Evaluation of the Delivering for Mental Health Peer Support Worker Pilot Scheme

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The need to adopt and promote a recovery-based approach to mental health support was described in 'Delivering for Mental Health' and later in 'Towards a Mentally Flourishing Scotland'. In support of this, 'Delivering for Mental Health' included a commitment to support the development of the Peer Support Worker role within mental health services in Scotland. As a result pilot schemes were developed in five Health Board areas where Peer Support Workers were trained, and then employed, to fill new positions within NHS teams in a range of settings, including inpatient and community-based services. These new workers, who were required to have a lived experience of mental health issues, drew on a range of skills to share their lived experience with the intention of supporting others in their recovery journeys. An evaluation was commissioned to assess the impact of the peer support pilot on service users, peer support workers and the wider service system as well as assessing the process of implementation at national and local levels.

Main Findings

■ The roll-out of peer support working across mental health services in Scotland, and beyond, would be beneficial for service users, peer support workers and mental health teams. However key challenges remain for developing best practice in relation to defining and implementing peer support roles.

■ Peer support can be successfully implemented in a wide variety of service settings including acute inpatient care and community-based teams and works best in settings that are open to and practising recovery-orientated support.

■ Although there are core aspects to the peer support worker role that were common across all sites, the role varied in terms of pay scale, induction processes and emphasis of activity which tended to be adapted to fit specific settings.

■ Peer support workers require support to help them maintain their recovery and wellness during employment as well as supervision and support from within their team to address the development of their role and employment issues.

■ On the whole, peer support workers were welcomed by service users who reported high levels of satisfaction with the service; peer support workers were able to give hope to service users, reduce feelings of fear and self-stigma amongst service users, enable life skills, and encourage service users to take on new strategies for recovery and have more control over their well-being.

■ Peer support workers experienced challenges in developing this role, particularly adapting to a new working environment and establishing effective relationships with service users and team colleagues.

■ Through undertaking the role and overcoming the challenges they faced (with the support of their managers, supervisors, peers and colleagues), peer support workers mostly grew in their own confidence and experienced enhanced recovery as a result of undertaking the role.

■ Although some peer support workers became unwell during the pilot, they demonstrated the great potential of making constructive use of their experiences of recovery by integrating this further lived experience into the skills and knowledge they could offer in the role of peer support worker.

The Scottish Government

- Peer support workers were able to bridge the 'them and us' gap that often exists between service users and professional teams by offering professionals further insights into the service user's own personal work in their recovery journey, reminding professionals of the courage and efforts required for individuals to make progress and helping service users to be open to trying new approaches to their care.
- Despite initial difficulties, particularly around confidentiality and information sharing and the impact of this on the peer relationship, peer support workers were able to integrate well with their multidisciplinary teams, gaining respect and cooperation from most of their colleagues.
- Peer support offers a unique and complementary role to mental health teams, strengthening a team-based approach to recovery, which formally values the contribution of sharing lived experiences, although some staff remained resistant to peer support.

Evaluation aims

The aims of the evaluation were to assess the impact of the peer support pilot on service users, peer support workers and the wider service system as well as assessing the process of implementation at national and local levels.

In-depth interviews, a satisfaction survey and a significant events analysis were used to track the process of implementation and the impact of the new peer support workers on the service teams and systems within which they worked. Qualitative data was analysed using a thematic analysis approach.

Impact on service users

The impact of peer support workers on service users has been on the whole positive, with peer support workers able to:

- Provide service users with hope of recovery and aspirations for the future at all stages of mental ill health and recovery.
- Act as a conduit between service users and clinical staff, providing both groups with further insight into each other's perspectives and enabling them to approach recovery using new strategies which are helpful to service users.
- Encourage service users to take more control of their own recovery through enabling activities and using Wellness Recovery Action Planning (WRAP).

Service users, on the whole, welcomed the option of working with a peer support worker at any stage of mental ill health and / or recovery. In a few cases, service users rejected the peer support worker's help.

Impact on peer support workers

The impact on peer support workers of taking on the role and the extent to which they are able to promote and maintain their own recovery was explored in detail. Peer support workers were faced with a number of challenges, such as:

- Adjusting to employment after many years of not working.
- Developing their role from scratch.
- Learning about their new working environment.
- Integrating with teams whilst challenging non-recovery focussed practice within those teams.

- Being confronted with service-user problems that reminded them of their own most difficult times.

Dealing with these challenges (with the support of supervisors) helped peer support workers to gain confidence and self esteem regarding their contribution towards helping others and influencing NHS culture. For many peer support workers this contributed to their going further in their own recovery journeys. Although some peer support workers became unwell during their period of employment, this was approached by them and their employers in a positive light, and peer support workers tended to make constructive use of their experiences of recovery, refreshing their knowledge.

Impact on the service system

A positive and considerable impact was made upon the service system and the service culture, values and practice in a short space of time.

Some difficulties were experienced, but overcome, in pilot sites regarding meeting Agenda for Change and Occupational Health requirements.

Although most peer support workers felt well prepared to take on the role of peer support worker, they felt that future training and induction processes should involve more preparation for working in settings such as the NHS, impact on benefits, management of aggression, risk assessment and influencing change.

