(The following were identified in the May 30 2008 forum on the Integration of Peer Service Providers and Community Mental Health Providers in Vermont's Mental Health System of Care).

1. Increase access for peers and friends of clients to accompany clients to clinical team meetings and to the emergency room.
2. Develop new modes of publicity and communication for the voices of clients and their experiences in recovery.
3. Integrate independently operated warm-lines into a single state-wide warm-line.
4. Move forward with the current proposal for a Peer Respite Alternative program through the Futures workgroup in collaboration with Vermont Psychiatric Survivors, Vermont Protection & Advocacy, CMHC providers, the Transformation

Council, the Department of Mental Health, and other partners. The program will need:

- A Board of Directors
  - Central leadership
  - Grassroots support
5. Enlist and collaborate with partner organizations (e.g. NAMI-VT and the Vermont Federation of Families) in developing new peer run programs.
  6. Develop a Peer Specialist training course organized by the Department of Mental Health.
  7. Convene a statewide strategic planning group to foster comprehensive peer services.
  8. Enlist an organizational expert to consult on implementing these next steps (once the state has received the Consultants' Report from this June 29-30 forum).
  9. Increase opportunities for hiring consumers through affirmative action policies.
  10. Organize a Vermont delegation to visit Amistad (the consumer operated agency in Maine discussed by Holly Dixon).
  11. Develop a means for a more timely and effective distribution of information to each individual and group involved in implementing recommendations.

## **Attachments**

- I Hiring Process
- II May 29<sup>th</sup> PowerPoint Presentation
- III Role Play Scenarios
- IV Interview Scoring Tool
- V Resume Scoring Tool
- VI Sample Interview Questions
- VII Sample Application Questions
- VIII Sample Job Descriptions
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- X Additional Resources

## ATTACHMENT I The Hiring Process

### *Recommendations:*

- *Preparation*
  - Educate staff about recovery and what the role of the peer provider will be.
  - Educate persons served about the role of the peer provider.
- *Job Description*
  - Have a clear job description that outlines qualifications, responsibilities, duties, supervision structure, expectations, etc.
  - The job description should be agreed upon by all parties prior to hiring the peer provider.
  - Decide what training is necessary for the peer provider in order to do the job effectively.
  - Offer a competitive wage and benefits—this will add value to the position and attract more candidates.
- *Advertising*
  - Advertise in a number of places to broaden your pool of applicants. This is a real job—advertise where anyone else would advertise to find job applicants
    - Newspaper
    - Online
    - Career Centers
    - Mental health organizations
    - Peer Support and Recovery Centers
  - Be clear about who you are looking for, examples:
    - “Past or present consumer of mental health services”
    - “Must self-identify as a consumer of mental health services”
    - “Must have personal experience with recovery”
  - Give a contact person and phone number rather than a place to send applications in the ad. This will give you a chance to screen applicants to save time. Many people do not understand the concept of the position, and will be calling as a provider or family member to apply. If you are seeking consumers this screening will save time and energy down the road. It also gives applicants a chance to ask questions about the job and may rule out inappropriate applicants.
- *Applications and Screening*
  - Have applicants submit a resume and cover letter rather than a standard application. You’ll learn more about them through this process—i.e. can they write and communicate clearly.

- If there are pieces of information you would like applicants to submit that may not show up in a resume and cover letter, give them an additional questionnaire to complete. (See Attachment VII)
- Use a screening tool to make sure you will be getting the candidates you want for the job. (See Attachment V)
- *Interviews*
  - Questions you cannot ask:
    - Need for accommodation
    - History of hospitalization
    - History of taking leave for treatment
    - Medication one takes
    - When they were last sick
  - Interview questions should address skills you are looking for (i.e. conflict resolution, stress management, dependability, self-care) (See Attachment VI)
  - Use a hiring committee that includes all stakeholders, i.e.:
    - Other peer providers
    - Hiring organization staff
    - Persons being served
  - Use a scoring tool to help determine the best candidate (See Attachment IV)

**ATTACHMENT II**  
**PowerPoint Presentation in Word-format**  
(Note the presentation is also attached as an addendum)

**Peer Services**

**Gayle Bluebird**

**Holly Dixon**

**History**

- **Office of Consumer Affairs**
- **Advocates**
- **Consumer Satisfaction Surveys**

**Today**

- **ACT teams**
- **Community Mental Health Agencies**
- **Peer Bridgers**
- **Inpatient**
- **Crisis centers**
- **Emergency rooms**
- **CIT teams**
- **Consumer operated programs**

**Requirements**

- **Self-disclosed peer**
- **Consumer/non-consumer**
- **Provider position with peer preference**

**Job Description/Advertising**

- **Self-disclosed mental health consumer/survivor**

**Common Terms**

- **Peer counselor**
- **Peer advocate**
- **Client liaison**

- **Recovery specialist (IL)**
- **Consumer coordinator**
- **Peer specialist**

### **Inpatient Settings**

- **Debriefers**
- **Advocate**
- **Living Room**
- **WRAP facilitators**
- **Drop-in centers**

## **ATTACHMENT III**

### **Role Play Scenarios**

Following are potential role-play scenarios to interview prospective Peer Specialists.

