

UNDERSTANDING THE ROLE OF PEER RECOVERY COACHES IN THE ADDICTION PROFESSION

Presented by Patty McCarthy Metcalf

April 23, 2013

A presentation by the NAADAC, the Association for Addiction Professionals



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WEBINAR ORGANIZER



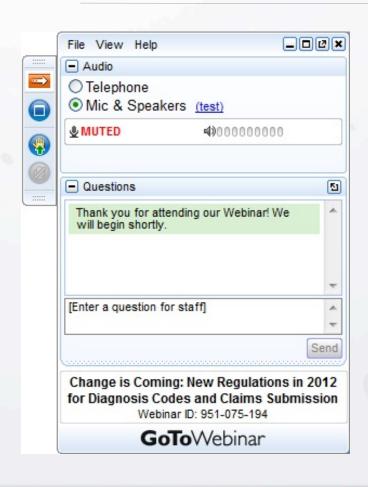
Misti Storie, MS, NCC

Director of Training & Professional Development

NAADAC, the Association for Addiction Professionals



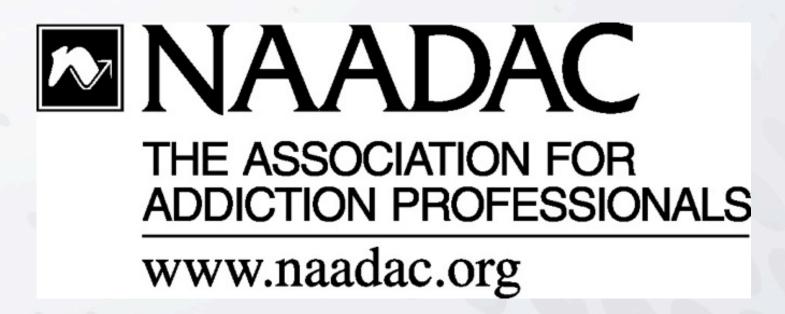
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WEBINAR LEARNING OBJECTIVES

- Define Peer Recovery Coaches
- Identify at least 3 ethical considerations
- List at least 3 elements key to a scope of peer practice
- Identify the various positions on the developmental ladder for peer recovery coaches
- State at least 2 supervision considerations



WEBINAR PRESENTER



Patty McCarthy Metcalf, MS

Director

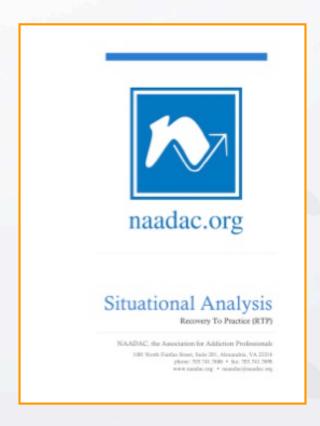
Friends of Recovery - Vermont patty@friendsofrecoveryvt.org



FINDINGS FROM NAADAC SITUATIONAL ANALYSIS



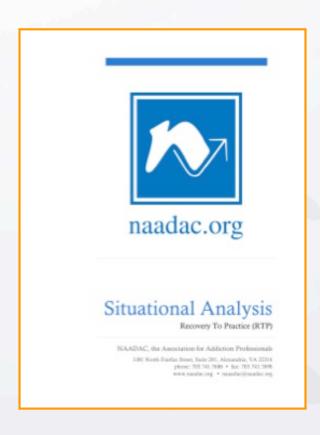
FINDINGS FROM SITUATIONAL ANALYSIS



Through the Recovery to Practice (RTP) Initiative, NAADAC was asked to determine the extent to which recovery-oriented concepts, values, and practices exist within all aspects of the addiction profession in order to develop a recovery-oriented training curriculum for the workforce.

www.naadac.org/education/recovery/s ituational-analysis

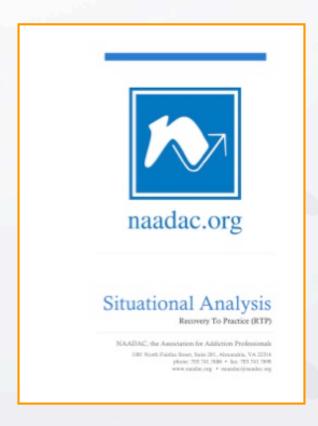
FINDINGS FROM SITUATIONAL ANALYSIS



In general, members of the addiction profession:

- understand recovery-oriented concepts
- utilize recovery-oriented practices
- have recovery-related opportunities for education, training, literature, certification, and licensure
- o Gaps still remain.

