

HOW GOOD IS GOOD?

Rubric in Action

**A Workbook for
Evidencing the
Quality of Peer
Support in
Aotearoa New
Zealand**



Whakatauki

Toka Tū is the name chosen for this project and comes from the whakatauki:

Ahakoā akina a tai, akina a hau, he toka tū toka ahuru tatou

Although the tides and winds may come crashing down upon us, like a rock we stand resilient and comfortable in the face of adversity.

Logo



The 'mango pare' part of the design represents the resilient rock or 'Toka Tū' while the koru on either side of the mango pare represents the tide and winds which crash upon the rock day in and day out.

The logo was designed by Henare Brooking, of Ngati Porou and Rongowhakaata descent. Henare was taught his skills by renowned master carver and tohunga ta moko Mark Kopua, which has enabled Henare to open his own ta moko business, Mokoira, in Lower Hutt.

This project was funded through the Lotteries Community Sector Research Fund

communitymatters.govt.nz



About Kites Trust

Kites Trust strives for equal citizenship for people who experience distress. We seek out opportunities to ensure people who experience mental health and/or addiction problems have equal opportunities to live, work and participate in the community. As the name Kites denotes, the aim of our organisation is to try new ways of doing things and ‘to make ideas fly’.

Our belief is that consumer leadership is the key mechanism to achieving social inclusion. For the past three years we have placed emphasis on seeking and promoting innovative solutions and fit for purpose services that are useful to people during times of distress.

Toka Tū Project

Research and evaluation is necessary to ensure peer support services continue to grow and develop as an effective response to people who are experiencing mental health and addiction problems. Many peer support services in Aotearoa New Zealand tend to be delivered by small non- government organisations (NGOs), on limited budgets which limits the capacity and capability to currently undertake research and evaluation.

Since 2011 and with the support of a Lotteries Social Sector Research Grant, Kites Trust has embarked on a project alongside 10 NGO peer support services from around New Zealand Aotearoa to answer the following questions;

1. What are the resources and procedures that will support peer support services to initiate and undertake ongoing evaluation and
2. What outcomes are supported by peer support services?

Acknowledgments

Toka Tū leadership group members and the organisations they work for:

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Shomilla Sidal	Wellink Division, Richmond
Gary Platz	Wellink Division, Richmond
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Jacinta Waitaiki	Te Waka Whaiora, previously known as Te Roopu Pookai Taaniwhaniwha
Vicky Hall	Junction
Paul Te Huna	MIST
Brian McKillop	Walsh Trust
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Chris Hocken	Journeys to Wellbeing
Eris Newson	Journeys to Wellbeing
Marilyn Kelland	Journeys to Wellbeing
Egan Bidios	Oasis Network (withdrew 2013)

Expert advisors to the Toka Tū project

Kate McKegg
Debbie Goodwin
Dr. Sarah Gordon
Dr. Debbie Petersen

Peer Review

mind&body
CONSULTANTS

395A Manukau Road, Epsom
Postal: PO Box 26396, Epsom,
Auckland 1344
admin@mindandbody.co.nz
09 630 5909

The workbook has drawn on the work of

Dr. Anne Scott

Shery Mead

Sunderland, Kim, Mishkin, Wendy, Peer Leadership group, Mental Health Commission of Canada (2013). *Guidelines for the Practice and Training of Peer Support*. Calgary, AB: Mental Health Commission of Canada.
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Were we
good enough?

Did we do a great
job?

Introduction

Evaluation and evaluative thinking is systemic reflection about things of importance and value, for example, how well a peer support programme is doing, what value it is to various stakeholders, and if it is worth doing more of.

Evaluative thinking and practice requires understanding what quality and value mean for the stakeholders.

This workbook has been designed by leaders of mental health and addiction peer support services¹ in Aotearoa New Zealand. It recognises the unique features of peer support which are highly valued by this group and the criteria used are based on their knowledge of best practice peer support and their values of what constitutes quality peer support.

The workbook is designed as a resource for organisations who deliver formalised peer support services. Formalised refers to peer support programmes that tend to be delivered within structured settings, are intentional and incorporate critical aspects of peer support philosophy into their practice.

¹ Toka Tū leadership Group members

Defining Peer Support

Peer support is defined, for this project as, organised support based on shared experience of emotional and/or psychological pain.

Peer support is a system of giving and receiving help founded on key principles of respect, shared responsibility, and mutual agreement of what is helpful.

The peer relationship is purposeful, non-judgmental, strengths based and recovery focused.

The connections and trusting relationships that are formed lead to hope and movement toward achieving goals and dreams.

Shery Mead adapted by Toka Tū Leadership Group.

This is a working document that will change as our knowledge grows. We acknowledge that peer support delivery is influenced by a range of models and frameworks. This workbook is strongly influenced by the Intentional Peer Support Model².

² <http://www.intentionalpeersupport.org/>

It's all about values

On what basis will we decide or demonstrate to others that something we are doing is high quality, valuable, worth doing, or important to pursue?

And on what basis will we determine 'how good is good'?

It is **values** that we look to help us make these judgements. Whenever we remark or comment on how good something was, or how well someone did something, we are drawing on our values to make **evaluative judgments** about the **quality** and **value** of things.

Evaluative thinking and practice requires getting to the heart of what quality and value mean for us, about the outcomes that matter, and the processes that contribute to these outcomes. It allows us to reflect and incorporate these 'values' in the criteria that is used to judge how 'good' our services are, and our 'good' our outcomes are.

Evaluative rubrics are an explicit way of defining "quality" and "value" for ourselves and for others. The rubric used in this work-book has been developed by the leadership group for the Toka Tū project and is made to be used by others.

Why do this?

- An opportunity to take a fresh look at our peer support service based on quality criteria which have been determined by peer support workers
- A chance to improve the way we do things
- A way to assess the quality of our service
- A means of accountability
- To learn which resources and processes are required for NGO peer support services to undertake and build evaluative enquiry.

What is Evidence?

The workbook is designed to be a conversation starter, a means to begin to reflect on our services.

As you progress through this workbook, ask “what is our evidence and how do we know?”

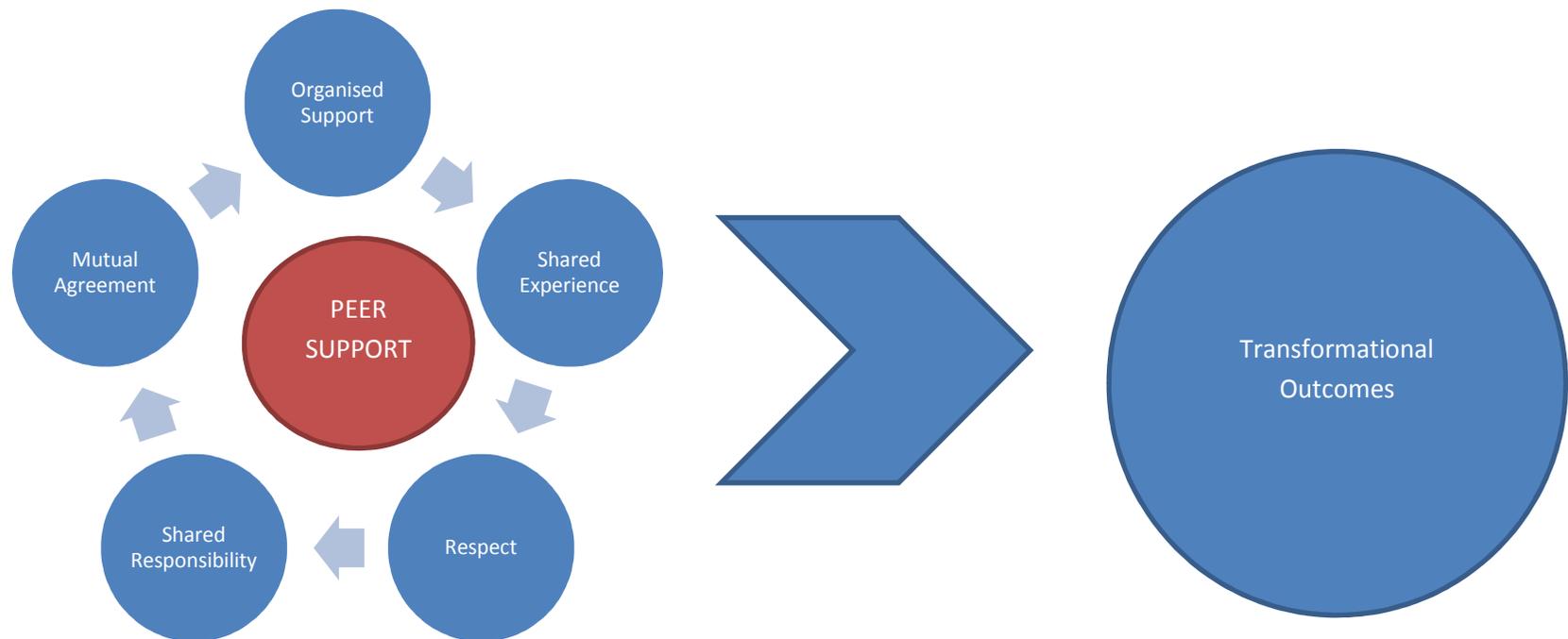
You may draw on many forms of evidence, for example, documents, observations, interviews and survey results. Consider if the evidence is recent, reliable and able to be collaborated. You may be provoked to seek further evidence, for example, asking peers and other stakeholders using the service what they think.

