

# Growing the Peer Support Workforce in the North West

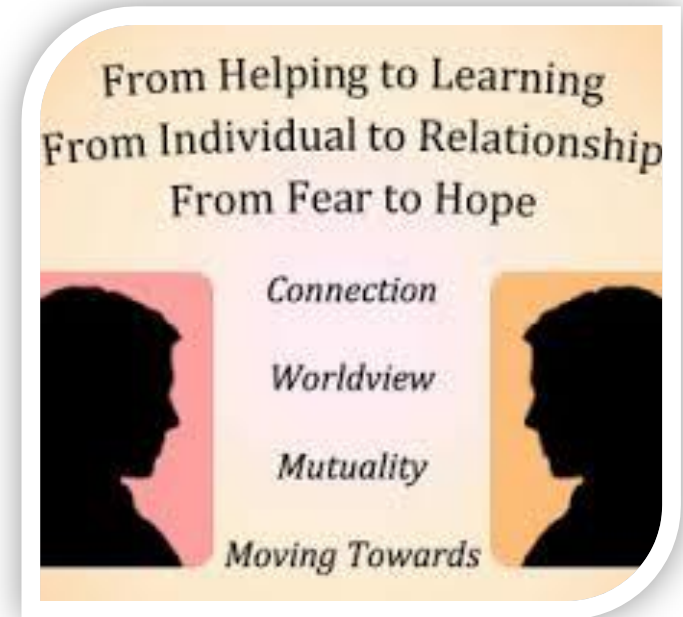


"Any one of us could be affected by an unexpected life event or illness where peer support will be vital to our recovery and wellbeing"



# Peer Support Workers

- Peer Support Workers are powerful recovery role models who have lived experience of mental health issues and actively use those experiences as a way to support others, whilst continuing along their own recovery journey.
- Having Peer Support Workers within the workforce brings a unique element to the service, through equal reciprocal relationships they provide hope; the hope that moving forward is possible. They also hold belief that recovery is possible and that each individual has the right to this.