1. A client approaches you stating that he is very angry and is having trouble calming down. You know that one of his coping strategies is to get a soda and take a walk. He does not have any money, staff will not allow him to leave the unit, and no one will go get the soda for him. You have a dollar and access to the vending machines. What do you do?
2. A client is in their treatment team meeting and discharge is being discussed. The client has been clear that they want to live in their own apartment with some in-home supports a couple times per week. The social worker is only discussing group home placement and applying for those. History has shown that the client does not do well living on their own. What do you do?
3. Three staff are sitting behind the nurses' station on the unit discussing client information while 1-2 clients are standing at the nurse's station waiting for assistance. The staff do not acknowledge that anyone is there. Clients have complained about staff discussing confidential information in an open area many times before. What do you do?
4. You're sitting in morning rounds with the hospital treatment team and they are reviewing the events of the prior weekend (New Year's Eve). A client had dropped his pants at the stroke of midnight. The psychiatrist states, "and everyone got to see Joe's ball drop too" while the whole team is laughing. How do you handle this comment?
5. A client is upset and yelling on the unit. A staff person approaches them and gets very close to the person, demanding that the person quiet down and go to their room. Peer support sees this interaction is making things worse and the client is getting more upset. The client has a relationship with you and you're available. How do you respond?
6. You are hired to work as a Peer Specialist at an organization from which a close friend receives services. You are assigned to the team that serves your friend. How do you handle this situation?
7. You have worked for many years as a traditional provider of mental health services. You have now started working as a Peer Specialist at another organization where a former client receives services. When the client finds out you work there, they request you to be their peer support person. What do you do?

**ATTACHMENT IV**  
**Interview Scoring Tool**

**Amistad**

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**Peer Specialist Interview Scoring Sheet**

Please rate each candidate using this scoring sheet.

**Rate each candidate on each category, from 1 to 5**

1=really weak

5=really great

Example: a person with 5 years of relevant experience might score a “5” for experience, but a person with a little or no experience might score a “1”

Your name: \_\_\_\_\_

Candidate Initials

1. Rate the candidate’s prior work experience
2. Rate the candidate’s peer support experience
3. Rate the candidate’s experience working with and supporting coworkers
4. Rate how well you think the candidate handled the “crisis” question in the interview
5. Rate how well you think the candidate will fit in with the Riverview peer support program
6. Score your overall impression of the candidate


Your total score

**ATTACHMENT V  
Resume Scoring Tool**

**Amistad Resume Scoring Sheet**

Please rate each resume or applications using this form.

Rate Each category from 1 to 5

1=Really weak and 5=Really great

Example: A person with 5 years of relevant experience might score a "5" for experience,

But a person with little or no experience might score a "1"

**Committee Person:** \_\_\_\_\_

Candidates Initials													
Rate the Individual's Cover Letter													
Rate the person's prior work experience (Is it relevant or transferable skills?)													
Rate the person's understanding of recovery as it relates to Amistad's philosophy													
Rate the answers to the Peer Specialist's additional questions sheet													
Rate your overall impression of applicant													
Your total score													

**ATTACHMENT VI**  
**Sample Interview Questions**

# Peer Support

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**Potential Interview Questions for Peer Providers:**

1. Tell us about your background and experience related to this position, both personal and professional.
2. What is your experience with the public mental health system?
3. Do you have any experience working with people who have a mental illness?
4. What do you think are your greatest strengths?
5. What interests you about working in this program?
6. What could you contribute to the program?
7. What do you suspect will be the most difficult challenges you will face in this position? How would you deal with them?
8. What do you know about “recovery” as a concept? What is your personal knowledge of this and how did you come to this understanding?
9. What is your understanding of the recovery movement?
10. If you felt that your job was causing an increase in your stress level what would you do?
11. If you felt that you were starting to relapse, how would you handle that?
12. Some staff here may be apprehensive about or unsupportive of peer support. How would you deal with this?
13. How would you handle it if a client were asking for your attention more than you felt was appropriate?
14. Can you tell us about your history of dependability in prior positions?
15. What would you do if a client were being difficult or verbally abusive?

16. Do you have any life experiences that would make you valuable to this program?
17. Tell us about your experiences as a team member.
18. While working here you may be a part of some situations that disturb you or make you uncomfortable. How do you think you would handle these situations, both when they occur and after the situation has ended?
19. Part of the role of a peer support worker is to model recovery by sharing some of your own personal experiences. Would you be comfortable doing so?
20. Other Peer Specialists have said that the amount of social interaction can be very draining—do you have any reaction to this?
21. Imagine that a client approaches you and lists all the staff that they have been requesting to meet with, and that they continually feel ignored—how would you respond?
22. The Peer Specialists function as a small team in a much larger institution. What do you think you might do to insure good communication and follow through with other members of the team?
23. Do you function best with the independence to structure your own time, or work better with a clear structure?
24. If you were in a situation where you were called to help deescalate a situation with a client, how would you respond in that situation?
25. Peer Specialists will be involved in entering notes in the medical record, how do you feel about documenting contacts with clients?
26. Are you comfortable working independently?
27. Some people are here because they have been found not criminally responsible for serious crimes. Those crimes range from theft and arson up to rape and murder. Many of these people have been high profile and you have read or heard some pretty outrageous things about them in the media. What are your thoughts and feelings on working with these people?
28. Have you ever experienced conflict with co-workers in the past? How did you address those conflicts?
29. A big part of what Peer Specialists do is advocate for clients on a low level. You may need to address staff on their approach to clients. Talk about your ability to speak up in difficult or intimidating situations.