The idea is to think about your service “overall” therefore generalisations will be required. We suggest you aggregate up.

Examples have been provided to stimulate thinking, they are not definitive and you may have other examples. The rubric is a stepped approach and you are encouraged to work left to right through the rubrics.

Evaluative Criteria-what aspects of peer support service delivery are important?

The rubric has been designed to cover the following areas of focus (quality criteria as outlined in blue), which are then explained in more detail (sub-criteria) on the following pages:



Criteria 1 Organised Support

1a Professional Development: This refers to the support offered to peer support workers to ensure they are well orientated to the principles and philosophies of peer support practice and to ensure they are developing the skills, attitudes and ways of working that align with peer support. This may include but is not limited to training in peer support models such as Intentional Peer Support (IPS), trauma informed care, or to achieve qualifications and certification in peer support and peer supervision.

1b Understanding and promoting the peer support service: This is particularly focused on organisations which may not be consumer led and may be offering peer support alongside mainstream services. This refers to the level of understanding and competence throughout the organisation about peer support, and its benefits. The aim is for the organisation to be demonstrating a commitment to growing and developing the peer support service.

1c Supervision: Supervision supports and enables development and understanding of practice. This refers to mechanisms that have/will be put in place for peer support workers to both receive and provide supervision.

1d Culture of Enquiry: This refers to the organisation acknowledging the value of learning and developing that can come from a culture of enquiry and reflection.

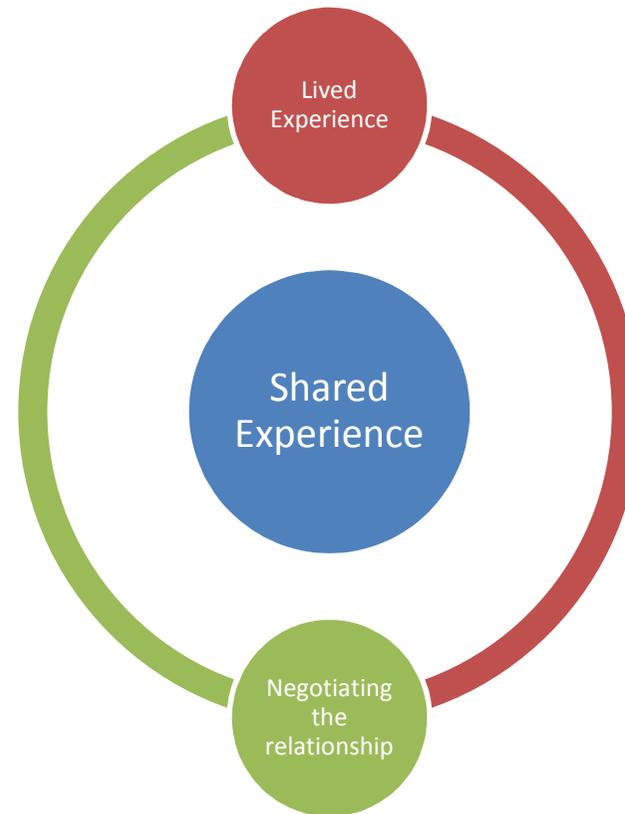
2e Resourced: This refers to the organisations ability to plan and respond to ensure the ongoing sustainability of the service in the longer term.



Criteria 2 Shared experience

2a Lived experience of mental distress and/ or addictions: It is a fundamental requirement of peer support services for peer support workers to have lived experience of mental distress and addictions as well as working toward recovery. Whilst it is acknowledged recovery is an evolving and changing process, the peer support worker would demonstrate hope (for self and others), have self-awareness to enable them to take care of themselves and believe recovery is possible.

2b Negotiating the relationship: This links into the earlier criteria of lived experience and is part of recovery. It refers to the mechanisms in place that encourage peer support workers to be aware of their own well-being and acknowledge when to take steps to look after themselves to avoid ill-health.



Criteria 3 Respect

3a Diversity: This refers to how the organisation ensures all people are treated respectfully and equally. It also seeks to ensure others perspectives and world views are recognised and understood and may include ethnicity, age, gender, history and social status.

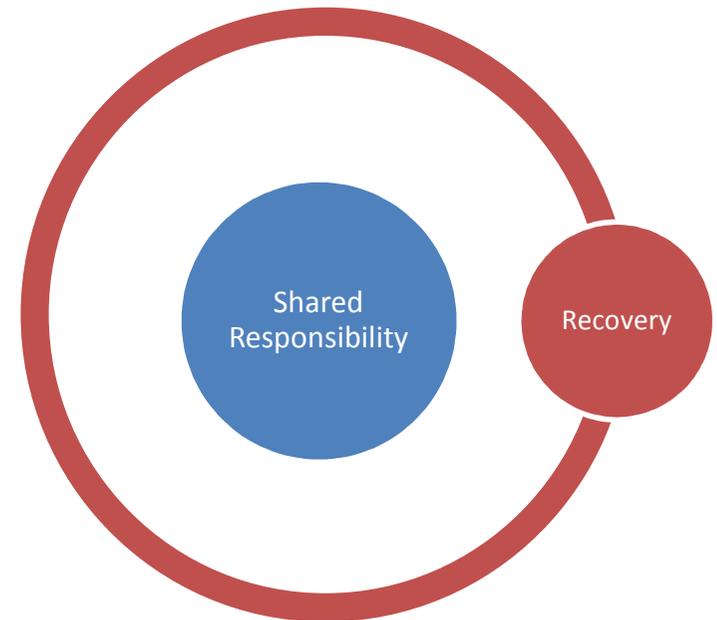
3b Trust: Trust is a key component to enabling peers to feel safe enough within the peer relationship to explore change. This requires considering how the organisation supports peer support workers and peers to acknowledge and develop trusting relationships.

3c Ethics: Ethics provide the code of behaviour to guide peer support workers to develop safe, trusting and effective relationships with peers. Organisations may have an overall code of ethics as well as those specific to the peer support relationship.



Criteria 4 Shared responsibility

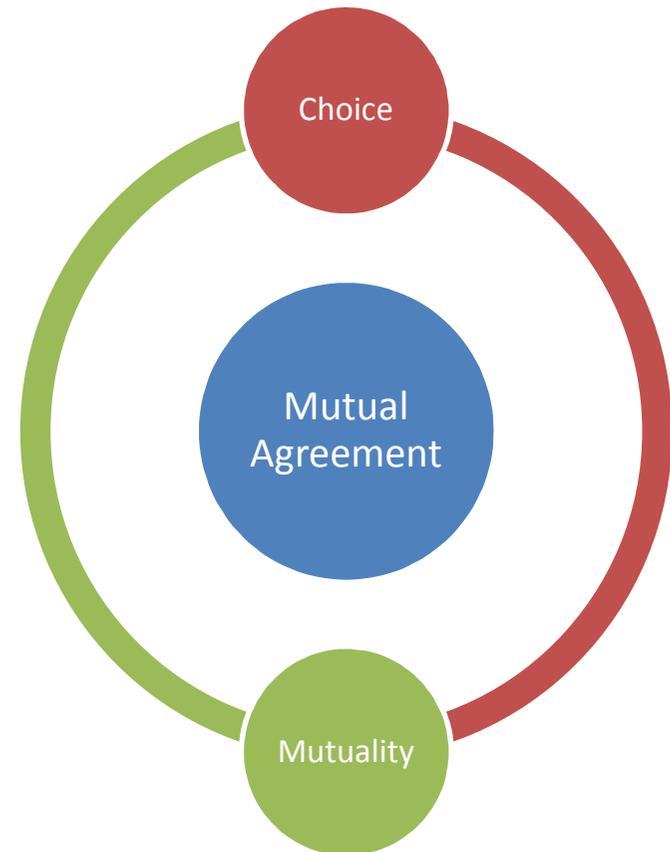
4a Recovery: This refers to the aim of peers recovering a quality of life and meeting their full potential. It acknowledges experiential learning, regaining power and control and taking responsibility for self.