FINDINGS FROM SITUATIONAL ANALYSIS



Special attention is needed in these areas:

- trauma-informed care
- cultural diversity
- medication-assisted treatment
- co-occurring disorders
- role of peer recovery coaches



SAMHSA Service Definition

Peer Recovery Coaching is a set of nonclinical, activities, based on shared lived experience, that engage, educate and support an individual to successfully recover from mental and/or substance use disorders. Peer Recovery Coaches act as a recovery and empowerment catalyst: guiding the recovery process and supporting the individual's recovery choices, goals, and decisions.

WHAT DO WE MEAN BY "PEER"?

Peer

One who shares equal footing with others, based on position, experience or affiliation.

Peerdriven/Peer -led

Activities that are developed with, offered to, promoted by and determined by the needs of a community of peers, as they define those needs

Peer-based recovery support (P-BRS)

The process of giving and receiving non-professional, non-clinical assistance to achieve long-term recovery

Peer Recovery Coaches act as a liaison by:

- Directly initiating the individual to recovery community environments
- Linking the individual to needed services and assist in navigating systems and addressing barriers to independence and recovery
- Directly accompanying the individual and "walking them through new environments, services, and systems, when appropriate and necessary



TARGET POPULATION

Individuals who are seeking to initiate or stabilize long-term recovery from addiction to alcohol and/or other drugs.

They may or may not have a cooccurring condition, such as a mental health disorder, HIV and/or Hep C, or a history of incarceration.

Individuals receiving this service should demonstrate the following outcomes:

 Measured, self-identified accomplishments, including demonstrated ability to independently meet basic needs



Individuals receiving this service should demonstrate the following outcomes:

 Increase in personal and external recovery capital:

The sum (or the totality) of internal and external resources that one can draw on to initiate and maintain recovery, including their inner strength, resources and sources of support and strength from the outside.



- Increased coping skills
- Success and quick turn-around in re-engaging the individual in treatment and/or recovery support following any episodes of drug or alcohol us or lapses in recovery



- Decrease in substance use or cessation of returning to use
- Increase education/employment
- Decreased criminal justice involvement



- Improved quality of life
- Sense of purpose and meaning
- Increased comfort in social settings



- Relationship repair or development
- Empowerment
- Increased optimism that recovery is possible



- Decreased isolation
- Increased participation in community activities, natural supports, families



- Increased self-efficacy (optimism, hope, altruism)
- Stability in housing
- Increased resources to sustain recovery





SERVICE REQUIREMENTS

This service is delivered primarily face-to-face, secondarily by telephone or via social media.

There are times when the individual may give permission for the Peer Recovery Coach to perform an activity for them, i.e. dealing with bureaucracy, trauma reactors (advocate).

Service activities defined under Peer Recovery Coaching:

- Are based on the mutual relationship (one-on-one relationship) in which an individual in recovery is linked with a person with successful recovery experience than the service recipient to develop trust, encourage, motivate and support the individual in making informed choices and guided decisions to establish or strengthen his/her own recovery
- Build on the individual's strengths, interests, and capabilities

Service activities defined under Peer Recovery Coaching:

- Assist the person in addressing their recovery needs
- Link the person to professional treatment, when necessary
- Support (as appropriate) involvement with mutual aid groups
 (AA, NA, Smart Recovery, etc.)

Service activities defined under Peer Recovery Coaching:

- (Re)engage or the participant with self-defined natural supports (family, friends and other loved ones, landlords, employers, neighbors, etc.)
- Identify service needs and assertively links the individual to community resources (employment, education, housing, social services, etc.)



PEER RECOVERY COACHES DO NOT:

- Perform clinical counseling or treatment tasks
- Administer drug testing
- Diagnose symptoms or disorders
- Do for an individual what they can do for themselves
- Act as 12-step sponsors



PEER RECOVERY COACHES DO NOT:

- NOTE: Peer work is distinct and separate from mutual aid support networks, such as 12-step programs.
- Specifically, peer workers are not 12-step sponsors and do not perform work that is related in any way to 12-step work.

