

Peer Support Specialist Administrative Checklist Medical College of Georgia

1. LEADERSHIP

- A. Communicate a clear commitment to the recovery model from the top of the organization.
- B. Secure funding for full implementation of the recovery model.
- C. Include recovery in the mission statement.
- D. Leaders of the organization should endorse recovery consistently in active, involved, and visible roles.
- E. View peer support as an essential part of the recovery model.

2. CULTURE CHANGE

- A. Provide recovery-based educational trainings to staff.
- B. Immerse the organization in using people-first language.
- C. Develop recovery-based health care documentation templates.
- D. Create recovery-based health care prompts including newsletters, consumer satisfaction surveys, and documentation audits.
- E. Provide sufficient administrative support to staff as needed to implement change.
- F. Establish a volunteer consumer advisory council consisting of people served by the organization to partner with staff in policy making and hiring.

3. RECRUITMENT

- A. Recruit peer specialists from a pool of competent candidates generated by an ongoing, standardized, competitive training and certification program with a code of ethics and continuing education requirements.
- B. Set a policy for the organization on whether or not to hire consumers who receive services from the same organization, based on rational study of the overall situation.

4. ADVANCE PREPARATION

- A. Use a standard job title and description that may be tailored to the needs of the organization.
- B. Outline duties of peer specialists to include service provision, ongoing educational efforts with staff, and advisement to management as a consumer voice in administrative decision making.
- C. Train supervisors how to work specifically with peer specialists, including how to apply peer specialist ethics and follow an established clear policy on dual relationships.

5. HIRING

- A. Hire peer specialists with substantive, meaningful lived experience with mental illness so that insights regarding the impact of mental illness and associated interventions can be shared with providers.
- B. Hire peer specialists who demonstrate recovery successes such that the message can be effectively communicated that recovery is possible and insights can be gained regarding how wellness, purpose, and meaning can be

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achieved through the strengths and resources of the consumer, including resiliency in the face of possible return or worsening of symptoms.

C. Hire peer specialists whose attitudes and social style facilitate a sense of true partnership with consumers and providers in implementing a recovery model of mental health care.

D. Hire two or more peer specialists per organization to amplify recovery supports and avoid isolation.

6. FOLLOW THROUGH

A. Provide quality supervision.

B. Regularly review job performance of peer specialists.

C. Evaluate outcomes of programs that include peer specialist participation.

D. Provide ongoing support to staff to maximize peer specialist inclusion.

E. Provide pathways for career advancement, promotion, and meaningful salary increases to peer specialists.

Resources

Chinman M, Young AS, Hassell J & Davidson L. (2006). Toward the implementation of mental health consumer provider services. *J Behav Health Serv Res*, 33:176-195.

Gates LB & Akabas SH. (2007). Developing strategies to integrate peer providers into the staff of mental health agencies. *Adm Policy Ment Health & Ment Health Serv Res*, 34:293-306.

Mabe PA & Fenley G. (2008). Project GREAT Recovery-based Training Procedures Manual: A guide to teaching professionals the recovery model of mental health care.