

## **University Medical Center Hires Mental Health Peer Specialists**

Illinois IPS Employer Podcast Series

Recorded by Dr. Cherise Rosen and Dr. Judith Cook

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JC: Thanks for joining us. Our guest today is Dr. Cherise Rosen, who is an Assistant Professor in the Department of Psychiatry at the University of Illinois at Chicago. She's here to talk about employing Certified Recovery Support Specialists who provide mental health services in the UIC Department of Psychiatry. Thank you for joining me today, Cherise.

CR: You're welcome. I'm very pleased to be here.

JC: Can you tell our listeners what a peer is, and why you decided to create this position?

CR: I'd be happy to. A peer is someone who has been treated for a mental health condition. A peer specialist is a person who has recovered from mental illness and then trained to provide support and assistance to patients with mental health conditions. I first learned about peer specialists when I had a chance to observe a peer support group. What impressed me was the quality of the relationship the peer specialist had with the group members. I also liked the practical nature of what the peer was teaching them about recovery while also supporting them emotionally. I felt that this would be a valuable addition to our clinical services here at UIC.

JC: You mentioned recovery. Many people think of that in terms of addiction treatment. Can you talk about how it applies in this case?

CR: Recovery is how we think about the goal of mental health treatment these days. It means helping a person have a life with purpose and dignity, even if they continue to have symptoms and challenges. It includes engaging in meaningful work or further education of the person's own choosing. It also includes having a satisfying social life and community participation. Having peers deliver services is important because they serve as role models that recovery is possible. In my opinion, that's why our certified peer specialist, Cheryl, is so effective.

JC: Yes, and there's good research to back this up. Can you tell me a little about what Cheryl's job entails?

CR: Sure. On our hospital's inpatient unit, she's a full-fledged member of the clinical team. She attends daily rounds, leads therapeutic groups, and meets one-on-one with patients to develop recovery plans. Her outpatient work involves helping people reach the goals in their recovery plans. She might help people find a better place to live, get a job, or go back to school. She also leads a patient education class that teaches people how to self-manage their mental health problems by getting enough sleep, exercise, and social support. This is similar to a class you'd take if you were newly diagnosed with a chronic medical condition like diabetes or high blood pressure.

JC: How did you decide what qualifications the position required?

CR: One important thing was being certified by the State to provide peer support. In Illinois, that's called a Certified Recovery Support Specialist. That credential requires special training and a certain number of hours of supervised paid employment. Aside from that, the position has the same qualifications as other mental health clinicians hired by the Department of Psychiatry.

JC: Was there anything special or different about the recruiting, interviewing, and reference-checking process that you followed for this position?

CR: No, not really. We used the same university-approved procedures that are used for all jobs. We also kept the same standards in mind in terms of speaking with references, drug testing, and background checks.

JC: What has it been like to supervise someone who has recovered from a mental health condition?

CR: Actually, it's very similar to supervising other clinical staff. Cheryl and I discuss her work and how it's going. She asks for help if she's having a problem and I find I make the same kinds of suggestions I would with other clinicians. We focus on the job and not so much on her peer status. I've also really enjoyed helping mentor her professional career. For example, she's expanded her role by participating in the research we do at UIC and by learning about new models of care.

JC: How have the other clinical providers accepted working with a peer?

CR: I have an interesting story about that. On one unit of the hospital, the team had tried a number of things to help a patient prepare for discharge. However, it didn't seem like he wanted to leave. They asked Cheryl to talk to the patient, and she found that he wanted help with practical things like housing and getting back to work. He also wanted reassurance that he was ready to return to life outside the hospital. Cheryl empathized with his condition because she too had faced some of the same things. When she shared this with him, he said he didn't feel so alone. After she reported back to the clinical team, they realized that their focus on outpatient therapy and medication needed to be broadened to include practical help as well as emotional support. Once the person knew exactly where he'd be living and what help he'd be getting finding a job, he started looking forward to discharge and getting on with his life.

JC: That's a great story. Is there anything else you'd like to share about your experiences in hiring and supervising a peer specialist?

CR: The only thing I have to add is that it's been a win-win experience. Cheryl is a talented professional who really values her job with us. And we really value her. We benefit from her ability to work with patients in ways that are different from other clinicians.

JC: Thank you, Cherise, for sharing your perspective about supervising someone who has recovered from a mental health condition.

CR: You're welcome. I'm glad to have had the opportunity to support this important hiring trend.

Announcer: Thank you for listening. You can obtain additional recordings, or download a transcript, by visiting the Illinois Supported Employment Transformation web site.

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