 Peer recovery coaches should have lived experience in recovery from addiction and have sufficient education, training and experience to develop and demonstrate core competencies.



Science of recovery from addiction

Practice of recovery values: primacy of recovery, authenticity, participatory process, diversity and inclusion, self-determination, etc.

REQUIRED KNOWLEDGE AREAS

Recovery process and various recovery-promoting services, supports, strategies and community resources

Diverse and stage appropriate pathways that support recovery

Ethics, confidentiality, boundaries and self-care

Cultural sensitivity and practice

REQUIRED KNOWLEDGE AREAS

Trauma and its impact on recovery from substance use disorders

Recovery plans, strength-based recovery planning, and recovery goal setting

Outreach and engagement Ability to provide Motivational emotional enhancement support REQUIRED SKILLS Active listening Conflict & transformation communication

STAFFING REQUIREMENTS

Recovery enhancement and reengagement

Community liaison and advocacy

REQUIRED SKILLS Crisis intervention

Written & oral communication

STAFFING REQUIREMENTS

Ability to assess recovery capital on individual, family, and community levels

Ability to connect individuals with necessary resources: including natural supports, recovery communities, and allied systems of care

REQUIRED SKILLS

Ability to work with diverse populations and cultural backgrounds, including different cultures of recovery

Ability to work comfortably in diverse community settings, as assigned

LOCATION REQUIREMENTS

Peer Recovery Coaching can be delivered wherever individuals obtain services including:

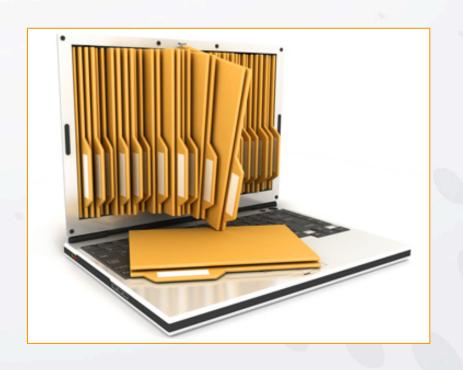
- Free-standing peer recovery support locations such as Recovery Community Centers
- Facilities where inpatient services are provided, such as hospitals,
 crisis centers, detoxification units
- Facilities where outpatient treatment services are provided, such as clinics, psychosocial rehabilitation center, treatment centers, etc.

LOCATION REQUIREMENTS

Peer Recovery Coaching can be delivered wherever individuals obtain services including:

- Primary care settings as well as emergency rooms, health homes
- Natural community settings where mobile services may appropriately meet the individual, such as coffee shops or a person's home, library, prison/jail, forensic facilities, college settings or job site
- Other community and faith-based settings
- Telephonic and other electronic communication

DOCUMENTATION REQUIREMENTS



- Required documents should include documentation of individualized Recovery Plans that are updated on a regular basis.
- In many cases, Recovery Plans are kept by the individual receiving the support, NOT by the peer recovery coach or the organization providing the service.

REIMBURSEMENT INFORMATION

States are using a variety of funding streams for peer workforce development, including:

- Medicaid
- Managed care
- Recovery CommunityServices Program
- Substance AbusePrevention and TreatmentBlock Grant

- Access to Recovery grant program
- State, county, and local funding
- Other sources (TANF, drug court funds, & private funding)

VOLUNTEERISM – GIVING BACK

Reciprocal Benefit:

- Peer recovery coaches, particularly those serving in this capacity as volunteers, are also quite explicit in what they get out of this service process.
- "I feel I am giving back by helping assist others in their recovery process. By practicing what I preach, I am able to build and nurture areas of spiritual growth in my life. I am able to maintain a sense of integrity and character. Working as a [peer] recovery coach has helped me evaluate strengths and weaknesses and improve my listening skills. I feel trusted and valued as a mentor when people allow me to help them reach their goals. I feel special."

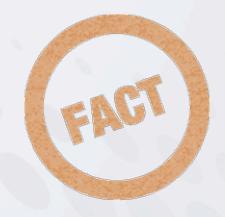
DEBUNKING MYTHS



MYTH: "THEY ARE TAKING OUR JOBS"

FACT:

Peer work is distinct and separate from professionally delivered clinical treatment.



