



Substance Use Disorder
Peer Delivered Services
Child Welfare Best Practices
Curriculum

BAY AREA FIRST STEP | RECOVERY HAPPENS

Child Protective Services (CPS)

The purposes of Child Protective Services are to identify unsafe children and to assure protection of children after a report of alleged child abuse or neglect is received by a screener

What are the benefits of peer mentoring for CPS?

- ▶ Parental engagement in services is improved by outreach and responsiveness to parents identified needs and priorities; knowledge and skills in navigating the child welfare system; supportive, respectful and culturally responsive relationships with peers; and advocacy that increases inclusion in service planning and delivery, giving parents a voice in the process.

DHS Child Welfare Reports in 2016: Abuse and Neglect in Oregon

Reports

There were a total of 76,668 reports of abuse and neglect in received by Child Protective Services.

Investigations

From those reports that were made, there were a total of 37,320 referrals for investigation.

Founded Cases

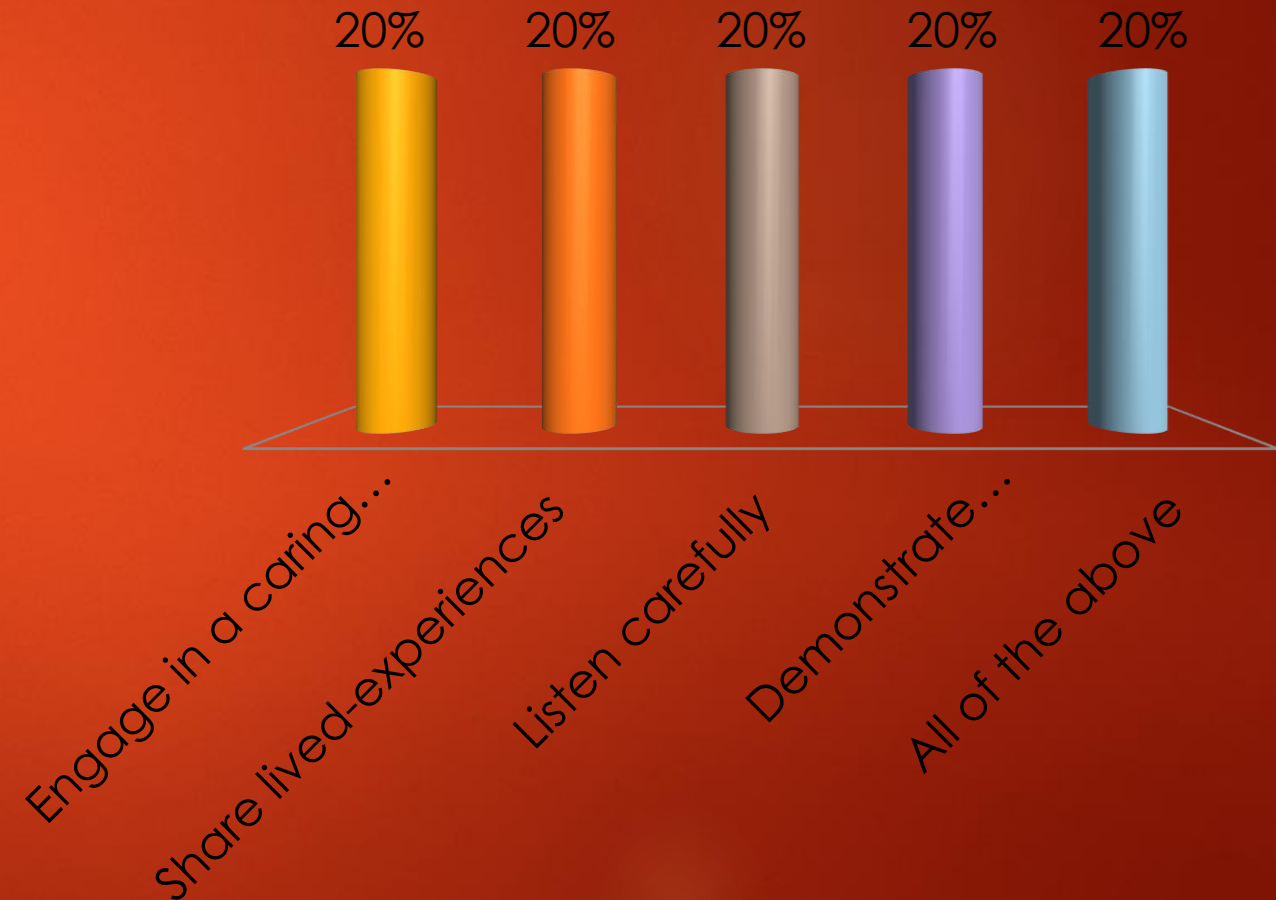
Of the completed investigations there were 7,677 founded for child abuse and neglect and involved 11,843 victims.

