

2023 National Dialogues on Behavioral Health Conference

Session Title: 'Workforce

Session Date:
November 1st
@ 8:30-10:00am

Featuring:

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Session Description:

WEDNESDAY, NOVEMBER 1, 2023 8:30 – 10:00 AM

Workforce Challenges in an Era of Increasing Acts of Violence

The behavioral health field is continuing to face a multitude of workforce related challenges including reduction in force due to retirement or burnout as well as recruitment and retention of both traditional and non-traditional staff.

Behavioral health practitioners, school mental health staff and first responders are being asked to do more and more, and they are experiencing stressors related to addressing trauma of individuals receiving treatment due to violence or exposure to violence.

How can the behavioral health field support the workforce as they provide treatment and support to these individuals?

This session will address four key issues:

- 1) How can the field recruit and train a broader range of individuals to serve the population of individuals who need care, and who are increasingly traumatized by exposure to acts of violence?
- 2) How can behavioral health address the self-care needs of practitioners to help mitigate stress associated with working in the field
- 3) How can professionals in related fields be provided with the support that they need to address the behavioral health needs of individuals with whom they routinely interact?
- 4) How can technological innovation be used to support the workforce?

National Association of State Mental Health Program Directors (NASMHPD)

- Crisis Peer Support Paper
- Trauma Informed Peer Support
- Role of Proper Peer Supervision



NAMI/MHA Policy Stances: Alternatives to Co-Responder Model Approaches

NAMI (National Alliance on Mental Illness) Policy Statement

- According to the NAMI (National Alliance on Mental Illness) 44% of people incarcerated in jail and 37% of people incarcerated in prison have a mental health condition — and people with mental illness are booked into the nation’s jails around 2 million times every year.
- Millions more end up in emergency departments that are often ill-equipped to address mental health crises, often waiting hours or days to access care.

Mental Health America Policy Statement

- Mental Health America (MHA) National issued a policy statement calling out the need for alternatives to calling 911 and the dispatching of law enforcement personnel in response to mental health and substance use crises. The cited reasoning for alternative approaches to behavioral health Crisis was that ‘non-behavioral medical emergencies, such as heart attacks, strokes and non-vehicular accidents are often handled by the 911 system. But rather than dispatching a police officer, an ambulance is sent.
- ‘A law enforcement response to a mental health crisis is almost always stigmatizing for people with mental illnesses and should be avoided when possible.’ Peer crisis services are considered an alternative to psychiatric ED or inpatient hospitalization. Peer crisis services are operated by people who have experience living with a mental illness (i.e., peers) (Ostrow and Fisher, 2011). Peer crisis programs are designed as calming environments with support for individuals in crisis.

[Position Statement 59: Responding to Behavioral Health Crises | Mental Health America \(mhanational.org\)](#)

[Criminalization of People with Mental Illness | NAMI: National Alliance on Mental Illness](#)

Bridging Gaps in Underserved Communities

- Communities that have experienced historical trauma caused by emergency response systems, including Black, Indigenous, and People of Color (BIPOC), may have mistrust of behavioral health crisis response systems and providers.
- It is crucial to expand the crisis response system to meet the unique needs of people of color. Without trust in the services provided, individuals in these communities may be less likely to seek help during a crisis.
- It is essential to establish a crisis response system that is culturally competent, responsive, and inclusive to build trust and increase accessibility for communities that have been historically underserved.



Trauma Informed Practices for Peer Support

- Trauma-informed peer support is essential in crisis services because individuals who are in crisis may be experiencing or re-experiencing trauma, which can impact their mental, emotional, and physical well-being.
- Trauma-informed peer support is critical in crisis services as it provides a unique form of support that is sensitive to the needs of individuals who have experienced trauma and can help them on their path to healing and recovery.
- To have a trauma informed lens Peer Specialist needs to be in healing place in their own recovery to understand their own issues. They must also understand the trauma of the person they serve, and the trauma from a systemic level and how systems have failed to serve the community.



Peer Support Worker Defined

Peer Support Workers are defined in accordance with SAMHSA's definition:

'Someone who has been successful in the recovery process who helps others experiencing similar situations. Through shared understanding, respect, and mutual empowerment, peer support workers help people become and stay engaged in the recovery process and reduce the likelihood of relapse.'

