

# Supervising Peer Support Staff: What does it take?

## Speakers:

Laurie Curtis, MA, CPRP for

Cheryl Gagne, PsyD

Lyn Legere, MS, CPRP, CPSS

Moderated by: Suzannah Kratz, MEd

# Disclaimer

This presentation was supported [in part] by contract number HHSS283201200002I/Task Order No. HHSS28342002T (State TA) from the Substance Abuse and Mental Health Services Administration (SAMHSA).

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# Welcome!



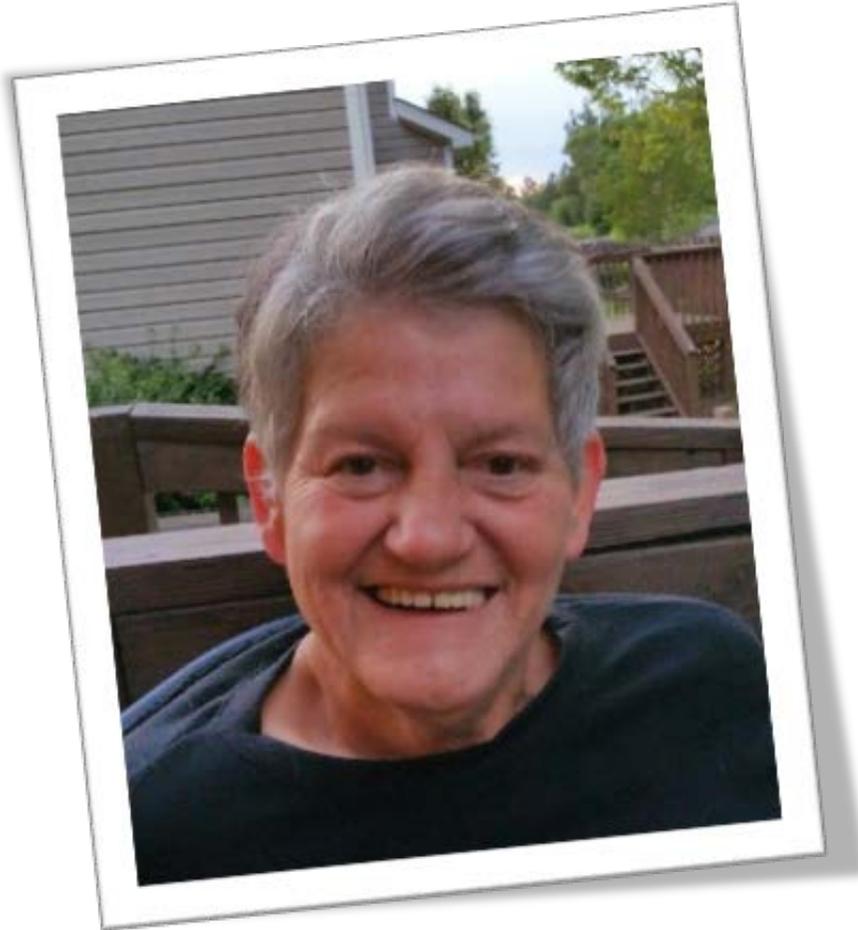
# Speaker: Laurie Curtis, MA, CPRP



Laurie Curtis is currently the project director for SAMHSA's Recovery to Practice initiative and has worked with other SAMHSA projects such as BRSS TACS, the Consumer-Operated Services Program [or COSP] Tool Kit, and she led the development of SAMHSA's shared decision-making tool on antipsychotic medication and recovery.

Over the years she has supervised peer staff and as a person in recovery herself, received both excellent supervision and mentoring as well as some that was less helpful.

# Speaker: Lyn Legere, MS, CPRP, CPSS



Lyn Legere is a person in long term recovery from substance use and mental health challenges. She has been active in promoting the value of peer support in our behavioral health systems since the early 1980's.

She was the Director of the Peer Support Training and Certification Program in Massachusetts and is now doing similar work in North Carolina.