Peer workers are viewed as a vital, unique, and autonomous component of the addictions service workforce, and the essential qualities that they bring are valued as transformative, rather than merely additive.

MYTH: "THEY ARE TAKING OUR JOBS"

- Most peer recovery coaches serve in the field as volunteers while also working at a paying job, and some volunteer for a limited time period as a way of strengthening their own recovery.
- Many peer recovery coaches do not desire full-time employment or pay for coaching because they have other jobs or professions.
- Becoming certified, therefore, is not an interest.

MYTH: "THEY ARE TAKING OUR JOBS"

- Instead, these peer recovery coaches opt to work as a peer to "give back" as a component of their own recovery plan.
- This trend of peer recovery coaches serving as volunteers may be changing as more peers are choosing to develop careers as peer recovery coaches.
- As more peer recovery coaches seek paid employment there will need to be a track for training and credentialing for them.

COMPARISON: SERVICE GOALS & TIMING

Addiction Counselors

The primary role is in facilitating the process of recovery initiation for those who have reached a point of readiness to change.

counselors use clinical skills to treat the individual and often consult with medical professionals for treatment coordination.

Peer Recovery Coaches

The primary objective of peer work is to help others initiate and achieve long-term recovery from addiction and to enhance quality of life, health, and wellness.

Peers/coaches are strengths-based and focus on the relationship that they have with the person striving to achieve recovery.

Their role is more focused on preparing the soil in which recovery can grow, using motivational enhancement strategies to regularly tip the scales of ambivalence toward a recommitment to recovery, transferring credibility from themselves to other helping professionals, and facilitating the ongoing lifestyle reconstruction that is crucial for successful long-term recovery.



AUDIENCE POLLING QUESTION

Do you feel peer recovery coaches should have personal experience with addiction recovery?

COMPARISON: EDUCATION & TRAINING

Addiction Counselors

Addiction counselors
today are formally
educated and
institutionally
credentialed via
certification or licensure

Peer Recovery Coaches

The legitimacy and credibility of the peer recovery coach comes from experiential knowledge (direct experience with personal/family addiction and recovery) and experiential expertise (demonstrated ability to use this knowledge to affect change in self or others)

COMPARISON: USE OF SELF

Addiction Counselors

Self-disclosure by the counselor has been discouraged or discredited

Peer Recovery Coaches

Uses his or her own story and ability to connect the client to the stories of others as a means of offering testimony to the reality and power of recovery and to offer guidance on how to live as a person in recovery

COMPARISON: SERVICE RELATIONSHIP

Addiction Counselors

May NOT accept gifts from clients, maintain phone or email contact with a client following his or her discharge from treatment, have dinner with a client, or give a client a ride to a recovery support meeting

Peer Recovery Coaches

May accept gifts, maintain phone or email contact, have dinner with a peer, and give a peer a ride to a recovery support meeting (under certain circumstances and depending on peer organization guidelines)

COMPARISON: LOCUS OF DELIVERY

Addiction Counselors

Services tend to be institution- and office-based

Peer Recovery Coaches

Neighborhood-based service delivery

COMPARISON: DURATION OF CONTACT

Addiction Counselors

Has a relationship characterized by a clear beginning, middle and end (spanning an ever-briefer period of time)

Peer Recovery Coaches

Expected to sustain contact with most peers for months and possibly years.

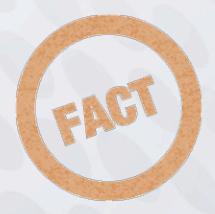
The purpose of this contact is to provide ongoing contact (check-ins) and support, stage-appropriate recovery education, assertive linkage to communities of recovery, active problem solving of obstacles to recovery and, when needed, early re-intervention.

MYTH: "HAVE TO BE IN RECOVERY TO BE A PEER RECOVERY COACH"

FACT:

Peer recovery coaching should be provided by individuals with personal recovery experience.

Peer support is based on the belief that people who have faced, endured and overcome adversity can offer useful support, encouragement, hope and perhaps mentorship to others facing similar situations.



MYTH: "HAVE TO BE IN RECOVERY TO BE A PEER RECOVERY COACH"

- "Peer" recovery coach v. recovery coach language matters
- Personal recovery/ family recovery
- Maintaining "peer-ness"
 - Peer support is the process of giving and receiving encouragement and assistance to achieve long-term recovery. Peers offer emotional support, share knowledge, teach skills, provide practical assistance and connect people with resources, opportunities, communities of support and other people.

