

Report from the National Peer Workforce

Development Forum 2017

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Realising workforce potential

Part of the Wise Group



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Preface

Kia ora

People with lived experience of mental health and addiction needs and recovery are ideally placed to support other people experiencing similar needs. Personal experience sharing and 'living in the shoes of one's challenges' can be one of the most helpful strategies to support someone towards their wellbeing aspirations. Not only can this be more effective than using professionalised services – but it can aim to ensure people develop coping mechanisms they can continually use in their day to day lives.

Currently the peer and consumer workforce constitute 4.9 % of the mental health and addiction workforce. He Ara Oranga, the report of the Government Inquiry into mental health and addiction, indicates that peer and consumer led services need to grow. In order to this we need to provide opportunity to recruit and develop those with lived experience into our workforce.

During this forum we heard from many people who were in peer and consumer roles – or had accessed these services. This report picks up those themes and provides guidance on workforce development. Te Pou o te Whakaaro Nui will continue to work with consumers, peers and the many agencies who need to support the growth and development of this workforce. This is an important part in providing effective and multiple options beyond the current overwhelmed and outdated systems for New Zealanders who are experiencing mental health and addiction needs.

Ngā mihi

Robyn Shearer

Chief executive of Te Pou o te Whakaaro Nui, 2009-2019

National Peer and Consumer Workforce Development Forum (2017)

Overview

On 30 November 2017, thirty-eight mental health and addiction lived experience leaders met in Wellington for a forum to discuss and plan what peer and consumer workforce development in New Zealand could look like.

Participants were diverse. They came from across New Zealand and held a variety of roles, including advisors, educators, peer support workers, researchers and leadership positions in DHB and NGO mental health and addiction services.

The day started with a snapshot of where the peer workforce¹ currently is at. Following this, using open space technology, participants outlined what a valued, effective and vibrant peer workforce of the future would look like under the headings of, "Where will we work? Who will we work with? What will we be doing? What will we need to support this?"

In the afternoon a panel of four people from a variety of peer roles and perspectives, outlined things they felt were important considerations going forward. Participants then described what was needed to get to the future under the five workforce development headings from the *Mental Health and Addiction Workforce Action Plan 2017-2020* (Ministry of Health 2017).

Feedback indicates peer leadership, experience and skills are pivotal in all areas of workforce development for true and sustainable growth and advancement of this workforce.

The day concluded with an outline of the next steps which were:

- development of a document outlining the participants feedback describing a vibrant valued and effective future peer workforce and what is needed to get there
- another national peer workforce development forum for 2018
- Te Pou peer workforce development plan informed by the forum.

This resource documents participants' concepts of what a valued, vibrant and effective peer workforce looks like and what is needed to get there.

¹ **Note** Within this document the term *peer workforce* is used to denote any identified lived experience, consumer, peer or service user role. This includes but is not limited to- consumer advisors, trainers, researchers, advocates and auditors, peer support workers and service user leads

A vibrant, effective and valued workforce- the future

Peer workers

What will peer workers be doing?

The nature and scope of the peer workforce is well recognised across health and disability sectors and within communities generally. The workforce has ownership of its own vocation and, working collaboratively with others, has established a professional body and is influencing and leading positive change at all levels across health and communities.

The roles available are extensive and expand beyond the mental health and addiction sector. There are a diverse and increasing range of roles in the community including within general practices, law firms and other influential organisations. Within government organisations, there are dedicated lived experience roles including mental health and addiction policy writing and monitoring roles and district health board planning and funding roles.

There are lived experience designed, delivered and led mental health and addiction teaching programmes and training programmes for clinical staff and mainstream workers across a variety of settings. These include, for example, government organisations such as Work and Income New Zealand, Justice, Corrections, Probation services and youth services as well as in schools and communities. There are also dedicated positions for peer workers on professional bodies, and within community decision-making groups.

Supporting peer workers in their roles is a national collective of peer workers who provide supervision and opportunities for supportive networking with colleagues.

Peer workers are everywhere they are needed

Where will peers be working?

Peer workers actively connect globally and share and exchange knowledge, information and ideas. Nationally they lead co-design of services across the spectrum of health. These include crisis services, clinical services (including inpatient units), peer run respite and acute alternative services, older people services, prison and forensic unit services, the probation service and police services.

The Prime Minister has peer advisors and peer roles positioned across all government departments and organisations, including Work and Income New Zealand, Ministries of Health, Oranga Tamariki and the Health Quality and Safety, Health and Disability and Mental Health Commissions.

Peer support kaiawhina roles work in marae-based peer services as well as in community services and programmes provided by church and other agencies who work alongside homeless people and other hard-to-engage populations.

The media have peer consultation and advisory roles ensuring there is balanced meaningful reporting that includes stories of success. Peers work in first responder roles with crisis teams and the police and doing emergency phone services such as 'Helpline' and an 0800 peer service line. Peer educators provide holistic Healthy Wellbeing programmes in schools, universities and other institutions.

The increasing awareness of the peer workforce and what it is able to offer the business sector has created enhanced workplace opportunities across all industries including employment agencies, law firms, and corporations.