In terms of addressing recovery needs for people in crisis and following up post-crisis, the definition's focus on meeting people's needs beyond the clinical setting and helping people reduce their risk of relapse points to the need for peer support workers to have a significant role in crisis services.



<https://www.samhsa.gov/brss-tacs/recovery-support-tools/peers>

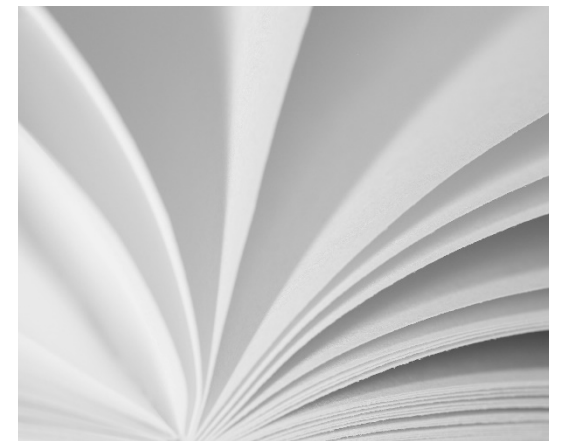
SAMHSA Advisory on Peer Support in Crisis Care

What Peer Support Workers Should Do

- Serve as a role model.
- Provide support during a crisis.
- Help with goal setting and wellness planning.
- Make connections with other services and supports

What Peer Support Workers Should Not Do

- Perform work that does not meaningfully contribute to care.
- Act as a sponsor, therapist, or clinician.
- Assess, diagnose, or treat an individual.
- Assimilate into other roles.





Peer Role Drift (SAMHSA Crisis Peer Advisory)

Organizational peer drift. Organizational peer drift often occurs when non-peer colleagues marginalize peer support workers, which can result in assigning tasks that misalign with their dedicated duties and responsibilities. This form of peer drift may occur if non-peer staff are not familiar with the role, code of ethics, and scope of practice of peer support workers under their state certification, as applicable.

Individual peer drift. Individual peer drift is when the peer support worker acts in a role that differs from that which is intended. This form of peer drift may occur when peer support workers' tasks inadvertently take on characteristics of their colleagues (drifting towards a clinical role) or are perceived as a form of other support by the individuals with whom they work (drifting towards an informal or casual role).



Peer Supervision

- The most important thing about supervision is that it happens
- Supervision should be a priority for early-career peer workers
- All workers need access to supervision
- Supervision is an investment
- Supervision benefits employees, employers and service recipients



Supervisors Understand Peer Roles and Practices

- Supervisors understand the variety of peer roles
- Supervisors have a deep understanding of the core competencies of peer workers
- Supervisors understand the specific peer support job of the person they supervise
- Supervisors can learn more about the fundamentals of peer support and peer roles by:
 - Participating in trainings designed for peer support workers
 - Reading articles about peer-delivered recovery support services
 - Learning the core competencies of peer workers



Supportive Supervision

- Supportive supervision tasks focus on the person's morale and job satisfaction.
- Give feedback on work
- Discuss personal reactions to the work
- Validate and provide encouragement
- Promote self-care practices
- Advocate for peer support roles



Possible Responses and Strategies

- **Recruitment and Training for Trauma-Informed Care:**
 - Develop targeted recruitment strategies that focus on attracting a diverse range of individuals, including those with personal experiences relevant to trauma.
 - Collaborate with educational institutions to create specialized programs and courses in trauma-informed care.
 - Offer scholarships or financial incentives to individuals from underrepresented backgrounds who commit to working in the field.
 - Establish mentorship programs that pair experienced professionals with newcomers, providing guidance and support in dealing with trauma-related cases.
- **Self-Care for Practitioners:**
 - Implement mandatory self-care and stress management training as part of professional development programs.
 - Provide access to counseling and mental health services for practitioners, either within the organization or through partnerships with mental health providers.
 - Encourage a healthy work-life balance through flexible scheduling and workload management.
 - Create peer support groups or networks where practitioners can share their experiences and coping strategies.



Recovery Community Organization Recruitment and Training

- Alleviating financial barriers for training and certification.
 - Strategic marketing and outreach to underrepresented populations.
 - Trauma focused trainings for peers and different types of trauma.
 - Education on therapeutic approaches to address trauma.
 - Community partnerships for clinical services.
 - Clearly defining role and responsibility of peer professionals.
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Trainings Offered

Burnout and Compassion Fatigue

Vicarious Trauma

Stress Management for Helpers

Self-care for Helpers

Burnout Recovery and Prevention

Mindfulness for Helpers

Crisis Response

De-escalation

Trauma Informed Care

Addressing self-care in the peer workforce

Leadership training on how to support and encourage staff self-care.