Criteria 5 Mutual Agreement

5a Choice: This refers to how the organisation enables peers to be self-determining. Peer support adheres to values of self-determination therefore participation in peer support is voluntary and does not involve force or coercion. This also extends to the peer support relationships and the ability of peers to explore options and make choices which may differ from those of the peer support worker.

5b Mutuality: A core principle of intentional peer support, which refers to the opportunities for both the peer support worker and peer to benefit, acknowledging that within the relationship each person can share and learn. This is a move away from clinical interventions that promote ways of working where the clinician is the expert in a position of power over the person who is 'helped'.

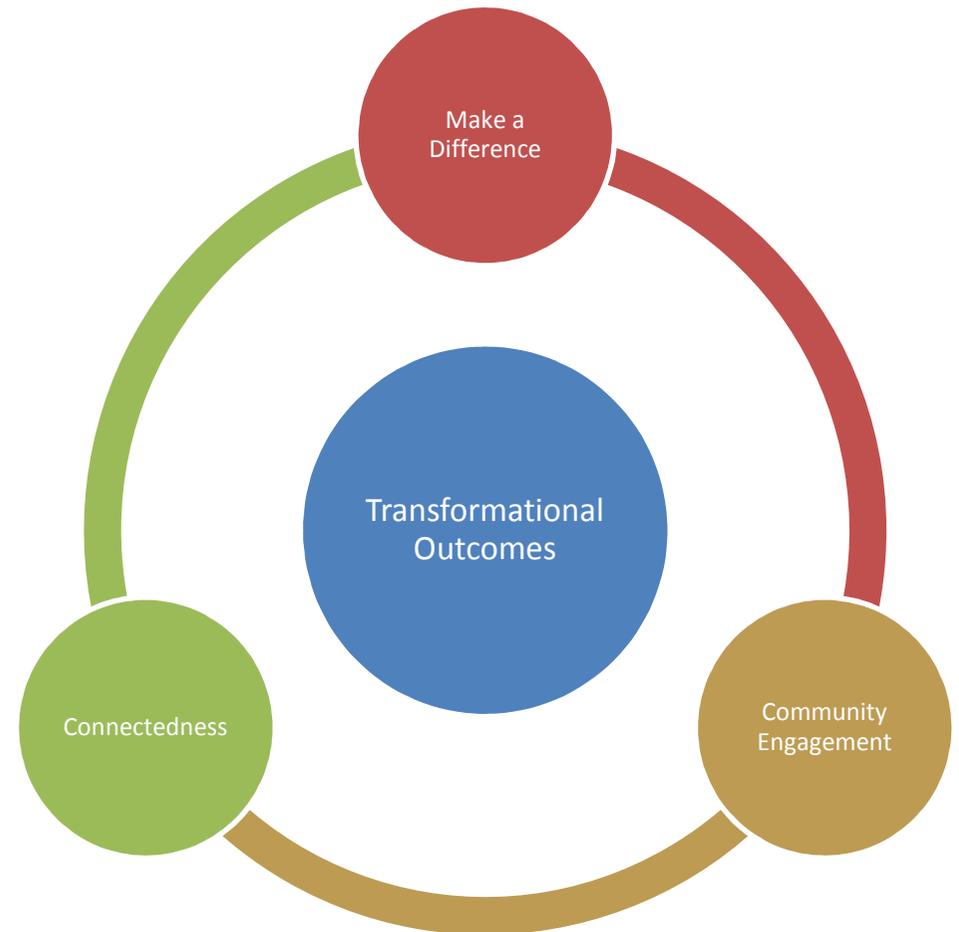


Criteria 6 Transformational Outcomes

6a Make a difference: This refers to the intent and expectations the peer support service holds for the people it exists for and how it supports peers to achieve their valued outcomes. Peer support is about focusing on strengths rather than deficits and not seeing people as problems that need to be fixed.

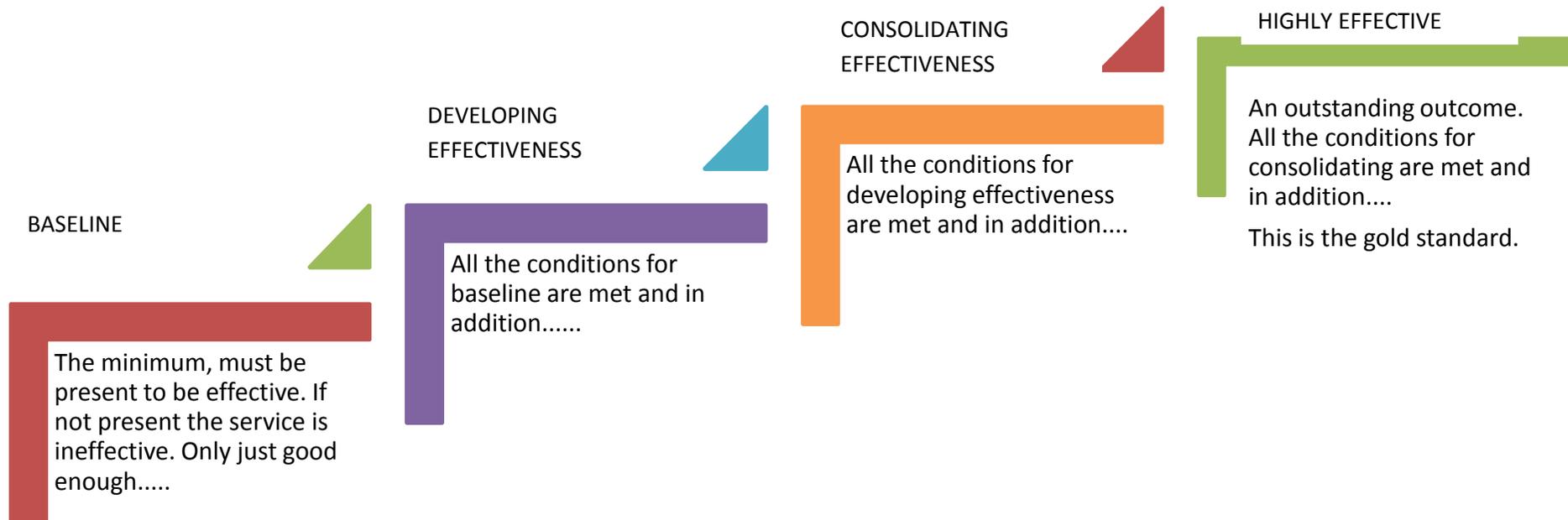
6b Community Engagement: This refers to how the organisation sees and supports peers in the context of being or becoming a contributing member of their community.

6c Connectedness: This refers to the way in which the organisation recognises and supports the disconnect peers may experience when experiencing distress.



Determining Merit- how good is “good”?

This stepped approach demonstrates what would be expected to be seen if a service is minimally effective (baseline) through to highly effective (the gold standard). To progress through this stepped approach the previous step needs to be met.



Using this Work-Book

For each quality criteria, sub-criteria have been identified which are then presented in the individual rubrics.

It is proposed that as an organisation you;

- choose which criteria and sub-criteria are relevant
- complete a self-assessment by completing the assessment worksheets (at the back of the document)
- develop an action plan identifying what you will now do to improve the quality of your service

A summary chart is included to provide an overall picture of how you are doing against each individual rubric

It is useful to record any evidence as to why you made the rating.

Criteria 1- Organised support

1a Professional Development

HIGHLY EFFECTIVE

CONSOLIDATING
EFFECTIVENESS

DEVELOPING
EFFECTIVENESS

BASELINE

All peer staff and volunteers have completed comprehensive peer support training and demonstrate a range of skills and attitudes for effective peer support practice.

Training is available for peers to become trained supervisors

There is regular, on-going peer support training and development for peer support work staff. Working toward competency

There is some peer support training available for peer support workers

All staff who are peer support workers including volunteers, have received an orientation to peer support

Only just good enough.....

