Integrating Peer Support Services Across Different Intercepts

Peer Support Services at the University of Alabama Birmingham

Welcome and Introductions
Welcome

• Timothy Jeffries, Senior Policy Advisor, BJA
• Diana Williams, Project Manager, Altarum
• Elizabeth Burden, Technical Assistance Director, Altarum
• Sadé Richardson, Analyst, Altarum
• Erin Etwaroo, Analyst, Altarum

Guest Presenters

• S. Bailey Davis
• Pamela Butler
• Paul Bryant
• Bobbi Jo Beverly
• Dorothy Smith
• Michael Wise
• Beth Slocum
S. Bailey Davis

- Director of Community Justice Programs/UAB School of Medicine, including oversight over all adult criminal (felony and misdemeanor)-related treatment court programs, community corrections programs (front-end diversion and reentry), the PRSS program, and pre-trial release services for Jefferson County, Alabama
- Has worked for the UAB School of Medicine/UAB TASC Programs for 19 years
- Received his master’s degree in rehabilitation counseling from the University of Alabama at Birmingham in December 2000
- Previously, he worked as a counselor with a variety of populations, including people afflicted with HIV, homeless teens, and individuals with severe substance use disorder/mental health diagnoses

Paul R. Bryant Jr.

- Peer Coordinator for Specialty Courts in Jefferson County
- Worked with UAB’s Community Justice Programs for 1.5 years, where he started as a certified recovery support specialist
- He is a graduate of the drug court program he works with and has been sober for almost 3.5 years
- His pathway to recovery is the 12 Steps, but he also explores and attends other programs such as Celebrate Recovery and Refuge Recovery
- He created an Alumni Group for Specialty Court and Beacon Recovery graduates, called the Jefferson County Treatment Court Alumni Group (JCTC Alumni), which helps former clients stay engaged in healthy recovery-oriented relationships and give back to current program participants, all while supporting each other in their recovery
- He graduated from Jefferson State Community College in 2017 and is currently a senior at UAB pursuing his bachelor’s degree in social work; he will enter graduate school in 2020 to earn his master’s degree in social work
Bobbi Jo Beverly

- Certified Recovery Support Specialist with Jefferson County Family Wellness Court since March 2016
- Certified through the Alabama Department of Mental Health
- Prior to joining TASC, she was a participant in the Family Wellness Program and graduated the program in December 2014 with a sobriety date of October 11, 2013
- Bachelor of science degree from the University of Central Florida
- Leadership team member at Celebrate Recovery with ONEeighty Church in Springville, Alabama
- Member of the Governor’s Alabama Opioid Overdose and Addiction Council

Dorothy Smith

- Peer Support Specialist with the University of Alabama at the Birmingham Community Corrections Program
- Started with CCP as a client, moving from client to volunteer, and then from volunteer to full-time employee in October 2011
- Certified by the National Institute of Corrections; facilitates several evidence-based curricula and was trained by the Alabama Department of Mental Health in peer support
- Currently attending the University of Alabama, seeking an undergraduate degree in social work, and will enter the graduate program in fall 2020
Michael Wise

- Recovery Support Specialist certified by the Alabama Department of Mental Health
- As a person in long-term recovery, he uses his personal recovery story to help others along their road to recovery
- Work responsibilities include care coordination and facilitating peer groups at Beacon Recovery

Beth Slocum

- Alabama State Certified Recovery Support Specialist with more than 5 years of recovery
- Uses her personal lived experience to assist others in finding their own paths to recovery
- Facilitates an opiate recovery intensive outpatient group using evidence-based curricula as well as walking clients through the assessment process
UAB Community Justice Programs

The Importance of PRSS Representation: Increasing Program Relevance for Consumers

Brief History to PRSS Inclusion

• UAB CJ Programs was created during the 1970s, in tandem with the beginnings of the National Treatment Alternatives for Safer Communities (TASC) organization
• Throughout the 1980s and 1990s, employed recovering individuals (5 years sober minimum) or past consumers (2 years postgraduation). Noticed that some wanted to engage in more focused, supportive roles, not traditional case management or counseling
• From 2010 to 2014, three things occurred
  • UAB started initiatives around consumer satisfaction with services—this began to create increased awareness of the need for “navigators” and ongoing support in the School of Medicine
  • Federal grants began to incorporate more opportunities to engage PRSS
  • The Alabama Department of Mental Health began to promote PRSS as a valid, professional service with its own certification process, ongoing credentialing training, and code of ethics
**UAB: PRSS Requirements**

All peers **MUST** comply with the Alabama Department of Mental Health’s statewide certification.

