

**Peer Support in
Crisis Services**

**Critical Role & Ethical
Challenges**

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Objectives:

1. Recognize the Critical Value of Certified Peer Specialists
2. Understand the Role and Scope of Practice of a CPS in Crisis Services
3. Appreciate the Ethical Challenges and Unique Boundary Issues for CPS in a Crisis Intervention Environment




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 **Objective 1**


Critical Value of Peer Specialists and Their Role

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 **What is Peer Support?**


Encompasses a range of activities and interactions between people who share similar experiences of being diagnosed with mental health conditions, substance use disorders or both.

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 **Peer Support Services**

Peer Support services “is an evidenced-based practice” for a mental health model of care which consists of a qualified peer support provider”

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Vital Role

1. Peer Specialists use their personal story of recovery to offer hope and encouragement that recovery is possible.
2. Peer Specialists focus on strengths-based discussions and supportive activities.
3. Peer Specialist services are voluntary, peer-driven, person-centered, and trauma-informed.

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Peer Specialist to Peer Relationships

Can be transformative:

- Development of trust and respect
- Focusing on “what’s strong” not “what’s wrong”
- When doing “with” a peer--not “for” a peer


“EMPOWERMENT”

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I WANT TO INSPIRE PEOPLE. I WANT SOMEONE TO LOOK AT ME AND SAY "BECAUSE OF YOU, I DIDN'T GIVE UP."

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**Certified Peer Specialists
are not Clinicians
or Other
Mental Health Licensed Professionals**


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Scope of Practice

- Primary function is to provide Support.
- Provide engagement and encouragement to peers in recovery from mental and/or substance use disorders
- Have the goal to promote wellness, self-direction, and recovery.
- Provide peers a sense of belonging and community.

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Code of Ethics

Principles to guide:

1. Primary responsibility is to help peers understand recovery and achieve their own recovery needs, wants and goals.
2. Duty to inform peers when discussing confidentiality that intended serious harm to self or others can not be kept confidential.

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Core Competencies
Domain 1: Values

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- 1.2 Believes in and respects a person’s right to make informed decisions about their lives.
- 1.3 Personal growth and change are possible.
- 1.5 Believes in and respects and all forms of diversity.
- 1.10 Believes in the healing power of healthy relationships.

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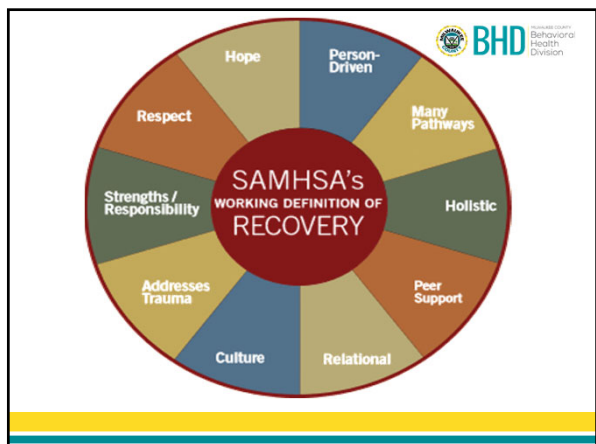
Domain 2: In-depth Knowledge of Recovery

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2.1 SAMHSA’s Definition of Recovery

“A process of change through which individuals improve their health and wellness, and live a self-directed life and strive to reach their full potential”

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Reaching Full Potential

1. **Health:** Managing one's on disorder to live a physically and emotionally healthy way.
2. **Home:** A stable and safe place to live
3. **Purpose:** Meaningful daily activities (e.g., job, school, volunteerism)
4. **Community:** Relationships and social networks that provide support friendship,

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Domain 3: Roles and Responsibilities

3.2 Knowledge of Ethics and Boundaries

3.3 Knowledge of the scope of practice of a Certified Peer Specialist

3.5 Knowledge of ways to encourage safe, trauma-sensitive environments, relationships and interactions

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Domain 4: Skills

4.5 Ability to identify and support a person in crisis and know when to facilitate referrals

4.6 Ability to listen and understand with accuracy the person's perspective and experience

4.13 Ability to work collaboratively with a team


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Objective 2

Role and Scope of Practice in Crisis Services



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Scope of Practice in Crisis Service Delivery




1. We can not diagnose or assess; we can provide mutuality and valuable input.
2. Assist in building trust and rapport in a crisis using lived experience.
3. Use their understanding of crisis and trauma to relate to persons in crisis.
4. Empathy and compassion from understanding the typical effects of crisis and trauma.
5. CPS experience can bring a different perspective.