**ATTACHMENT VII**  
**Sample Application Questions**

**Application Addition**  
**Peer Specialist**  
**(Use back for additional space)**

1. Please tell us why you are interested in the position.
2. Please write about what recovery means to you, in your own personal journey.
3. Where do you see peer support fitting into the continuum of services?
4. Talk about your ability to be dependable.

## ATTACHMENT VIII Sample Job Descriptions

### Riverview Peer Specialist

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#### Job Description Amistad, Inc.

Amistad is a non-profit corporation started in 1982 which provides progressive and consumer directed services based on a belief in the potential of individuals with serious life challenges to live full, rich and productive lives.

**We currently operate four major programs:**

- *The Peer Support and Recovery Center at 66 State Street in Portland*
- *The Peer Support Program at Riverview Psychiatric Center in Augusta*
- *The Peer Support Program in the Maine Medical Center Emergency Department*
- *The Maine Warm Line*

The mission of Amistad is to foster a community for people who are facing mental health and other life challenges, develop peer services, and advocate for changes to the mental health system which are based on a belief in recovery and respect for meaningful consumer voice.

**Our values are these:**

We believe that all members of the Amistad community – members, staff and those seeking our services – deserve to be treated equally and with dignity and respect at all times.

We have a fundamental and unwavering belief in the power and possibility of recovery and absolutely believe that all individuals can lead full, rich and productive lives.

We believe that services that are organized and delivered by peers focus on building positive relationships and should be become an integral part of the mental health system.

All staff of Amistad are expected to share in this philosophy and in these values.

The Peer Specialist is recruited to work in the Peer Support Program that operates at Riverview Psychiatric Center in Augusta. The Peer Specialist will be responsible for working on the treatment units at Riverview.

**Qualifications include:**

- A demonstrated commitment to the philosophy of Amistad;
- A sound understanding of and commitment to the consumer led recovery movement;
- A personal history of recovery;

- Sufficient understanding of mental health practice to allow comfort in dealing with both traditional and non-traditional providers;
- Terrific people skills are critical;
- Ability to express yourself in both verbal and written communication;
- A level of comfort working with both civil and forensic populations;
- Good time management skills;
- Ability to be comfortable working in an in-patient psychiatric hospital;
- A history of dependability in recent work or volunteer service;
- Willingness to share personal recovery experiences as appropriate;
- Prior work experience working in the mental health field is a plus.

**Responsibilities include:**

- To act consistently in a manner that demonstrates dignity and respect for peers;
- To act in a calm, gentle manner and to treat all peers and professionals alike with respect;
- To act as role models, who share personal strengths and skills as well as the hope that recovery is possible for everyone;
- To encourage others to take personal responsibility for their own wellness and recovery;
- To help peers advocate for their own needs and wants;
- To maintain a high level of respect for individuals' confidentiality at all times;
- Provides support in a manner consistent with the recovery philosophy, which emphasizes peer and natural support, and the de-escalation of possible crisis;
- To participate in training developed for Peer Specialists;
- To participate in Riverview Psychiatric Center orientation;
- To participate in regular supervision with the Peer Services Director;
- To maintain records as needed for proper documentation;
- To participate in regular staff meetings with Amistad Inc. and with other Peer Specialists;
- To be actively involved in all aspects of client care;
- To report incidents that are perceived as inappropriate care of clients;
- To assist in formulating and processing client concerns/suggestions/grievances;
- Other duties as may be assigned to insure the success of the program.

The Riverview Peer Specialist is responsible to the Peer Services Director of Amistad's Riverview Program.

## Peer Services Director

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### Job Description Amistad, Inc.

Amistad is a non-profit corporation started in 1982 which provides progressive and consumer directed services based on a belief in the potential of individuals with serious life challenges to live full, rich and productive lives.

#### **We currently operate four major programs:**

- *The Peer Support and Recovery Center at 66 State Street in Portland*
- *The Peer Support Program at Riverview Psychiatric Center in Augusta*
- *The Peer Support Program in the Maine Medical Center Emergency Department*
- *The Maine Warm Line*

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#### **Our values are these:**

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We have a fundamental and unwavering belief in the power and possibility of recovery and absolutely believe that all individuals can lead full, rich and productive lives.

We believe that services that are organized and delivered by peers focus on building positive relationships and should become an integral part of the mental health system.

All staff of Amistad are expected to share in this philosophy and in these values.

The Peer Services Director in Portland is responsible for the Maine Warm Line, the Peer Support program in MMC ED and supervision of the Peer Outreach Coordinator. The Peer Services Director in Augusta will supervise all Peer Support positions at Riverview Psychiatric Center.