**Certified Recovery Support Specialist:** A person living in recovery with a substance use disorder working within an agency or organization who has been trained and certified by the Alabama Department of Mental Health (ADMH) to use their personal recovery story to assist others in developing their personal plan for recovery.

**Qualifications to Become a Certified Recovery Support Peer Specialist**
- A minimum of two (2) years of continuous demonstrated recovery time from a substance use/mental health disorder at the date of application
- Willing to self-identify as a person in recovery for the benefit of others
- High school diploma or GED
- A valid driver’s license
- Two (2) written references that attest to appropriateness for certification
- 40 hours of ADMH-approved Certified Recovery Support Specialist (CRSS) training
- Pass exam with a minimum score of 70

**Required Knowledge and Skills**
- An understanding of recovery from substance use/mental health disorders
- Basic understanding of substance use/mental health disorders and the system of care
- Basic knowledge of empowerment and the goals and objectives of the consumer movement
- Ability to work with individuals or groups
- Basic knowledge of consumer rights and advocacy

**ADMH will cover the cost for the training, hotel accommodations, and meals. In order to retain certification, Certified Recovery Support Specialists (CRSS) must earn 16 Continuing Education Units (CEUs) each calendar year following the year they pass the CRSS exam.**

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**UAB PRSS Programs**

**CRIMINAL JUSTICE**
- Completion of the state CRSS certification process prior to employment or volunteering
- First contact at intake—minimizing resistance and trauma
- Cognitive Behavioral Intervention for Employment Model
  - Lead evidence-based trainings
  - Jobs coaching/post employment
- Mentoring in specialty court programs
  - Drug courts
  - Mental health courts
  - Veterans’ courts
  - Family wellness courts

**TREATMENT PROGRAMS**
- **Six-month on-the-job training** with two tracks (PAID training)

1. **Fellowships** for SA/MH peers who have already completed the CRSS training offered through DMH and are new to the field/looking for experience in an agency
2. **Internships** for SA/MH peers who have not completed the CRSS training but plan to once they reach the two-year mark

- Fellows and interns work alongside the peers currently in place in IOP groups, most of whom have 15-plus years of recovery
UAB PRSS Programs

Five Core Philosophies

1. **Being Aware of Trauma**: Peers are essential to trauma-informed care practices
2. **Professional Certification**: Peers are responsible to their own credentialing organizations, independent of the employer
3. **Linkage**: Peers are the most able navigators to the recovery community resources
4. **Motivation**: Peers are instrumental in keeping participants motivated through mentoring/coaching
5. **Inspiring Hope**: Peers demonstrate that recovery is possible

Elements for Success

1. Staying true to strengths developed in training, not just to fill service gaps
2. Making sure that peers have a sense of community and a voice within the organization
   *Our PRSS are enabled to have independent community meetings, as well as representation at all higher-level meetings (administrative or management).
   *Our PRSS have representation at interviews for other peer applicants
3. Utilizing peers at varying intercepts in the criminal justice system and in the formal treatment system

Some PRSS Impacts

For Fiscal Year 2018, 7,411 participants were served by the adult Community Justice Programs

1. ALL participants have contact with a peer for screenings and follow-up mentoring
2. First contact is always peer facilitated; this reduces resistance and increases engagement in participating in the programmatic screenings (peer facilitated), which assists the case planning and referral process
3. By virtue of early peer engagement at criminal justice intercept points (prison reentry, jail, or program intake), 5,786 participants were screened, assessed, and engaged in clinical services or enrolled in supportive services (CBI programming, vocational/housing support, mentoring, and employment) that are fully peer staffed
4. Completion rates for the totality of Community Justice Programs increased to 78 percent, following the introduction of more consistent/focused recovery support services during 2017 and 2018
5. Direct peer involvement assisted in reducing jail stays via coordinating services from an average of 6 months to an average of 3 days to 2 weeks
6. 4,118 community service hours were coordinated via peers
Specialty Courts

Paul R. Bryant Jr., AA, CRSS
Bobbi Jo Beverly, CRSS
Specialty Courts in Jefferson County

• Adult Felony Drug Court
• Veterans’ Court
• Mental Health Court
• Family Wellness Court

What Is Peer Support?

