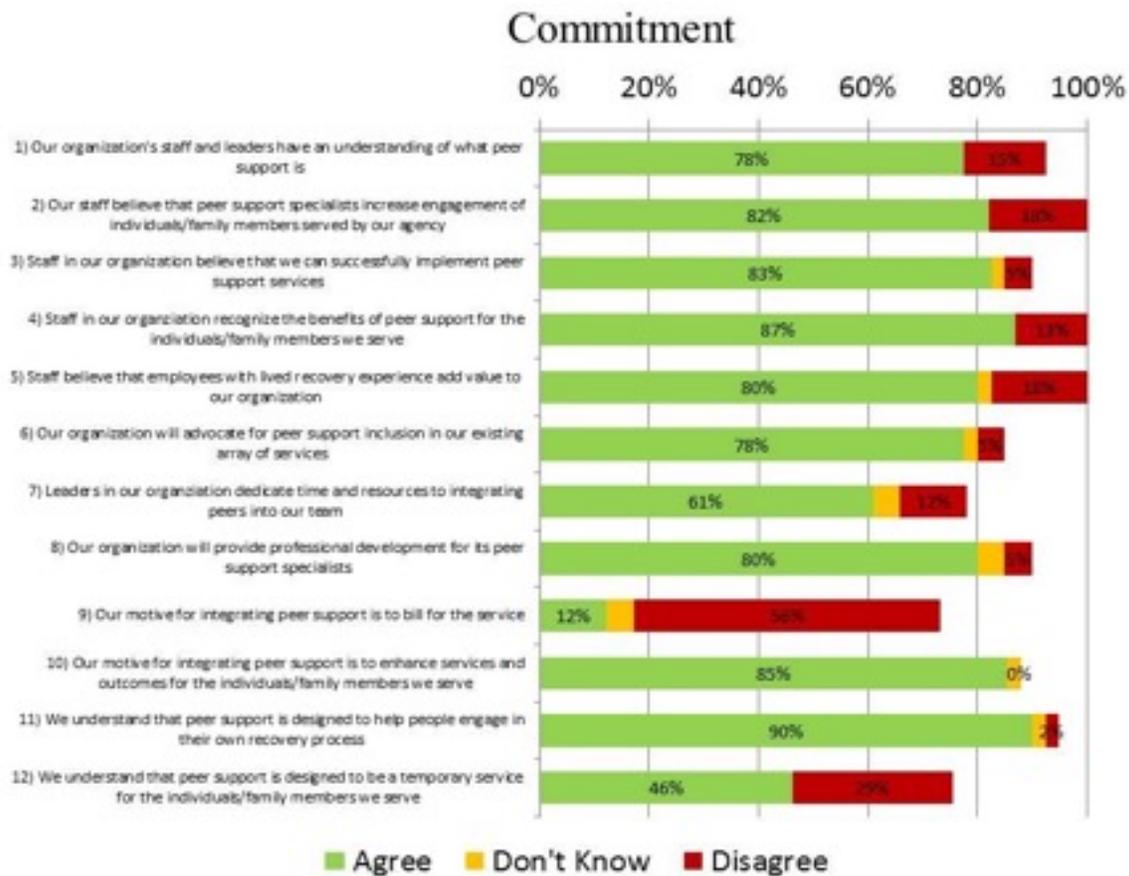
