



Forming Strong Partnerships

with Providers and their Peer Practitioners

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Welcome Back

Who's in the Virtual Room?

Please share via chat:

- Your name and title
- Your court / jurisdiction
- Check-in:
 - How *are* you?
 - Since the last session, what's new in your work?



Poll: Do You Agree...?

The opposite of addiction is not sobriety,
the opposite of addiction is connection

Do you agree with the above statement?

- **If yes, what role do opioid courts play?**
- **If no, what is role do opioid courts play?**

Session 4 Overview

- Moving from Peer Practitioner to Peer Recovery Support Services
- Envisioning Peer ***Supports***
- Defining Strong, Strategic Partnerships
- Final Final Thoughts

Learning Objectives

- Identify the core elements of a strategic partnership with a treatment provider to develop and sustain court-based peer recovery supports
- Describe a process for effectively integrating peer practitioners and peer supports into the opioid court programming.

Moving from Peer Practitioner(s) to Peer Recovery Support Services

Where We've Been

January - Where Group Was –Peer Integration

Thinking

10.3%

Planning

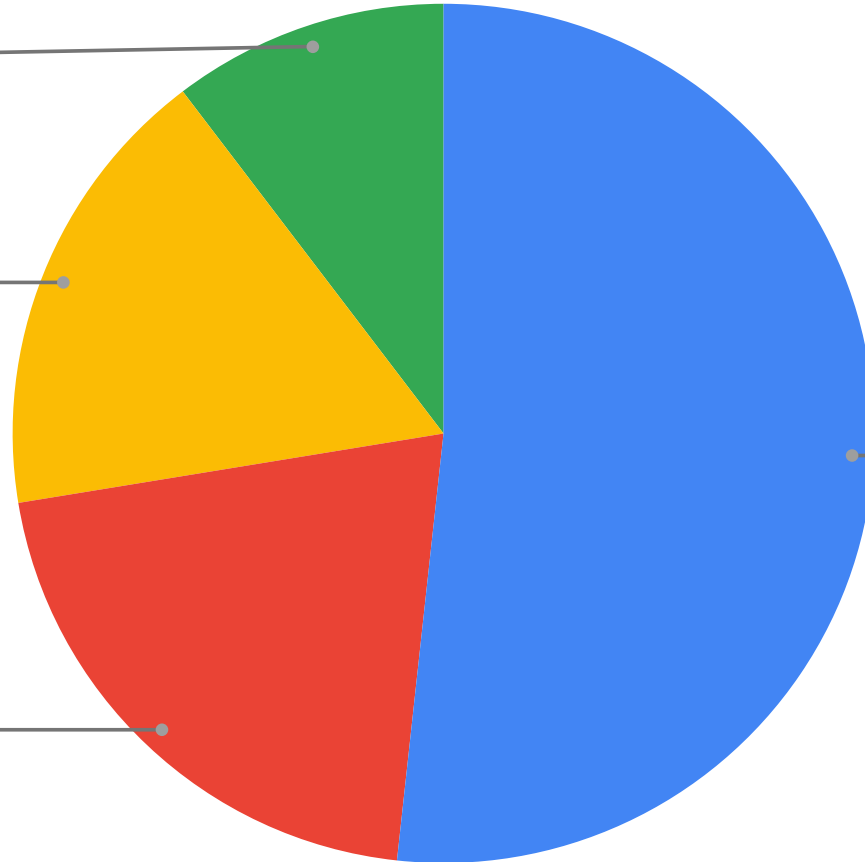
17.2%

Implementing -
Early Stages

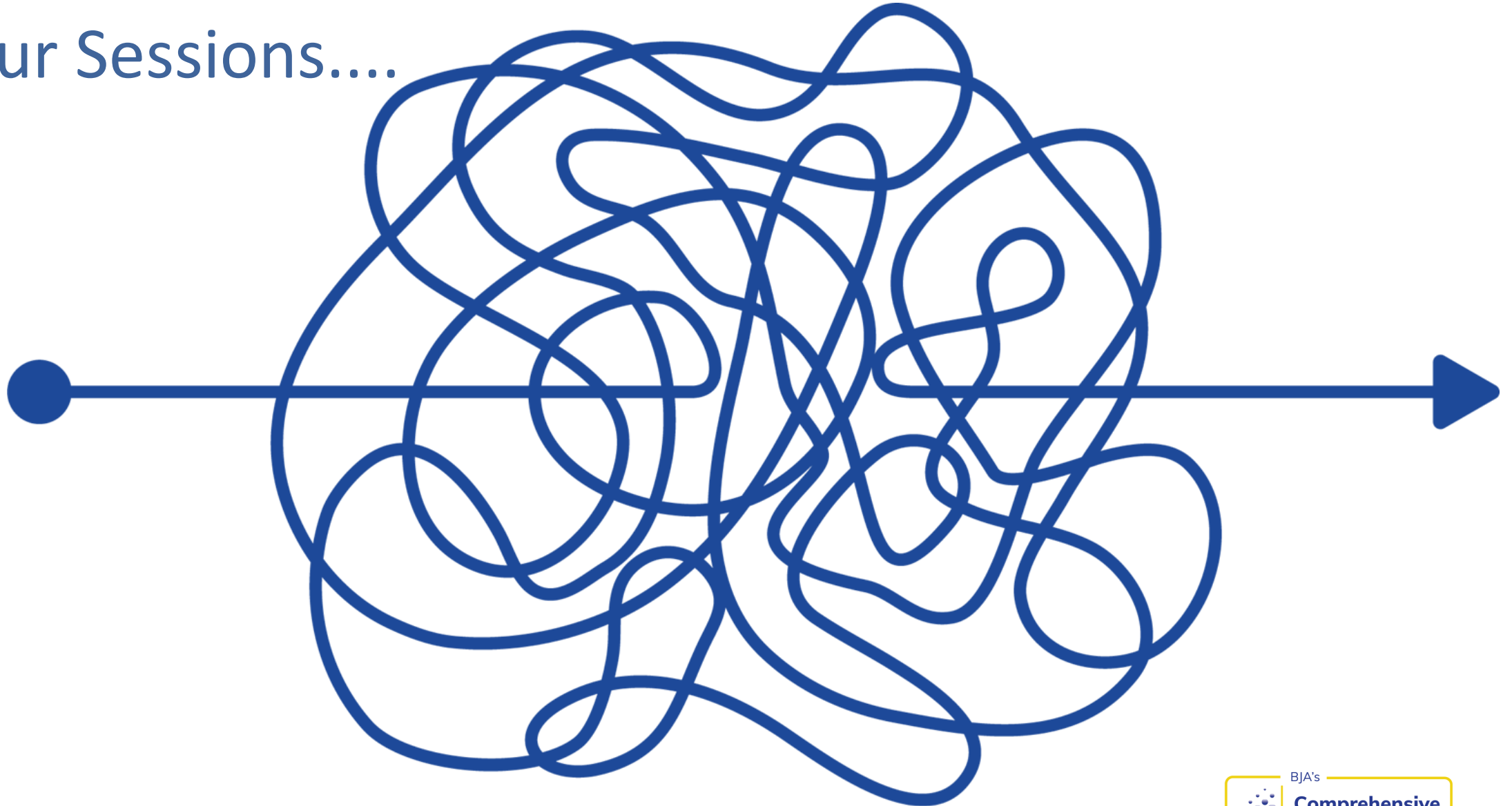
20.7%

Implementing -
Well Established

51.7%

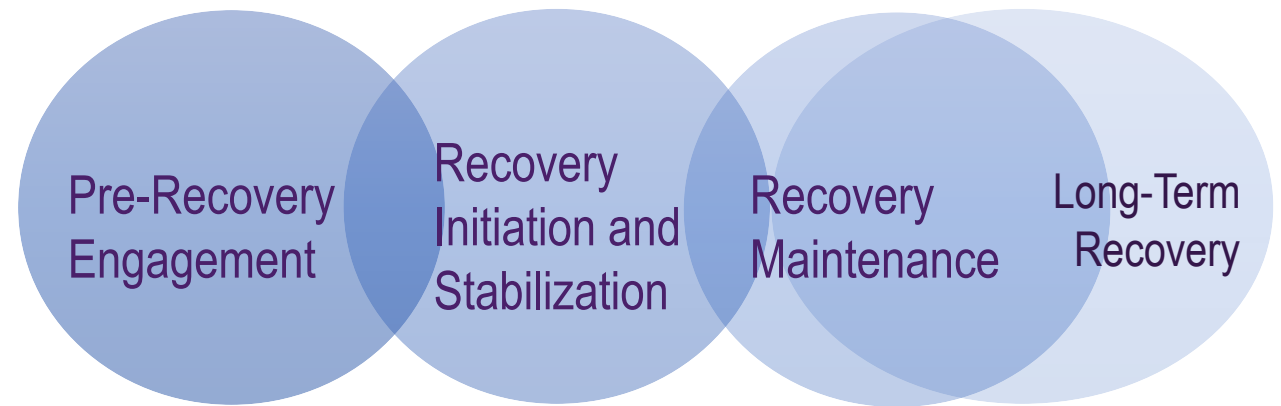


Four Sessions....