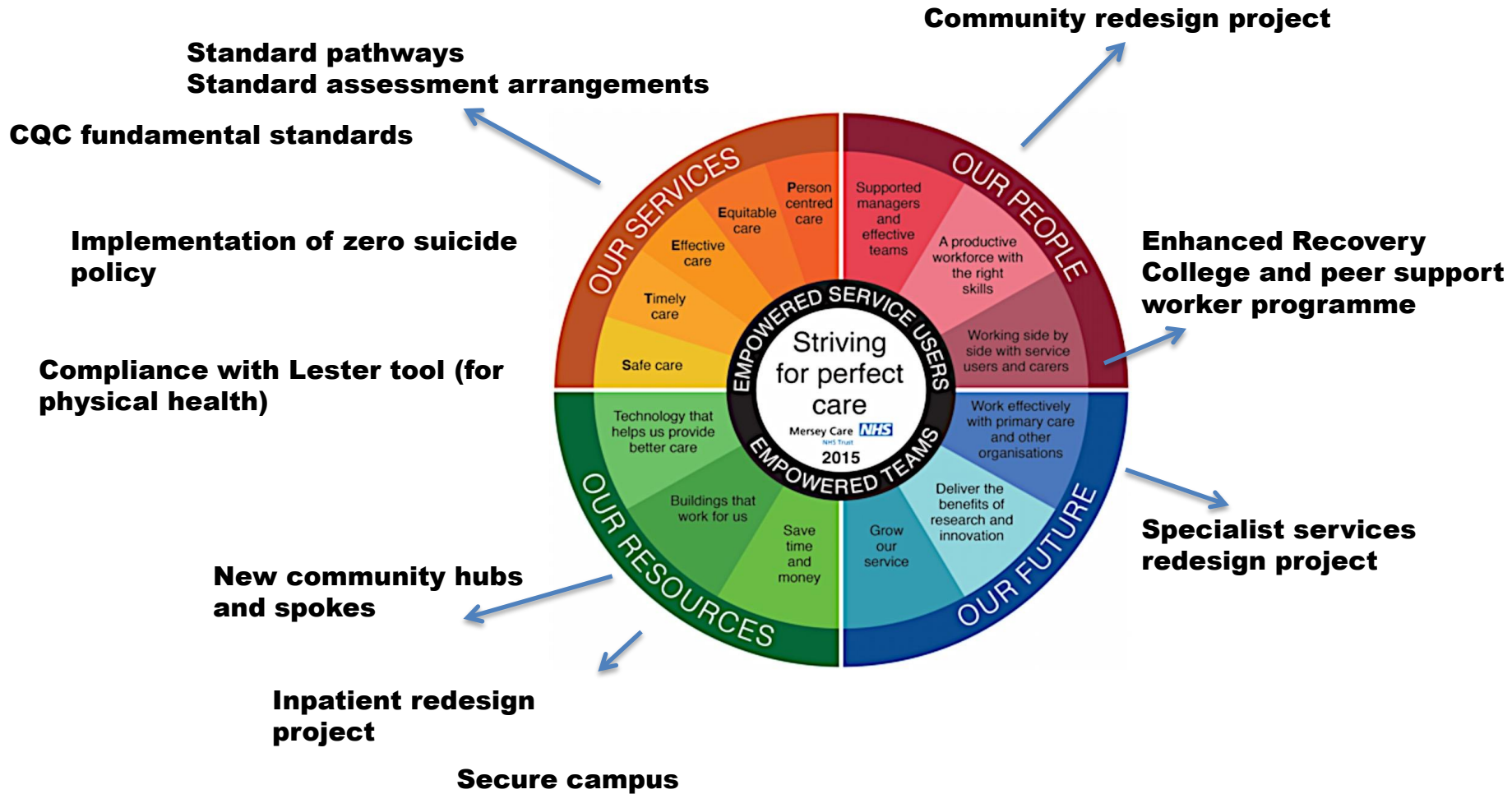


# North West Approach

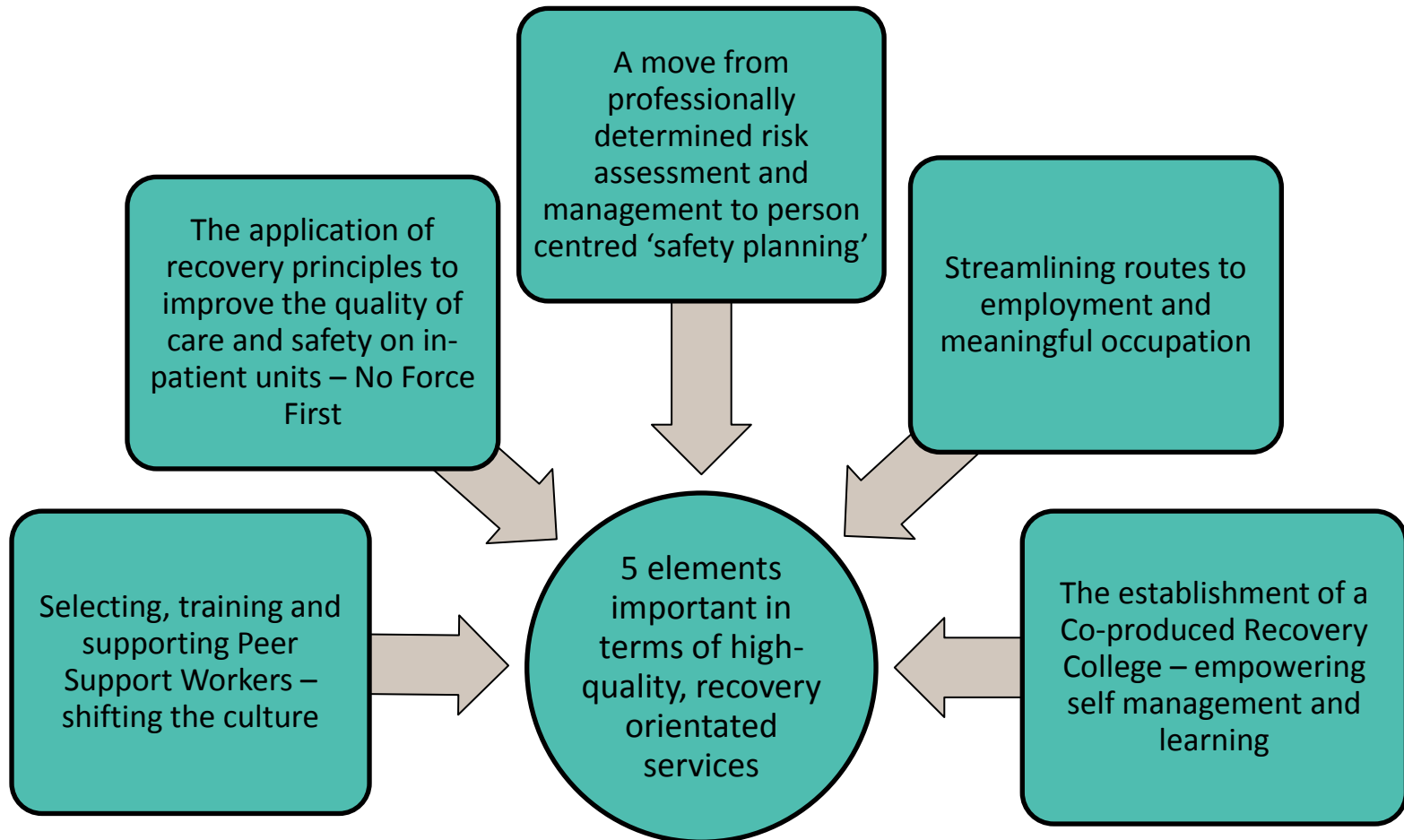
- Initial workshop in March 2016
- Region-wide PSW Network Established
- Action Plan
- Terms of Reference
- Developing Standards
- Supporting Training & Development Opportunities to Enable the PSW Workforce to Grow