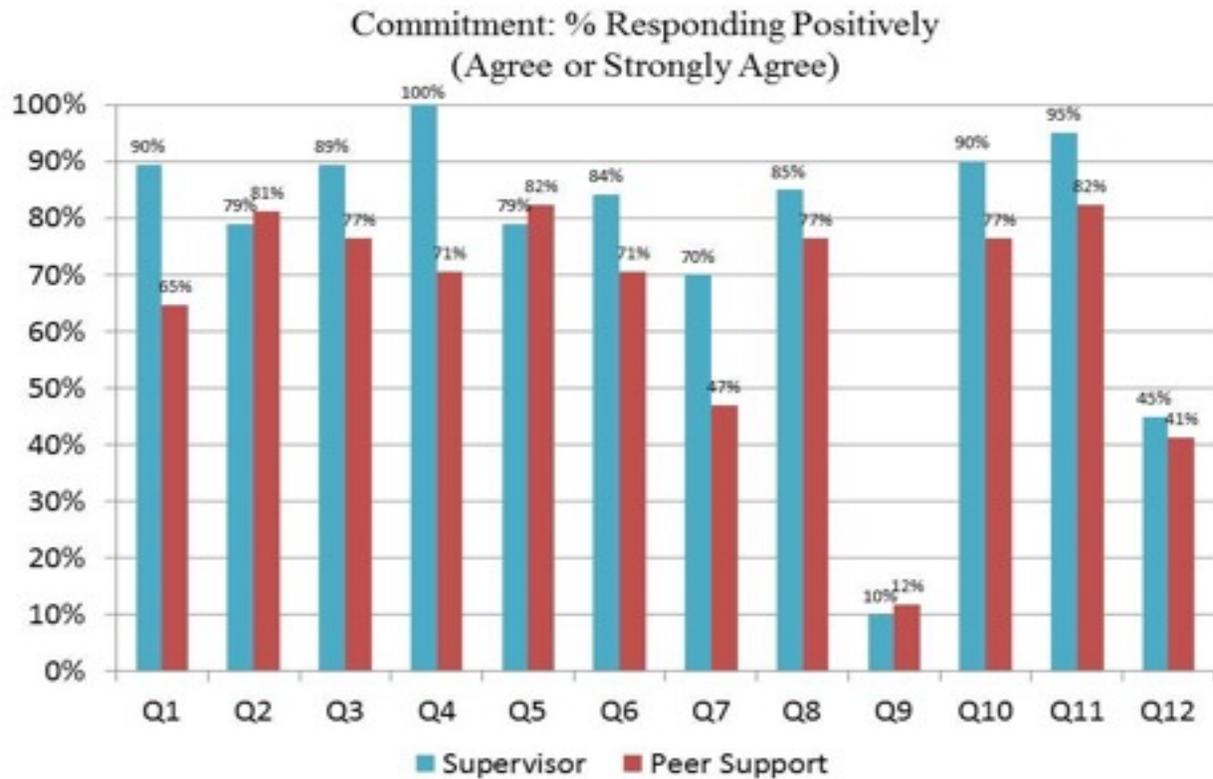