Best Practice One: Establishing a Connection with Parents

Peer Recovery Mentors build trust with parents by developing a connection through the sharing of their personal experience and history of managing their substance use disorders and past child welfare involvement. They engage individuals in a caring relationship by recognizing trauma, understanding and articulating fears of parent-child separation, and listening carefully to the content and emotion being shared. Peers demonstrate acceptance and respect with non-judgmental understanding.

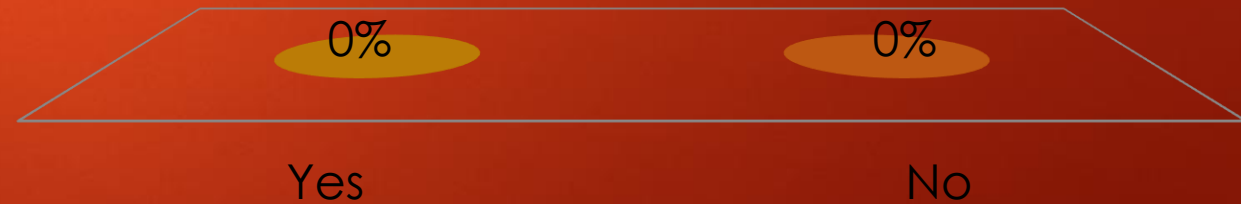
What is the best way for Peer Recovery Mentors to establish a connection and build rapport?

- A. Engage in a caring relationship
- B. Share lived-experiences
- C. Listen carefully
- D. Demonstrate acceptance
- E. All of the above



Do you think self disclosure of lived experience is a good method to make a connection with a mentee?

- A. Yes
- B. No



What should you include when sharing your story with a mentee?

- A. Your drug of choice
- B. Your criminal behavior and consequences for those behaviors
- C. What led you to begin using
- D. Negative ways of thinking and negative feelings you had about yourself while you were using
- E. None of the above



