



# Core Competencies and Supervision for Alcohol and Drug Peer Support Specialists

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# Agenda

- ▶ The Role of Peer Support in Recovery
- ▶ Areas of Focus during Supervision
- ▶ Boundaries and Ethical Issues
- ▶ Registered Alcohol and Drug Peer Support Specialists in Kentucky
- ▶ Questions along the way!

# Peer Support in Recovery

## Aspects of Recovery:

- 1) Health: Managing one's disease(s) as well as living in a physically and emotionally healthy way.
- 2) Home: A stable and safe place to live.
- 3) Purpose: Meaningful daily activities, such as a job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income, and resources to participate in society.
- 4) Community: relationships and social networks that provide support, friendship, love, and hope. ( SAMHSA, 2017)

# Guiding Principles of Recovery

- ▶ Recovery Emerges from Hope
- ▶ Recovery is Person Driven
- ▶ Recovery occurs via Many Pathways
- ▶ Recovery is Holistic
- ▶ Recovery is Supported by Peers and Allies
- ▶ Recovery is Supported Through Relationships and Social Networks
- ▶ Recovery is Culturally-Based and Influenced
- ▶ Recovery is Based on Respect
- ▶ Recovery is Supported by Addressing Trauma
- ▶ Recovery Involves Individual, Family, and Community Strengths & Responsibilities

# Recovery Orientation vs Treatment Orientation

- |                                      |    |   |
|--------------------------------------|----|---|
| ▶ Promote clinical stability         | vs | Promote quality of life & recovery              |
| ▶ Focus on illness, disabilities     |    | Focus on wellness/health, choices               |
| ▶ Value compliance                   |    | Value active participation                      |
| ▶ Only professionals have info       |    | All parties have access to same                 |
| ▶ Link to professional services      |    | Link to diverse supports                        |
| ▶ Relies on facility-based settings  |    | Integrated settings/natural support             |
| ▶ Self-determination after stability |    | Self-determination is human right               |
| ▶ Emphasize avoidance of risk        |    | Emphasize responsible risk-taking<br>and growth |

# Recovery Orientation

- ▶ Supervisor recognizes recovery capital/assets.
- ▶ Recognize natural supports, inclusion of family, and allies, and a strengths-based approach to supporting recovery.
- ▶ Supervisor understands the importance of instilling hope, often facilitated through appropriate self-disclosure, and mutuality. Supervisor defines appropriate self-disclosure.

# Models Principles of Recovery

- ▶ Supervisor models key principles of recovery in their personal work.
- ▶ Supervisor promotes and monitors occupational self-care and peer wellness.
- ▶ Supervisor models good self care and health maintenance, including perhaps a personal/professional system of support.

# Supports Meaningful Roles

- ▶ Supervisor designs meaningful work for peers, avoiding sole, or primary work assignments as “treatment aids,” “gofers,” “staff assistants,” or occupational assignments that create role ambiguity, such as “junior counselors,” “junior case managers,” “U.A. technicians,” or junior probation officers” tracking traditional behavioral health care treatment compliance.
- ▶ Supervisor values the synergistic importance of lived-experience combined with effective empathetic support, instilling hope through self-disclosure, and motivational enhancement interventions.



# Supports Meaningful Roles



Supervisor recognizes and supports the value of peers as a bridge between traditional behavioral health institutions and the natural supports of friends, families, allies, and the greater recovery community

Supervisor acknowledges peer roles based on a peer's lived-experience.

# Recognizes the Importance of Addressing Trauma, and Social & Health Care Inequity

- ▶ Supervisor understands models of trauma-informed care and best practices for varied populations. Supervisor assist peers in developing skills to express empathic understanding and validate traumatic experiences, oppression, institutional, and judicial bias experienced by vulnerable populations that have been historically stigmatized and marginalized.