**Iowa Peer & Family Peer Support Training Program
Workforce Expansion Summit, Ames, Iowa
Agency Readiness Self-Assessment Survey Results
May 16, 2018**

Agency readiness to incorporate peer support as a service is identified as a crucial step to the success of both the service and the individuals working in the role. Each summit participant completed a readiness assessment and received a blank copy of the assessment tool to take back to their agency. The assessment was adapted from resources by Cheryl Gagne, the Louis de la Parte Florida Mental Health Institute, the Peer Education & Evaluation Resource Center, and the Idaho Peer Support Specialist Training. We modified it for use in our application.

The survey asked participants to rate statements in three categories related to agency readiness: commitment, capacity and culture. The first chart in each category shows the responses from all participants combined. The second chart separates responses according to whether they were made by a supervisor or a peer support specialist. Following the charts is description of items where there was at least a 15% discrepancy between the responses given by the supervisors and the peer support specialists. Lastly, is a list of comments submitted via the survey.

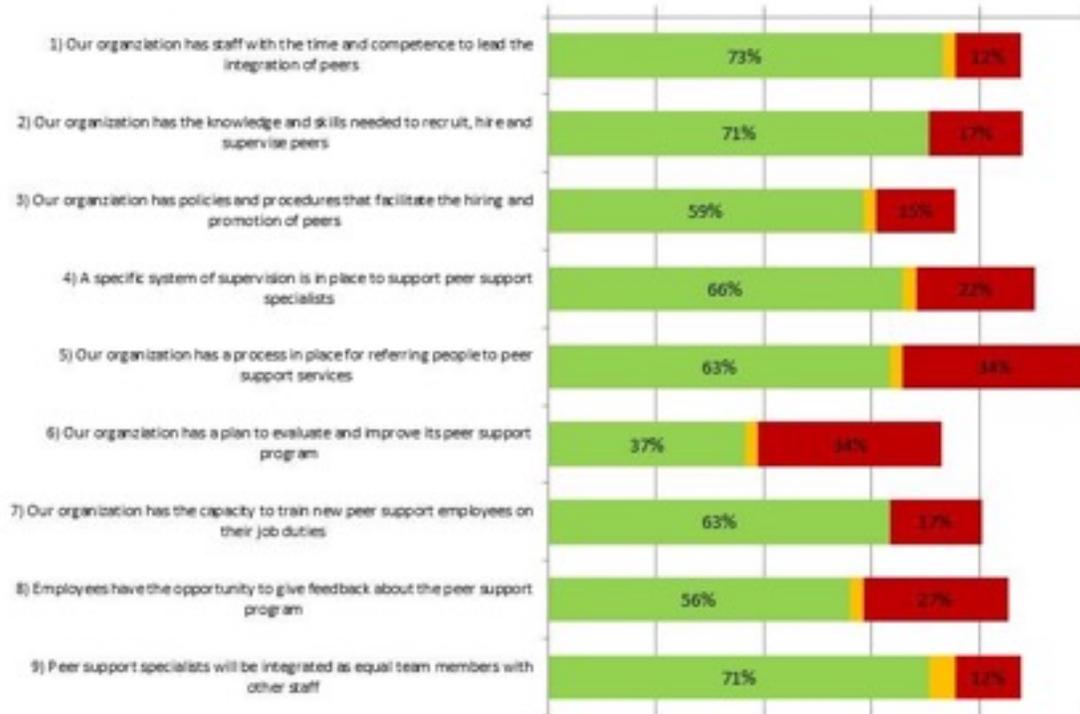




1. Our organization's staff and leaders have an understanding of what peer support is
2. Our staff believes that peer support specialists increase the engagement (involvement) of the individuals and family members served by our agency
3. Staff in our organization believes that we can successfully implement peer support services
4. Staff in our organization recognizes the benefits of peer support for the individuals and family members we serve
5. Staff believes that employees with lived recovery experience add value to our organization
6. Our organization will advocate for peer support inclusion in our existing array of services
7. Leaders in our organization dedicate time and resources to integrating peers into our team
8. Our organization will provide professional development for its peer support specialists
9. Our motive for integrating peer support is to bill for the service
10. Our motive for integrating peer support is to enhance services and outcomes for the individuals and family members we serve
11. We understand that peer support is designed to help people engage in their own recovery process
12. We understand that peer support is designed to be a temporary service for the individuals and family members we serve