# The **What's** and **Why's** of Supervision



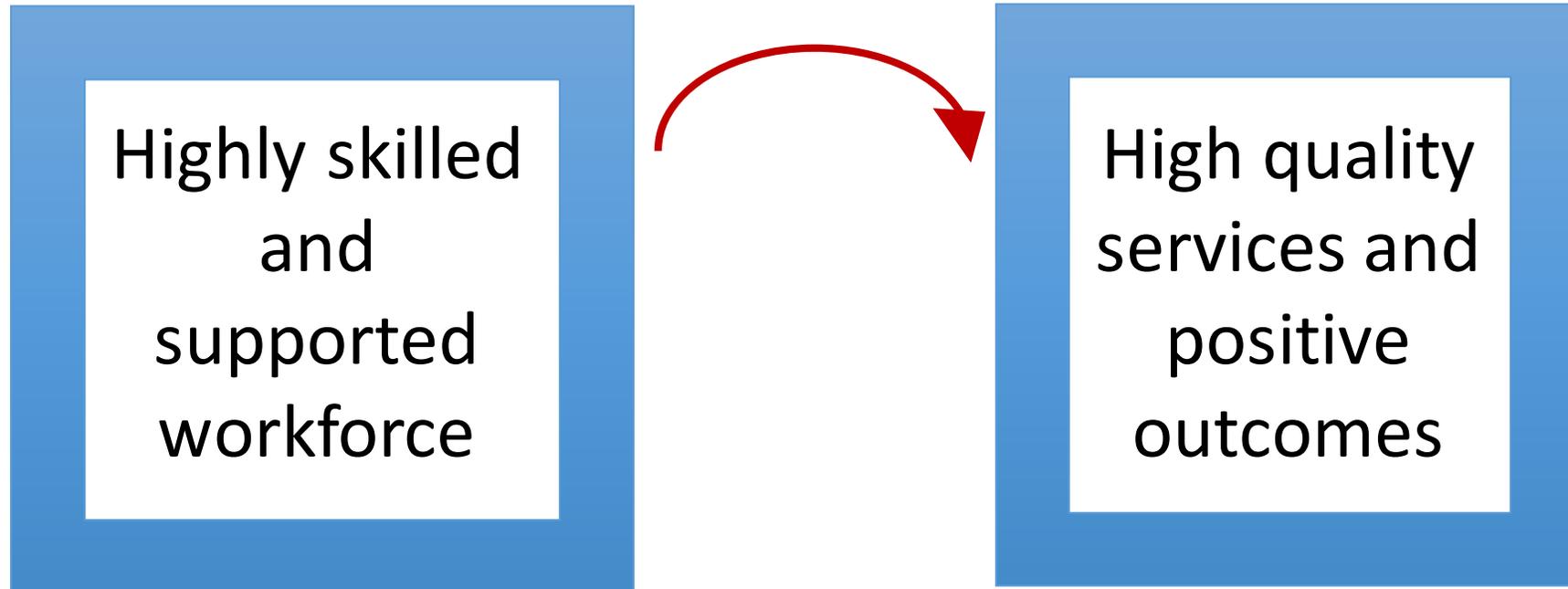
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- \* **New Field**
- \* **Confusion reported**
- \* **Research findings**

# Why Formal Supervision?

Supervision that is well implemented is a key component for....



# Definition of Supervision



Supervision is a designated interaction between two or more professionals, within a safe and supportive environment, which enables a process of reflective, critical analysis of care, to ensure quality services.

