

# Evolution of the Game: Empowering a Winning Team



**Knowing the Playbook: Ensuring the Integrity of the RSS Role**

Date: April 3, 2025

# CRSS/CPRS Supervisor Training Work Group



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Interested in helping? Email: [DHS.DMHRRecoveryServices@illinois.gov](mailto:DHS.DMHRRecoveryServices@illinois.gov)

# Thank you for joining today's training!

Date & Topic for Next Training:

July 10, 2025

10:00am – 11:00am

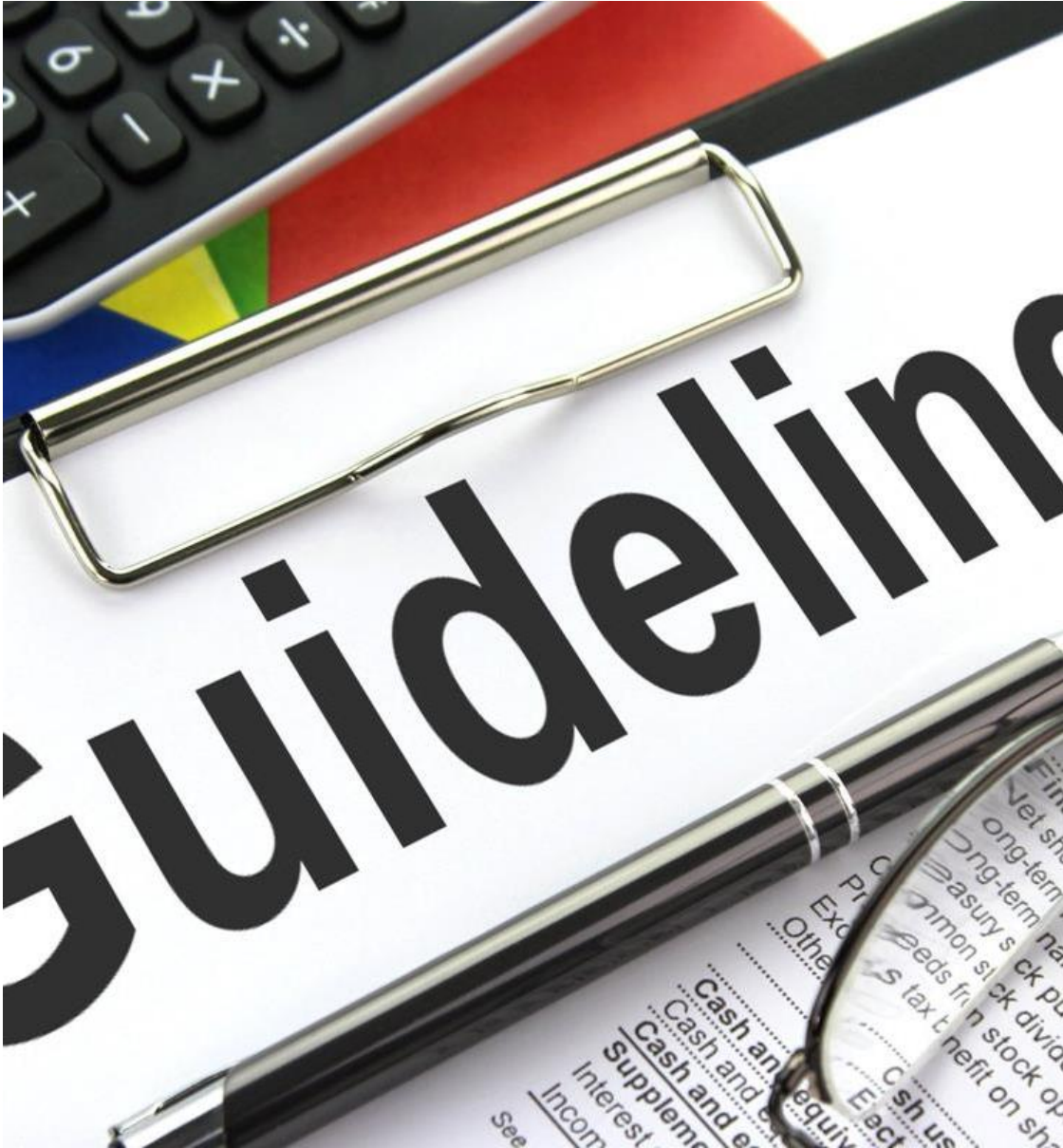
Reviewing the Playbook: Half  
Time (CRSS/CPRS Supervisor  
Q&A Session)