#### **Qualifications include:**

- A demonstrates a commitment to the philosophy of Amistad;
- A sound understanding of and commitment to the consumer led recovery Movement;
- A personal history of recovery;
- Demonstrates supervisory skills and at least two years of managerial and/or supervisory experience;
- Sufficient understanding of mental health practice to allow comfort in dealing with both traditional and non-traditional providers;

- College degree is strongly preferred;
- Working knowledge of Microsoft Office;
- A minimum of 5 years of work experience in the mental health field;
- Knowledge of mental health systems in Maine;
- Terrific people skills are critical;
- An ability to work in a flexible, multi-dimensional and fast paced environment;
- Ability and comfort with providing staff training and presentations to the public;
- Good written and verbal communication skills.

**Responsibilities include:**

- Develop and maintain the administrative structure of peer support programs;
- Develop collaborative relationships with other service providers;
- Participate in the recruitment and hiring of individuals to staff peer support programs;
- Provide regular supervision of Peer Specialists;
- Develop education modules for new staff training and orientation;
- Provide and monitor training requirements and continuing education of Peer Specialists;
- Develop program protocols consistent with generally recognized “best practice” standards;
- Educate the larger community about programs under your direction and Amistad programs in general;
- Prepare timely reports on the operation of peer support programs;
- To participate in training as needed for the acquisition and enhancement of skills;
- To attend regular staff meetings of Amistad;
- Participate in the regular supervision with Executive Director;
- Other duties as assigned to assure the success of the program.

The Peer Services Director is responsible to the Executive Director of Amistad.

12/06

**Job Description  
Amistad, Inc.**

Amistad is a non-profit corporation started in 1982 which provides progressive and consumer directed services based on a belief in the potential of individuals with serious life challenges to live full, rich and productive lives.

**We currently operate four major programs:**

- *The Peer Support and Recovery Center at 66 State Street in Portland*
- *The Peer Support Program at Riverview Psychiatric Center in Augusta*
- *The Peer Support Program in the Maine Medical Center Emergency Department*
- *The Maine Warm Line*

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We have a fundamental and unwavering belief in the power and possibility of recovery and absolutely believe that all individuals can lead full, rich and productive lives.

We believe that services that are organized and delivered by peers focus on building positive relationships and should become an integral part of the mental health system.

All staff of Amistad are expected to share in this philosophy and in these values.

The Peer Specialist is recruited to work in the Peer Support Program that operates at Riverview Psychiatric Center in Augusta. The Peer Specialist will be responsible for working primarily at Riverview and Maine General Medical Center Emergency Department.

**Qualifications include:**

- A demonstrated commitment to the philosophy of Amistad;
- A sound understanding of and commitment to the consumer led recovery movement;
- A personal history of recovery;
- Sufficient understanding of mental health practice to allow comfort in dealing with both traditional and non-traditional providers;
- Terrific people skills are critical;
- Ability to express yourself in both verbal and written communication;

- Willingness to work evening hours;
- A level of comfort working with both civil and forensic populations;
- Familiarity with the Outpatient Commitment law and involuntary hospitalization;
- Good time management skills;
- Must have reliable transportation;
- Comfort being one-on-one with clients;
- An ability to work in a hospital emergency department while also practicing in a manner that emphasizes peer and natural support and the opportunities provided by an apparent crisis.

**Responsibilities include:**

- To act consistently in a manner that demonstrates dignity and respect for peers;
- To act in a calm, gentle manner and to treat all peers and professionals alike with respect;
- To act as role models, who share personal strengths and skills as well as the hope that recovery is possible for everyone;
- To encourage others to take personal responsibility for their own wellness and recovery;
- To help peers advocate for their own needs and wants;
- To maintain a high level of respect for individuals' confidentiality at all times;
- Provides support in a manner consistent with the recovery philosophy, which emphasizes peer and natural support, and the de-escalation of possible crisis;
- To participate in training developed for Peer Specialists;
- To participate in Riverview Psychiatric Center orientation;
- To participate in regular supervision with the Peer Support Coordinator;
- To maintain records as needed for proper documentation;
- To participate in regular staff meetings with Amistad Inc. and with other Peer Specialists;
- To actively weave the natural principles of wellness into Emergency Dept. conversations as well as modeling and teaching skills of recovery and self care;
- To model a recovery approach to crisis within the hospital emergency department;
- Other duties as may be assigned to insure the success of the program.

Peer Specialist is responsible to the Peer Services Director of Amistad's Riverview Program.

### **Job Description Amistad, Inc.**

Amistad is a non-profit corporation started in 1982 which provides progressive and consumer directed services based on a belief in the potential of individuals with serious life challenges to live full, rich and productive lives.

#### **We currently operate four major programs:**

- *The Peer Support and Recovery Center at 66 State Street in Portland*
- *The Peer Support Program at Riverview Psychiatric Center in Augusta*
- *The Peer Support Program in the Maine Medical Center Emergency Department*
- *The Maine Warm Line*

The mission of Amistad is to foster a community for people who are facing mental health and other life challenges, develop peer services, and advocate for changes to the mental health system which are based on a belief in recovery and respect for meaningful consumer voice.