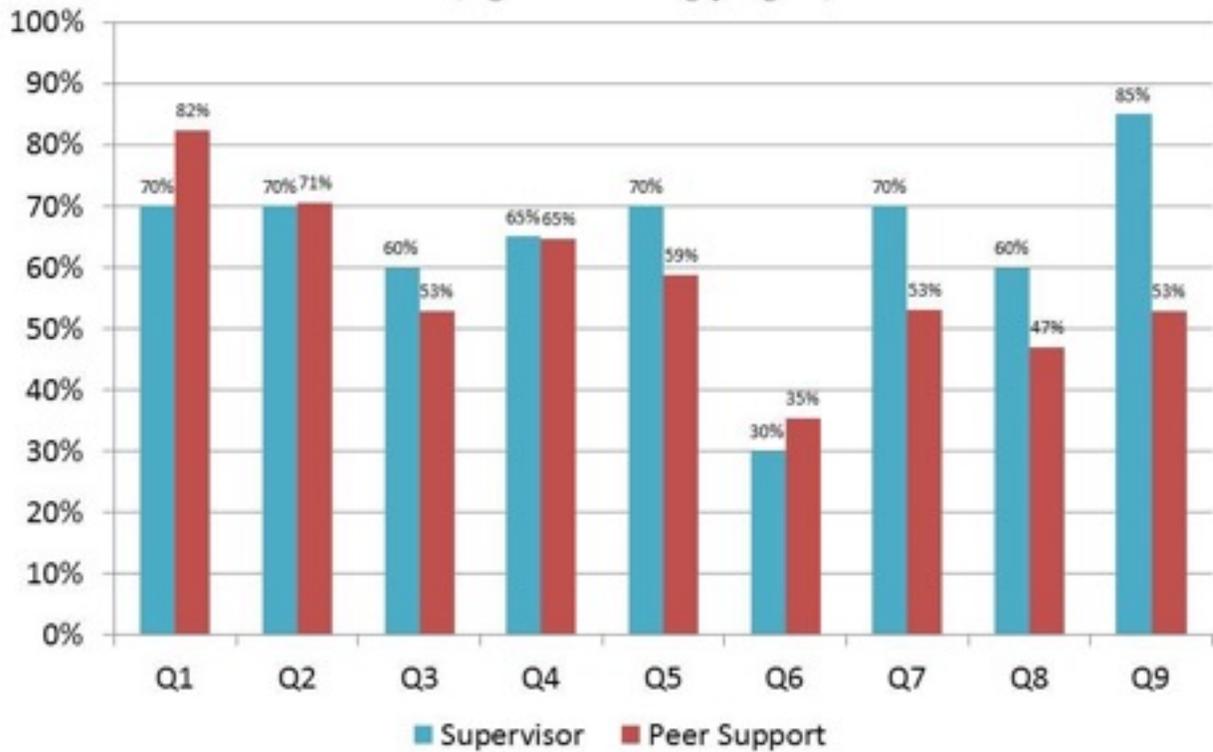
Capacity

0% 20% 40% 60% 80% 100%



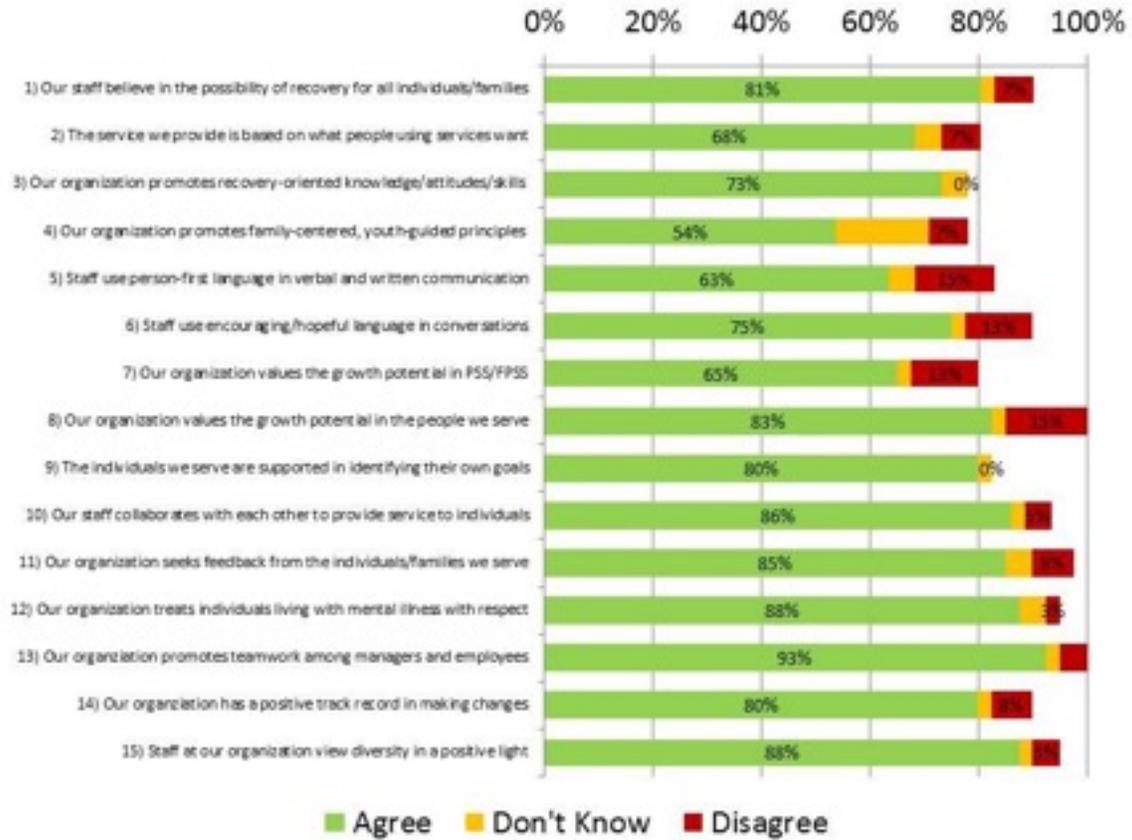
Agree Don't Know Disagree

Capacity: % Responding Positively (Agree or Strongly Agree)