Peer workers work with all people

Who will peers be working with?

The number and diverse range of people that peers work alongside is extensive and stretches across all of our communities. People experiencing mental health and addiction issues, their whānau and support networks through to professional bodies such as the Royal Australian and New Zealand College of Psychiatrists have access to effective peer workers, advisors and leaders.

Māori Iwi, Tohunga and Roopu Wairua, Tangata Pasifika, refugees, new migrants and people from all ethnic and cultural groups have access to peer services in formats that are meaningful to them.

Supporting the peer workforce

What is in place to sustain and grow the peer workforce?

The peer workforce has a clearly defined scope of practice that is supported by the government. There are spokespeople and multiple peer networks (local/regional) that contribute to a national peer-led network embedded across all systems within which the workforce operates.

There is a peer professional association, incorporating peer workers throughout the health and disability sector through which a map of the workforce including roles, training and services has been developed. Formalised processes of succession, such as the Tuakana Teina- train your replacement model, are in place to provide opportunities for existing workers to advance and for new workers to smoothly transition in.

Peer governance groups and a peer supervision workforce share mentoring knowledge and resources. Proactive use of communication technology e.g. Skype is utilised for the provision of support for peers in isolated areas.

There is a national training framework for peer-led educational programmes, from entry to advanced levels with a national curriculum and resources that are New Zealand-based and developed. Educational pathways for peer workers extend from NZQA level 4 to tertiary degrees up to PhD level. There is higher-study funding for peers to train for roles such as researchers and managers. The workforce has its own knowledge base (epistemology) that supports its work and peer leaders are visible throughout all areas of the sector and the community.

Employment contracts reflect the valuing of lived experience and all peer roles are clearly defined, including accountability expectations. Training is available for employers and employees on how to integrate roles into services.

Peer workers have, as part of their roles, self-care plans and access to formalised peer professional supervision and will have full citizenship as described in international Human Rights legislation (CRPD/ BORA²). Workplaces offer all workers self-care time within work hours and encourage a balanced lifestyle that enables workers to approach challenges with confidence. There are also cross-cultural safety wānanga and options of peer-led intervision (co-reflection) available.

Peer services are valued and trusted. These also empower people's natural supports such as family, whānau, hāpu, iwi and, for some, their tūpuna.

Peer workforce and peer services are effective

The health sector knows peers and peer services work through peer led and developed evaluation and research

The peer workforce is widely recognised as the Gold Standard in the health sector and is accepted globally as an effective template for a well workforce and positive outcomes for people accessing services. There is a clear evidence base from multiple peer developed and led evaluations and studies.

The peer workforce is respected as a valid vocation, with its own qualifications, career streams and management roles at all levels. There is an agreed percentage target of dedicated peer roles in the mental health and addiction workforce. The peer workforce is included in all workforce collective agreements and a positive change in work culture throughout diverse services and sectors is evidenced.

Peer developed key performance indicators (KPI) measure individual (self-determined) outcomes as well as population outcomes in relation to employment, family life, social networks and income.

Towards a vibrant, effective and valued peer workforce | 2018 7

² CRPD/BORA: United Nations Convention on the Rights of Persons with Disabilities.

Support for the workforce is reflected in government policy. Peer and clinical partnerships are effective and there are equal numbers of peer workers to clinical staff in multi-disciplinary teams.

Getting there

What is needed to actualise the vision of a vibrant peer workforce that is everywhere they are needed, doing effective, valued work and flourishing?

Using the five workforce development headings from the *Mental Health and Addiction Workforce Action Plan 2017-2020* (Ministry of Health 2017) participants outlined the approaches required.



1. Workforce Development Infrastructure

A sturdy resourced and sustainable infrastructure is required to enable the workforce to develop its identity, roles and place within the health and social sector.

Initiative	Criteria
National Peer Workforce Association and Network	Development of recommended pay scale rates and equivalent professional roles for comparison for funders and employers Sample job/role descriptions, key performance indicators for roles Data base of peer workers including; leaders, researchers, supervisors, advisors. Advocates, educators etc Develop a code of ethics informed by peer values Inclusion in employment contracts to protect rights Ability to network nationally
Professional peer leader and leadership development,	Leadership development programme
Peer leadership given equivalency to clinical and administrative leadership	Develop peer leadership positions from local through to national and government levels
Overarching workforce development guidelines that outline how lived experience is preferable and valued in ALL positions in the sector not just in peer-defined roles	Position paper and guidelines on what this means
Easily accessible peer supervision for every peer worker	Supervision training available List of trained peer supervisors Supervision part of all role descriptions and contracts

Organisational support structures for peer roles	Clear role descriptions Clear accommodations and processes Clear expectations Managers, leaders and colleague in non-peer roles have clear guidelines on supporting and implementing peer workers and roles.
Peers influence a unique provided service, including relevant policies	Peers have a voice and influence throughout service and organisation
New appointees to senior leadership roles have a peer mentor	Develop peer mentor roles
Ability to be a strong voice at ministry level	Develop and support peer leader and advisory positions in government ministries
Funding is identified and ring-fenced for developing and employing peer roles in every service	Clear strategy, plan and funding steam developed for peer workforce development
Peer Workforce Development Expert Group to advise workforce development centres	Develop peer workforce development advisory group
A voluntary standard for workplace wellbeing	Develop worker wellbeing standard

2. Learning and Development

The future needs to include robust learning and development options that support and validate peer roles. These need to be carefully considered to provide the best platforms for people working in peer roles.

