

Recovery to Practice Monthly Report

November 2011

National Association of Peer Specialists

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Although curriculum development was the primary focus of this month's activities, other, related activities have occurred.

Curriculum development resulted in the creation of a rough draft of the first module that covers basic recovery principles. Peer specialists receive (without exception) basic recovery principle instruction during their certification training. But there is great diversity regarding the scope and depth of that training. The NAPS RTP team decided it is important to begin the curriculum with basic information to provide a review and ensure that participants began with certain fundamental knowledge.

Because of the nature of training already received, the recovery module covers basic information, approaches and attitudes that contribute to recovery. This was followed with guidance as to how those attributes can be directly applied in the peer specialist practice. Although the SAMHSA ten recovery components were identified, most were not specifically covered in the module. Instead, the basic information was combined with the ten components for a large group discussion at the end of the session. In this way, we intend to avoid redundancy but at the same time ensure knowledge and application of the components in the peer specialist practice.

The draft has been distributed for review. It is, indeed, a draft and we expect many comments to refine the module. To facilitate distribution and the reception of input, the NAPS RTP team has greatly improved the look and capability of its website. And with collaboration from the Depression and Bipolar Support Alliance (DBSA), those efforts are ongoing in a cost-effective manner.

During the course of module development, procedures were refined to ensure more effective development using available resources in the most efficient manner. Our primary sub-contractors—Rita Cronise and DBSA—have proven helpful beyond expectations. At the same time, the reality of the scope of this project has become more apparent. This reality has helped us appreciate the importance of this project to our constituency as well as to the other participating disciplines as well.

Curriculum design documents and a train-the-trainer publication have also been distributed for review. Although the latter has already been extensively reviewed, we believe it was valuable to have a broader review effort as this approach is fundamental to the implementation strategies of the curriculum.

The NAPS RTP team continues to receive requests from various groups and organizations to participate as pilot sites. It will be incumbent upon the team to carefully select sites based on cost-effectiveness, relevance and propriety. But the team feels fortunate that the vast amount of input received to date from the field is apparently translating into this type of collaboration, interest and enthusiasm.

In addition to the first module, a series of meetings have been held with Lyn Legere, the subcontractor who is spearheading the wellness module and related activities. Work is well underway on this module and basic concepts and approaches have been discussed and agreed upon.

The next draft module will cover recovery relationships. Portions of this module have been extensively pre-piloted. This experience and subsequent input is expected to result in a module that will be especially relevant and valuable to the peer specialist practice. This module will relate closely to the module on resolving workplace issues. In addition, recent discussions regarding relationships and peer specialist practice have given rise to the notion that an additional module regarding system navigation. This issue was prominent during the situational analysis development but it was expected to be incorporated as part of the resolving workplace issues and recovery relationships modules. But it now appears to be more appropriate to cover this topic as its own module. Specific learning objectives and a curriculum design plan will be devised to accommodate this addition.

It has become apparent that an important part of the peer specialist practice is to inform those they serve about how their particular mental health systems are organized and operate. Understanding the roles of specific mental health professions is also an important aspect of the peer specialist practice. When this information is conveyed to those served a deeper understanding of how to access and best use mental health services results. For example, knowing that it is the psychiatrist or nurse practitioner who prescribes medications helps service users avoid confusion about the roles of other professionals. Some peers initially believe it is the therapist who prescribes medications and this misperception can result in delayed pharmacological interventions.

Training and endorsing learning facilitators (we are avoiding use of the term “instructors”) has also been the topic of much discussion among the NAPS RTP team and stakeholders. The use of webinars and attendance at events such as the NAPS annual peer specialist conference are expected to provide opportunities for facilitator training to ensure quality in curriculum use.

Based only on anecdotal information, it appears at the beginning of the RTP project that webinars would have little application. But recently, especially in the last year, participation in webinars appears to have grown among peer specialists. As a result, the NAPS RTP team will be exploring ways to use this method to train learning facilitators who cannot otherwise access such training. Other applications will be investigated as well but the team is mindful that, during the situational analysis process, it was abundantly clear that peer specialists strongly prefer face-to-face instruction with as many interactive, participatory and experiential training activities as possible.

In December, the NAPS RTP will finalize the recovery relationships module draft as well as continue to refine website use and development. The module regarding the resolution of workplace issues will also be developed and ready for distribution by the end of the month.

The NAPS RTP team is happy to report that one anticipated challenge—integrating wellness, trauma-informed practices and multi-cultural awareness and practices—appears to be less difficult than first perceived. The nature of the material and curriculum development design plans appear to facilitate integration of the components in an effective fashion. While these components will be featured as specific modules, the goal of the team is to integrate them throughout the curriculum.