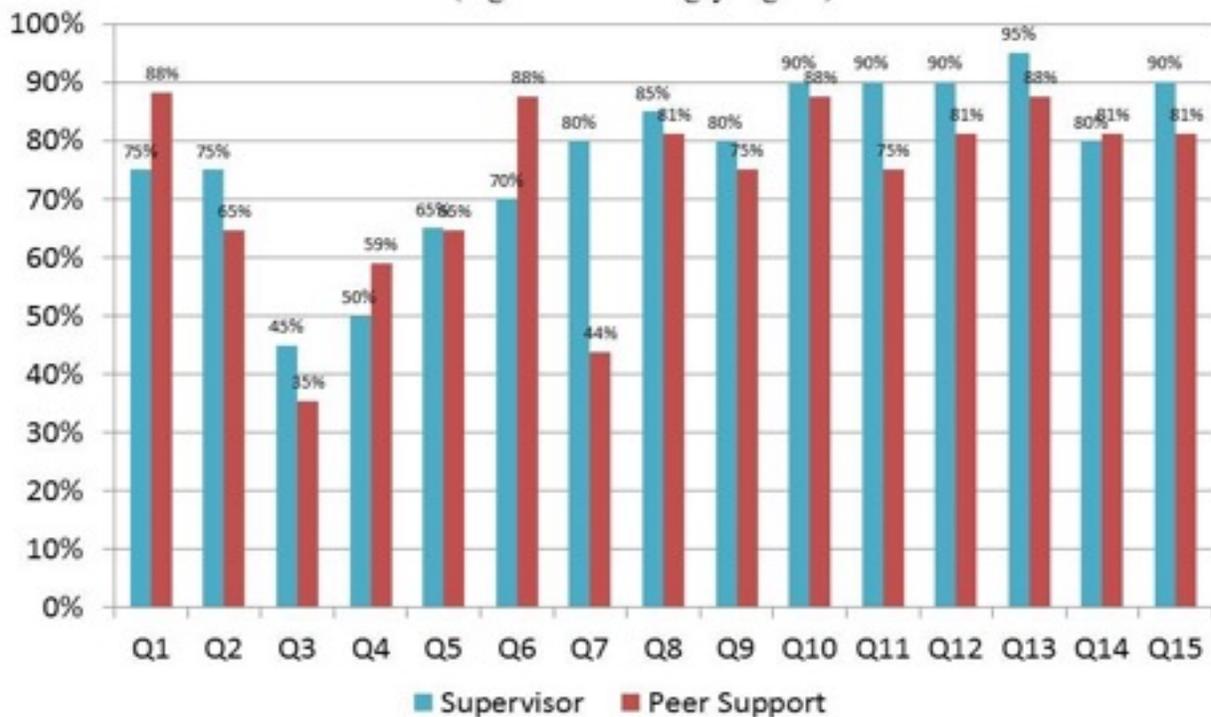


1. Our organization has staff with the time and competence to lead the integration of peers
2. Our organization has the knowledge and skills needed to recruit, hire and supervise peers
3. Our organization has policies and procedures that facilitate the hiring and promotion of peers
4. A specific system of supervision is in place to support peer support specialists
5. Our organization has a process in place for referring people to peer support services
6. Our organization has a plan to evaluate and improve its peer support program
7. Our organization has the capacity to train new peer support employees on their job duties
8. Employees have the opportunity to give feedback about the peer support program
9. Peer support specialists will be integrated as equal team members with other staff

Culture



Culture: % Responding Positively (Agree or Strongly Agree)



1. Our staff believes in the possibility of recovery for all individuals and family members
2. The service and support we provide is based on what the people using our services want
3. Our organization promotes recovery-oriented knowledge, attitudes, and skills in its workforce
4. Our organization promotes family centered; youth guided principles in service delivery
5. Staff at our organization uses person-first language in verbal and written communication
6. Staff use language with one another that is encouraging and hopeful in conversations regarding the individuals and family members we serve
7. Our organization values the growth potential in peer support specialists
8. Our organization values the growth potential in the people we serve
9. The individuals and family members we serve are encouraged and supported in identifying their own goals
10. Our staff collaborates with each other to provide service to the individuals and family members we serve
11. Our organization seeks feedback from the individuals and family members we serve
12. Our organization treats adults and children living with mental illness and/or addiction with respect
13. Our organization promotes teamwork among managers and employees
14. Our organization has a positive track record in making changes
15. Staff at our organization views diversity in a positive light

Peer & Family Peer Support Agency Readiness Self-Assessment

The items below represent statements that demonstrated a noted difference in the responses given by supervisor/ agency directors/program managers and those identifying as Peer or Family Peer Support Specialists. These differences may suggest areas of need as we work to expand peer support.

Readiness Factor: Commitment

Our organization's staff and leaders have an understanding of what peer support is

- 90% of individuals identifying as a supervisor* agreed with the above statement
- 65% of peer or family peer support specialists agreed with the above statement

Staff in our organization recognizes the benefits of peer support for the individuals and family members we serve

- 100% of individuals identifying as a supervisor* agreed with the above statement
- 71% of peer or family peer support specialists agreed with the above statement

Leaders in our organization dedicate time and resources to integrating peers into our team

- 70% of individuals identifying as a supervisor* agreed with the above statement
- 47% of peer or family peer support specialists agreed with the above statement

Readiness Factor: Capacity

Our organization has the capacity to train new peer support employees on their job duties

- 70% of individuals identifying as a supervisor* agreed with the above statement
- 53% of peer or family peer support specialists agreed with the above statement

Peer support specialists will be integrated as equal team members with other staff