#### **Our values are these:**

We believe that all members of the Amistad community – members, staff and those seeking our services – deserve to be treated equally and with dignity and respect at all times.

We have a fundamental and unwavering belief in the power and possibility of recovery and absolutely believe that all individuals can lead full, rich and productive lives.

We believe that services that are organized and delivered by peers focus on building positive relationships and should become an integral part of the mental health system.

All staff of Amistad are expected to share in this philosophy and in these values.

The Peer Specialist is recruited to work in the Peer Support Program that operates at Riverview Psychiatric Center in Augusta. Peer Specialists will be responsible for working with the Riverview Forensic ACT team.

#### **Qualifications include:**

- A demonstrated commitment to the philosophy of Amistad;
- A sound understanding of and commitment to the consumer led recovery movement;
- A personal history of recovery;
- Sufficient understanding of mental health practice to allow comfort in dealing with both traditional and non-traditional providers;
- Terrific people skills are critical;
- Ability to express yourself in both verbal and written communication;

- Willingness to work day and evening hours;
- A level of comfort working with both civil and forensic populations;
- Familiarity with the Outpatient Commitment law;
- Good time management skills;
- Flexibility in work hours;
- Must have a reliable vehicle;
- Must have appropriate insurance coverage;
- Comfort being one-on-one with clients;
- Good driving record.

**Responsibilities include:**

- To act consistently in a manner that demonstrates dignity and respect for peers;
- To act in a calm, gentle manner and to treat all peers and professionals alike with respect;
- To act as role models, who share personal strengths and skills as well as the hope that recovery is possible for everyone;
- To encourage others to take personal responsibility for their own wellness and recovery;
- To help peers advocate for their own needs and wants;
- To maintain a high level of respect for individuals' confidentiality at all times;
- Provides support in a manner consistent with the recovery philosophy, which emphasizes peer and natural support, and the de-escalation of possible crisis;
- To participate in training developed for Peer Specialists;
- To participate in Riverview Psychiatric Center orientation;
- To participate in regular supervision with the Peer Services Director;
- To maintain records as needed for proper documentation;
- To participate in regular staff meetings with Amistad Inc. and with other Peer Specialists;
- To participate in case management duties, if qualified to provide those services (i.e. MHRT-C certification);
- Other duties as may be assigned to insure the success of the program.

The ACT Team Peer Specialist is responsible to the Peer Services Director of Amistad's Riverview Program.

### **Job Description Amistad, Inc.**

Amistad is a peer support and recovery center open to adult consumers of mental health services and other life challenges.

Several fundamental beliefs are key to the operation of Amistad.

The first is that Amistad is a peer-managed organization. For too long professionals have decided what is best for consumers. Our belief is that consumers are the experts in their own lives. In this Center, consumers make the major decisions regarding the policies and priorities for the Center and its operation.

The second is that we believe that people, even those with severe and persistent mental illness, can lead full, rich, productive lives when given the skills, tools, courage and support to act on their own recovery. We have an unwavering commitment to this belief.

The next is that all members of this community should be treated with dignity and respect at all times. Members have long lived with the stigma of their illness and suffered intolerance, discrimination and humiliation as a result of it.

Lastly, we believe that the opportunity to socialize, develop and maintain friendships as well as have fun in a safe and accepting environment is crucial to recovery and an important component for an individual's well being and a strong community.

All staff of Amistad are expected to bring, teach, and model the recovery philosophy.

The Peer Specialist is recruited to work in the Peer Support Program that operates in the Emergency Department of Maine Medical Center.

#### **Qualifications include:**

- A demonstrated commitment to the philosophy of Amistad;
- A sound understanding of and commitment to the consumer led recovery movement;
- A personal history of recovery;
- Sufficient understanding of mental health practice to allow comfort in dealing with both traditional and non-traditional providers;
- Terrific people skills are critical;
- Ability to express yourself in both verbal and written communication;
- Willingness to work 5pm-11pm;
- Knowledge of mental health programs and providers in the Greater Portland area;

- An ability to work in a hospital emergency department while also practicing in a manner that emphasizes peer and natural support and the opportunities provided by an apparent crisis.

**Responsibilities include:**

- To act consistently in a manner that demonstrates dignity and respect for peers entering the Emergency Dept;
- To act in a calm, gentle manner and to treat all peers and professionals alike with respect;
- To act as role models, who share personal strengths and skills as well as the hope that recovery is possible for everyone;
- To actively weave the natural principles of wellness into Emergency Dept. conversations as well as modeling and teaching skills of recovery and self care;
- To encourage others to take personal responsibility for their own wellness and recovery;
- To help peers advocate for their own needs and wants;
- Provides peer support on a scheduled basis in the Emergency Dept. at Maine Medical Center to individuals who choose to have peer support;
- To maintain a high level of respect for individuals' confidentiality at all times;
- Provides support in a manner consistent with the recovery philosophy, which emphasizes peer and natural support, and the de-escalation of possible crisis;
- To model a recovery approach to crisis within the hospital emergency department;
- To participate in training developed for Peer Specialists;
- To participate in regular staff meetings with other Peer Specialists;
- To maintain records as needed for proper documentation of the Emergency Department Program;
- To participate in regular supervision with the Program Coordinator;
- Other duties as may be assigned to insure the success of the program.