# Supervisor Understands Need for On-Going Training

- ▶ Supervisor provides ongoing education/training/coaching regarding: documentation standards and data entry systems, motivational enhancement techniques/micro-skills, outreach, engagement, rapport-building, peer competencies (SAMHSA, IC&RC, etc.), regulations, legal compliance, ethics, professional boundaries, cultural awareness, self-care, and community resources.

# Professional System Navigation

- ▶ Supervisor assists peer staff in understanding the etiquette, procedures, and legal obligations for cooperative working relationships with Child Welfare.
- ▶ Supervisor orients peer staff to their role within the child welfare system: family court, case workers, protective services, foster care, ASFA timelines, termination of parental rights, alternate plans, limitations to confidentiality, and completing appropriate documentation for child welfare agencies.

# Applicable Laws and Regulations

- ▶ Supervisor advises peer staff regarding the applicability of confidentiality regulations HIPAA and Code of Federal Regulation 42, Part II in their cases. Supervisor is available to discuss disclosures, releases of information, items to be discussed, responding to subpoenas, and permissible disclosures within the exceptions to confidentiality (medical emergency, QSOA, crime on premises or against Peer Delivered Services program personnel, duty to warn, child/elder abuse, research, audit, court order, medical emergency ) and restrictions and notice of prohibitions on re-disclosure.

# Community Resources

- ▶ Supervisor assists peer staff in maintaining access to community resource directories and facilitates the sharing of community resource information within the team.
- ▶ Supervisor assists peer staff in developing referral relationships with varied community resources, including indigenous recovery support resources that are not part of the traditional health and human services system.
- ▶ Supervisor provides means for the development and ongoing maintenance of a resource library/directory and/or access to community resource information (e.g., computer access, notebooks/binders, and directories.)

# Role Clarity

- ▶ Supervisor provides role clarity for peers through accurate job descriptions and the written articulation of duties, utilizing supervision time to identify, discuss, and process situations where there is role ambiguity or role confusion.

# Strength Based Person-Centered Supervision

- ▶ Supervisor exercises strength-based person-centered approach to supervision. Supervisor has capacity to give and receive feedback, engendering mutuality and trust. Supervisor creates a safe atmosphere for all staff to give and receive feedback, facilitate self-reflection, and the experience of professional growth. Supervisor utilizes a strength-based approach and can consistently give recognition and praise for competency development and successful outputs/outcomes with clients



# Identify and Evaluate Peer Competencies

- ▶ Supervisor can identify SUD peer competencies (knowledge, skills, attitudes) specific to the peer role (active listening, motivational interviewing, and other skills).
- ▶ Supervisor monitors the fidelity of those competencies and can give feedback to individual peers regarding their efficacy, and creating work plans as indicated.

# Confidentiality

- ▶ Supervisor maintains appropriate confidentiality of supervision relationship, and recognizes their obligations to support peer staff in occupational self-care and ongoing recovery while maintaining professional boundaries and avoiding acting as therapist, diagnostician, or sponsor. Supervisor understands their obligation to monitor and facilitate “occupational selfcare” of peer staff versus “the personal recovery” of peer staff.

# Ethics and Boundaries

- ▶ Supervisor is aware of ethical standards for peers and boundary issues common with peers. Supervisor recognizes the difference between boundary issues and ethical violations, and understands the difference between clinical and non-clinical boundaries. Supervisor models healthy boundaries and can train peers regarding a variety of boundary issues through role-playing and case examples.

# Quality Supervision

- ▶ Supervisor maintains the integrity of Peer Delivered Services supervision. Too often in traditional behavioral health, supervisors are promoted to leadership roles due to their administrative competencies as opposed to their supervision competencies. Supervisor can balance administrative/clerical supervision versus quality peer services supervision, and continuously provides peer supervision, and resisting “administrative compliance” being the primary function of peer-delivered services supervision.