Examples may include: induction to the ethos of the service, nature of peer support and current workers

Examples may include:

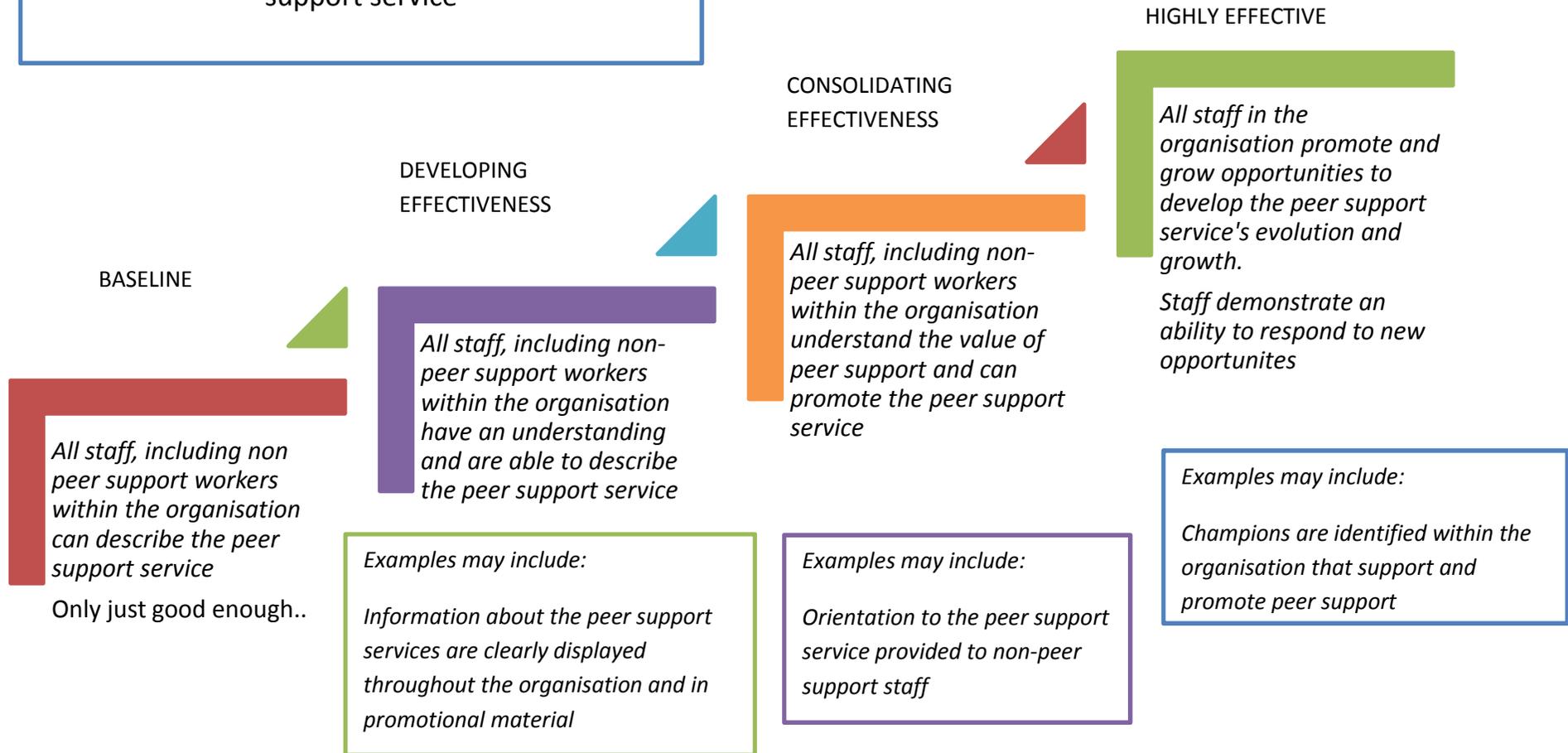
Training incorporates key themes such as recovery, code of conduct, ethical issues, peer relationships and boundaries, recovery language, active listening skills

Examples may include: Staff gain Peer support worker certification, For example, NZQA Level 4 certificate in peer support