MYTH: "HAVE TO BE IN RECOVERY TO BE A PEER RECOVERY COACH"

"My [peer] recovery coach is 100% real. She has been there and done that. She understands me and knows where I'm at in this point in my life. She knows exactly what to say and do for me to build me up and keep me strong. It's like we are on the same level and she is here to help me move on and get to the next step in my recovery and in my life."





AUDIENCE POLLING QUESTION

Do you feel the ethics guidelines for addiction counselors should be the same for peer recovery coaches?

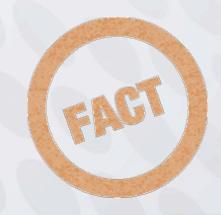
MYTH: "THEY ARE NOT BOUND TO A CODE OF ETHICS"

FACT:

Individual programs have developed ethical guidelines for peer recovery coaching. No national code of ethics at this time.

(William White) <u>www.naadac.org/images/2007ethicsofpeer-basedservices.pdf</u>

Peer ethics are codes and guidelines that are developed in a peer context and incorporated in peer and community settings. Peer ethics are fundamental to all levels of policy, practice, and program development.



MYTH: "THEY ARE NOT BOUND TO A CODE OF ETHICS"

- Recovery support relationships are less hierarchical (less differential in terms of power and vulnerability) than the counselor-client relationship, involve different core functions, and are governed by different accountabilities.
- Given these factors, the ethical guidelines that govern the addiction counselor are often not applicable to the peer recovery coach.
- When peer recovery coaching is conducted in clinical settings, clear boundaries are established and maintained between work done by clinicians and work done by peers.

MYTH: "THEY ARE NOT BOUND TO A CODE OF ETHICS"

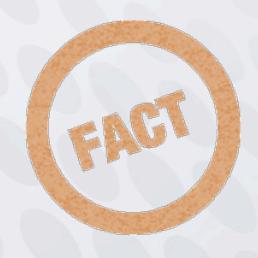
Efforts to impose ethical standards from traditional helping professions might inadvertently lead to the overprofessionalization and commercialization of the role of peer recovery coach and recreate the very conditions that created the need for peer-based recovery support services.



FACT:

Peer-run recovery community organizations have established peer-to-peer supervision models.

To be most effective, peer workers will be guaranteed regularly scheduled supervision that is non-clinical and trauma-informed, facilitated by a qualified and trained peer supervisor.



Peer recovery coaches should not receive "clinical" supervision

- Peer recovery coaches are doing non-clinical work
- While peers may need administrative supervision to help them manage the demands of the workplace (e.g., recordkeeping, work schedule), they also need supervision from senior, experienced peers/coaches who can teach and reinforce critical competencies and help with problem solving.
- A peer supervisor can also share experience, strengths, and hope when the job seems overwhelming.

- Supervision can be viewed as a peer-to-peer "coaching" model within itself
- Peer-to-peer supervision and/or co-supervision in individual and group format are accepted models
- Peer supervisors should have experience providing peer recovery coaching
- Ideally, peer supervisors will have completed a peer recovery coach training program

Practical supervision considerations that counselors might encounter or be concerned about:

Lack of training and lack of peerfocused supervision and support can
create confusion in the workplace
because the staff is unclear about the
peer's role in the workplace. These
work conditions lead to a phenomenon
that peers experience when they
"drift" toward professionalization and
thus lose their "peer-ness."



Practical supervision considerations that counselors might encounter or be concerned about:

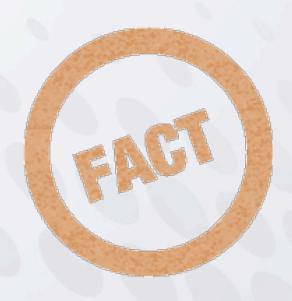
- In non-peer run settings, many peer recovery coaches are concerned about the lack of supervision, or supervision that does not match their role.
- More senior peers rarely supervise peer staff, and non-peer supervisors may lack a clear enough understanding of the role to provide accurate feedback and pertinent support.



MYTH: "ITS DEPROFESSIONALIZING THE ADDICTION PROFESSION"

FACT:

Peer recovery coaches respect and value the role of professional treatment in the recovery process and in a recoveryoriented system of care.