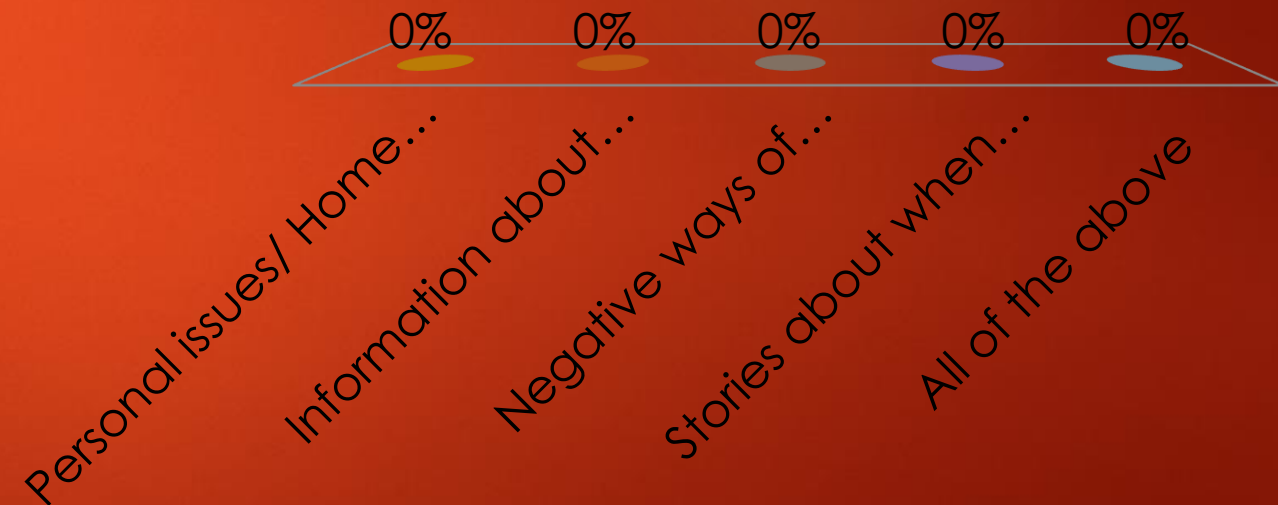


What other things should you
share about yourself?

PEERS SHARE THEIR STORIES


What should you not include when sharing your story with a mentee?

- A. Personal issues/ Home life
- B. Information about another mentee you work with
- C. Negative ways of thinking and negative feelings you had about yourself while you were using
- D. Stories about when you were using (war stories)
- E. All of the above






What other things should you not disclose when sharing your story?



Self-disclosure and using one's own story as means of enhancing the value of the service is an important dimension of the recovery mentoring or coaching role. In addition, a peer mentor or coach implicitly holds himself or herself out as a recovery role model. As described by William White, this core competency entails “modeling of core recovery values (e.g., tolerance, acceptance, gratitude); the capacity for self-observation, self-expression, sober problem-solving; recovery based reconstruction of personal identity and interpersonal relationships; freedom from coercive institutions; economic self-sufficiency; positive citizenship and public service.”
(White, 2006)

Best Practice Two: Supporting Positive Engagement in Services

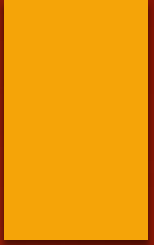
Peer Recovery Mentors maintain regular communication through assertive outreach and being available for frequent face to face contact. Contact may also be by phone outside normal business hours and supporting engagement in services.



Peers reach out to parents knowing accessibility and responsiveness increases the likelihood they will connect with the mentor. Peers encourage parents to engage in services such as: alcohol and drug treatment, mental health sessions, recovery support group meetings, parenting classes, anger management classes, and domestic violence classes.

Best Practice Three: Supporting Compliance with Child Welfare

Peer Recovery Mentors assist individuals in identifying their ambivalence and resistance regarding engagement with child welfare. Peers assist in overcoming barriers to treatment attendance, success in recovery and completion of treatment, to comply with the child welfare plan.



Peers describe the personal benefits of compliance and the potential self-improvement and growth through participation in services, regardless of the outcome. Peers utilize the principles of motivational enhancement to increase the parent's motivation for change and engage individuals in change talk.

Best Practice Four:

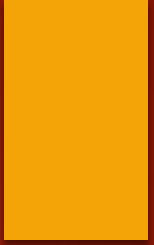
Promoting Self-efficacy

Peer Recovery Mentors encourage parents and promote their beliefs in their own capacity to execute the behaviors necessary to achieve and sustain recovery, and to parent their children safely. Peers reflect confidence in parent's ability to exert control over their own motivation, behavior, and social environments. Peers identify and reinforce prior and current successes to build self-efficacy and resilience. Peers model and rehearse patterns of prosocial healthy behaviors.



Best Practice Five: Inspiring Hope and Serving as Reunification Role Models

Peer Recovery Mentors inspire hope through self-disclosure, while role modeling healthy lifestyle choices. Peers teach prosocial behavior in recovery and wellness.