Intentional Peer Support and/or peer supervisor training

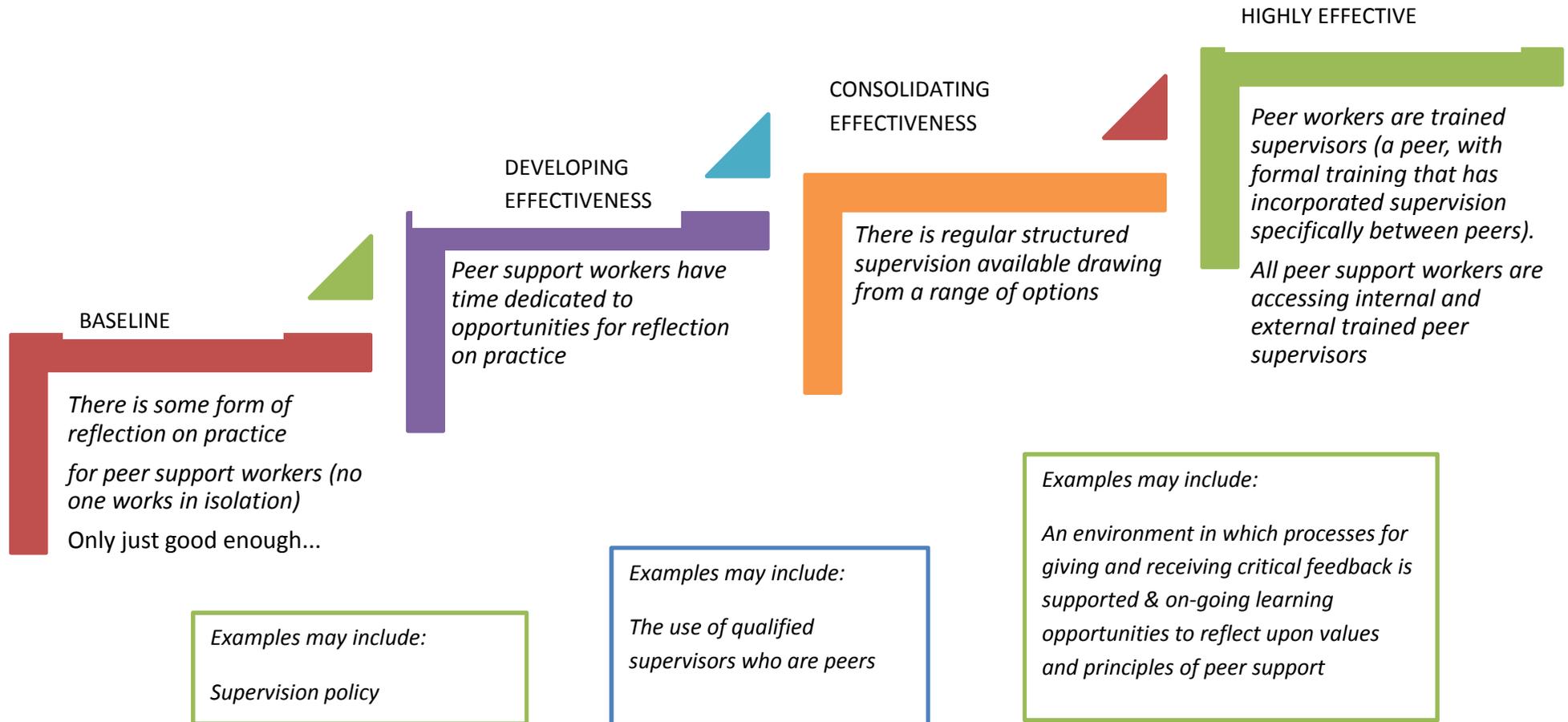
Criteria 1- Organised support

1b Understanding and promoting the peer support service



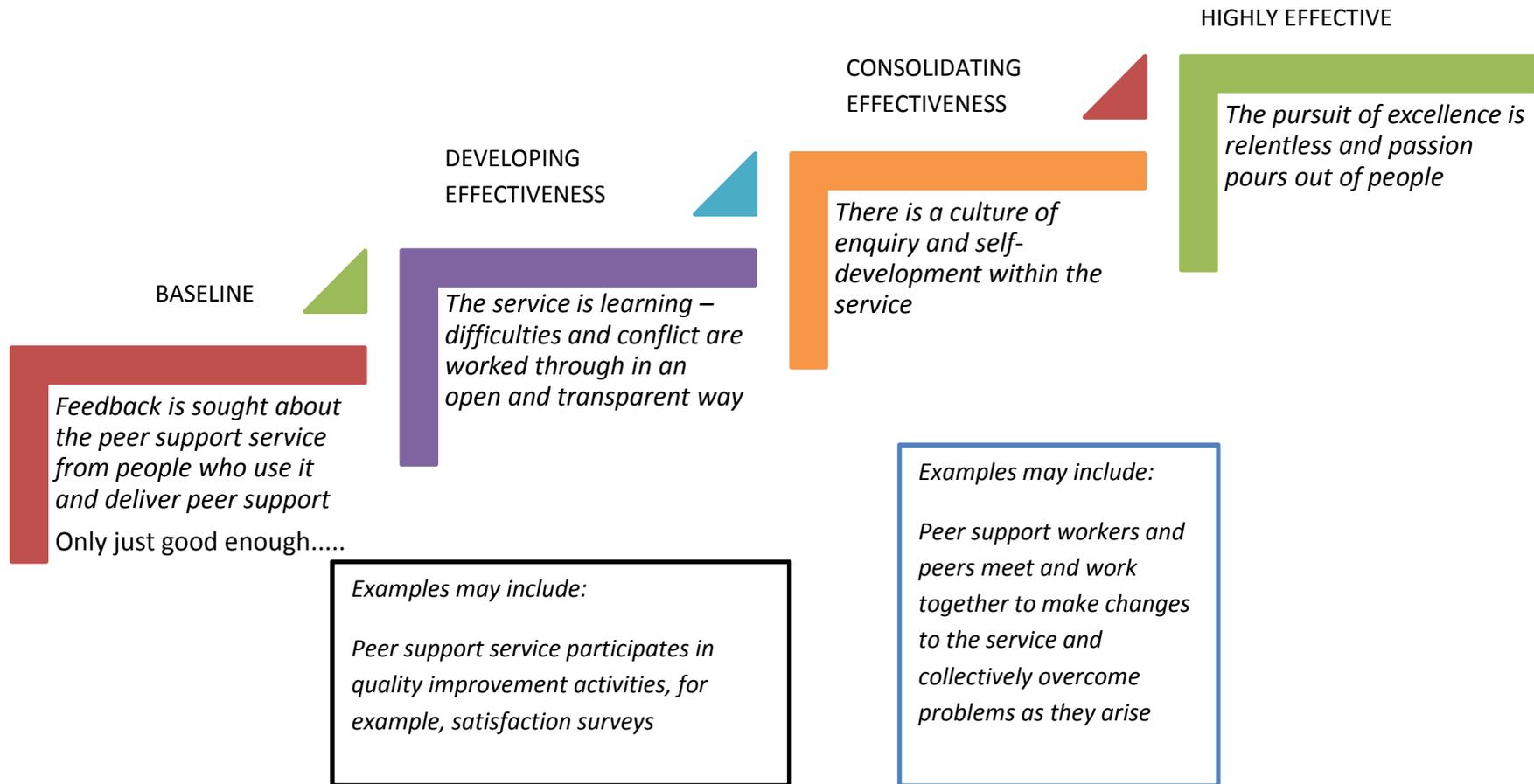
Criteria 1- Organised support

1c Supervision

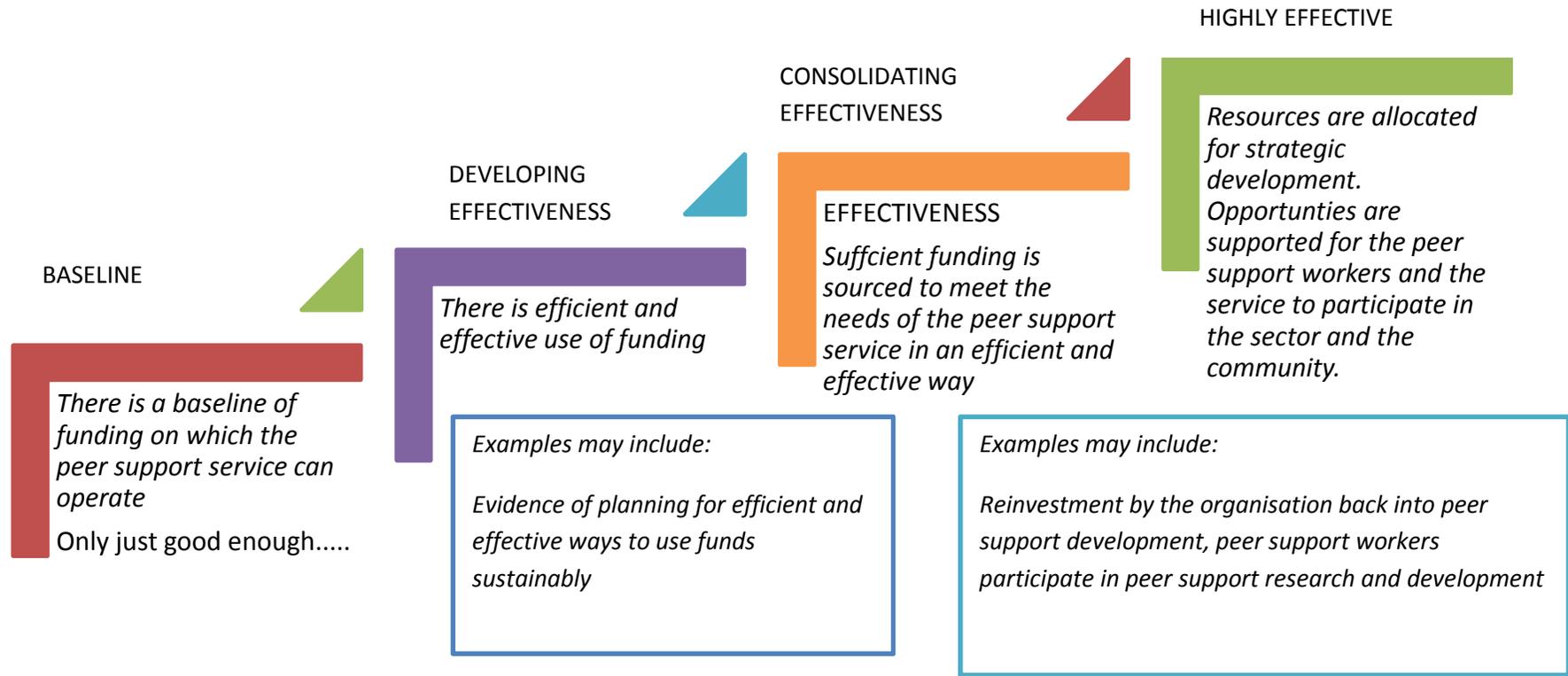


Criteria 1- Organised support

1d Culture of Enquiry

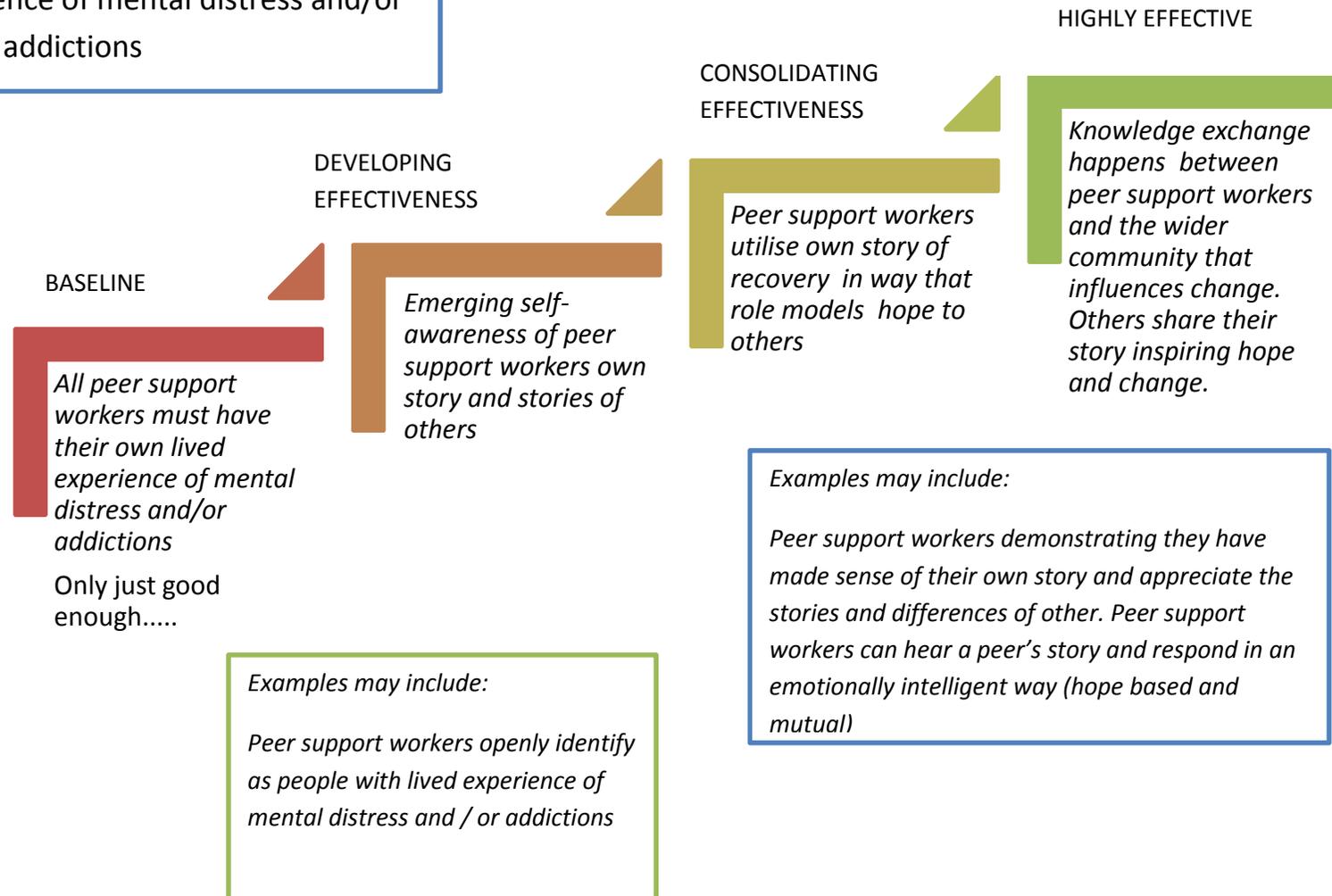


Criteria 1- Organised support
1e Resourced