Opportunities in Integrating Peer Advocates

- Add new perspective to multidisciplinary team
- Engage participants in broader or deeper way
- Strengthen motivation for change, identifying and removing barriers
- Build more recovery capital
- Improve participant outcomes



Challenges in Integrating Peer Advocates

- Aligning visions, philosophies, values, and organizational cultures of program partners
- Clearly defining appropriate roles and tasks
- Clearly defining processes and practices
- Scheduling regular time for problem-solving and refining processes

Peer Practitioner Role – Specialty Courts

Supporting people involved with criminal justice system as mentor, guide, and/or resource connector while they are engaged with the court, and beyond.

- Supports personalized recovery planning
 - Assists and supports participants in setting goals related to adherence to court requirements
 - Proposes strategies to help participants accomplish recovery goals
- Links to resources, services, and supports
 - Addresses barriers to housing, employment
 - Assists to identify, select, and use resources and services
- Provides information about skills related to health, wellness, and recovery
- Helps participants to manage crises
- Advocates for individuals while supporting compliance
- Supports collaboration and teamwork

Peer Practice is Story + Skills + Service

- Story** Experience coming from a person history of, or exposure to: (1) substance use disorder; (2) the process of change; and (3) a sustainable life in recovery
- Skills** Expertise in a variety of methods and approaches for applying that knowledge and experience
- Service** Focus on helping others establish, and live in, their own definition and pathway of recovery across a lifetime

(Adaptation of Thomasina Borkman, 1976; Ruth Riddick, 2018)

Peer Practitioners are Professionals

- Education → practice specific
- Ethics → profession specific
- Certification → role-specific
 - Certified Recovery Peer Advocate (CRPA) (Medicaid billing)
 - Certified Addiction Recovery Coach
 - Certified Peer Specialists (mental health system only)

(Ruth Riddick,2020)