**Supervision is about enhancing the knowledge, skills and attitudes of staff.**



# Administrative

Hours/HR issues

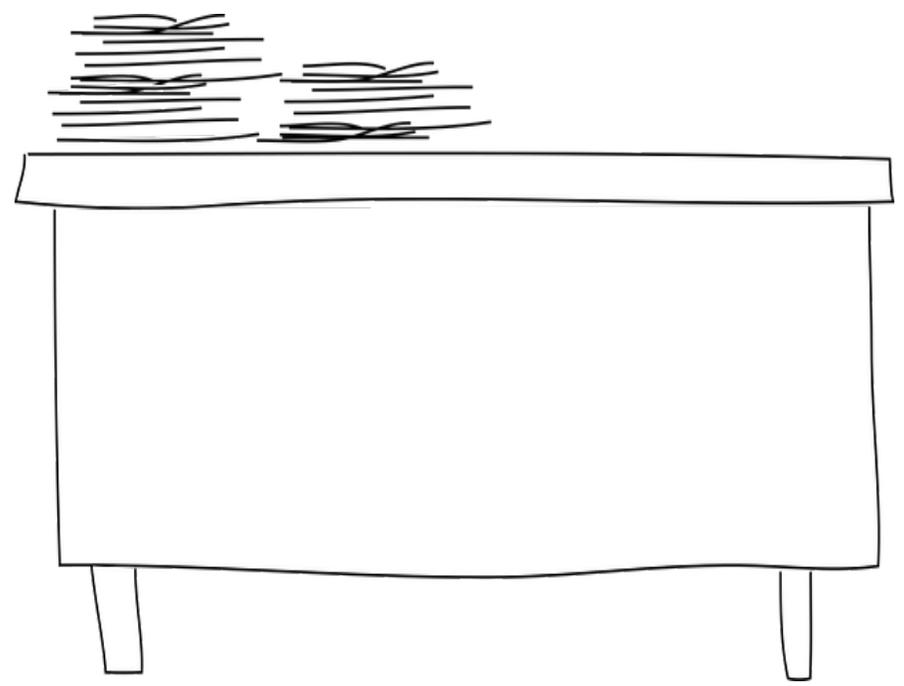
Meeting requirements

Case review

Time management

Documentation requirements

Miscellaneous issues



**“Practice”**

## **“Practice” / Professional Development Mentoring**

Practice skills, ways to improve practice, role-modeling, suggestions for further information, etc.



# Supervisor Responsibilities - General



Provide  
Constructive  
Feedback

**Criticism means I think you have what it takes to do better. It's actually a compliment!**



# Supervisor as Guide

Most important...



# Requirements of a Supervisor

If you're not a  
**ZEBRA,**

you have to at least  
**KNOW** what makes a  
zebra tick!

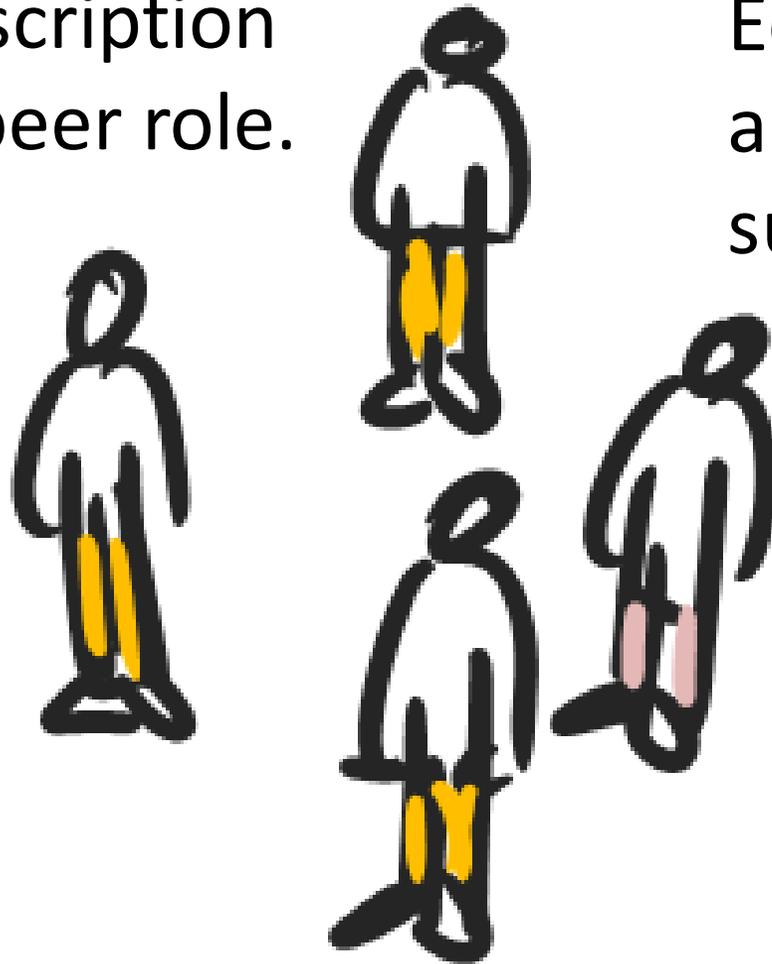


# Primary Functions of Supervisor

Ensure that job description is consistent with peer role.