# Organisational Approach




# The Key Components of High Quality Recovery Orientated Services





# Co-production in Action

## Peer Support Workers

80% working alongside professionals in teams, others as 'Peer Trainers' in Recovery Colleges



**ImROC**  
Implementing Recovery through Organisational Change

A joint initiative from  
Centre for Mental Health  Mental Health Network   
MIND COMMUNITARIAN

**Briefing**

### 5. Peer Support Workers: Theory and Practice

**Julie Repper**  
with contributions from Becky Aldridge, Sharon Gilfoyle, Steve Gillard, Rachel Perkins and Jane Rennison

**INTRODUCTION**

Peer support is 'offering and receiving help, based on shared understanding, respect and mutual empowerment between people in similar situations'. In this paper we will examine the concepts and principles of peer support and present examples from organisations which now have peers in their workforce.



The ImROC programme has recommended the use of peer workers to drive recovery-focused organisational change. ImROC recognises the value of a range of different roles for peers in all types of mental health services. Whether they are paid or voluntary, working in public, private or independent services, peer workers have a valuable role to play.

We have concentrated on the contribution of peers working inside mental health services because of the multiple benefits that they can bring. Working together, 'co-producing' services alongside traditional



mental health professionals, they can offer a truly comprehensive and integrated model of care.

We also have to be concerned with maximising 'value for money' and we believe that peers – properly selected, trained and supported – can improve the quality of services at no extra cost, possibly even with cost reductions.

This would put the voice of those with lived experience truly at the centre of mental health services – which is where it belongs.



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### 7. Peer Support Workers: a practical guide to implementation

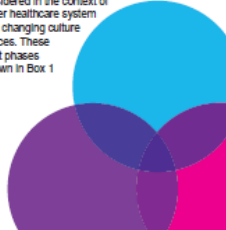
**Julie Repper**

**INTRODUCTION**

Our experience with the ImROC programme has led us to the conclusion that the widespread introduction of people with lived experience of mental health problems into the mental health workforce is probably the single most important factor contributing to changes towards more recovery-oriented services. In the first paper on this topic (Repper, 2013) we discussed the theoretical background, core principles and the range of potential benefits. In this paper we will discuss practical issues of implementation in more detail.