Email Your Feedback:

[DHS.DMHRRecoveryServices@illinois.gov](mailto:DHS.DMHRRecoveryServices@illinois.gov)

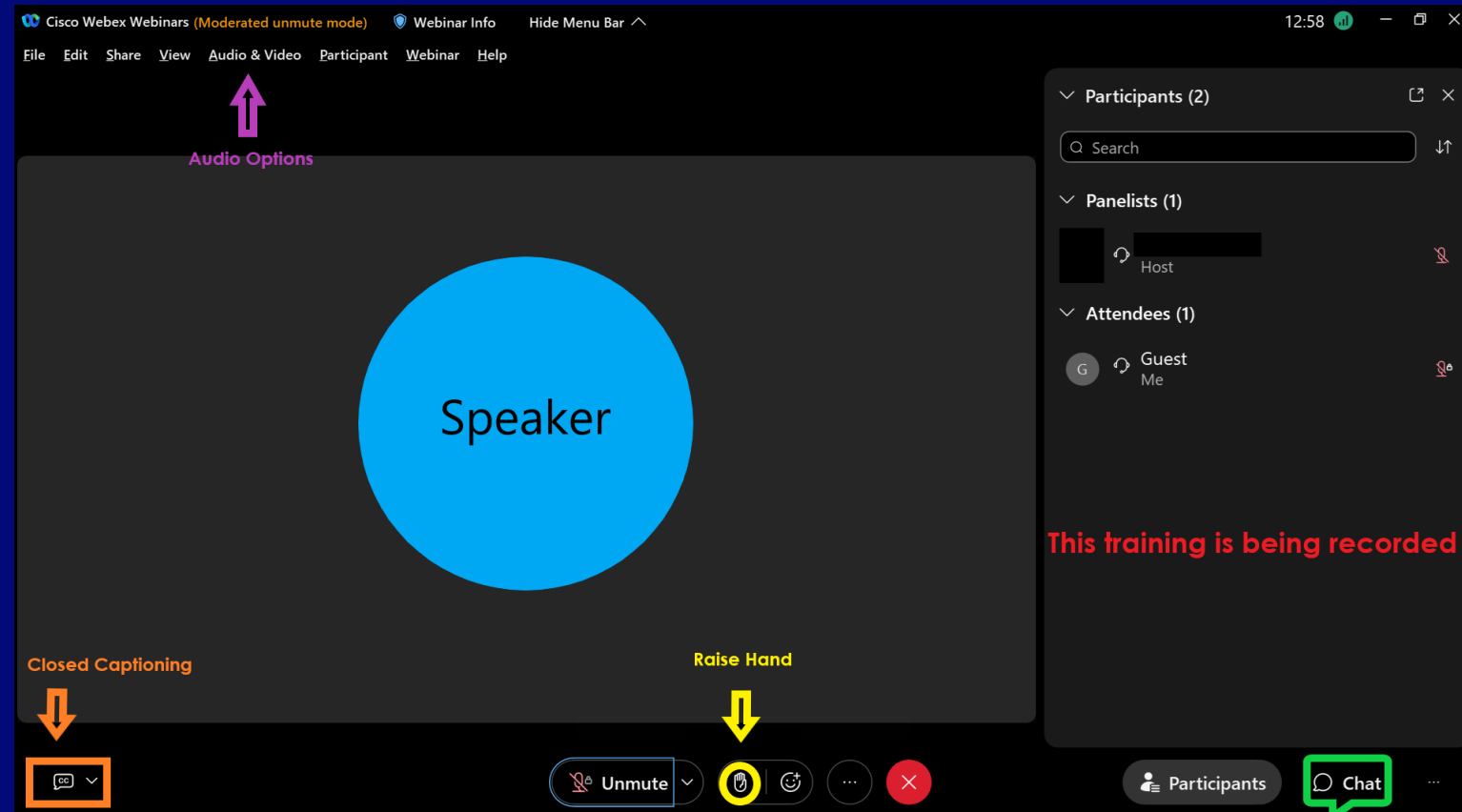




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- Keep an open mind about varying perspectives.
  - All speakers will use person-first language, referring to people as people not labels.
  - All acronyms will be spelled out and defined.