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Peer Support in Crisis Services Milwaukee County Behavioral Health Division

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Current OCA Team:



```
graph TD; AC[Access Clinic] --- AC_CPS[CPS]; TC[Team Connect/You Matter] --- TC_CPS[CPS]; TC --- TC_PS1[PS]; TC --- TC_PS2[PS]; IU[Inpatient Units] --- IU_CPS1[CPS]; IU --- IU_CPS2[CPS]; IU --- IU_CPS3[CPS]; IU --- IU_PS[PS]; CH[Crisis Stabilization Houses] --- CH_CPS[CPS];
```

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Other Crisis Settings

- Certified Parent Peer Specialists – Wraparound model
- Crisis Stabilization and Linkage (CLASP)
- First Episode Psychosis Teams (CORE)
- Drug Court, re-entry, restorative justice programs
- Warmlines/Crisis Lines
- Peer Run Respite/Club Houses

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Crisis Services in Rural Communities



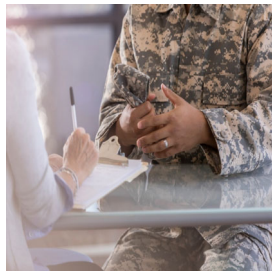
1. Barriers exist for many small, rural communities:
2. Inadequate or no local access to treatment for mental health
3. Inadequate or no local access to treatment for substance use (including MAT)
4. Stigma – discourages those seeking treatment where they perceive “everyone will know”

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Crises Services for Veterans



Shared experiences of military service personnel create a bond like no other (mental health and substance use)



Need for Veterans trained as Peers in recovery from this “unique” perspective

Veteran Peer Run Respite

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Crisis Now: Transforming Services is Within Our Reach



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What Peers Can Also Bring to a Crisis Event



1. Peer (especially those who have experienced suicidality) intervention in crisis for suicide attempts can be a safe way for assessment.
2. Peers can relate without judgement and be person-centered, recovery focused, and sensitive to trauma-informed care
3. Demonstrating shared responsibility in having the individual in crisis be an active partner in regaining a sense control
4. Assist in identifying strengths to recover from the crisis; focusing on the whole person to move forward
5. Navigation of resources to address unmet needs

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Future Settings to Integrate the Peer Specialist



1. Psychiatric Emergency Rooms
2. Medical Hospital Emergency Rooms
3. Community-based Crisis Mobile Response Teams
4. Community-based Clinics with in-house Crisis Services to include access for rural areas


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Ways to Include Peer Services




- Find opportunities to include peers in all services, where appropriate and with Clinical supervision
- Peers work collaboratively with Clinical teams
- Peers can utilize their lived experience to help reduce isolation and fear during the crisis

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Crisis and Post-Crisis Supports 


- Encourage and support peers to engage in Clinical Assessments as a “good thing” for a positive outcome
- Treatment team offering a unique perspective to work with a peer developing a crisis response, diversion or relapse plans (e.g., WRAP; Advanced Directives)
- A Peer Specialist can support an individual in their community post-crisis (e.g., Peer Run Respite if needed)

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Community-Based Treatment Facilities 


- Peer services can be woven into the treatment and case management teams for youth and adults
- Assist in community resource navigation and outreach to others who may be in need of care
- Provide ongoing individual coaching and support by meeting the peer where they are at on the crisis continuum

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Community Mobile Crisis Response Teams 

1. Peer Specialist can support and work with Mobile Response teams to be par of the critical “initial” contact.
2. Peer Specialist can reach out to the peer by using their experiential knowledge to mutually engage.
3. This assignment would provide an opportunity for further training and development for the Peer Specialist.


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Private Entity Challenges 


- Peer Program Readiness – organizational review to develop a plan for it's inclusion. BSM19
- Peer Specialist Model – educate and support staff in understanding the blending of two models:

Peer *plus* Medical models can complement each other.


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"Any one of us could be affected by an unexpected life event or illness where peer support will be vital to our recovery and wellbeing"



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Objective 3 

Unique Ethical and Boundary Considerations in Crisis

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Slide 34

BSM19 You might want to look at the PowerPoint Tips sheet I reference in the email. This is an area where I really had to work on my PowerPoint skills, with respect to consistency across PPT slides (e.g., fonts, formats, highlighting, etc.).

Munger, Brad S, 9/5/2019

In this Section...

- Summarize the National Practice Guidelines for Peer Supporters BSM20
- Explore the WI CPS Code of Ethics
- Explore tensions between natural and professional peer support
- Analyze billing practices and how to fund peer support in crisis settings



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National Practice Guidelines



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BSM22 **National Practice Guidelines**

- Peer Support is voluntary
- Peer Supporters are hopeful
- Peer Supporters are open minded
- Peer Supporters are empathetic
- Peer Supporters are respectful
- Peer Supporters facilitate change
- Peer Supporters are honest and direct
- Peer Support is mutual and reciprocal



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Slide 37

BSM20 GREAT to include these aspects!!