Peer support workers have learned about the art of influencing change by trial and error and raised this as an important learning curve. Peer support workers seem to have been effective in breaking down barriers around the 'them and us' culture that still exists within many NHS services. Even those teams which are quite progressive in terms of their recovery approach have found that the peer support worker has helped them to be mindful of the principles of recovery and develop more effective strategies for applying this to their practice.

A conclusive finding was that peer support workers thrived and had positive impacts on service users and culture in a range of settings. However, it was essential that the service or team in which peer support workers are based must be open to and starting to implement a recovery-focussed approach to their practice.

Uniqueness of peer support

Many factors make the peer support worker approach distinctive and positive, the main one being the sharing of lived experience as a strength. Another key feature was peer support workers' ability to use their insight, empathy, and commitment to mutuality in their relationship with service users which has helped teams to overcome the 'them and us' relationship. This has the potential to support mental health services to be more effective in the service they offer. Peer support workers were viewed by many of their staff colleagues as a unique and essential part of the multi-disciplinary team.

Recommendations

The findings from the pilot indicate that the roll-out of peer support working across mental health services in Scotland, and beyond, would have a positive impact for service users and mental health teams. It will be important to develop a clear set of national guidelines for the effective implementation of peer support working within both statutory and voluntary services. The following factors should contribute to the effective implementation of peer support working leading to improvement in services.

Recruitment, preparation and set up

- Peer support can be based in any setting that is recovery-focussed in ethos, although more challenging settings such as acute inpatient wards might suit peer support workers with more experience and confidence.
- Partnerships between voluntary sector service providers and the NHS can work well in developing and providing a peer support service.
- To ensure continuity and maximum benefit for service users, peer support should be available in acute and rehabilitation inpatient and community-based teams.
- Opportunities to affect a more lasting impact on the service users are maximised when there is time for peer support workers to build good relationships with service users.
- Peer support workers should be treated the same as any other employee in relation to their employment terms and conditions.
- Standardisation of a core peer support worker job description that fits with 'Agenda for Change' requirements would assist efficient recruitment and fairer grading of jobs.
- The criteria required for peer support working, alongside a lived experience, should include good communication skills, positive attitude to recovery, and knowledge of a range of self-management strategies. Employers should be open about the potentially stressful nature of the peer support worker role and emphasise the importance of peer support worker applicants being at an appropriate stage in their recovery to handle the pressures involved.

- Guidance for Occupational Health professionals regarding raising awareness about the peer support worker role should be provided.
- Peer support workers should be formally trained on a course which covers preparation for return to employment, working in the NHS and influencing change.
- Staff on teams that will be introducing peer support should be given training on the peer support worker role and how it will fit in with their role as well as general awareness raising about the advantages and challenges associated with peer support.
- Clear guidance on patient confidentiality issues should be agreed within services and teams employing peer support workers and provided for all Peer Support Workers.
- A full and thorough induction should be offered to all new peer support workers and in-house training should be considered e.g. suicide prevention training, values and recovery-based training and management of aggression.

Integration to the team and organisation

- Strong support from senior service management and psychiatry should create the conditions necessary for a supportive and progressive working environment for peer support workers.
- Peer support workers should only be placed in supportive environments as a way to enhance, but not introduce, recovery.
- Teams should be clear about how the peer support worker role will fit in with their current practice and team working systems including information sharing, and where possible, operational policies should be reviewed to accommodate the peer support worker role.
- Documentation should be produced for referral processes, note keeping or writing inpatient user notes, to promote the service.
- Systems to manage information about peer support worker activity should be developed.
- Room should be left for the peer support worker and their team colleagues to develop the peer support worker role gradually but systematically.
- Opportunities should be provided for teams to discuss and review the potential and actual impact of peer support on team and individual working and practice prior to and following the introduction of peer support workers.
- Peer support workers must be fully involved in any team reviews following significant events e.g. suicide.
- Information materials (such as leaflets) about the nature of peer support, how it can be of help and how to access the service should be made available to service users with contact details of an individual(s) who can provide further information.
- Peer support workers require supervision and support in two main areas. They need support to help them maintain their recovery and wellness during employment as well as support from within their team to address the development of their role and any operational and employment issues.

Building in sustainability

- Sustainable and available training for peer support workers is required to ensure that new peer support workers can be employed. Until then, it is not expected that a rollout will be possible.
- Peer support workers absences from work could be viewed constructively by them, their employers and colleagues in that when an absence is due to mental health problems, the process of the peer support worker regaining their recovery can enhance the approach they take to drawing on their lived experience to support others.
- Employers will also need to build in strategies to provide cover for long term absences.

National support

The pilot helped to identify a number of ways in which national support for the roll-out of peer support working could be delivered including:

- A clearly identified national champion for peer support (the Scottish Recovery Network currently provides a national lead for peer support developments within Scotland and this role should be reinforced).
- National facilitation of networks / learning sets.
- Providing guidance that can be used by local employers to raise awareness of the peer support role within periphery services such as Occupational Health who will be less directly involved in the recruitment and employment of peer support workers but still play a crucial role.

Issues for further consideration

A number of issues remain unresolved including standardisation of job descriptions, pay scales, sharing information within multi-disciplinary teams, levels of responsibility and career development. The long-term objective of how peer support should feature within mental health service delivery in the future is also not clearly defined. Continuing the debates required to resolve these issues is important for ensuring the ongoing development of this innovative and important role for mental health services in Scotland.