Peer Practitioners—Key Competencies

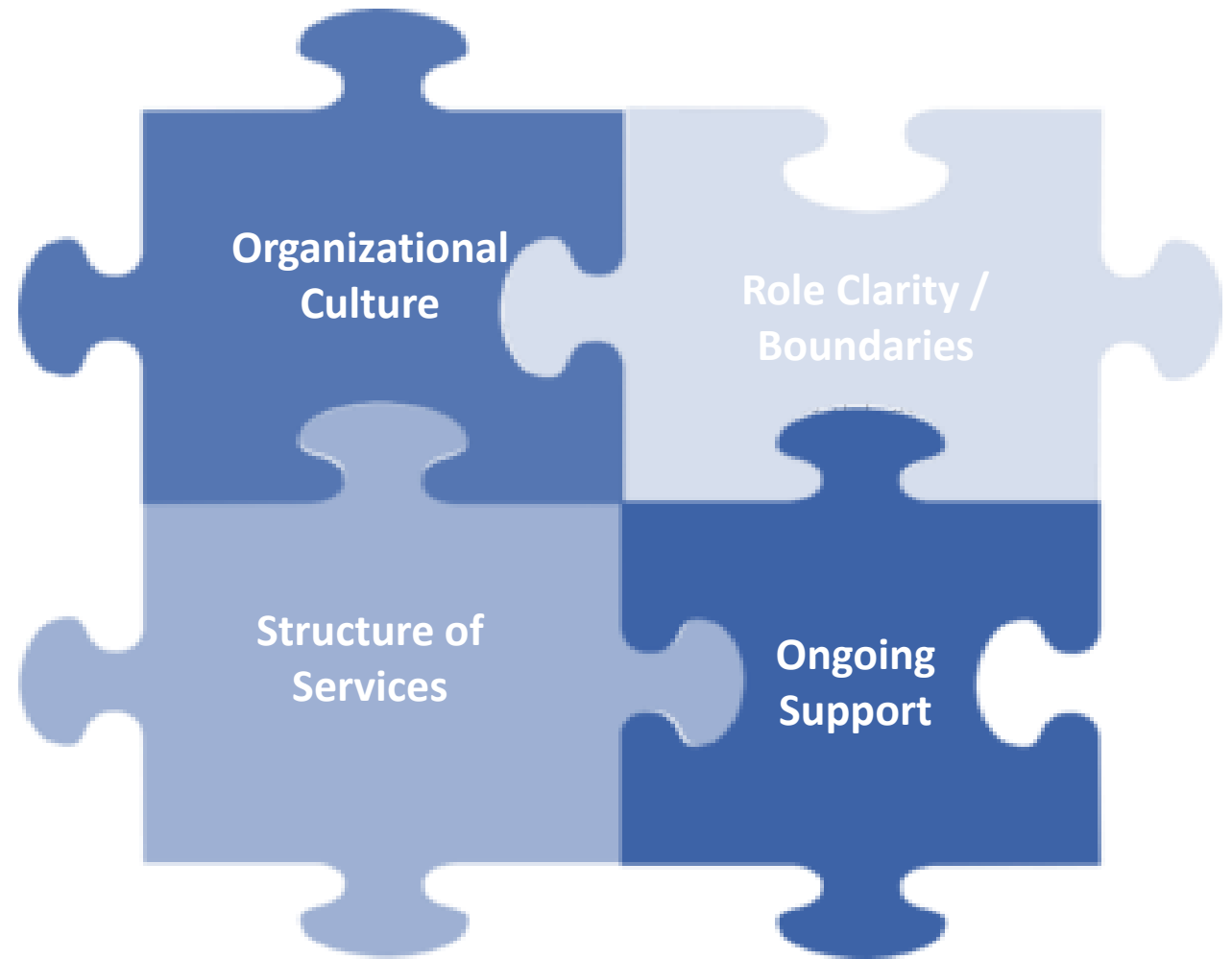
- Listening, facilitating, guiding, encouraging
- Leveling power differentials
- Helping others to gain hope, explore recovery, and achieve life goals
- Reinforcing voice and choice
- Building on strengths (**recovery capital**) to develop solid recovery foundation
- Development of person-owned recovery plans
- Applying trauma-informed and culturally appropriate strategies
- Role modeling successful recovery

Ethical Framework

Ethical **guidelines** provide a framework for **decision making** for conduct

- Prevents conflicts
- Resolve conflicts
 - Protect the individual being supported
 - Protect the peer practitioner
 - Protect the organization
 - Protect the peer practitioner field