- 85% of individuals identifying as a supervisor* agreed with the above statement
- 53% of peer or family peer support specialists agreed with the above statement

Readiness Factor: Culture

Staff use language with one another that is encouraging and hopeful in conversations regarding the individuals and family members we serve

- 70% of individuals identifying as a supervisor* agreed with the above statement
- 88% of peer or family peer support specialists agreed with the above statement

Our organization values the growth potential in peer support specialists

- 80% of individuals identifying as a supervisor* agreed with the above statement
- 44% of peer or family peer support specialists agreed with the above statement

Our organization seeks feedback from the individuals and family members we serve

- 90% of individuals identifying as a supervisor* agreed with the above statement
- 75% of peer or family peer support specialists agreed with the above statement

*Supervisor – Agency administrator, supervisor, CEO, program manager, etc

Peer & Family Peer Support Agency Readiness Self-Assessment

Written comments

Readiness Factor: Commitment

Comments by: Agency administrator, supervisor, CEO, program manager etc.

*** List the benefits of integrating peer support into your organization:**

- Improved outcomes
- Exemplary system navigation and referral skills, Empathetic perspective on care, Powerful connection(s) with clients, Ability to inspire hope and motivation in clients, organizations, and the public
- People receiving services are able to have a different level of support, someone that understands the struggles firsthand
- Provide additional support at discharge for our patients, decrease need for hospitalization, improve individual and family strength and ability to cope with chronic illness, provide a way to integrate back into life and improve self-esteem and see this as not just their illness
- Greater compassion and empathy for the persons who are served, Promoting recovery and resiliency
- Listening to people improves our work satisfaction for staff and families and adults with SMI
- People with lived experience are more connected with the clients that we serve
- People receiving services are reporting they are understanding recovery better and are learning skills that are helping in their recovery
- Coping skills for clients (modeling), Empathy
- Lived experiences, more personal relation
- We are a peer support specialist only organization
- Often people are more open to an individual who has lived experience, Give the people we serve hope for more in their lives
- They see more of person-centered than what they see and receive from their clinical model support
- Have engaged clients that have been difficult to keep engaged by other staff
- Engagement of clients and better treatment outcomes
- This changes perspective of the clinical team
- Been there/done that, Empowerment, “Me too” understanding, Coaching for recovery resilience

*** List the challenges of integrating peer support into your organization:**

- Finding qualified peer staff to consistently provide peer support services, Staff retention as the role of peer support can be quite stressful
- Peers have different functioning levels and some need ongoing management meetings and strategy time to figure out how to accommodate their needs, Transportation is often an issue
- Not everyone is willing to work with peer supports (note verbiage)
- Inpatient only focus at this point (we have only 1st step outpatient services), probably funding
- Agency culture has been more about illness centered recovery than person centered recovery
- Stigma of hiring people with lived experience over more highly educated people
- The peer support has to have 100 hours of supervision before becoming a specialist. Cannot bill for that time if they aren't a specialist already
- Administration still struggles a bit in understanding the full scope of services, we are having difficulty in finding applicants for positions we have had open for months, do not know where to advertise
- Needs of clients (members ? is too great)
- Care of peer support, peer support burn out
- None (no challenges)
- Getting some “old timers” to buy into this “new thing”
- Peer run organizations being seen by the state as an essential and credible program, Funding for peer run organizations
- It's new – no training for supervisors, Peers are sometimes triggered by conversations by other staff
- We are in a very rural area where peers may have difficulty reaching out to peers
- Clinical team often feels they know best or better the role of the peers
- ? to accept these into medical model vs recovery model

Readiness Factor: Capacity

Comments by: Agency administrator, supervisor, CEO, program manager etc

*** Define the roles and responsibilities peer specialists have or will have in your organization.**

- IHH team members, Wellness center team members, Warm line team members, Community based peer support
- Fundraising coordinator, office administrator, program coordinator of recovery center, PSS at recovery center, office support volunteers, student interns, volunteer coordinator, supervisor of PSS, volunteer support group leaders, public outreach volunteer
- Sharing personal experience/success stories
- Provide support and education to families and peers about recovery, the journey, etc.
- Could see them as liaison for patient before and after discharge, Assist with outpatient services that are community based
- Integrated health services, wellness center/drop-in center, community
- Take calls and provide resources and referrals
- To provide recovery based implementation of peer support specialist to aid the client in understanding and pursuing a better quality of life for everyone
- PSS receive referrals to work with people struggling to achieve recovery, k a minimum of once a week with the person to receive support and modeled behavior to achieve and maintain recovery
- Work on coping skills, Provide groups, Support
- Recovery and resilience
- Full-time PSS at wellness center, offers one-on-one and groups
- Admissions, support for Social Security and work opportunities, Fund raising, Supervisory roles
- Coping skills, WRAP, Wellness tool box
- Meet individually with clients and in groups, Advocate for clients, Support clients where struggling, Share lived experience when appropriate to support
- Meet one-on-one with individuals, work in clubhouse, and help run WRAP groups
- Role and responsibilities are clearly defined in job description and outlined in job aid workflow