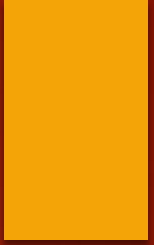


Peers guide in the process of setting goals. Peers understand that ambivalence should be viewed as positive in terms of readiness to change and engage individuals in dialog to mobilize change talk.




Best Practice Six: Person-centered Trauma-informed Services that Evoke Individual Needs, Objectives and Goals

Peer Recovery Mentors help individuals with crisis management using a trauma informed approach. Peers recognize the impact of trauma and seek to actively resist re-traumatization.



Peers are mindful of the importance of self-care and practice stress reduction methods to reduce risk and maintain safety. Peers provide emotional support, reducing anxiety and inspiring confidence.



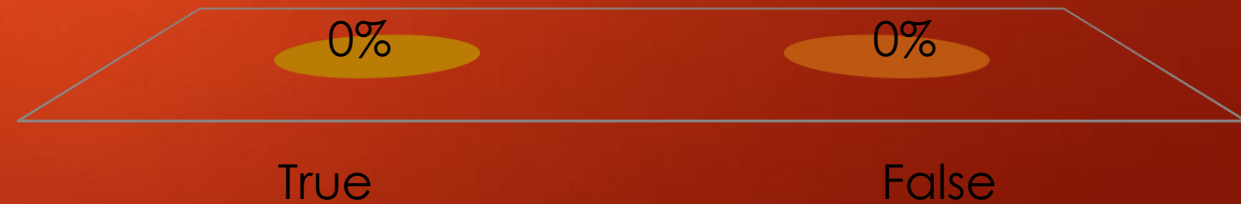
Peers assist in planning to accomplish objectives, propose strategies, and support individuals in finding their own pathways to recovery. Oftentimes, child welfare parents have little voice in adopting goals that are established by child welfare and family courts. Peers assist these individuals in identifying objectives to achieve court mandated goals.




Peers support parents in decision making processes and encourage engagement in activities with the child welfare case management process; from the safety assessment, to safety planning, creating a Protective Action Plan, identifying Conditions for Return, participating in Permanency Hearings at family court and all meetings possible where their child or child welfare case is being discussed.

Asking open ended questions is an effective method to assess an individuals needs.

- A. True
- B. False

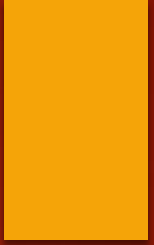




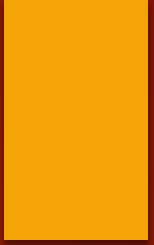
What are some resources that you should be familiar with to help individuals meet their needs?

Best Practice Seven: Advocating for Parents with Child Welfare

Peer Recovery Mentors advocate for individuals by making sure the parent's voices are heard. Peers question caseworkers to make them aware of situations where individuals need representation. Peers offer clarity by modeling effective communication skills with caseworkers.