Educate others in agency about role & tasks of peer supporter(s).

Help peer staff to be successful in the job.

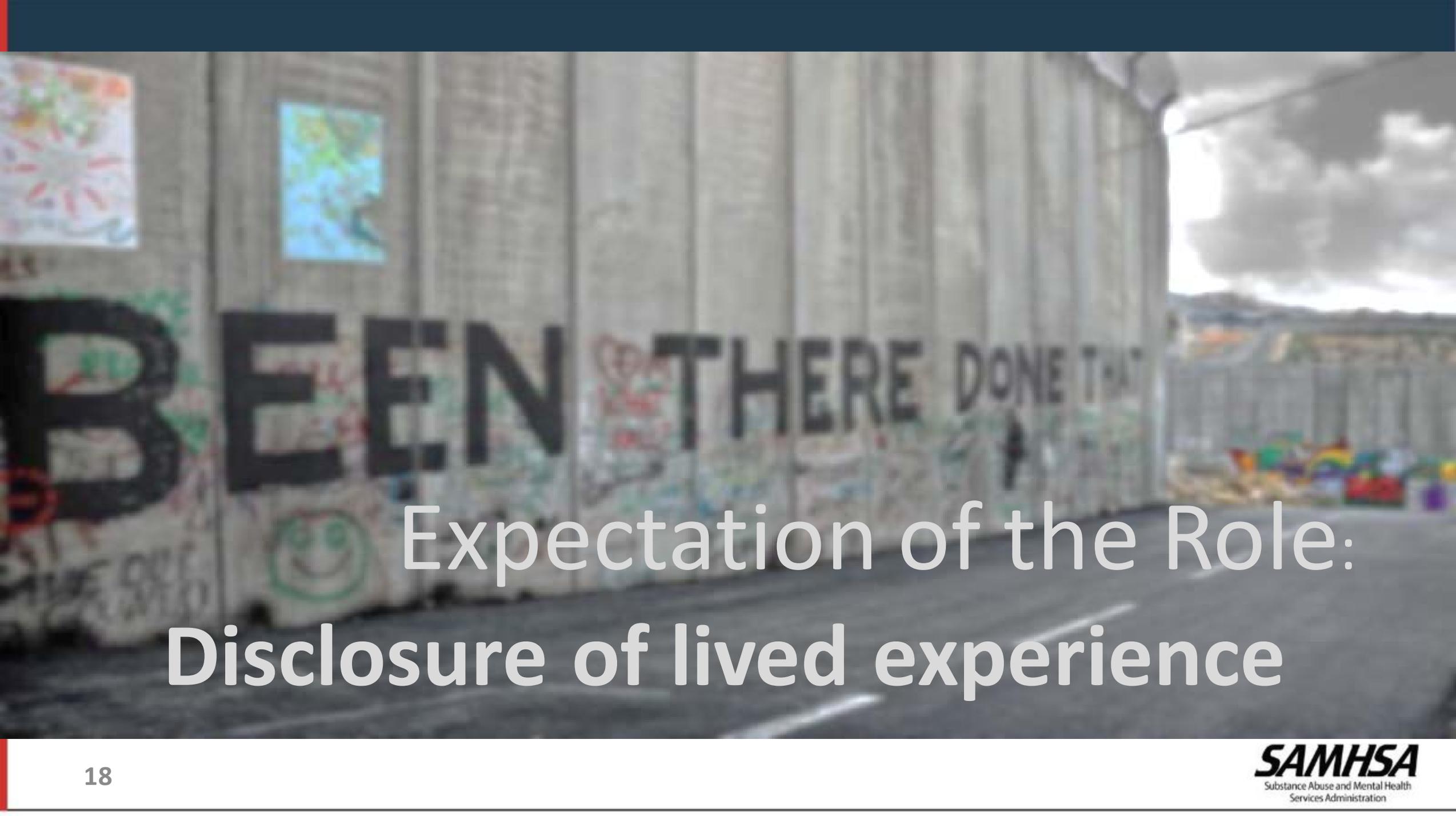


Recognize ways that agency practices are inconsistent with recovery vision and advocate for change.