*** How will/do you provide people who need services with information about your peer support program?**

- Educate about the various options for receiving peer support, Provide written descriptions
- Email, phone, email referrals, pamphlets in social service agencies and healthcare settings, email newsletter
- Word of mouth
- Yes, verbally during intake and then as needed
- Through case management
- Through the Regions, Providers
- Telephone, e-mail, newsletter, Facebook, website, posters, brochures
- The paper, social media, brochures, word of mouth, mental health providers
- Word of mouth, brochure
- Marketing IHH services, networking
- Word of mouth, referrals from all staff
- Presentations at crisis centers and hospitals
- CMHC, Regions, MCO, Law enforcement, churches
- At time of enrollment and ongoing, in person and with flyers
- Our therapist and case managers will understand the role and make referrals
- Referrals from within agency and outside agencies
- Introduced through behavioral health advocate/community health worker

*** How will peer specialists be trained on their job duties?**

- Internal orientations/trainings, Formal Peer Support training/certification, After ongoing trainings and supervision at least 2 times monthly
- Convenience training and mentorship, PSS speak with supervisor about policies, shadow another PSS, take IA PSS training
- Trainings

- Sent to peer support training via U of I
- Not sure
- Through the Iowa Peer Support Training Program
- Jump in – sink or swim
- We require they have attended training provided by U of I. We then train on the specifics of our jobs
- By supervising staff, trainings, peer support training
- Meeting with supervisor weekly, Complete peer support training
- Supervisor will train, Attend state training, Become certified
- Continued training days, communication daily
- Trainings/certifications, job shadowing
- They will shadow and review roles with supervisor
- Will become certified, Our agency is just working on getting details for program started – hope by July 1
- Trained PSS/FPSS/Recovery Coaches, 3 month ramp-up before going live to learn internal systems

Readiness Factor: Culture

Comments by: Agency administrator, supervisor, CEO, program manager etc

***Describe how integrating peer support will promote recovery in your organization.**

- “As role models in recovery, our PSS’s remind us that everyone has to maintain wellness and mental health. Also, they service as living examples that mental illness is not/does not have to be forever.”
- Added extra support
- Not sure, will need to think about it to give a better response, Role modeling
- Different and positive addition to what we provide
- It has brought several positive responses for our current clients
- Showing that individuals with lived experience can have a fulfilled life
- It provides a perspective that is missing without them, Provides them “me too” perspective
- We have a more rounded approach

*** What does your organization need to do to implement or sustain its peer support program?**

- Find more peers to hire!
- Better understand peer support first
- More information and details on other inpatient programs and peer support that are currently functioning
- Money, Education with the non-clinical staff
- Provide job ladder
- Sustainable funding stream
- More staff
- Help with peer support, Burn out, More supervisor training
- Support to retain
- Funding and support from all
- Supervisor training, on-going training for peers
- We are currently working on putting program together by July 1st

Readiness Factor: Commitment

Comments by: Peer or Family Peer Support Specialist (working/not working)

*** List the benefits of integrating peer support into your organization:**

- By having lived experience the client can relate and connect with peer support worker
- Helping with the recovery process
- To support recovery lifestyle with member, Offer support and encouragement
- Recovery model and awareness, it’s the right thing to do
- Sometimes people enrolled cannot connect with other staff because they believe they may be misunderstood, Some parents have a hard time sharing their frustration if they know the staff member may not be able to relate

- Extra support for members that are extremely mentally ill, extra support for families with children because of lived experience, extra support for therapists and medical providers, Support for all team members
- Better rapport with clients thus leading to better outcomes
- More relatable to the person in need
- Team work, Collaborate

*** List the challenges of integrating peer support into your organization:**

- Not all staff is knowledgeable of peer support services or how to utilize peer support staff
- The label of a diagnosis does not have to be as important as most funding entities give it
- Finding quality help, providing the flexibility needed. Families need an increased amount of time off. Families who have children with special needs require more time off than someone with? children
- Often times talked to/treated differently because of our illness and are in recovery
- Lack of understanding by most of the staff, Different ethical standards for different roles within the agency
- People not understanding what peer support is all about
- My company does not understand what a peer supports job is or do not care to learn
- Cultural sensitivity, Providing peer support for enough time with those in need
- Define PSS, Informing clients about role of PSS