Munger, Brad S, 9/5/2019

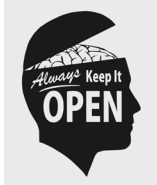
Slide 39

BSM22 GREAT! I like how you highlight a few of these. It will give you an opportunity to comment on some examples in the crisis environment, something that the peer specialist can bring to the situation that is not easily provided by the crisis professional or licensed staff.

Munger, Brad S, 9/5/2019

National Practice Guidelines  Behavioral Health Division

Peer supports are open-minded




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National Practice Guidelines  Behavioral Health Division


Peer supporters are empathetic




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National Practice Guidelines  Behavioral Health Division


Peer supporters facilitate change



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National Practice Guidelines 

Peer supporters are honest and direct




KEEP CALM AND BE DIRECT


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National Practice Guidelines 

Peer support is mutual and reciprocal



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National Practice Guidelines 

Peer support is equally shared power BSM23


- Professional paradigm vs. natural paradigm of peer support
- Tensions can arise when overlap of these paradigms occur, but these tensions are necessary

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Slide 45

BSM23 What's the asterisk reference?


Munger, Brad S, 9/5/2019

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Peer Support & Medicaid/Medicare

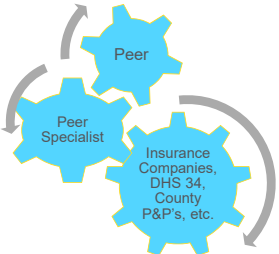
- 2007 – Peer Support becomes an evidence based practice! BSM24
- To be billable, must be... BSM25
 - Formal training/certification path
 - Supervision

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Equally Shared Power in Crisis Services

Professional peer support is accountable to a third party

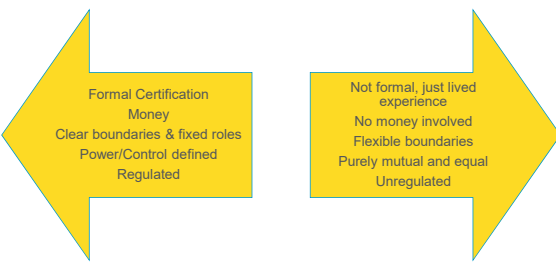


The diagram shows three interlocking gears. The top gear is labeled 'Peer'. The bottom-left gear is labeled 'Peer Specialist'. The bottom-right gear is labeled 'Insurance Companies, DHS 34, County P&P's, etc.'. Arrows indicate a clockwise flow of interaction between the gears.

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Professional vs. Natural



The diagram features two large yellow arrows pointing in opposite directions. The left arrow points left and contains the text: 'Formal Certification', 'Money', 'Clear boundaries & fixed roles', 'Power/Control defined', and 'Regulated'. The right arrow points right and contains the text: 'Not formal, just lived experience', 'No money involved', 'Flexible boundaries', 'Purely mutual and equal', and 'Unregulated'.

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Slide 46

BSM24 It would be good to reference a source.

Munger, Brad S, 9/5/2019

BSM25 May want to talk about how billing can occur in CCS but then under what circumstance billing could occur in DHS 34, Subchapter III Crisis. Since the Crisis rule is 23 years old, Peer Support was not included in the development of the rule. Therefore the activities of the peer support specialist and related billing must be addressed in the context of the existing rule.

Munger, Brad S, 9/5/2019

BSM26

Natural vs. Professional Peer Support

Professional Model

Natural Model

Tensions arise in this overlap!

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The slide features a Venn diagram with two overlapping light blue circles. The left circle is labeled 'Professional Model' and the right circle is labeled 'Natural Model'. A blue arrow points upwards from the intersection of the two circles. Below the arrow, the text reads 'Tensions arise in this overlap!'. The slide includes a yellow footer bar and the BHD logo in the top right corner.

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National Practice Guidelines

Peer support is transparent

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The slide features a central image of a hand holding a transparent book against a blue sky with white clouds. The text 'Peer support is transparent' is positioned above the image. The slide includes a yellow footer bar and the BHD logo in the top right corner.

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Wisconsin Code of Ethics

BHD Behavioral Health Division


The slide features a decorative background with teal and yellow geometric shapes. The text 'Wisconsin Code of Ethics' is centered on the slide. The slide includes the BHD logo in the top right corner.