Our principles and how we put them into practice



Ethics and Boundaries Scenarios

Always okay



Sometimes okay/ sometimes not

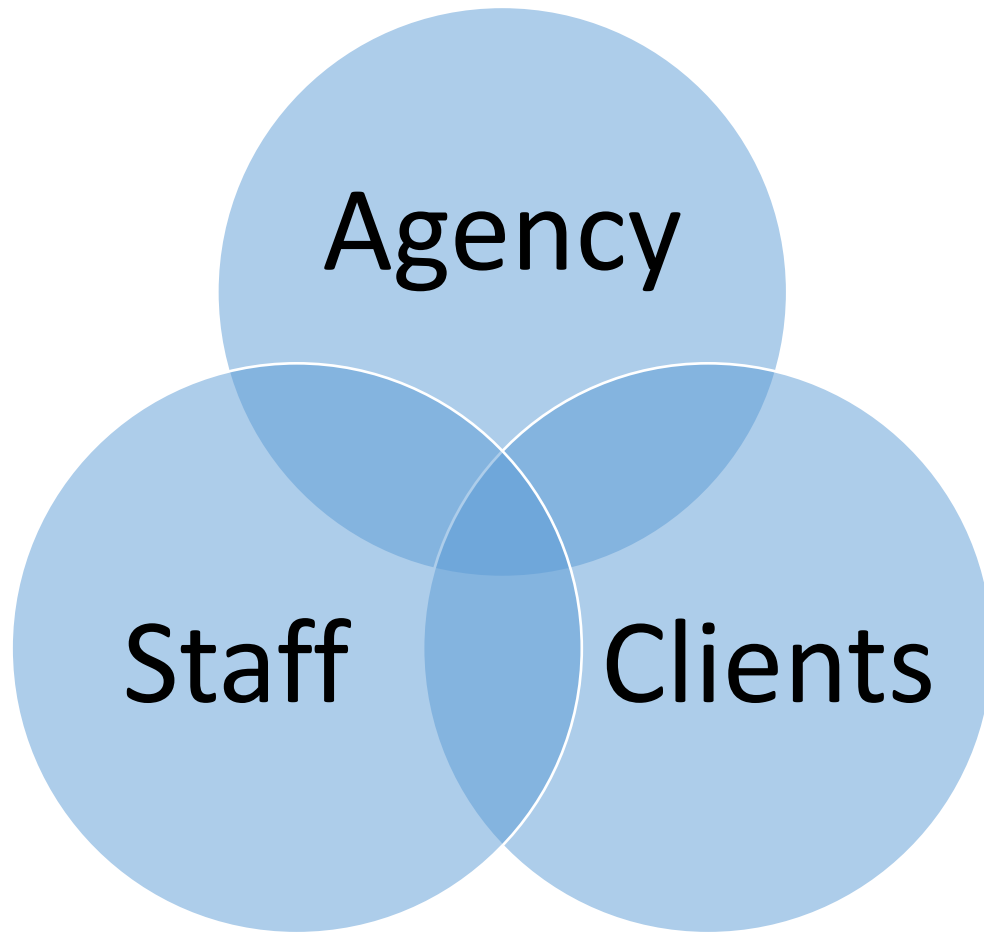


Never okay



for a peer practitioner to do?

Administrator Responsibilities



- Clients
 - Safe
 - Good Care
- Staff
 - Safe
 - Treated Well
- Agency
 - Safe/Liability
 - Viable – Financial/Regulatory

Ethical Concerns

Clients

Safe from:

- Abuse
- Maltreatment
- Bias

Staff

Safe from:

- Physical harm
- Extortion

Agency

Safe from:

- Liability
- Loss of Certification
- Extortion

Summary: Key Questions

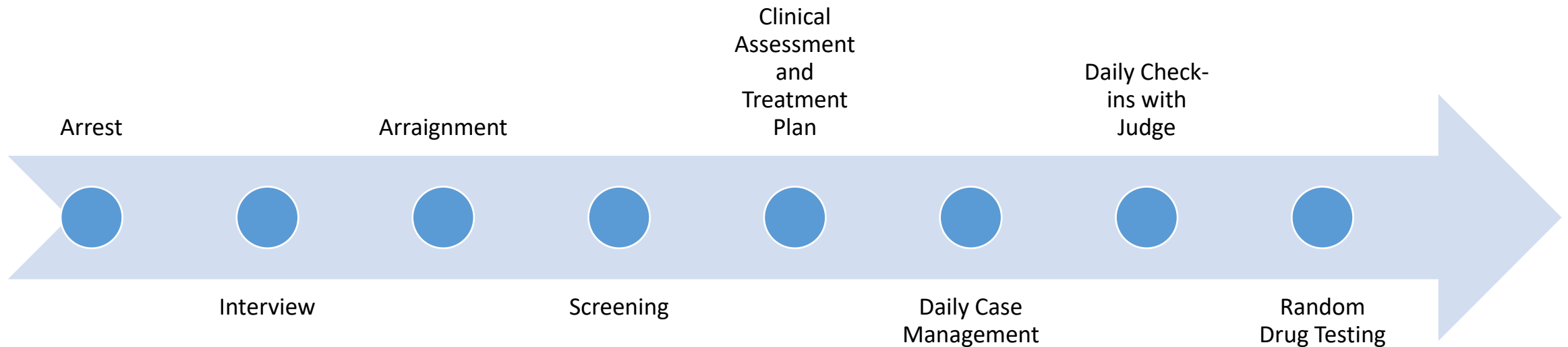
- What is the primary purpose of CRPA in *your* setting?
- Who is the CRPA there to advocate for?
- What is the CRPA there to advocate for?
- How does the CRPA build and maintain a trusting relationship with peer participant?
- How do we support CRPAs in setting boundaries and in engaging in ethical peer practice?
 - What are the ethical considerations for peer practitioners?
 - What are the ethical concerns for our treatment provider partners?