# Using WebEx

- **Recording:** Please note that we are recording today's webinar.
- **Raise Hand Feature:** You will find the raise hand feature at the bottom of the participant list.
- **Chat Box:** Towards the bottom of the box on the right of the Webex window.



**This training is being recorded**

# Meet the Presenters

- Ricardo Anderson, CRSS, IDHS-DMH
- Sean Johnson, CRSS-E, University of Illinois at Chicago
- Jacob Bradshaw, CRSS, Illinois Mental Health Collaborative



# Learning Objectives

**At the conclusion of this training, participants will be able to...**

1. Identify strategies to support staff in learning about the RSS role
2. Describe how RSS staff can become integrated as an equal part of a team
3. Explain how role drift can apply to RSS staff
4. Develop approaches to maintain the integrity of the role of RSS staff




# Community Speaker

- Jacob Bradshaw, CRSS

*Certified Recovery Support Specialist*

- Director of IL Warm Line- Illinois Mental Health Collaborative



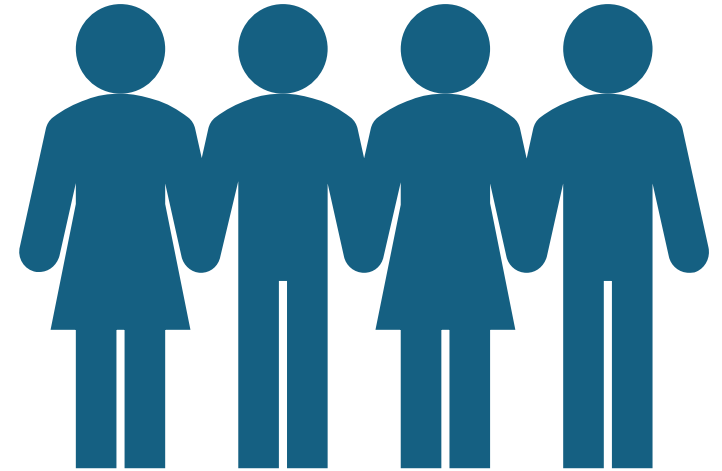


## **Strategies to support staff in learning about the RSS role**

- **Behavioral Health Peer Support Workforce Growth**
- **100,000+ Certified Peer Support Specialist**
- **Mental Health & Substance Use Services etc.**

# Strategies to support staff in learning about the RSS role

- The core competencies of peer support workers i.e., SAMHSA & NAPS.
- All staff are accountable employees of the agency.
- Review research articles about peer-delivered services and the RSS credentialing information ICB.
- Supervisor of Peer Workers Self-Assessment
- Share resources and continue opportunities to orient current staff.





# Ways to Integrate RSS professionals as an equal part of a team

- Clearly Define Roles and Responsibilities
  - Incorporate Recovery Principles into the Organizational Culture
  - Foster Collaboration and Team Integration
  - Provide Ongoing training and Professional Development
  - Promote Peer-Led Initiatives and Programs
-

# How Recovery Support Specialists Can Work With Other Team Members

Case managers collaborate with the individual to access community services in order for the individual and family to have their basic needs covered.

Therapists work with the individual to help identify very specific feelings, thoughts, behaviors, symptoms, and processes to assist them in processing these.

Recovery Support Specialists use their shared experiences to provide non-hierarchical support by helping individuals to identify and pursue their own recovery goals and strategies



# What is Role Drift & how does it happen?

- **What is it?**
  - Tendency for peer roles to drift away from their unique purpose
  - Can be from non-clinical to clinical, but not always
- **How does it happen to peer roles?**
  - Multiple reasons
    - Misunderstandings
    - Staff shortages
    - Social mirroring
  - Not just externally
    - Transforming lived *experiences* into lived *expertise*



# How can RSS professionals avoid Role Drift?

- Using their 3-part anchor:



**Lived experience:** *"Been there, done that."*

**Lived expertise:** *"Been there, learned that."*

# Reducing & redirecting peer role drift

- **Warning signs**

- Use of clinical or stigmatizing language (symptoms, diagnoses, etc.)
- Being assigned tasks outside of legitimate job duties
- Being left out of important meetings (or not speaking up)
- Pressuring participants to follow team recommendations

- **Might not even notice it until it has already happened – what then?**

- Quality peer-led training (not just for the peers!)
- Peers in leadership roles
- Transparency
- Recovery-oriented organizational culture
- Advocacy (self and otherwise)