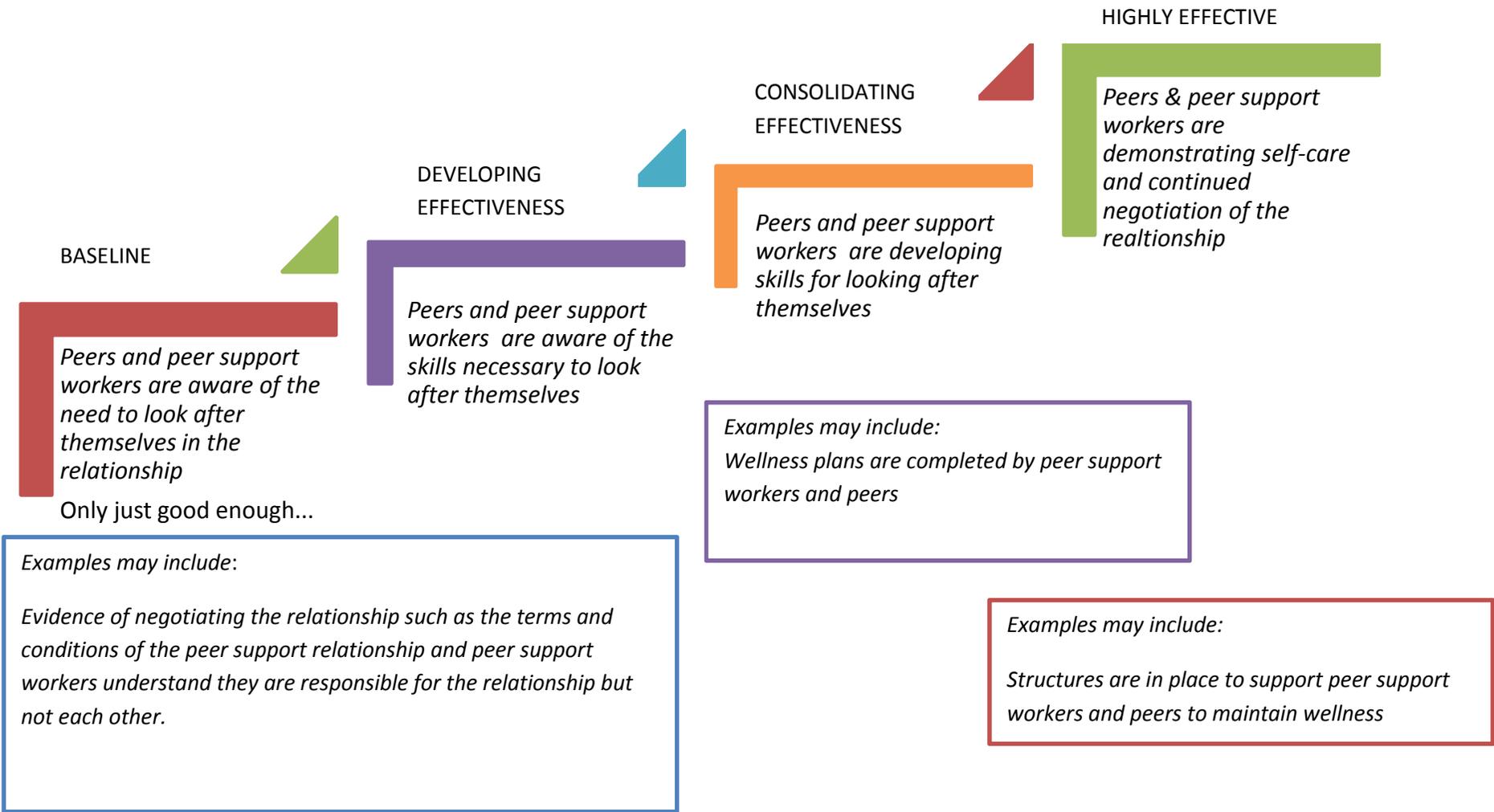


Criteria 2 Shared Experience

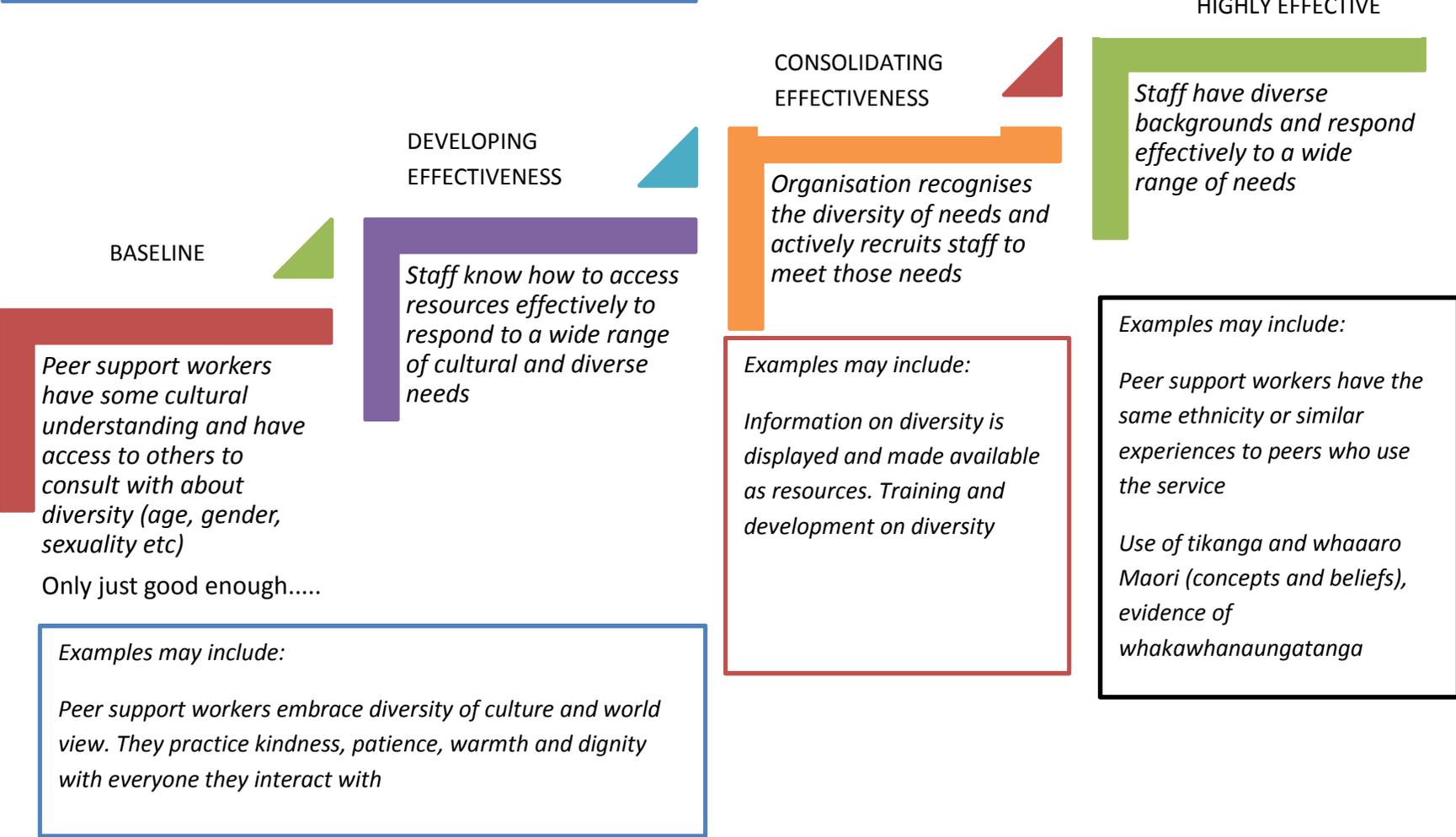
2a Lived Experience of mental distress and/or addictions



Criteria 2 Shared experience
2b Negotiating the relationship



Criteria 3 Respect 3a Diversity



Criteria 3 Respect

3b Trust

HIGHLY EFFECTIVE

CONSOLIDATING
EFFECTIVENESS

DEVELOPING
EFFECTIVENESS

BASELINE

*There is a degree of safety
and trust to engage in the
peer relationship*

Only just good enough.....