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Slide 49

BSM26 Lots of good graphics in these slides!
Munger, Brad S, 9/5/2019


BSM28



WI Code of Ethics

- Promote self-determination
- Serve as “role models” for recovery
- Utilize self-disclosure


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WI Code of Ethics

- Confidentiality
- Informed consent
- Trauma aware

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WI Code of Ethics

- Services free from discrimination
- “With,” not “for” BSM2
- Mindful of dynamics of power
 - Intimate relationships
 - Money/gifts


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Slide 52

BSM28 Good to highlight key principles! Maybe introduce an example of an ethical dilemma or two
Munger, Brad S, 9/5/2019

Slide 54


BSM2 Clarify order and to what the prepositionn refers.
Munger, Brad S, 9/4/2019



WI Code of Ethics

- Education and Recertification ^{BSM29}
- Supervision
- Self-care for CPS


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Peer Support & DHS 34

- Peer Support not mentioned in DHS 34 → “Mental Health Technician” ^{BSM30}
- Clinical Consultation
- Grievances
- Peer Satisfaction/Feedback
- Ongoing training
 - 20 hours every two years
 - 8 hours annually of emergency MH services training
 - Documentation of all trainings

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Supervision of Peers - Crisis Services

- One hour of supervision with an LPC or LCSW for every 30 hours service
- Educating LPC’s and LCSW’s on role and scope of practice for CPS

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Slide 55

BSM29 Good!!!
Munger, Brad S, 9/5/2019

Slide 56

BSM30 Yes, this goes to an earlier comment with reference to billing. I'm glad you brought in the other Crisis requirements!
Munger, Brad S, 9/5/2019

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Peer Support & WI DHS 34

- Required Emergency Mental Health Services
 - Telephone Service (24/7/365 Crisis Line)
 - Mobile Crisis Services (CART, CMT)
 - Walk-in Services (Access Clinic, Psychiatric Crisis Services)
 - Short-term voluntary and involuntary hospital care
 - Linkage and community services

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Community Linkage & Stabilization Program (CLASP)

- Six CPS
- One Supervisor (who is also a CPS)
- Clinician
- Program Coordinator



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CLASP Funding

- Medicaid remittance
- Tax levy
- What this means...
 - Medicaid? You can receive peer support!
 - Medicare? You can receive peer support!
 - Private Insurance? You can receive peer support!
 - No insurance? You can receive peer support!
- There is never any cost or fee related to CLASP services to the peer!

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The Time is Now!

The Power of Peer Support



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Access To

Effective Treatment

People Can Recover!!



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Questions?

Thank you!!

References:



“Evidence for Peer Support”, MHA Report May 2018: <https://www.mhanational.org> **BSM8**

“Toolkit for Improving Crisis Intervention and Emergency Detention Services”: <https://www.dhs.wisconsin.gov> **BSM7**


WI Department of Health Services, Division of Care and Treatment Services P-02224 (08/2019) **BSM6**

“Value of Peers 2017”: https://www.samhsa.gov/sites/default/files/programs_campaigns/brss_tacsvalue-of-peers-2017.pdf **BSM9**

“Crisis To Recovery” National Council Magazine: www.thenationalcouncil.org **BSM10**

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References - Page 2



The Rural Monitor: Article “Peer Support Specialists Care for and Connect with Rural Behavioral Health Clients” 2/6/19: www.ruralhealthinfo.org/rural-monitor/peer-support-specialists/ **BSM11**

BRSS TACS Bringing Recovery Supports to Scale: <https://www.samhsa.gov/brss-tacs/training-technical-assistance>

SAMSHA’s Working Definition of Recovery: <https://store.samhsa.gov>

“Crisis Now: Transforming Services is Within Our Reach”: National Alliance for Suicide Prevention: Crisis Services Taskforce: <https://actionallianceforsuicideprevention.org>

BSM13 **BSM12**

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Slide 64

- BSM6** Do you want to include a hyperlink? I didn't find one for 2019, but see one from MHA for 2018:
Munger, Brad S, 9/5/2019
- BSM7** I also found the SAMHSA webpage on BRSS TACS:
www.samhsa.gov/brss-tacs/recovery-support-tools/peers
Munger, Brad S, 9/5/2019
- BSM8** It might be good to state the specific content of the particular reference followed by the reference itself
Munger, Brad S, 9/5/2019
- BSM9** The www.wicps.org link didn't work for me.
Munger, Brad S, 9/5/2019
- BSM10** Is there a hyperlink or a printed reference for this conference?
Munger, Brad S, 9/5/2019

Slide 65

- BSM11** It would be good to include a hyperlink to this issue.
Munger, Brad S, 9/5/2019
- BSM12** Is there a particular article or reference you'd like to make on this website?
Munger, Brad S, 9/5/2019
- BSM13** Great to include the rural piece! You may want to put in the specific hyperlink:
www.ruralhealthinfo.org/rural-monitor/peer-support-specialists/
Munger, Brad S, 9/5/2019