# Be A Champion

For the worker  
For peer staff in the agency  
For the peer workforce  
For the agency  
For people using services





# Expectation of the Role: Disclosure of lived experience

Partnership  
shared  
Relationship  
homologous  
Similar  
likeness  
kindred  
same  
equal  
Alliance  
Match  
PEER  
*equivalent*  
reciprocal  
mutual  
affinity  
*Comparable*  
similitude  
Commonality  
alike  
akin  
parallel  
connection



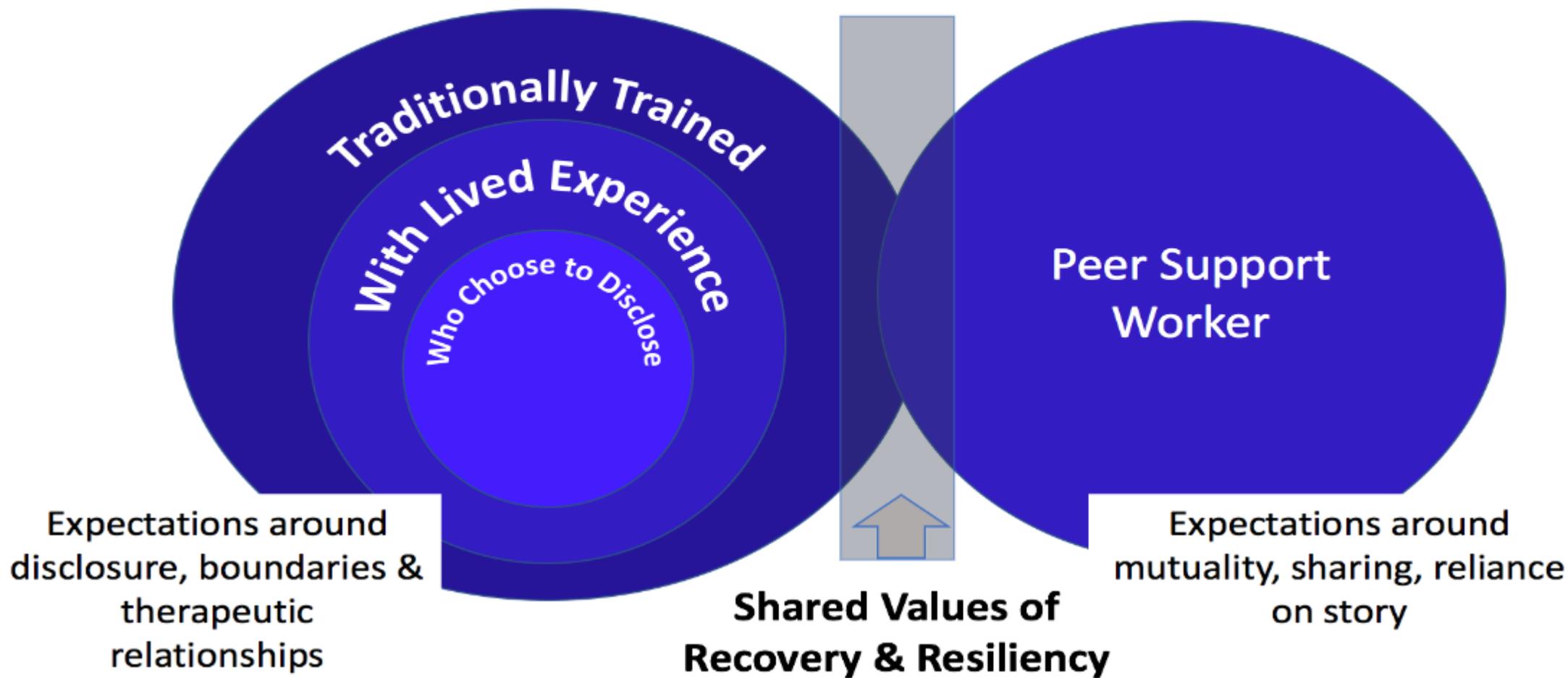
It cannot be  
both  
**MUTUAL**  
and  
**MANDATORY**