Readiness Factor: Capacity

Comments by: Peer or Family Peer Support Specialist (working/not working)

*** Define the roles and responsibilities peer specialists have or will have in your organization.**

- Working with individuals to enhance their lives on their terms
- Section not completed
- Outreach
- To work within the IHH model as an equal to the care coordinators
- The roles and responsibilities are dependent on the families' needs, I have worked on a wide variety of things – the most common are attending IEP or school meetings, Linking families to community resources
- To provide support for staff/clients to the best of their ability, To make connections in the community to assist members, To be a good listener and advocate for the members
- Follow-up with clients who have utilized mobile crisis counselors
- I am still learning what role I am with my clients
- We are not part of the team, there is a big turn over in help due to this fact, we are left out of all meetings

*** How will/do you provide people who need services with information about your peer support program?**

- Ads, brochures, one-on-one conversations
- Phone calls, home visits, create flyers
- Introduction at assessment time, We have a website, Informational brochures
- At every opportunity
- I do not get involved in that part of the service
- I, as the peer support, am the only one that can do this as my supervisor will freely say they have no idea what I do
- Brochure, Face-to-face contact

*** How will peer specialists be trained on their job duties?**

- Constant communications, weekly staff meetings
- FPSS Training
- On the job
- They need more one-on-one training, Understanding what clients need from their peers
- I was given a book, never trained, given a list of clients and let go. I was lost the first 6 months

- 40 hour training program, hands-on training

Readiness Factor: Culture

Comments by: Peer or Family Peer Support Specialist (working/not working)

***Describe how integrating peer support will promote recovery in your organization.**

- Sharing recovery stories is one way
- When family is feeling down they typically reach out and we go over how much progress they've made
- Section not completed
- Promote better understanding of client issues
- The goal for all our clients is recovery
- My job is looked at as a joke

*** What does your organization need to do to implement or sustain its peer support program?**

- Already working – just need to maintain
- Increase number of PSS employees
- Understanding of peer support
- Already have it

Readiness Factor: Commitment

Comments by: Other Category

*** List the benefits of integrating peer support into your organization:**

- To offer the perspective of lived experience within multi-disciplinary teams/Also to increase the value of recovery within the organizational culture
- Individual involvement in role recovery, Gives teams another viewpoint, Holds people accountable to Recovery Principles
- Peer support can provide work opportunities for persons with lived experience; Peer support can provide insight to the treatment and team and to clients for recovery-oriented treatment

*** List the challenges of integrating peer support into your organization:**

- Knowledge amongst all team members, supervisors, and management about Peer Support and Recovery
- Needs to begin with understanding and support from leaders, CEO's, staff and others model themselves after, Cost reimbursement is poor, Some people still do not believe in recovery
- Finding and retaining qualified, trained peer support specialists can be difficult. Stigma is great in small communities so those in recovery are not interested in associating themselves with the behavioral health community or triggers from difficult past situations

Readiness Factor: Capacity

Comments by: Other Category

*** Define the roles and responsibilities peer specialists have or will have in your organization.**

- To engage people and empower their recovery, also, to be a system navigation resource, to action plan with individual and provide a living example of recovery
- Running groups, one-on-one
- Peer Support Specialists provide a valuable service to the treatment team and give individuals in recovery an advocate, a mentor, and someone who can identify with struggles of lived experience

*** How will/do you provide people who need services with information about your peer support program?**

- Through organized promotional efforts and word of mouth
- Pamphlets, newsletters
- We have brochures about the services; Do talks to inform various groups about the service and its value

*** How will peer specialists be trained on their job duties?**

- By other staff
- Unknown
- Participate in U of I training and on the job training from experienced job coaches

Readiness Factor: Culture

Comments by: Other Category

***Describe how integrating peer support will promote recovery in your organization.**

- By showing first-hand examples that recovery is real
- This will always bring a new viewpoint that has not been there, Staff sees people in recovery
- We have a strong continuum of care that supports recovery in a variety of settings within our system

*** What does your organization need to do to implement or sustain its peer support program?**

- To devote adequate resources and promote the change through leadership
- Honor the value of peer support and the significance it has to the success of an organization
- We need to do more aggressive outreach for referrals, to work around funding barriers and to engage family members to see peer support as a collaborative resource