PEER RECOVERY COACHES BENEFITING THE ADDICTION PROFESSION



PEER RECOVERY COACHES IN HISTORY

The addiction profession has a strong foundation of peer involvement.

In fact, the earliest addiction professionals were the first peer recovery coaches informed by Alcoholics Anonymous.

Webinar #4 in RTP Series: The History of Recovery in the United States and the Addiction Profession

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BENEFITS TO THE ADDICTION PROFESSION

Evidence suggests that peer support and peer recovery coaching . . .

- Reduces use of acute services (e.g., emergency rooms, detoxification centers)
- Increases engagement in outpatient treatment
- Increases active involvement in care planning and self-care
- Reduces average service costs per person

PEER RECOVERY COACH RESEARCH

More research on recovery and peer involvement is outlined in this webinar:

Webinar #2 in RTP Series:

What Does Science Say? Reviewing Recovery Research

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 In a recovery-oriented system of care, treatment is one component in a larger paradigm of recovery



- Peer-based recovery support services can constitute an adjunct to addiction treatment (for those with high problem severity and low recovery capital) or an alternative to addiction treatment (for those with low or moderate problem severity and moderate or high recovery capital).
- This requires considerable vigilance in determining service needs and providing services only within the boundaries of one's competence, and skill in making necessary referrals in a timely manner.

- Many see the implementation of peer support services and peer recovery coaching as viable alternatives to more expensive specialty addiction treatment.
- The challenge is to ensure that decision makers are aware of and support a continuum of care which is holistic and accessible to individuals with substance use disorders, spanning from use to dependency and addiction.

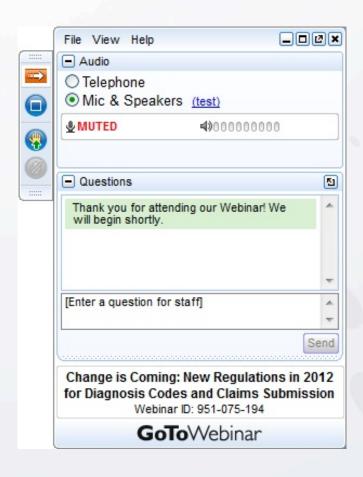


To be effective across this spectrum of disorders, services much be supported and include education, assessment, early intervention, treatment, and long-term recovery supports across the life span of individuals to produce a community focused on health and well-being for all who reside there.





ASKING QUESTIONS



Ask questions through the Questions Pane



OTHER RTP WEBINARS

Defining Addiction Recovery

Wednesday, February 13, 2013 @ 3-4pm EST

What Does Science Say? Reviewing Recovery Research

Thursday, February 28, 2013 @ 12-1:30pm EST

Defining Recovery-Oriented Systems of Care (ROSC)

Wednesday, March 13, 2013 @ 3-4pm EST

The History of Recovery in the United States and the Addiction Profession

Tuesday, March 26, 2013 @ 12-1:30pm EST

Using Recovery-Oriented Principles in Addiction Counseling Practice

Wednesday, April 10, 2013 @ 3-5pm EST

Understanding the Role of Peer Recovery Coaches in the Addiction Profession

Tuesday, April 23, 2013 @ 12-1:30pm EST

Including Family and Community in the Recovery Process

Wednesday, May 8, 2013 @ 3-5pm EST

Exploring Techniques to Support Long-Term Addiction Recovery for Clients and Families

Thursday, May 23, 2013 @ 12-2pm EST

Collaborating with Other Professions, Professionals, and Communities

Tuesday, June 4, 2013 @ 3-4pm EST



WEBINARS ON DEMAND

- Medication Assisted Treatment
- Building Your Business with SAP/DOT
- SBIRT
- Billing and Claim Submission
- Ethics
- Co-occurring Disorders
- Test-Taking Strategies
- Conflict Resolution
- Clinical Supervision
- ASAM Placement Criteria
- DSM-5 Proposed Changes



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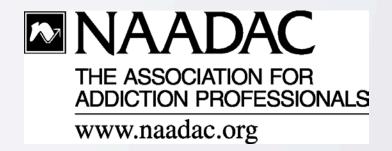
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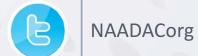
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Thank You for Participating!