# The Basics...



Peer Support

Case Management



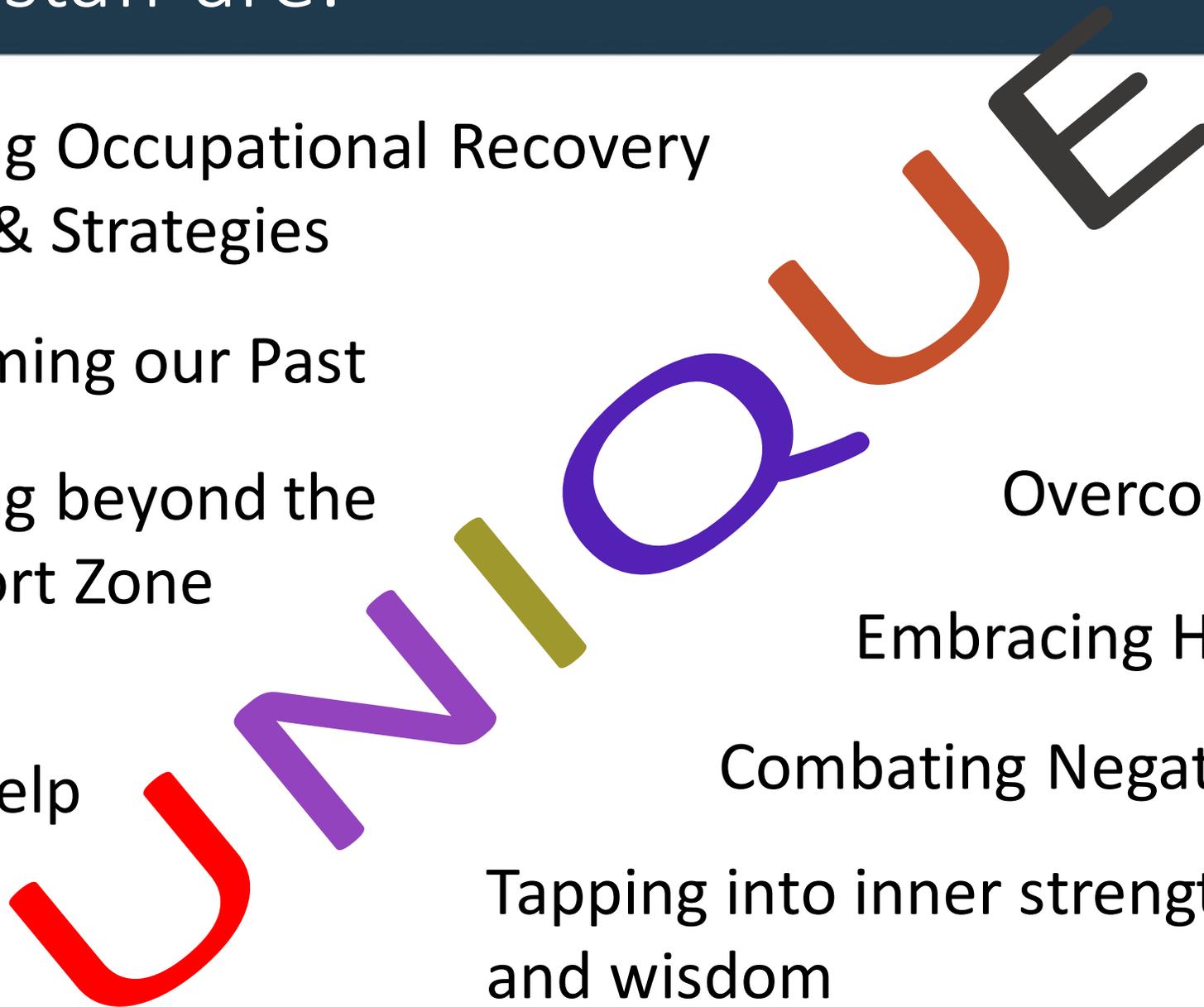
# Peer staff are:

