Creating Meaningful Roles for Peers in Recovery
Bio

Gamaliel Polanco is a licensed clinical social worker with over 15 years of experience in community mental health. He has been the manager of the wellness & recovery center at Tri City for 8 years and was instrumental in the planning, development and program implementation of the center. He also is in private practice providing treatment to EAP clients; consultation and supervision for license eligible social workers.
How did P2C come about (unmet needs)
What funding did you use under MHSA
Wellness Center

Community Hub
Peer support
Events
Facility use for Meetings
Collaborative Partnerships
  CBO’s
  County departments
  School Districts
Learning Institution
4 programmatic components

• Prevention (PEI) rather than Treatment (CSS)
  – Support groups
  – Family wellbeing—MSW internship program
  – Transitional Age Youth
  – Educational and Vocational Services
Programs and Services

- WC
  - Tour
  - Support Groups
  - Specialized Pops
    - Family Wellbeing
    - TAY
    - Senior
    - Employment

Our Approach

Recovery Model

Strength Based

Wellness Management & Recovery
Encourage the exploration of meaningful community inclusion roles
Peer Support is

Voluntary

Mutual & reciprocal

Equally share power

Person driven

Strengths focused

Transparent

−SAMHSA (2011)
What are challenges/solutions that you have learned (Success stories)
• October 27th 2010
  – Hired our WC staff
  • Lessons learned!
- Agency buy in
- Leadership’s role
- Training
- Supervision
- Retention
- Outcomes
- Funding & Sustainability
PEP Integration Team

Wellness Center Manager
Workforce Education & Training Supervisor
Prevention Early Intervention Supervisor
Clinical Wellness Advocate Supervisor
Peer Mentor Program Supervisor
## Criteria for Organizational Success in the Use of Peers in Integrated Primary Care and Behavioral Healthcare Settings

Below is a checklist for behavioral health and primary care settings to use when embarking on this path towards integrated healthcare services that utilize health-trained Peer Support Specialists.

<table>
<thead>
<tr>
<th>PREPARING THE EXISTING WORKFORCE</th>
<th>No</th>
<th>Sometimes</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Staff receive information about the mission statement, policies and procedures that articulate the value of peers and promotion of a non-stigmatizing environment.</td>
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<tr>
<td>2 The agency provides a full training for all staff on the benefits of hiring peers, including roles and responsibilities, potential pitfalls and how to avoid them, as well as understanding the use of a personal narrative.</td>
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<tr>
<td>LEADERSHIP, ADMINISTRATION AND HUMAN RESOURCE ISSUES</td>
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<tr>
<td>3 Leadership articulates the importance of hiring peers and periodically meets with staff to reinforce this concept.</td>
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<tr>
<td>4 There are clear, written Human Resources policies and procedures in place regarding recruitment, hiring and retention of peers and supervisors receive regular trainings on these topics.</td>
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<tr>
<td>5 Peer positions have clear job descriptions, which are disseminated to all staff on the team.</td>
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<tr>
<td>6 Policies and procedures that articulate a policy of inclusiveness, the value of peers and promotion of a non-stigmatizing environment are in place.</td>
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<tr>
<td>TRAINING AND CERTIFICATION</td>
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<tr>
<td>7 A standardized curriculum for training peers and a specialized whole health curriculum are utilized.</td>
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<tr>
<td>SUPERVISION</td>
<td></td>
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<tr>
<td>8 Regularly scheduled supervision of peers by a peer supervisor or a supervisor who has specific training in the supervision of peers is provided.</td>
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<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>RETENTION STRATEGIES</th>
<th>No</th>
<th>Sometimes</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 The supervisor is conversant in the language and culture of the three systems that create care integration: primary care, substance use and mental health.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OUTCOMES AND EVALUATION</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 The program is able to measure the impact of peer support on health outcomes.</td>
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<tr>
<td>17 The program achieves cost-effective and quality of life outcomes through the use of a multi-disciplinary team that includes peers.</td>
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<td></td>
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<tr>
<td>FUNDING AND SUSTAINABILITY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Peer support funding is adequate and sustainable.</td>
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</tr>
</tbody>
</table>

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Stages of Change

The Patient Activation Measurement (PAM)

Level 1
Starting to take a role.
Individuals do not feel confident enough to play an active role in their own health. They are predisposed to be passive recipients of care.

Level 2
Building knowledge and confidence.
Individuals lack confidence and an understanding of their health or recommended health regimen.

Level 3
Taking action.
Individuals have the key facts and are beginning to take action but may lack confidence and the skill to support their behaviors.

Level 4
Maintaining behaviors.
Individuals have adopted new behaviors but may not be able to maintain them in the face of stress or health crises.