The ED Peer Specialist is responsible to the Peer Services Coordinator of Amistad.

8/05

### **Job Description Amistad, Inc.**

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#### **We currently operate four major programs:**

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- *The Maine Warm Line*

The mission of Amistad is to foster a community for people who are facing mental health and other life challenges, develop peer services, and advocate for changes to the mental health system which are based on a belief in recovery and respect for meaningful consumer voice.

#### **Our values are these:**

We believe that all members of the Amistad community – members, staff and those seeking our services – deserve to be treated equally and with dignity and respect at all times.

We have a fundamental and unwavering belief in the power and possibility of recovery and absolutely believe that all individuals can lead full, rich and productive lives.

We believe that services that are organized and delivered by peers focus on building positive relationships and should become an integral part of the mental health system.

All staff of Amistad are expected to share in this philosophy and in these values.

The Executive Director of Amistad is a unique position. S/he is expected to be a leader and visionary, and also support the primary role of consumer voice in the operations of Amistad. S/he is expected to lead and direct the staff, but in such a manner that promotes collaboration and shared decision making. And at all times s/he is expected to model the mission and values of the organization.

#### **Qualifications include:**

The Executive Director must demonstrate a number of personal qualifications. These include: maturity, initiative, sound judgment, dependability, creativity, a warm and caring manner, flexibility and a great sense of humor. Additionally the Executive Director must demonstrate an administrative style that demonstrates both leadership, as well as a commitment to working collaboratively with other staff, members, and the Board of Directors.

The Executive Director should have a Master's Degree in Social Work, Psycho-social Rehabilitation or equivalent in education, work experience or life experience. The Executive Director should also demonstrate a clear knowledge of mental health, recovery, principles of psychosocial rehabilitation, as well as sound understanding of principles of management.

**Responsibilities include:**

- Working collaboratively with the Board of Directors

The Executive Director must support the role of the Board of Directors as the body responsible for the overall direction and vision of Amistad. S/he will attend board and committee meetings; draft reports on a timely basis as may be needed by the Board or its committees; facilitate the work of the Board to recruit, train and develop members for the Board and write a monthly report for the Board prior to Board meetings.

- Provide overall supervision for the administration of Amistad operations.

This will include facilitating the preparation of the annual budget consistent with board priorities, developing and maintaining policies and procedures for the overall operation of Amistad.

- Provide overall supervision of all Amistad staff

This may include involvement in the hiring, evaluation, and if necessary, termination of staff. S/he will work with staff in a collaborative manner so they also have input in the management and operation of Amistad consistent with the mission and direction as determined by the Board. S/he will develop a plan to meet the developmental and training needs of staff. S/he will coordinate student internships for students placed at Amistad.

- Insure the financial solvency of Amistad

The Executive Director will work closely with the Board to insure the financial health of Amistad. This will include not only the day to day management of the existing budget, but also the aggressive pursuit of additional sources of funds which increase and diversify programs consistent with the mission of Amistad.

- Community Contacts

The Executive Director will maintain positive contacts with other community agencies and funding sources. This will include attending community meetings and forums, as well as attendance at conferences and training sessions. S/he will represent Amistad in public forums to increase the profile of Amistad.

- Leadership

The Executive Director will provide and model quiet and calm leadership in the management of Amistad. This will include developing supportive and positive relationship with members and staff, dealing with crisis in a thoughtful and effective manner, and promoting peaceful and constructive resolutions of conflicts.

The Executive Director reports to the Board of Directors of Amistad.

## **Recovery Trainer**

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### **Job Description Amistad, Inc.**

As a recovery trainer you will be responsible for co-facilitating Recovery Groups on the treatment mall at Riverview Psychiatric Center. Groups are offered 4 hours per week between the hours of 9-11 am and 1-3 pm (session times may vary due to treatment mall scheduling).

The groups borrow heavily on concepts related to Mary Ellen Copeland's WRAP model and Boston University Recovery Workbook material.

Recovery Trainers are required to provide general documentation of client participation for hospital records. They are expected to develop and copy curriculum that is used for the groups.

Recovery Groups are part of the Amistad Inc. Peer Specialist Program that Amistad operates within Riverview. Recovery trainers will be part of the peer support team and participate in individual and group supervision as needed.

Recovery Trainers are expected to have personal experience with the mental health system, a willingness and comfort in sharing their history appropriately, and a working familiarity with the principles and practice of "recovery."

## Riverview Peer Specialist Team Leader

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### Job Description Amistad, Inc.

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- *The Maine Warm Line*

The mission of Amistad is to foster a community for people who are facing mental health and other life challenges, develop peer services, and advocate for changes to the mental health system which are based on a belief in recovery and respect for meaningful consumer voice.