# Accessibility

- ▶ Supervisor is accessible, maintaining regular supervision appointments and providing consistent availability for crisis support.
- ▶ Supervisor practices good time management and demonstrates respect for the importance of supervision by keeping supervision appointments and being present and accessible to peer workers.

# Occupational Equity and Staff Development

- ▶ Supervisor affords opportunities for participation, and training to all staff equally, including peer staff.  
Supervisor promotes professional development and advancement through a career ladder.  
Supervisor develops written professional development plans with peer staff.

# Peer Delivered Services Advocacy

- ▶ Supervisor advocates for and promotes SUD peer recovery services within the organization and in the greater healthcare system, understanding the importance of outcome data and cost-benefit research. Supervisor has a key role in data collection and insuring its accuracy. Supervisor uses data to inform the agency regarding expected peer-delivered services outputs and outcomes. Supervisor understands funding sources and their obligations to collect data and work with various and diverse funding sources.

# Employment Practices

- ▶ Supervisor facilitates the hiring process and includes existing peer staff in the hiring process. Supervisor has awareness of the ADA, and in providing reasonable accommodations to peer staff. Supervisor is aware of generally accepted HR practices and applicable laws regarding applicant questioning and interviewing, compensation and benefits, grievances, employee rights, whistleblower policies, and mandatory trainings, such as Medicaid, Fraud Waste Abuse, Civil Rights, Safety Regulations, and others.



# Boundaries and Ethical Issues

- ▶ Former Relationships
- ▶ Sponsorship
- ▶ Contact outside of business hours
- ▶ Social Networking
- ▶ Confidentiality
- ▶ Dual relationships
- ▶ Boundary issues

# Kentucky Alcohol and Drug Peer Support Specialist

- ▶ 1. Eighteen (18) years of age or older.
- ▶ 2. Section 1 of application completed.
- ▶ 3. Section 2 completed – describing education attainment of at least high school diploma/equivalent
- ▶ 4. Provided a copy of a high school diploma, high school transcript, or equivalent (unless it was previously provided for Temporary PSS). Let the Board Administrator know if your diploma/transcript is under a different last name than your current one.
- ▶ 5. Section 3 completed – Must have completed 500 hours of experience working with persons having a substance use disorder
- ▶ 6. Sign the Affidavit at bottom of page 2
- ▶ 7. Attestation of Recovery – Signed and dated.

# Kentucky Alcohol and Drug Peer Support Specialist

- ▶ 8. Peer Support Specialist Verification of Alcohol / Drug Training – Completed and documented the 60 classroom hours of board-approved curriculum.
- ▶ 9. Peer Support Specialist Supervisory Agreement – Completed and signed by you and your Board Approved Supervisor
- ▶ 10. Peer Support Specialist Verification of Supervision – 25 hours of direct supervision documented and signed by your Board Approved Supervisor.
- ▶ 11. Supervision Evaluation for Peer Support Specialist – Completed and signed by your supervisor.
- ▶ 12. Two letters of reference from credentialed alcohol and drug counselors.
- ▶ 13. Check or money order made payable to the Kentucky State Treasurer (DO NOT SEND CASH).

# Kentucky Peer Support Required Education

- ▶ In accordance with 201 KAR 35:050, Section 1 (1), an applicant seeking registration as an alcohol and drug peer support specialist shall complete sixty (60) classroom hour which shall include:
- ▶ Have completed at least sixteen (16) hours of ethics training; three (3) hours of domestic violence training; two (2) hours of training in the transmission, control, treatment, and prevention of the human immunodeficiency virus; ten (10) hours of advocacy training; ten (10) hours of training in mentoring and education; and ten (10) hours of training in recovery support;
- ▶ Have submitted two (2) letters of reference from certified alcohol and drug counselors or licensed clinical alcohol and drug counselors; Live or work at least a majority of the time in Kentucky; and Have complied with the requirements for the training program in suicide assessment, treatment, and management in KRS 210.366 and any administrative regulations promulgated thereunder.