Increasing Level of Activation
Stages of Change Vignettes

- Last week I invited/encouraged Rod to attend our Freedom Through Reality group. He attended the entire group. Today, he asked what group was going on as I was walking into the room, and I told him it was the group he attended last week. He then followed me into the room and attended group once again, this time without being asked. During group he shared how the Wellness Center has helped him with his recovery from drugs and has helped improve his mental health (hearing voices). He shared that he did not like coming to the Wellness Center at first and that after some time, he began to make some changes. The changes he shared with us were: diet (he began to see a nutritionist), stopped using drugs and began a routine; which included coming to the Wellness Center. He described how he used to not want to get out of bed, in order to not have to face the day. However, the routine of getting up and coming to the Wellness Center helped him out of his depression. He was very encouraging to other participants in the group and shared openly and honestly.
Stages of Change Vignettes

• Robert visited and tour was given to him in of this year. Since then, he started attending our support groups. In February, he contacted and spoke with me regarding his desire to find employment. I met with him personally the following day, and discussed about WC Vocational/Employment services. He was linked to one of our vocational/employment specialists, hoping that he would find employment. Aside from the job searching, he started attending the basic computer class. After a few meetings with of job searching, he said to me today, "I just finished my training and I am going to start this Thursday". He will be working as a Retail Clerk 1 for Food 4 Less.
Stages of Change Vignettes

- When Vinetta first started coming to The Women’s Depression Group in 2015 she was really shy, quiet and sat way at the back. As time went on, slowly she started coming out of her shell and would talk about her depression. As time went on, she started sitting next to me in group, and really opening up to the group. Then she started volunteering and join the peer mentor program. Watching Vinetta blossom from this, shy depressed woman, to a women having more confidence and believing in herself has been such a great privilege. I love being the facilitator of such a rewarding group. We had a participant ask if there was any way that we could have a support group for women on self – esteem, Brenda and I just looked at each other and said that we’d look into it, all the women in the group were so excited about this, so the women are really looking forward to attending a self – esteem group for women.
Ongoing Training

- On the job training:
  - on self care
  - professional role
  - symptom management & training on life implications
Recruitment, promotion, professional development “ladder”
Employment Services at WC
Vocational / Employment Team
To provide Vocational Rehab and Employment Services to residents of Claremont, Pomona and La Verne.

Employment Supervisor

MHRS Employment Specialist

Wellness Advocates Employment Specialist
Educational & Vocational Activities

Employment/Vocational Services
Basic functioning skills such as educational/career planning, job search skills and employment readiness.

ESL classes
Weekly literacy classes for adults 18 and over.
Weekly GED preparation classes
Computer classes
8 week cycles for basic, intermediate and advance class.
Weekly employment workshops 3 times a week
One on One coaching, job application/resume skills and mock interview practice

11 station computer lab
(job search, homework, emails, research, stream movies, wifi)
Vocational / Employment

1. Weekly Job Packets
2. Weekly Job Board Postings
3. Monthly Hiring Events
4. Quarterly Expungement Workshops
5. Annual Job Fair
Ongoing Support

• Participants
  – Group placement
  – Community inclusion
  – Workforce
From our archives...

I:
am a 23 year old male
developed Anxiety attacks
was a client
ended up coming to the TAY group at the Wellness Center
I:
[am] an original TAY…been coming to the Wellness Center
like to say about the TAY space at the Wellness Center…great place to hang out
feel loved and welcomed, feel blessed to be here…
call this place “my second home”.
I:
told my story of my struggle for the first time
became a volunteer, only lasted 7 months
applied for [a job], had to go through 2 interviews
started my employment at Tri-City on Monday January 22, 2018
have been working for this agency ever since.
Work Maintenance Skills

30 / 60 / 90 Days
Ongoing Learning

• Community Engagement
  – Family Member, Client, student

• Volunteers Ops
  – Peers, family members, students

• Internship
  – 1st & 2nd year MSW students
Sustainability

Skills transference
FTEs to our peer staff and volunteer force.

MSW interns
strengthen the clinical expertise
at the edge of discovery & innovation.

WET plan
provides a learning environment
high school and college aged students.
# PEP next steps

## PEER EMPLOYMENT PIPELINE

### Module One: Available Year Round

<table>
<thead>
<tr>
<th>Week</th>
<th>Employment Group</th>
<th>Group</th>
<th>TAY Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1 hr x</td>
<td>1 hr x</td>
<td>1 hr x</td>
</tr>
<tr>
<td>2</td>
<td>1 hr x</td>
<td>1 hr x</td>
<td>1 hr x</td>
</tr>
<tr>
<td>3</td>
<td>1 hr x</td>
<td>1 hr x</td>
<td>1 hr x</td>
</tr>
<tr>
<td>4</td>
<td>1 hr x</td>
<td>1 hr x</td>
<td>1 hr x</td>
</tr>
</tbody>
</table>

Total Hours Completed:

Program Staff Signature:

### Module Two: Available Year Round

<table>
<thead>
<tr>
<th>Week</th>
<th>Employment Co-facilitation</th>
<th>Group</th>
<th>TAY Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Week 1</td>
<td>1 hr x</td>
<td>1 hr x</td>
</tr>
<tr>
<td>2</td>
<td>Week 2</td>
<td>1 hr x</td>
<td>1 hr x</td>
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<tr>
<td>3</td>
<td>Week 3</td>
<td>1 hr x</td>
<td>1 hr x</td>
</tr>
<tr>
<td>4</td>
<td>Week 4</td>
<td>1 hr x</td>
<td>1 hr x</td>
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</tbody>
</table>

Total Hours Completed:

Program Staff Signature:

### Module Three: Available Spring

<table>
<thead>
<tr>
<th>Week</th>
<th>Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1 hr x</td>
</tr>
<tr>
<td>2</td>
<td>1 hr x</td>
</tr>
<tr>
<td>3</td>
<td>1 hr x</td>
</tr>
</tbody>
</table>

Total Hours Completed:

Program Staff Signature:

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*Client must complete module 3 before moving to next module & Consumer must complete module 10 to fully engage & complete PEP further steps.*
Question my answers
Works Cited