Peer leadership model and development.

A national standard of excellence for peer work

Defined and affordable peer qualifications that are peer led and trained that provide a framework for peers to be relational and includes resources and tools to use in their work including;

- Practicum hours
- Apprenticeship and mentoring for peer supports

- Recognition of prior learning
- Online options for learning/ qualifications
- Leadership qualification
- Suite of learning options
- Continuing education
- Organic models of learning (always changing and adapting)
- Developing a curriculum that is relevant and important in a variety of different settings
- Waananga for peer support
- Baseline modules and expansion learning
- Professional Yearly development
- Training in dealing with suicide, addictions, information systems, management, business
- Self-reflection tools
- Navigating the politics of organisations and its people
- Health and wellbeing
- NZQA qualifications level 4/5/6 and 7 that includes recognising prior experience and learning

Human Rights (CRPD Core competency)

Career pathways that allows entry into peer work with no qualification

Peer mentoring for new peer workers including strong support for people working in limited hour roles and who live in isolated roles or areas.

Continuous evaluation that is used to improve training, uptake, organisational environments and efficacy of roles.

Peer supervision training and scholarships so that supervision and co-reflection is available for all peer workers. External supervision available to be delivered to non-peer roles

Toolkits for services on integrating peer work and workers with a focus on organisational learning to change the culture and language. Equal training opportunities across services

Formal processes of succession e.g. Tuakana Teina, train your replacement

Funding and scholarships for training including peer leadership development

KPI's for consumer advisors and orientation guidelines

Development of peer analysts, policy makers, information and data technologists, business staff and researchers

3. Retention and Recruitment

For the peer workforce to be most effective, retention and recruitment processes need to be clear, supportive, consistent and relevant to role, type of service and values of the peer sector.

- Develop clear and demonstrable job and role descriptions that are more aligned across the sector
- Policy and procedure and supportive management who believe in peer roles and foster their growth
- Ensure there are clear competencies based upon common values that enable accountability and demonstrate effectiveness
- Organisations lead by example by having people with lived experience in all levels of organisation openly
- Develop guides on how to navigate organisational politics
- Adequate and appropriate peer supervision- peer supervision becomes compulsory in contracts. Scholarships for supervision and training
- Equitable wages for experience, skill, qualification and sophistication of peer work

Prioritise tāngata whenua

Have the right structure and supports in place BEFORE recruiting. Recruitment requires input from peers in all aspects of recruitment. Good succession planning needs to be part of recruitment processes

Peers demonstrate professional standards- organisational policies are supportive of ALL workforce and applies equitably to ALL

4. Information, Research and Evaluation

To ensure peer workforce continuing growth, effectiveness and value it's important to have good current information, evaluations that ask the right questions and peer led research that continually stretches and tests what is possible, what works and how can it be better.

Fund research led by openly lived experience researchers on:

- Choices and alternatives to medical model
- Authentic peer designed and led review
- Develop a strong evidence base for the efficacy and value of peer roles
- Peer defined measurements

Create a peer led body to create and maintain an online, user friendly platform to gain, gather and correlate research, reporting of all previous research and evaluation. Lots of research is readily available, however it requires intense concentration to identify many important and specific issues.

Develop collaboratively agreed outcome tools and measures that measure the impact of peer work from peer perspectives

Evaluate peer supervision and support its placement within organisations that employ peer workers

Use students with lived experience to do research as part of their thesis to:

- Get information
- Educate new staff about peer values
- Be part of standard practice

Hold annual peer research and evaluation expos for

- Networking and maintaining working relationships sharing data, information and resources
- Peer governance to collate and share data

Promotion of peer research

Support (finance) peer research and peer research positions in academia

Award research grants and scholarships for original research

Do annual surveys of peer workforce to ascertain its growth, placement and roles. Registry of graduated peer support workers to track employment conditions etc

Revive and use <u>Toka Tuu</u>³ through providing train the trainer packages and trainings to support organisations to utilise the resource and do their own evaluation processes

Workforce centres that include peer led research and evaluation

 3 http://www.tokatu.org.nz/tokatu/pdf/Tokatu-Rubric-2014-final.pdf

Next steps

A series of recommendations came from the forum for Te Pou and Matua Ra \underline{k} i.

- Developing a peer workforce development plan informed by the forum
- Developing a mental health peer workforce advisory group
- Refreshing the competencies for the service user, consumer and peer workforce
- Hold another national peer workforce development forum for further

These are currently in progress. To find out more visit our website www.tepou.co.nz

Acknowledgements

Te Pou o te Whakaaro Nui and Matua Raki would like to acknowledge the considerable input, knowledge, skills, energy and time that forum participants gave to the day and towards the future developments from the forum. We look forward to working together developing a more sustainable, robust, prevalent, vibrant, effective and valued peer workforce.



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