On June 8th, 2018, the ACT Institute facilitated the 2nd Annual Peer Learning Community Day of ACT Peer Specialists at the New York State Psychiatric Institute. ACT Peer Workers from as far as Ulster County, the Bronx, Staten Island and the Rockaways were in attendance as well as Peer leaders from the Office of Consumer Affairs, Howie the Harp and the New York Association of Psychiatric Rehabilitation Services.

Attendees included: Helle Thorning, Pascale Jean-Noel, Stacey Hamilton, Ramona Santiago, Zachariah Jackson, Francesca Frevola, Sascha DuBrul, Maria Silva, Monique Ingram, Richard Peart, Celia Brown, Angel Serrano, Lynnae Brown, Luis Lopez, Noah Lipton, Raymond Rodriguez, Jeannie Dewan, Denise Ranaghan, Anna Gomez

We had the entire day to share ideas and strategies and trade stories from the field in the service of supporting one another and developing clarity for the ACT Peer role for everyone in the greater Peer community and behavioral health workforce. As a start to the activity-packed day, Helle Thorning, ACT Institute Director and Sascha DuBrul, Recovery Specialist & Trainer welcomed everyone, framing the experience as a mutual learning opportunity for those in the field versus those working in administration and training. Helle and Sascha underlined another important purpose for the group’s convening: to reflect and celebrate on the development of the ACT Peer Scope of Practice document. The ACT Peer Scope of Practice resulted from a collaboration with the New York State Office of Mental Health (NYS OMH) over the better part of the year;
the document’s concept was borne directly of conversations from the inaugural ACT Peer Specialist event last year.

Immediately following introductions, Angel Serrano, Peer Specialist, Luis Lopez, ACT Coordinator of Fidelity & Best Practices, and Sascha facilitated a discussion on the Power of Language. One of the key components of the discussion was distinguishing between the Medical Model and Recovery Model. Currently, there is a collective understanding in our Peer Learning Community that Peer workers on ACT Teams are often pressured into using clinical language both in team communications and in writing treatment plans and documenting services for billing. The ability to use recovery-based language over medically-based language is a critical component of the Peer role in any clinical environment. The discussion culminated in a decision to create a tool and accompanying training for all ACT Peers to play a role in evolving the culture of their teams.

After this discussion, some of our community leaders-- Celia Brown, Lynnae Brown, Denise Ranaghan, and Raymond Rodriguez--presented on projects they were working on across the state of New York. There was a lively dialogue among several people working on the ground that zeroed in on the day-to-day reality of working in the City’s shelter system, in people’s homes, and with the City’s forensic population. There seemed to be a general agreement that those working in Peer roles have an uphill battle on their teams to be recognized and appreciated. One ACT Peer remarked that clinicians on their team were uncomfortable speaking directly to them and wondered aloud how comfortable they might be working with clients who shared the same social demographics. Many people in the room resonated with this feeling and a heartfelt conversation ensued about the importance of treating the people who use ACT services like everyday people, rather than “clients.”
After our lunch break, the group was honored to participate in a presentation by Ramona Santiago and Stacey Hamilton, who work together as a team of Peer Specialists on a Forensic Assertive Community Treatment Team at the Bridge in the Bronx. They provided some tips navigating the topics of recovery, wellness, strength-based practices, and engagement, when communicating with team members. Ramona and Stacey touched on how challenging it is to keep Peer Specialists away from clinical work. They reminded the group that Peers need to continue to advocate for Peers to provide Peer-specific services. One of the most powerful aspects of Stacey and Ramona’s work is that they work together on their team, a model that is very unusual in 2018 in the realm of any clinical teams with Peer Specialists. Angel Serrano reflected that when he started working as an ACT Peer Specialist 13 years ago, there were four Peers on his team, though now he is the only one left. There was much discussion about what ACT Peer services would look like if there was the ability to have more than one Peer on a team.

Finally, the group discussed the [ACT Peer Scope of Practice Document](#). As mentioned earlier, the Scope of Practice is a document that the ACT Institute, with the assistance of a Peer Specialist workgroup and the NYS OMH, developed over the past year. The scope outlines the job responsibilities of Peers on ACT teams. Sascha facilitated a discussion with the group. One of the initial recommendations was to add a statement concerning the need for Peers to not only be part of a larger Peer community
but to help clients connect to Peer supports in the community. The group also discussed the importance of identifying and defining the aspects of reciprocity and boundaries on ACT teams. The group concluded that there is a need to review what billable notes are in the arena of Peers. Lastly, the group discussed the role of Peers in the development of treatment or service plans. If you have any additional thoughts and feedback on the Peer Scope of Practice, please email Sascha at sascha.dubrul@nyspi.columbia.edu or Luis at Luis.Lopez@nyspi.columbia.edu

The ACT Institute appreciates the energy, synergy, and abundance of ideas developed during this day. If you are an ACT Peer Specialist and you are interested in joining a workgroup to expressly develop documents to make changes in the growing role of ACT Peers in the system, please be in touch. On September 11, 2018, our first meeting will focus on “The Power of Language: Treatment Planning, Billing Documentation, and Team Communication for the Peer Role”. This workgroup will be meeting once a month for about six months. Please contact Sascha sascha.dubrul@nyspi.columbia.edu if you would like to be on this workgroup.

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