



ST Peer Workforce Development Steering Committee
January 8th, 2020; 9:30-10:30am
MHASt, 47 Broad Ave. Binghamton, NY 13904

In person: Tina Van Noy, UHS

On the phone: Denise Brown, RSS; Mary Maruscak, Rural Health Network; Matthew McDonald, Unity House; Bill Perry, Lourdes Mental Health; Laura Zocco, OMH; Carly DelVecchio, Youth Power; Melissa Wettengel, LI RPC; Matthew Petite, Excellus

The focus of the meeting's conversation was based off the following three questions:

1. Are there enough truly qualified, ready, and willing peer specialists/recovery advocates to fill the existing demand for services?
2. Are systems and organizations ready to integrate peers in ways that are sustainable, effective, and that value the essential ingredients of peer support/services?
3. Are we operating peer programs and designing peer interventions in a way that tracks outcomes, creates learning, and drives improvement?

In regards to Question 1:

Carly: The majority of Youth Advocate positions being part time (PT) or per versus full time (FT) is why agencies are not able to fill positions

Matthew M.: A lot of peers are transitioning off of alternate forms of wages (e.g. SSDI) which makes working while balancing income requirements difficult.

Emily asked agencies present who employ peers what type of employment they offer (PT, FT, per diem)

Tina: UHS are all FT positions

Bill: Lourdes currently has no peer positions; previously had a peer through a grant program

Ticket to Work and other Vocational incentives were mentioned as opportunities for those seeking employment.

Carly: Youth Power website updates job openings monthly for central region and includes a credential verification tool

Laura: Peer Specialist job openings listed online through OMH as well

Emily will look into if OASAS posts CRPA openings.

In regards to Question 2:

Key elements of that organizations should consider was discussed. Elements included: Specific job descriptions developed; supervisor preparedness, coworker readiness

Carly: YP has an assessment to gauge agency readiness

Melissa: NYCDOH has a peer employment agency readiness toolkit which includes 2 components: agency readiness and ability to participate in Community of Practice

The term Community of Practice was discussed. It originated from Center for

Medicare/Medicaid Services and has been used by Rita Cronise in her work. The group talked about how there is no authority regulating what our group should be called but that our aim is for standardization across the state. Melissa mentioned that there is a goal to have continuing

education credits earned through peer networking and training groups, specifically for OMH Peer Specialists.

The group shifted to discuss what to include in the next survey to agencies that employ individuals with lived experience. Conversation included

- Peer supervision collaboration question
- Agency buy-in
 - YP monthly meetings – buy-in has been difficult; no reimbursement for agency to send peers
- Onboarding phase:
 - OMH Peer Specialist: length of time to obtain APS certification when hiring someone who is not certified
 - Youth Advocate: Carly explained YP certification process
- Frequency of meetings
- Agency capacity to host
- Emily will begin to draft questions and send them out to group for approval before being sent out

Discussion surrounding options for trainings to be held once the group is up and running included:

Outreach to MHEP & NYAPRS regarding collaboration on free trainings

Denise: Potential DSRIP funding to train peers, RPU funds, innovation funds, CCN has someone to help with grant writing, provide ability to pay peers to complete trainings (will forward information)