• Peer support is the act of people who have had similar experiences with substance use disorders and/or mental illnesses giving each other encouragement, hope, assistance, guidance, and understanding that aids in recovery. It can be done anytime, anywhere, when two or more peers are in a mutual, supportive relationship
• Peer support is a range of nonclinical supportive services to facilitate the process of recovery and holistic wellness
• These services may be provided prior to, during, and after treatment to an individual and/or family member of an individual with a substance use disorder and/or mental illness in an individual or group setting
• Peer support services must promote
  • Many pathways to recovery
  • Self-directed care
  • Recovery-oriented care
  • Self-advocacy
  • A strength-based approach
  • Relationship enhancement
  • Peer support philosophy
Peer Support Specialist Roles

Peer Support Specialist
A person living in recovery with a substance use disorder and/or mental illness and providing support to others seeking recovery from a substance use disorder and/or mental illness

Peer Bridge Builder
Represents a bridge that connects two entities that are separated; because peer specialists have experience as both clients and staff members, they have the ability to provide a bridge between the two

Peer Mentor
A mentor is a person who has experience in a given area and uses that experience to help another person advance in a particular area of life. A peer mentor uses his or her recovery experience to help a peer learn the needed skills to move beyond the disabling power of an addictive disorder and/or mental illness and to create a new life

Role of Peer Support Specialist in Specialty Courts

- Provide peer support based on the peer’s lived experience, knowledge of resources, and connections to the recovery community
- Bridge the gap between case managers and clients and also between judges and clients
- Engage participants in the application process and answer any questions they may have
- Engage participants at orientation and give them information about the program and alumni group
- Lead recovery support groups
- Lead evidence-based criminal thinking and cognitive behavior intervention groups
- Provide one-on-one sessions with clients in the office or field or on the phone
- Connect clients to resources in their communities based on need, preference, and past experience
- Transport clients to treatment so they have a “warm hand-off,” which makes them more comfortable and confident upon arrival
- Advocate for clients in court and in staffing meetings
- Help clients plan for graduation/completion of program by developing long-term recovery management plans
Peer Support Core Competencies/Skills

Recovery-Oriented Systems of Care
A coordinated network of community-based services and supports that is person-centered and builds on strengths of individuals, families, and communities to achieve recovery, improved health, wellness, and quality of life.

Cultural Competence
Peers value the cultural differences and preferences of individuals and realize that cultural differences can influence a person’s willingness to receive help and his or her preferences on how services will be provided.

Motivational Interviewing
Peers use motivational interviewing as a client-centered, empathetic, yet directive interaction designed to explore and reduce inherent ambivalence and resistance. This can encourage self-motivation for positive change. Motivational interviewing is not a technique but rather a style, a facilitative way of being with people.

Self-Efficacy
This is critical to the success of the client. If a client does not believe that he or she can be successful, then success becomes difficult or impossible to achieve. When the peer believes in the client and is able to convey that to the client, the peer can enhance the client’s belief that change is possible.

Peers Using Their Personal Recovery Stories
The most valuable tool a peer has is his or her lived experience; learning how to share this experience is a vital skill. Peers’ personal stories should be used only to help clients, never to work through their own issues. This requires development of appropriate and professional communication skills, learning to say a lot in a short amount of time, and staying focused on the clients they are working with (not themselves).

Ethics/Boundaries
A peer’s main ethical obligation is to “do no harm.” Many peers may struggle with ethics and boundaries, which is why frequent training and education is recommended. This is because many peers have such deep empathy for clients that professional and personal lines/boundaries can become blurred. Each agency has its own specific policy and procedure that must be adhered to as well, and the peers have an ethical obligation to the certifications they hold.
Peer Support in Recovery Support Services Is Key
Peers Are Working in Every Aspect of Behavioral Health

• EMPLOYMENT versus RECIDIVISM
• Bridging the gap
• Maintaining employment

Employment Workshop Before Employment

• Client need checklist
  • (remove the barriers)
• Application
  • (changing the language)
• Interviewing
  • (how to answer the questions)
Recovery Support Services After Employment

Criminal Justice
- ✔ Reporting
- ✔ Court reviews
- ✔ Urinalysis
- ✔ Recidivism

Peer Support
- ✔ Group session
- ✔ One-on-one mentoring
- ✔ Job coaching
- ✔ Advocacy
A Peer’s Role in Treatment

• Beacon Recovery utilizes peers throughout an entire treatment episode
• Recovery support specialists are the initial points of contact at our agency
• Peers working in the Assessment Center facilitate the day-to-day operations, the intake process for incoming clients, and the flow of information to and from our referring partners
A Peer’s Role in Group Facilitation

• For our IOP and day treatment programs, peers facilitate roughly half of the group treatment sessions
• During these sessions, peers cover core curriculum of our evidence-based treatment model
• Peers address this material from the perspective of their own lived experience pertaining to each topic

Challenges Peers Face in Treatment

• An area that deserves special diligence by recovery support specialists is maintaining professional boundaries with clients
• Peers aim to develop a rapport with clients that allows for an open and honest dialogue while adhering to ethical boundaries
Questions?