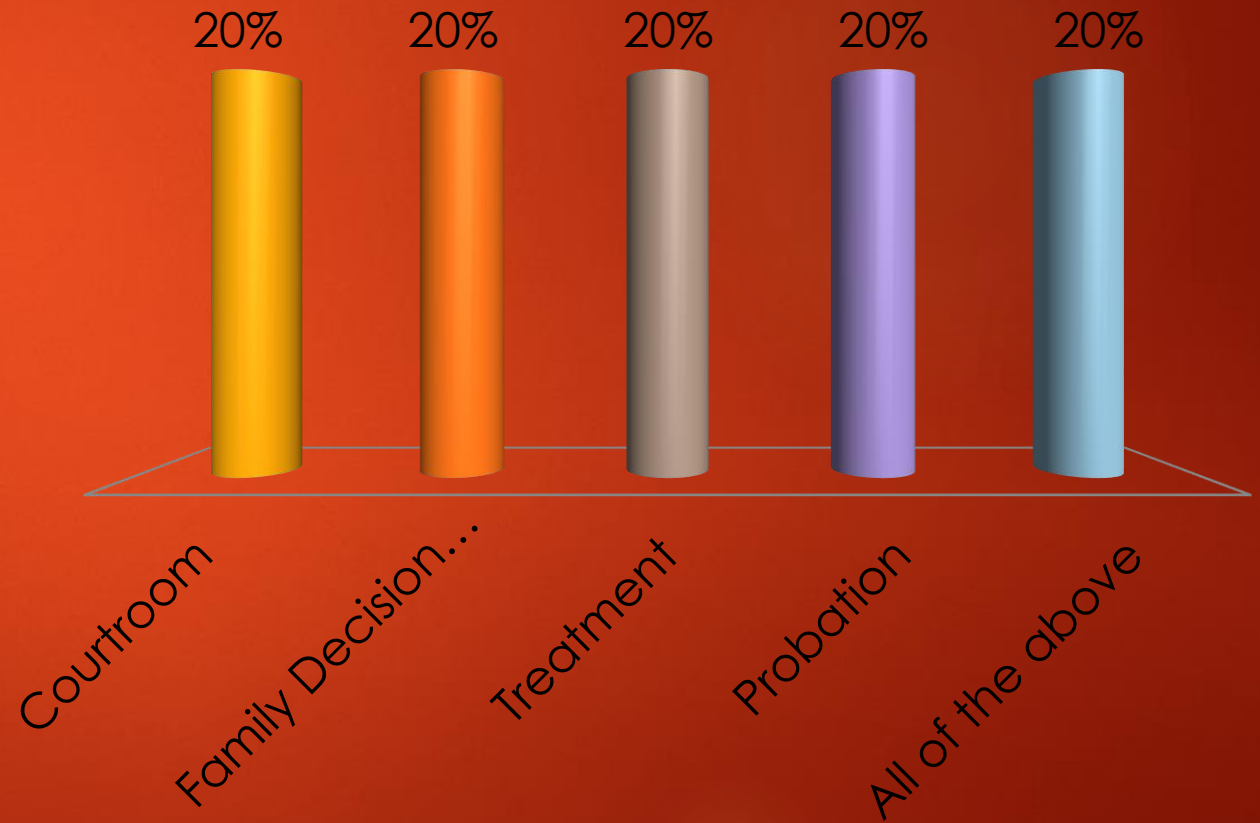
Peers support parents in visitation,
and relationships with foster parents.
Peers represent individuals in a
variety of settings and systems, but
always with the parent, not speaking
for the parent.



Peers working out of a stand-alone, consumer operated (peer-run) organization, are best able to advocate for parent(s) with child welfare, because they are not governed by the agency.

In what types of settings do Mentors advocate for mentees?

- A. Courtroom
- B. Family Decision Meetings
- C. Treatment
- D. Probation
- E. All of the above



Self-Care Checklist





Group Discussion

Self-care is a critical part of working in the field of recovery support services. Peers understand the importance of self-care and will be committed to maintaining physical, emotional, and spiritual health. Peers will continue to actively maintain a program of recovery.

What do you do for self-care?

Why is self-care so important when offering peer delivered services?

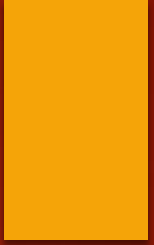


Best Practice Eight: Guiding Development of Supportive Relationships

Peer Recovery Mentors support positive and healthy affiliation with other peers by guiding parents in the development of supportive relationships.



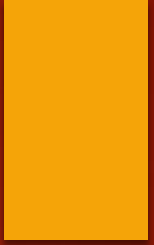
Peers encourage growth in building a recovery support group. Peers promote involvement in Recovery Center activities, as well as alcohol and drug free housing communities. Peers communicate the critical importance of community support for long term success in recovery.



Peers support parents asking for letters of support and recommendations from professionals they have worked with for placements and other steps forward. Peers support the parent when some of those requests are denied.