# Reducing & redirecting peer role drift

- Encourage recovery support professionals to always look through their 'peer lenses'
- Adapting workplace culture to include *meaningful* peer involvement at all levels
- Stick to the Core Values (NAPS) and Competencies (SAMHSA) of Peer Support
- Make sure all staff know what is included in their roles and the roles of their teammates



# Reducing & redirecting peer role drift

## Encourage your recovery support professionals to:

- Support the voice of the person receiving services
  - Advocacy for and with; choices and options
- Focus on strengths, opportunities, and skills
  - Rather than illness-focused or problem-focused services
- Use the language of experience
  - Rather than clinical language
- Use personal experience as our main tool
  - We have other skills and knowledge, but our lived expertise should be our focus



# **What's your WHY?**

- Encourage RSS staff to regularly ask themselves:
  - What's the driving factor behind what you do?
  - What led you to where you are?

# References & Further Resources

- *Peer Drift*. Hedges, Tenda. © Peer Power LLC (2024)
- Drift from Peer Support Values and Standards: A Position Statement and Call for Action
- *Supporting Peer Support Workers and Their Supervisors: Cluster-Randomized Trial Evaluating a Systems-Level Intervention*, Brown, L. D., et al (2024), *Psychiatric Services*, Vol. 75, Issue 6 (pp 513-612).
- *Competing allegiance in an unclear role: Peer and non-peer understanding of peer support in Massachusetts, United States*, Adams, W. E., et al (2023), *SSM-Mental Health*, Vol. 4, 100245
- "What Makes a Peer Role a Peer?" Wildflower Alliance (May 2013)
- "Peer Support within Criminal Justice Settings: The Role of Forensic Peer Specialists" The CMHS National GAINS Center (May 2008)

# References & Further Resources

## **National Overview of the United States Certified Peer**

**Specialist Workforce:** <https://www.center4healthandsdc.org/map-of-national-peer-training-programs.html>

## **National Overview of the United States Certified Peer Specialist**

**Workforce:** <https://www.peersupportworks.org/wp-content/uploads/2021/07/National-Practice-Guidelines-for-Peer-Specialists-and-Supervisors-1.pdf>

## **The City of Philadelphia Department of Behavioral Health and Intellectual disAbility Services**

**PEER SUPPORT Toolkit:** <https://dbhids.org/wp-content/uploads/2024/02/PSToolkit-2023.pdf>

## **SAMHSA's Core Competencies for Peer Workers**

**in Behavioral Health Services:** [https://www.samhsa.gov/sites/default/files/programs\\_campaigns/brss\\_tacs/core-competencies\\_508\\_12\\_13\\_18.pdf](https://www.samhsa.gov/sites/default/files/programs_campaigns/brss_tacs/core-competencies_508_12_13_18.pdf)

## **BRSS Tasc Bringing Recovery Supports to Scale Technical Assistance Center Strategy, Supervisor of Peer Workers Self-**

**Assessment:** [https://www.samhsa.gov/sites/default/files/programs\\_campaigns/brss\\_tacs/guidelines-peer-supervision-2-self-assessment-cp9.pdf#:~:text=Tis%20Supervisor%20of%20Peer%20Workers%20Self%2DAssessment%20is,about%20strategies%20for%20learning%20the%20needed%20competencies.](https://www.samhsa.gov/sites/default/files/programs_campaigns/brss_tacs/guidelines-peer-supervision-2-self-assessment-cp9.pdf#:~:text=Tis%20Supervisor%20of%20Peer%20Workers%20Self%2DAssessment%20is,about%20strategies%20for%20learning%20the%20needed%20competencies.)



# More information

Illinois Certification Board:  
[www.iaodapca.org](http://www.iaodapca.org)



- Tanya Cooley
- Christina Ancira
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- Sharon Grant
- Mark Williams
- Nicolette Rivera
- Jane Lindsey

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# Guidelines for Questions and Comments

- Use Person-First Language
- If you use an acronym, please let the audience know what it stands for
- Keep an open mind about varying perspectives
- Questions and Comments Will Be Relevant to Today's Topic



# Guidelines continued

- Use raise hand feature
- One question or comment per person, no more than two minutes each.
- Conclude with “thank you”





# Q & A Session

- Use raise hand feature to ask a question or make a comment.
- Wait to be called on and your line unmuted
- Use the hand feature again to lower your hand



*Thank You!*



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