

## Peer Support Workers – where to focus our skills

### Lean toward:

- Sharing how you have turned your difficult experiences into positive ones
- Difficult experiences - don't be afraid to have conversations about big emotions, and validate how someone is feeling
- Sharing your experiential knowledge of services and the ways you have found to live well
- Providing your perspective and giving feedback on the services you work in to support and improve the quality and effectiveness of services (this could include feedback on assessments and decisions made with regards to a person's care and support)
- Providing face-to-face, telephone, online or group support which focuses on emotional support, sharing experiences and practical activities
- Advocating for the people who use your services – this can be achieved in ward rounds, team meetings, handovers, and conversations with colleagues
- Asking people what has worked for them in the past, or what they want to do about an issue, before you share ideas about what might work for them now
- Offering time to the people who use your services to actively listen, share ideas, problem solve (support decision making) and provide practical help based on your own experiential knowledge
- Supporting the people who use your services to move towards the things they want (personal recovery goals) and signposting people to various resources, opportunities and activities within the Trust and in the community
- Trying to understand people through the lens of their experiences and not through a medical diagnosis
- Asking powerful and challenging questions (example – why do you think you can't have what you want?)
- Sharing needs, thoughts and feelings around maintaining the peer support relationship
- Working together with other professionals for the greater good of the organisation (remember the overall objective for all staff is to improve the lives of the people who use services)
- Being as honest and transparent with the people who use your services as you can be. There is a saying in mental health services: "nothing about us without us". Try to remember this when recording notes etc.
- Listening from a point of not knowing and provide a safe space for people to get things off their chest
- Challenging stigma and stigmatising language in supportive and non-aggressive ways and promoting recovery-focused language

- Promoting peer support at any given opportunity (newsletters, notice boards, conversations)
- Receiving peer support co-reflection (supervision) in order to reflect on challenges and prevent the slipping away from the core values of peer support
- Accompanying people to appointments, meetings and activities that are aligned to their recovery goals
- Seeking support when you need it, outside of supervision and find out what kind of support works best for you
- Using every opportunity to be part of a no force first culture and promote the use of de-escalation instead of restraint

### **Lean away from:**

- Trying to fix people or jumping in with solutions before exploring what people think they can do for themselves
- Delivering therapies or treatment based on professional/medical training
- Assessing or evaluating the people who use your services (although you can be part of an assessment to provide peer support and perspective)
- Undertaking the routine duties of other staff (bedroom cleans, errands etc), unless you feel it strengthens the peer relationship and doesn't affect the balance of power in the relationship
- Making assumptions about a person's needs or experiences. You may be able to relate to certain things, but that doesn't mean one knows what is truly happening for another person
- Sharing anything you don't feel comfortable sharing.
- Creating further separation between services and the people who use them.
- Giving out medications unless you feel it strengthens the peer relationship and doesn't affect the balance of power in the relationship



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