#### **Our values are these:**

We believe that all members of the Amistad community – members, staff and those seeking our services – deserve to be treated equally and with dignity and respect at all times.

We have a fundamental and unwavering belief in the power and possibility of recovery and absolutely believe that all individuals can lead full, rich and productive lives.

We believe that services that are organized and delivered by peers focus on building positive relationships and should become an integral part of the mental health system. All staff of Amistad are expected to share in this philosophy and in these values.

The Warm Line is being expanded to provide a gentler alternative to traditional crisis services. It is hoped that it will be another example of the power of peer support.

The team leader position is created to take over day to day operations of the Riverview program. They will have supervisory and oversight capacity of all staff assigned to hospital units. They will ensure the smooth operation of the program's functioning on a day to day basis. They will report to the Peer Support Coordinator, who will maintain oversight through the team leader.

#### **Qualifications Include:**

- A demonstrated commitment to the philosophy of Amistad;
- To demonstrate a personal history with recovery;
- An understanding of and commitment to the consumer led recovery movement;
- An ability to document significant events and supervisory actions;

- To have a history of dependability in past/ recent work or volunteer service;
- Sufficient understanding of mental health practice;
- The ability to model recovery based concepts;
- An ability to work in a flexible, multi-dimensional environment;
- Knowledge or ability to learn the technology needed for success in the position, which include the computer (email and word processor);
- Ability to express yourself in both verbal and written communication;
- Willingness to work evenings and weekends when needed for supervisory reasons;
- Experience and ability to supervise other co-workers;
- Ability of manage work time and a flexible schedule;
- Ability to coordinate multiple schedules.

**Responsibilities Include:**

- To act consistently in a manner that demonstrates dignity and respect for Riverview clients;
- To maintain strict confidentiality of all client information outside of your position;
- To act in a calm, gentle manner and to treat all peers and professionals alike with respect;
- To act as a role model, who shares personal strengths and skills as well as the hope that recovery is possible for everyone;
- To actively weave the natural principles of wellness into conversations with clients and co-workers as well as modeling and teaching skills of recovery and self care;
- To encourage others to take personal responsibility for their own wellness and recovery;
- To help clients advocate for their own needs and wants;
- To be available on time for scheduled shifts;
- Work with co-workers to find replacements or coverage for peer support obligations;
- To participate in all scheduled trainings for Peer Specialists as needed for the acquisition and enhancement of skills;
- To participate in regular supervision with Peer Services Director;
- To act as program supervisor in the Peer Services Director's absence;
- To attend or facilitate scheduled staff meetings with other Peer Specialists;
- To assure program report data is turned in timely;
- Maintain supervision records of assigned staff;
- To work with Peer Services Director on other assigned administrative tasks: scheduling; data collection and management; obtaining supplies; supervision of designated staff assigned to Riverview Psychiatric Center units; and occasional supervision of full-time staff as needed and requested by Peer Services Director
- Overall management of staff during shift hours;
- Provide individual supervision on a regular basis with assigned staff;
- To ensure that new Peer Specialists are trained in program practices, policies, expectations, and oriented to the hospital milieu;
- Oversight of all unit practices related to peer support and client care issues;
- Other duties as assigned to ensure the success of the program;

The Peer Specialist Team Leader is responsible to the Peer Services Director of Amistad.

## Transportation Peer Support

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### Job Description Amistad, Inc.

Amistad is a non-profit corporation started in 1982 which provides progressive and consumer directed services based on a belief in the potential of individuals with serious life challenges to live full, rich and productive lives.

#### **We currently operate four major programs:**

- *The Peer Support and Recovery Center at 66 State Street in Portland*
- *The Peer Support Program at Riverview Psychiatric Center in Augusta*
- *The Peer Support Program in the Maine Medical Center Emergency Department*
- *The Maine Warm Line*

The mission of Amistad is to foster a community for people who are facing mental health and other life challenges, develop peer services, and advocate for changes to the mental health system which are based on a belief in recovery and respect for meaningful consumer voice.

#### **Our values are these:**

We believe that all members of the Amistad community – members, staff and those seeking our services – deserve to be treated equally and with dignity and respect at all times.

We have a fundamental and unwavering belief in the power and possibility of recovery and absolutely believe that all individuals can lead full, rich and productive lives.

We believe that services that are organized and delivered by peers focus on building positive relationships and should become an integral part of the mental health system.

All staff of Amistad are expected to share in this philosophy and in these values.

The Peer Specialist is recruited to work in the Peer Support Program that operates at Riverview Psychiatric Center in Augusta.

#### **Qualifications include:**

- A demonstrated commitment to the philosophy of Amistad;
- A sound understanding of and commitment to the consumer led recovery movement;
- A personal history of recovery;
- Sufficient understanding of mental health practice to allow comfort in dealing with both traditional and non-traditional providers;
- Knowledge of the Augusta area;
- Terrific people skills are critical;
- Ability to express yourself in both verbal and written communication;
- Willingness to work day and evening hours;

- Must have a reliable vehicle;
- Must have appropriate insurance coverage;
- A level of comfort working with both civil and forensic populations;
- Comfort being one-on-one with clients;
- Good time management skills;
- Flexibility in work hours;
- Good driving record.