Sharing Occupational Recovery  
Tools & Strategies

Reframing our Past

Moving beyond the  
Comfort Zone

Using  
Self-Help



Validating  
Strengths

Overcoming Fear

Embracing Hope

Combating Negative Self-Talk

Tapping into inner strength  
and wisdom

# Peer staff are not:

**Clinicians**

**Case Managers/Social Workers**

**Mental Health Workers**

**Advisors**

**Sponsor/Spiritual Advisors**

**Friends**



# Potential Role Confusion

- Friend
- Clinician/Care Taker
- One of “us” versus one of “them”
- Savior



Professionally  
Led Activity

Practice  
Based Activity

~~Personal  
Therapy~~

Supervision

✓ **Performance**

✓ **What's happening in field**

✓ **Areas for education and professional growth**

✓ **Relationships with co-workers**

✓ **Personal wellness (related to work performance only)**

## Example Agenda for Supervision

# Ways of Structuring Supervision

- ✓ **One-to-one**
- ✓ **Group**
- ✓ **Co-facilitating groups**
- ✓ **Direct observation of interactions**
- ✓ **Video or audio recordings of interactions**
- ✓ **Reviewing documentation**

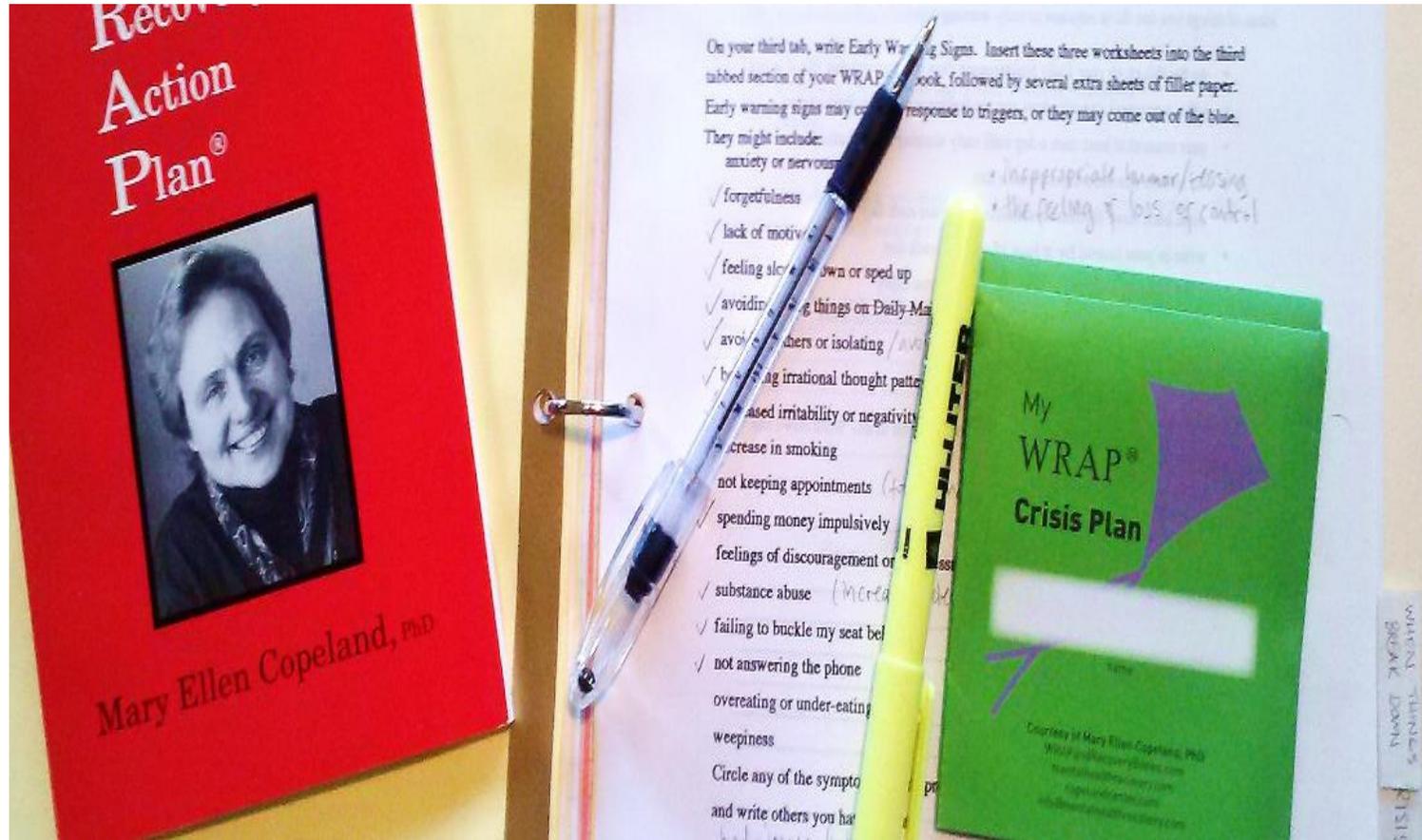


# Pitfalls to watch for



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# Not so good practices



## #1. Taking on a caretaker role

# Not so good practices



**#2**

**Acting as clinician**

# Not so good practices



**#4**

**Violation of Peer  
Specialists Ethics**



# Not so good practices



## #7 Breaching confidentiality

# Not so good practices



#8

**NO! RESPECT**



# Finding Success



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**#1**  
**See a peer  
staff member  
as any other  
employee**



## #2 Reasonable Accommodations

The biggest risk one can  
take is to not take one

— ANONYMOUS

**#4**  
**Take some  
risks**

# Good Practices



## #5 Challenge and support



## #6 Collaboration and Partnership

## #7 Leadership



# Supervision Resources

Belbin Team Roles Video Scribe: <https://www.youtube.com/watch?v=-efhOLVgEvM>