Best Practice Nine: Guiding and Teaching System Navigation

Peer Recovery Mentors guide parents in initial navigation of systems, and in learning to self-navigate, by providing information regarding system requirements, such as supervision guidelines, the culture of helping organizations, and treatment plan stipulations.



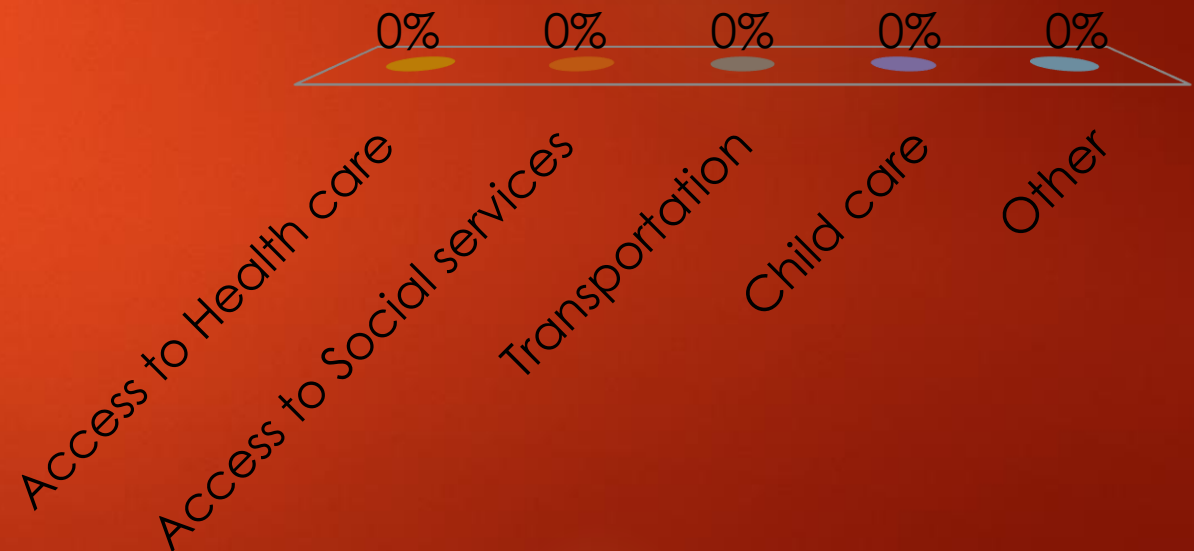
Peers may provide transportation to appointments and meetings. Peers are punctual and model arriving on time, being organized, remaining calm, minimizing expectations, and asking for exactly what they need. Peers model and coach self-advocacy and appropriate behavior for interaction with professionals.

CPS Definitions

1. Assessment- Investigation into a report of child abuse or neglect
2. Initial Safety Plan- A documented set of actions or interventions sufficient to protect a child from an impending danger safety threat in order to allow for completion of CPS assessment
3. Protective Action Plan- An immediate, same day, short-term plan, lasting a maximum of 10 days
4. Child Safety Meeting- Held at the conclusion of CPS assessment to develop an ongoing safety plan
5. Conditions For Return- Written statement of specific behaviors, conditions or circumstances that must exist within a child's home before a child can safely return home


What is the most important type of instrumental support?

- A. Access to Health care
- B. Access to Social services
- C. Transportation
- D. Child care
- E. Other



Best Practice Ten: Regulations, Ethical Conduct & Peer Boundaries

Peer Recovery Mentors adhere to professional, ethical and legal guidelines. Peers maintain boundaries and resist the temptation to collude with individuals against the system, especially with regard to perceived or actual injustice.



Similarly, Peer Recovery Mentors do not collude with the system against the individual. Peers may act as an intermediary while advocating for individuals with the agency. Peers have a responsibility to know the guidelines and limitations to both HIPAA and 42-CFR Part 2 and other potential privacy laws. Peers understand the necessity of obtaining signed Releases of Information for every supporting family member, stakeholder, agency and/or organization before attempting to contact anyone.

Questions?

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