**Responsibilities include:**

- To act consistently in a manner that demonstrates dignity and respect for peers;
- To act in a calm, gentle manner and to treat all peers and professionals alike with respect;
- To act as role models, who share personal strengths and skills as well as the hope that recovery is possible for everyone;
- To encourage others to take personal responsibility for their own wellness and recovery;
- To help peers advocate for their own needs and wants;
- Provide transportation for clients to medical appointments, support groups, and other scheduled appointments in the community;
- To maintain a high level of respect for individuals confidentiality at all times;
- Provides support in a manner consistent with the recovery philosophy, which emphasizes peer and natural support, and the de-escalation of possible crisis;
- To participate in training developed for Peer Specialists;
- To participate in Riverview Psychiatric Center orientation;
- To participate in regular supervision with the Peer Support Team Leader;
- To maintain records as needed for proper documentation of transportation activities;
- To participate in regular staff meetings with Amistad Inc. and with other Peer Specialists;
- Other duties as may be assigned to insure the success of the program;
- Coordinating schedule with hospital staff.

The Transportation Peer Specialist is responsible to the Peer Services Director in the Riverview Program.

## **ATTACHMENT IX**

### **Hawaii Peer Code of Ethics**

#### **Certified Peer Specialists**

1. The primary responsibility of Certified Peer Specialists is to help individuals achieve their own needs, wants, and goals. Certified Peer Specialists will be guided by the principle of self-determination for all.
2. Certified Peer Specialists will maintain high standards of personal conduct. Certified Peer Specialists will also conduct themselves in a manner that fosters their own recovery.
3. Certified Peer Specialists will openly share with consumers and colleagues their recovery stories from mental illness and will likewise be able to identify and describe the supports that promote their recovery.
4. Certified Peer Specialists will, at all times, respect the rights and dignity of those they serve.
5. Certified Peer Specialists will never intimidate, threaten, harass, use undue influence, physical force or verbal abuse, or make unwarranted promises of benefits to the individuals they serve.
6. Certified Peer Specialists will not practice, condone, facilitate or collaborate in any form of discrimination on the basis of ethnicity, race, sex, sexual orientation, age, religion, national origin, marital status, political belief, mental or physical disability, or any other preference or personal characteristic, condition or state.
7. Certified Peer Specialists will advocate for those they serve that they may make their own decisions in all matters when dealing with other professionals.
8. Certified Peer Specialists will respect the privacy and confidentiality of those they serve.
9. Certified Peer Specialists will advocate for the full integration of individuals into the communities of their choice and will promote the inherent value of these individuals to those communities. Certified Peer Specialists will be directed by the knowledge that all individuals have the right to live in the least restrictive and least intrusive environment.
10. Certified Peer Specialists will not enter into dual relationships or commitments that conflict with the interests of those they serve.
11. Certified Peer Specialists will never engage in sexual/intimate activities with the consumers they serve.
12. Certified Peer Specialists will not abuse substances under any circumstance.

13. Certified Peers Specialists will keep current with emerging knowledge relevant to recovery, and openly share this knowledge with their colleagues.

14. Certified Peer Specialists will not accept gifts of significant value from those they serve.

The following principles will guide Certified Peer Specialists in their various roles, relationships and levels of responsibility in which they function professionally.

## **Attachment X Additional Resources**

[www.gmhcn.org](http://www.gmhcn.org)

This is the Georgia Mental Health Network, which provides information about the Peer Specialist Training program in Georgia.

[www.hali88.org](http://www.hali88.org)

"Hands Across Long Island" is an organization that has opened a consumer/professional mental health clinic on Long Island.

[www.mamhtransformation.org](http://www.mamhtransformation.org)

This is a Massachusetts website that offers information about mental health transformation in the state, including the promotion of peer roles.

[www.metaservices.com](http://www.metaservices.com)

Provides information about META's (now Recovery Innovations) Peer Employment Training Program. Also provides information about the Living Room, an alternative peer run crisis program.

[www.naops.org](http://www.naops.org)

This is the website for the National Association of Peer Specialists. The organization sponsors an annual conference for Peer Specialists, which is in Philadelphia in August for 2008. Information about the conference is on the website. All Peer Specialists, inpatient and outpatient, will benefit from attending this conference. NAPS also is a resource of other materials regarding Peer Specialists and publishes a quarterly newsletter.

[www.mhrecovery.org](http://www.mhrecovery.org)

This website offers information about recovery and Peer Specialist research conducted out of Pennsylvania. This is an excellent resource for those looking to substantiate the importance of peer support.

[www.nasmhpd.org/consumernetworking.cfm](http://www.nasmhpd.org/consumernetworking.cfm)

This website is a resource for peers working in inpatient settings. Currently it contains the guidebook: "Paving New Ground: Peers Working in Inpatient Settings" and will have frequent news announcements, job opportunities, training materials and additional information provided by peer providers throughout the country.

Other resources can be found in the guidebook, "Paving New Ground: Peers Working in Inpatient Settings" by Gayle Bluebird. This guidebook is available on request from Gayle.