*Trust and security in the
peer relationship is
developing*

*The relationship is safe
enough to explore change
and sit with discomfort and
vulnerability*

*Trusting and secure peer
relationships, resilient to
mutual change.*

*Peers and peer support
workers gain "learned
wisdom" from one another*

Examples may include:

*Peer support workers practice building connections,
direct and honest communication and listening
from a position of "not knowing"*

Examples may include:

*Peer support workers sit comfortably with silence, share
relevant personal change stories and negotiate reality*

NOTE

It is acknowledged trust is part of a continuum therefore trust will vary from peer to peer. We suggest this criteria is viewed in the context of a continuum

Criteria 3 Respect 3c Ethics

BASELINE

Guiding principles and values of the peer support relationships are in place
Only just good enough.....

DEVELOPING EFFECTIVENESS

A code of practice is in place, understood and implemented

Examples may include:
Ethics are discussed at team meetings and in supervision

CONSOLIDATING EFFECTIVENESS

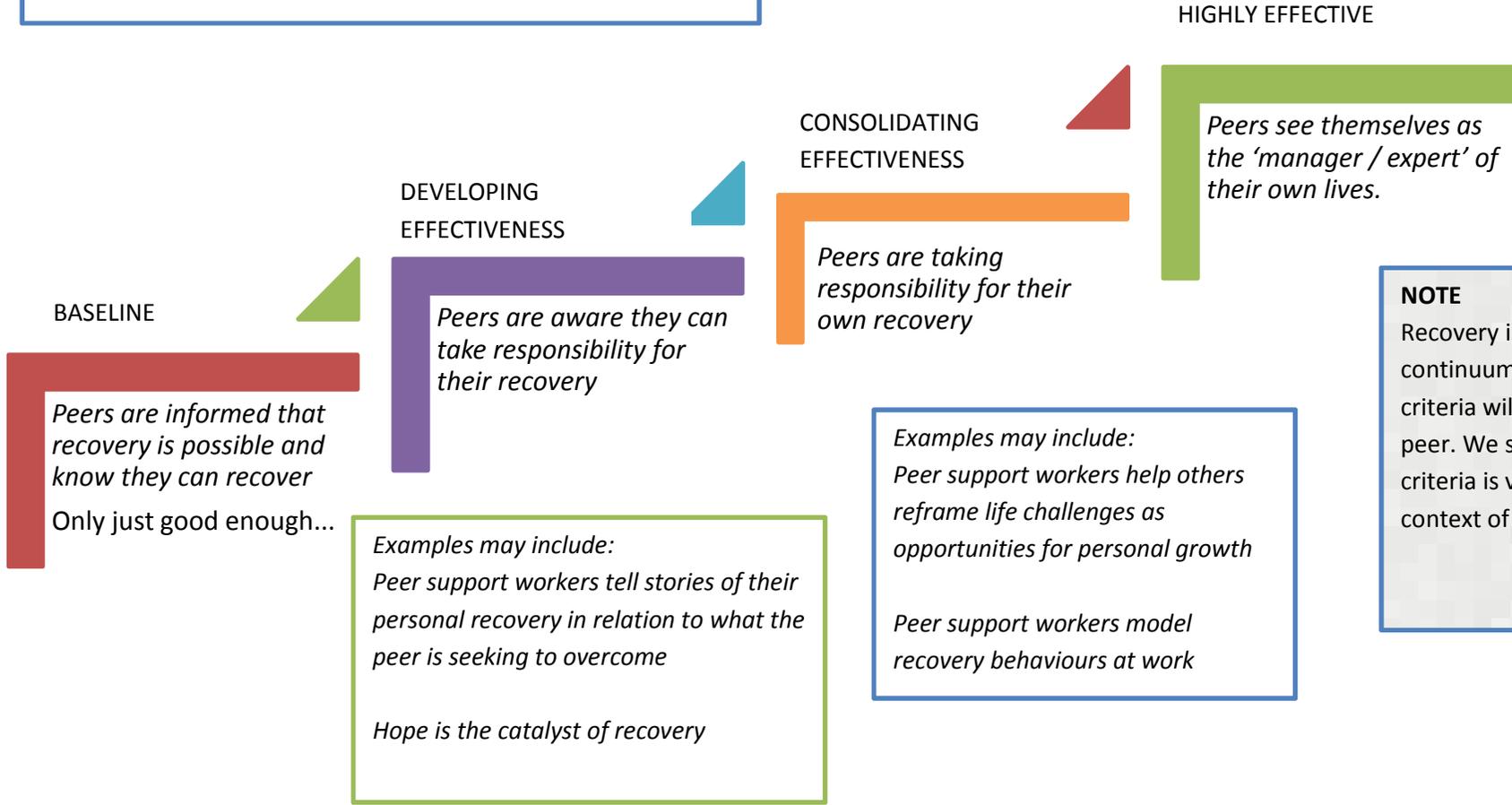
Practice is reflected upon in relationship to the code of ethics

Examples may include:
Peer support workers are trained in ethics.

HIGHLY EFFECTIVE

Ethics are openly and routinely discussed and considered.

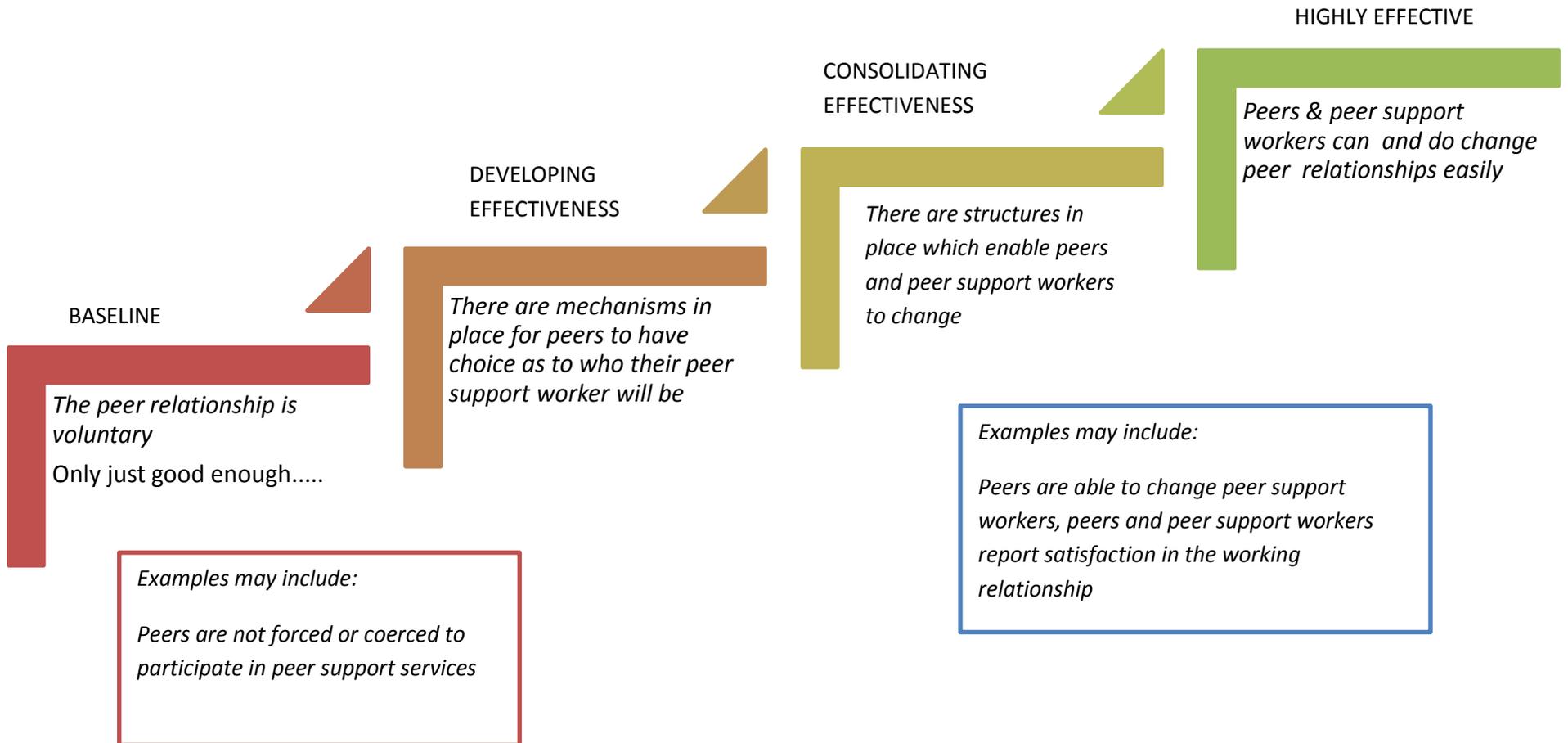
Criteria 4 Recovery
4a Shared responsibility