Tucker, S.J., Tiegreen, W., Toole, J., Banathy, J., Mulloy, D., & Swarbrick, M. (2013). *Supervisor Guide: Peer Support Whole Health and Wellness Coach*. Decatur, GA: Georgia Mental Health Consumer Network.

[http://www.integration.samhsa.gov/Supervisor\\_Guide\\_to\\_Peer\\_Support\\_Whole\\_Health\\_and\\_Wellness\\_-\\_c\\_2013.pdf](http://www.integration.samhsa.gov/Supervisor_Guide_to_Peer_Support_Whole_Health_and_Wellness_-_c_2013.pdf)

Center for Substance Abuse Treatment. *Clinical Supervision and Professional Development of the Substance Abuse Counselor. Treatment Improvement Protocol (TIP) Series 52*. DHHS Publication No. (SMA) 09-4435. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2009.

<https://store.samhsa.gov/shin/content/SMA14-4435/SMA14-4435.pdf>

Wade, John C., Jones, Janice E. (2015). *Strengths-Based Clinical Supervision: A Positive Psychology Approach to Clinical Training*. New York, NY: Springer Publishing Company.

<https://books.google.com/books?hl=en&lr=&id=ld9vBAAQBAJ&oi=fnd&pg=PP1&dq=Strengths-Based+Clinical+Supervision:+A+Positive+Psychology+Approach+to+Clinical+Training.&ots=-2PcsJCaG5&sig=07xiM1jjJ360ZPRdvfuK73vYU-I - v=onepage&q=Strengths-Based Clinical Supervision%3A A Positive Psychology Approach to Clinical Training.&f=false>

Clinical Supervision Guidelines for Mental Health Services. Queensland Health, 2009.

<file:///Users/lynlegere/Desktop/Psychology-Board---Submission---Draft-Guideline-for-Supervisors-and-Supervisor-Training-Providers---Queensland-Centre-For-Mental-Health-Learning-Attachment.PDF>

AAMFT Supervision Agreement: [https://www.aamft.org/Documents/Sample\\_Supervision\\_Contract.pdf](https://www.aamft.org/Documents/Sample_Supervision_Contract.pdf)

Yale University Recovery Self-Assessment:

[https://medicine.yale.edu/psychiatry/prch/tools/rec\\_selfassessment.aspx](https://medicine.yale.edu/psychiatry/prch/tools/rec_selfassessment.aspx)



# Discussion

Thank

you

Laurie Curtis

Lyn Legere

# Thank You

SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

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