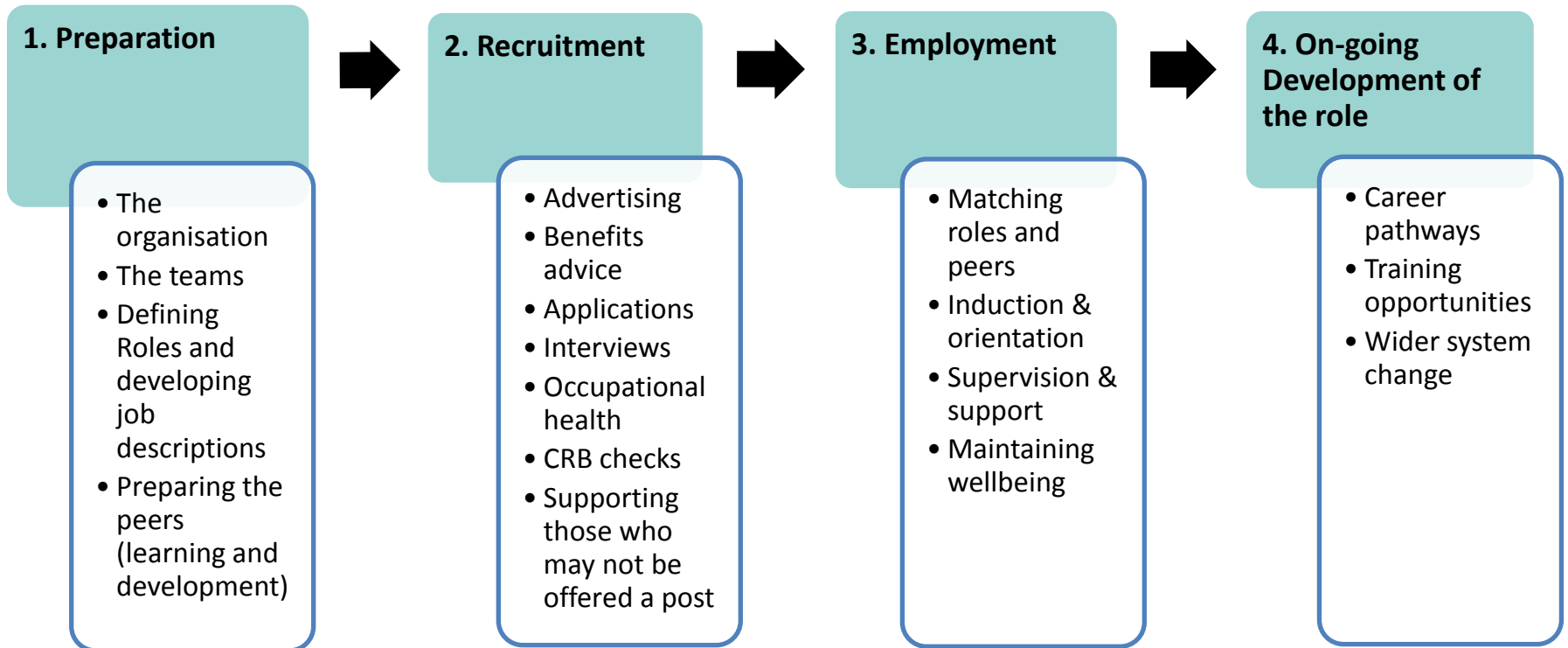
When developing peer worker posts, it is useful to think of four sequential phases. The first involves preparation – of the organisation as a whole, of the teams in which peers will be placed, and, perhaps most obviously, of the peers themselves. The second phase involves recruitment of peers to the posts that have been created or existing posts that have been

modified for peer workers. Given the likelihood that peer applicants may have not worked for some time, nor been through an interview process with all of the formalities and checks that this brings, the whole process needs careful support. Thirdly, there is the safe and effective employment of peer workers in mental health organisations. Finally, the ongoing development of peer worker opportunities and contributions needs to be considered in the context of the wider healthcare system and the changing culture of services. These different phases are shown in Box 1 below.



# Establishing Peer Support Workers - 4 Phases

Peer support is “offering and receiving help, based on shared understanding, respect and mutual empowerment between people in similar situations”





# Developing and supporting our peer workforce



"When I'm with people and I tell them I'm not medically qualified but I've been in the place they are now they open up, there's a real connection - it's a magic moment."