Where We're Going

Comprehensive Peer Supports

Type	Description	Supports	Tech-assisted Peer Support Examples
Emotional	Demonstrate empathy, caring, or concern to bolster the person's self-esteem and confidence	Offering peer recovery coaching and varied peer-led support groups in an accessible, welcoming environment	Telephone recovery support Video recovery check-ins "Zoom" support groups
Informational	Share knowledge and information and/or provide life or vocational skills training	Scheduling a complete calendar of training sessions—such as parenting classes, job readiness training, health education classes, and wellness sessions—based on participants' identified needs	One-time webinars Learning communities Self-directed learning modules
Instrumental	Provide concrete assistance to help others accomplish tasks, such as connecting individuals to housing, employment support, and social services	Offering one-on-one or small-group assistance in locating providers, completing paperwork, making appointments, and negotiating barriers to accessing needed resources and services	Tech on loan Paperwork clinic Online resource board
Interpersonal (Affiliational)	Facilitate contacts with other people to promote learning of social and recreational skills, create community, and acquire a sense of belonging	Providing space for sober social gatherings (e.g., sober Super Bowl party) and assisting participants in setting up social outings and sober sports leagues	Community coffee breaks Live-streamed group activities (e.g., meditation, yoga, CrossFit) Game play session

The Journey



Envisioning Peer *Supports*

Why?

Why is your court interested in integrating certified recovery peer advocates ?

→ Why?

→ Why?

→ Why?

Recovery Capital



Best and Laudet (2010)

Recovery Capital

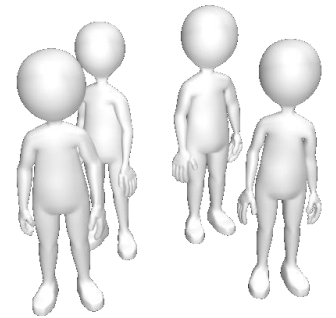
Personal Capital	Social Capital	Cultural Capital
General Health Mental Wellbeing Nutrition Employment Education Housing Situation Transportation Clothing	Family Support Significant Other Social Support Social Mobility Healthy Lifestyle Access to Healthcare Safety	Beliefs Spirituality Cultural Relevance Sense of Community Values

Recovery Capital = Linking Personal, Social and Community Assets

- Two things we know for sure: individuals cannot do it alone and recovery is **an intrinsically social process**
- Personal capital grows through the support of the groups we belong to and the nurturance of the context and environment
- Supporting recovery growth requires engaging the positive components of the social networks and the broader community
- The more you use, the more you gain

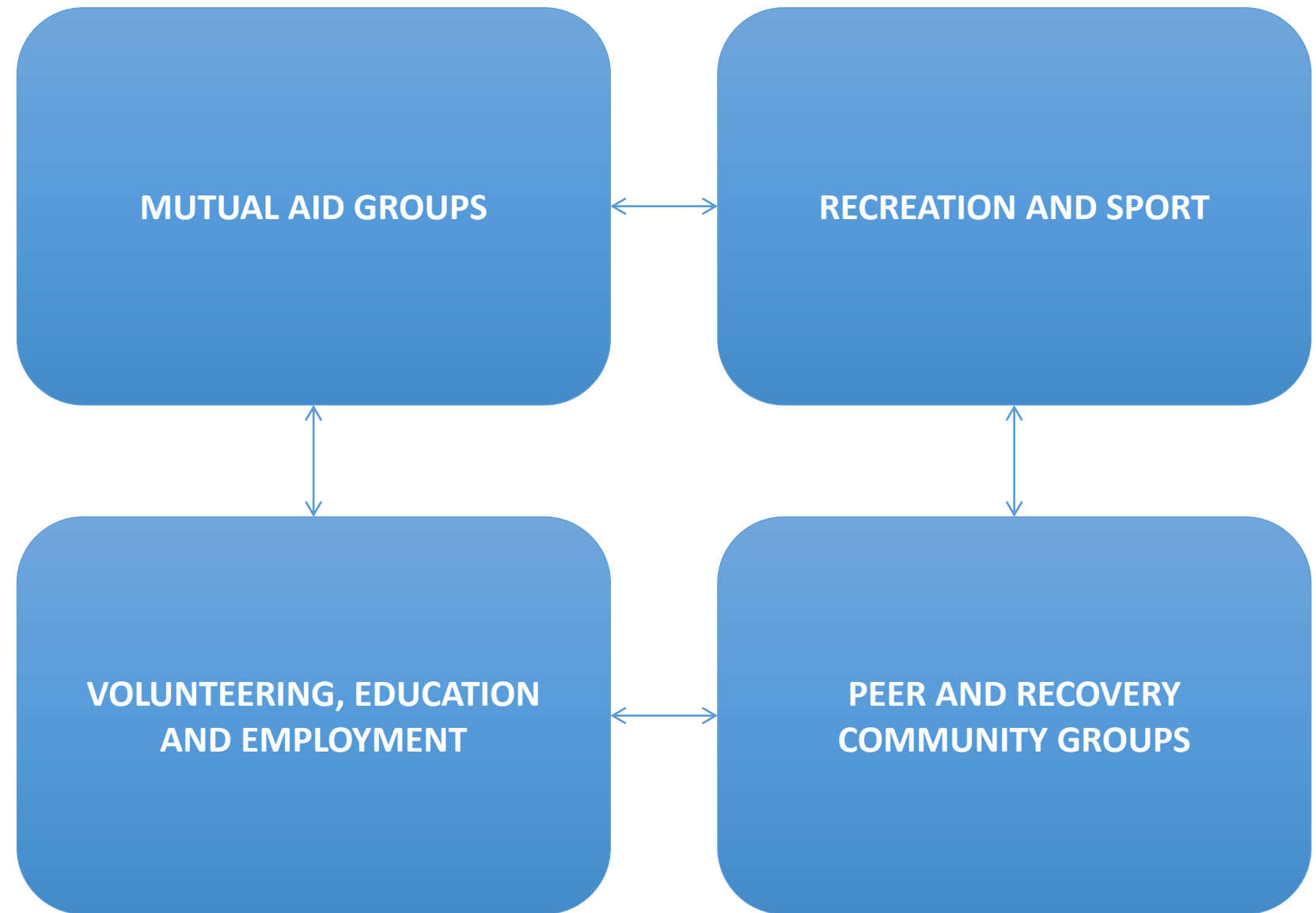
Recovery Capital: A Social Model of Recovery