Knowing the signs of burnout and secondary traumatic stress.

Allowing staff time to engage in self-care activities. Ex: "Wellness Wednesdays," "Mental Health Mondays"

Balanced case loads

Integrate in weekly supervision

Staff trainings

Behavioral health needs of related professionals



Education and implementation of Trauma-Informed Recovery Oriented System of Care (TIROSC) across systems



Schedule meetings for community service providers to network and establish partnerships



Create coalitions



Interdisciplinary teams can learn from one another

Technological innovations and the peer workforce



Telephonic and virtual peer support sessions create more opportunities for connection and eliminate transportation barriers.



Virtual trainings increase access to continuing education opportunities for peer professionals.



Virtual trainings are often offered at a reduced cost.



Peer professionals can attend national virtual meetings for support and/or to learn best practices.



Recovery management applications and self-care applications are beneficial for both peers and participants.

Technology Examples

- Connect to a Peer
- IRN member portal for private groups, information exchange, virtual meetings
- IN211 IRN Peer Recovery Line
- IRN recovery resource locator

Indiana Recovery Network (IRN) is Indiana's Recovery Hub

Connect to a Peer

Need a Lyft ride?

Programs and services to support individuals exposed to trauma

- Peer led organizations partner with clinicians to offer clinical support services
- BrainPaint-a neurofeedback program that has proven to be effective, especially for individuals who struggle with PTSD.
- Trauma Informed Weightlifting & Fitness
- Wellness Recovery Action Plans (WRAP)
- Grounding and other techniques for staff and participants to promote healthy coping skills.
- Referrals to external service providers.

External Partnerships

Domestic Violence survivor organizations

Community Mental Health Centers

YWCA

The Center for Nonviolence

10 Point Coalition

Victim's Assistance Programs

Organizations who provide support and services to individuals subjected to human and/or sex trafficking

Successes

Establishing partnerships and referrals process with external organizations.

Partnering with clinician for on-site services

Utilizing active listening skills

Not taking things personally

Holding space, providing safety

What more
can be
done?

Additional trainings such as
QPR & de-escalation

More trainings on mental
illness and SMI

Encouraging self-care, allowing
more time for self-care

Indiana Recovery Network

Connect to a Peer

Regional Recovery Hubs

Certified Recovery Community Organizations

IN211

Trainings

Events

News



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- **Heather Rodriguez-**
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 - **Indiana Recovery Network-**
<https://www.indianarecoverynetwork.org/>
 - **Indiana Addictions Issues Coalition-**
<https://www.recoveryindiana.org/>

Resources

1. [About Us | National Association of State Mental Health Program Directors \(nasmhpd.org\)](https://nasmhpd.org)
2. <https://nasmhpd.org/content/division-recovery-support-services>
3. [Peer Support Workers for those in Recovery | SAMHSA](#)
4. [behavioral-health-workforce-report.pdf \(mamh.org\)](#)
5. <https://www.macpac.gov/wp-content/uploads/2019/07/Recovery-Support-Services-for-Medicaid-Beneficiaries-with-a-Substance-Use-Disorder.pdf>
6. [Peer Support Workers for those in Recovery | SAMHSA](#)
7. [Recovery-Support-Services-for-Medicaid-Beneficiaries-with-a-Substance-Use-Disorder.pdf \(macpac.gov\)](#)
8. [http://www.pacdaa.org/SiteCollectionDocuments/SAMHSA White Paper on The Role of Recovery Support Services.pdf](http://www.pacdaa.org/SiteCollectionDocuments/SAMHSA%20White%20Paper%20on%20The%20Role%20of%20Recovery%20Support%20Services.pdf)
9. <https://www.nashp.org/states-use-of-peers-in-the-mental-health-crisis-continuum/#tab-id-4>
10. https://www.nasmhpd.org/sites/default/files/2022-10/HRSA_Peer_Support_Billing_Pathways_2022_08_FINAL.pdf
11. [Behavioral Health: Available Workforce Information and Federal Actions to Help Recruit and Retain Providers | U.S. GAO](#)

Contact

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