Richard Cope

Friends can support when you have a problem, but sometimes you just need someone who has truly 'been there.'

For as long as people have used mental health services they have provided each other with friendship, shared coping strategies and supported each other through dark times.

Traditional relationships between mental health professionals and the people they support are founded on the assumption of an 'expert' – the professional - and a non-expert – the patient.

But a very different type of support is now offered to people who come to Mersey Care for their care.

## Sharing experiences

A team of people who have themselves been service users have been employed to use their personal experience to support others; they are now a fundamental part of the trust workforce, going onto wards, talking to people, sharing experiences and helping those in need find ways forward.

Allied health professions lead Lynn King: "Peer support workers don't have specialist knowledge so they don't offer that sort of advice; neither would a peer support worker say 'you should try this because it worked for me'. Instead, their expertise is in real lived experience, so they help people to recognise their own resources

and strengths and seek their own solutions, because they will have gone through a similar process in terms of their own recovery."

## What makes them so valuable?

"They understand the challenges, the impact of being defined as a mental health patient in our society and the confusion, loneliness, fear and hopelessness that can bring. "They aren't afraid of being with someone in distress, but they also see the seeds of possibility, what a person has gained from their experience; they are in a position to say 'I know you can do it'.

## Richard's Story

Latest figures show that nine out of ten prisoners have a mental health problem – Richard Cope sees the person behind the crime, often hearing stories that may be put forward during trial.

"I can see the person behind the crime. I'm not there to judge, I tell them they're not alone in having a problem and I share the parts of my story I think might be helpful."

## Life was futile

Richard's story began in 2008 when, as a door to door sales rep he felt life was futile and became unwell.

"I wasn't a natural salesman and I felt I was letting my family down."

He battled on until five years later, by then wrestling with what he describes as 'a demon in my head' he went to his GP. Unable to reveal the full extent of his thoughts he left with a prescription for a low dose of antidepressants. I couldn't work out what was wrong and I wasn't a great talker so I just kept taking the tablets."

Crunch time came two years later when Richard confided in a colleague that he had self harmed as a youngster and had suicidal thoughts. Her cold reaction left him feeling shocked, vulnerable and eventually unable to work.

"I told the GP everything and was treated at the Broadoak Unit; my family learned for the first time how ill I was. My parents questioned themselves but it wasn't their fault. Nothing could make me happy, not care, food, or love. My wife was wonderful but I needed to realise that I was creating the demon."

Richard joined a peer support group at Broadoak Unit: "To be sat in a room and say 'I'm Richard, I have these thoughts' was amazing. They're such a good bunch."

## No ordinary job

"The peer support worker job interview was a unique experience." It was strange to be telling people about such personal things in order to get a job, but then this isn't an ordinary job.

Richard Cope spends most of his working life in Liverpool Crown Court. As a peer support worker for the criminal justice liaison team he regularly supports people having mental health assessments before they appear in court.

"When I'm with people and I tell them I'm not medically qualified but I've been in the place they are now they open up, there's a real connection - it's a magic moment."

Richard's views are often put forward to the courts. "Through talking to people I can put forward information so the courts will see that the situation isn't always as it seems."

Team manager Sadie Canning-Dossor: "The peer support worker role is such a valuable addition to the team, and we have wanted someone like Richard in the team for a long time, so when the chance to develop the role within the team came, we took it. We work with people who experience not only the stigma of a mental health problem but also the stigma of being in the criminal justice system.

"As practitioners we try to empathise and we always saw ourselves as an effective team, but this role brings so much more to the service we deliver. Richard and our other peer support workers make the team feel whole."

I may work in the courts  
but I don't judge



# Feedback

*'I thought it would be right to give special praise to my Peer Support Worker. From the moment we met, I had finally found someone who I could talk and confide in who actually knew what the pain was like. No disrespect to the staff, but unless you have been there, it's not something you can easily pick up from a book. I think the Peer Support Workers are a great idea and asset to the NHS as I believe my stay would have been much longer without this support'*

*Service User, Mersey Care NHS  
Foundation Trust*



# ‘Thank You For Listening’

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