1. Emphasizes social & interpersonal connections as the foundation of sustainable recovery
2. Values experiential knowledge
3. Promotes peer-to-peer, mutual aid, and other recovery supportive environments in which progressive wellbeing is the common bond
4. Requires active work in an individualized recovery program
5. Emphasizes peer-to-peer AND practitioner-client relationships that blend to mutually enhance treatment and recovery/wellness objectives and key results



Borkman, Kaskutas, Rooms, Bryan, & Barrows. (1998). An historical and developmental analysis of social model programs. *Journal of Substance Abuse Treatment*, 15 (1), 7-17.

Connections



Defining Strong, Strategic Partnerships

Drivers

Element	Summary
Vision	Defining how peer supports will benefit court participants
Alignment	Ensuring compatible court philosophy, partner philosophies, and core philosophies of peer practice
Engagement	Fostering deep participation of persons with lived experience in planning and refining program design
Selection	Recruiting, hiring, and onboarding of individuals who can use lived experience as a tool for inspiring hope
Environment	Creating safe environment in which positive, trusting, peer-to-peer relationships can thrive
Program Design	Planning and offering a wide range of peer supports
Infrastructure and Resources	Ensuring infrastructure and resources necessary for effective peer practice (including supervision)
Training and Support	Building and enhancing competencies of peer practitioners, program supervisors, court and partner staff
Data and Decision Making	Collecting and using data to support and inform

Discussion Key Questions for Partners

- What are we partnering for and on?
- What does each partner bring to effort?
- What does each gain from this partnership?
- What are the ways in which/ levels at which we will work together?
- How do we prepare our staffs for our partnership?
 - How do we prepare CRPAs for working at/in court?
 - What might provider staff not know about court process?
 - What guidance, direction, and supervision will staff receive from whom?
- What are the most significant concerns?

Final Final Thoughts

TTA Center for Peer Recovery Support Services

In-Person and Virtual Technical Assistance



TTA Center for Peer Recovery Support Services

Areas of Focus

Resources

- Staffing levels, caseload, service array, physical space, technology

Infrastructure

- Written policies and procedure, communication tools, organizational structure

Organizational Learning

- Practice knowledge, staff training, coaching
- Communication and multi-disciplinary collaboration
- Performance measurement, reporting, and evaluation

Organizational Culture & Climate

- Shared beliefs and vision
- Conflict resolution and trust
- Commitment to change

Engagement & Partnership

- Within the Agency, with other organizations, and with communities
- Leadership – including leading change

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