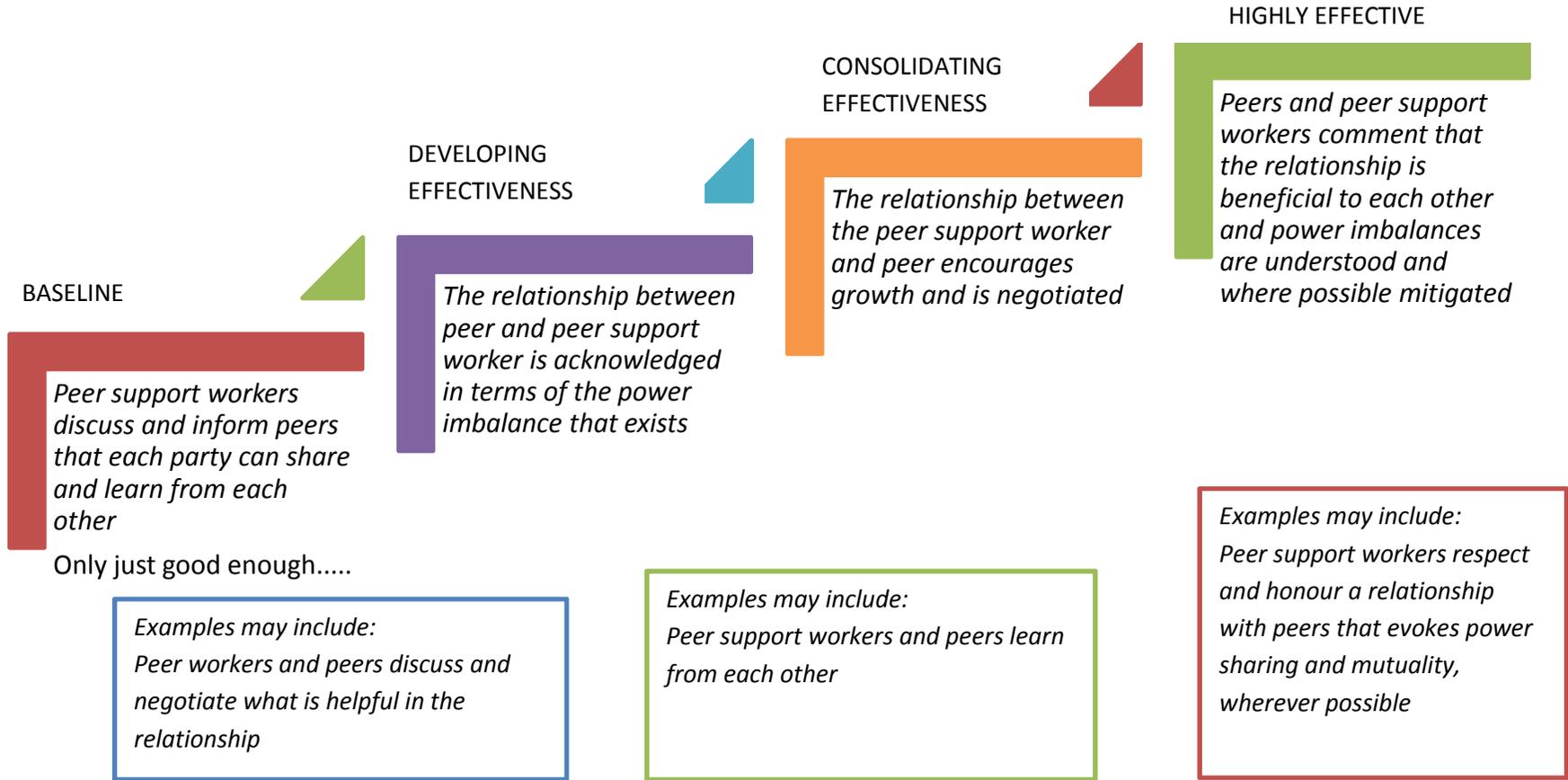
NOTE
Recovery is part of a continuum therefore these criteria will vary peer to peer. We suggest this criteria is viewed in the context of a continuum

Criteria 5 Mutual Agreement

5a Choice

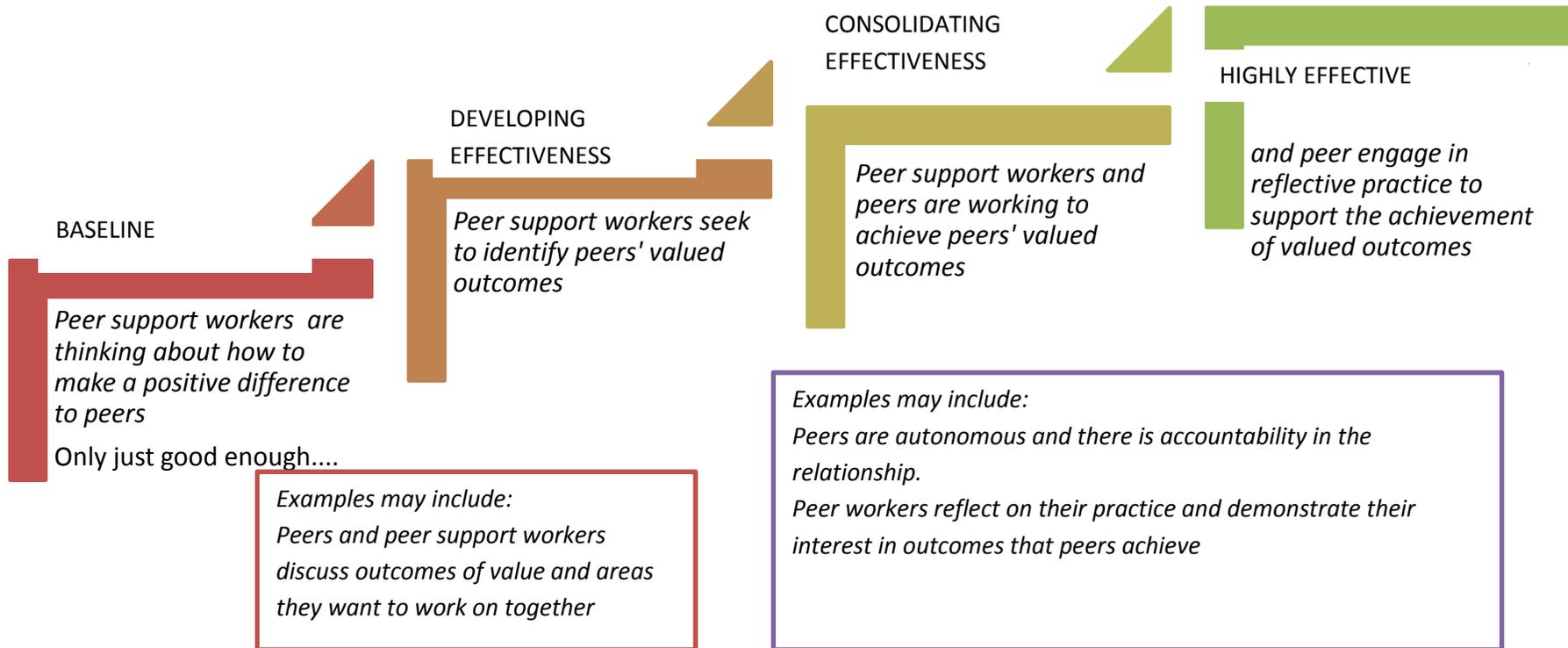


Criteria 5 Mutual Agreement
5b Mutuality



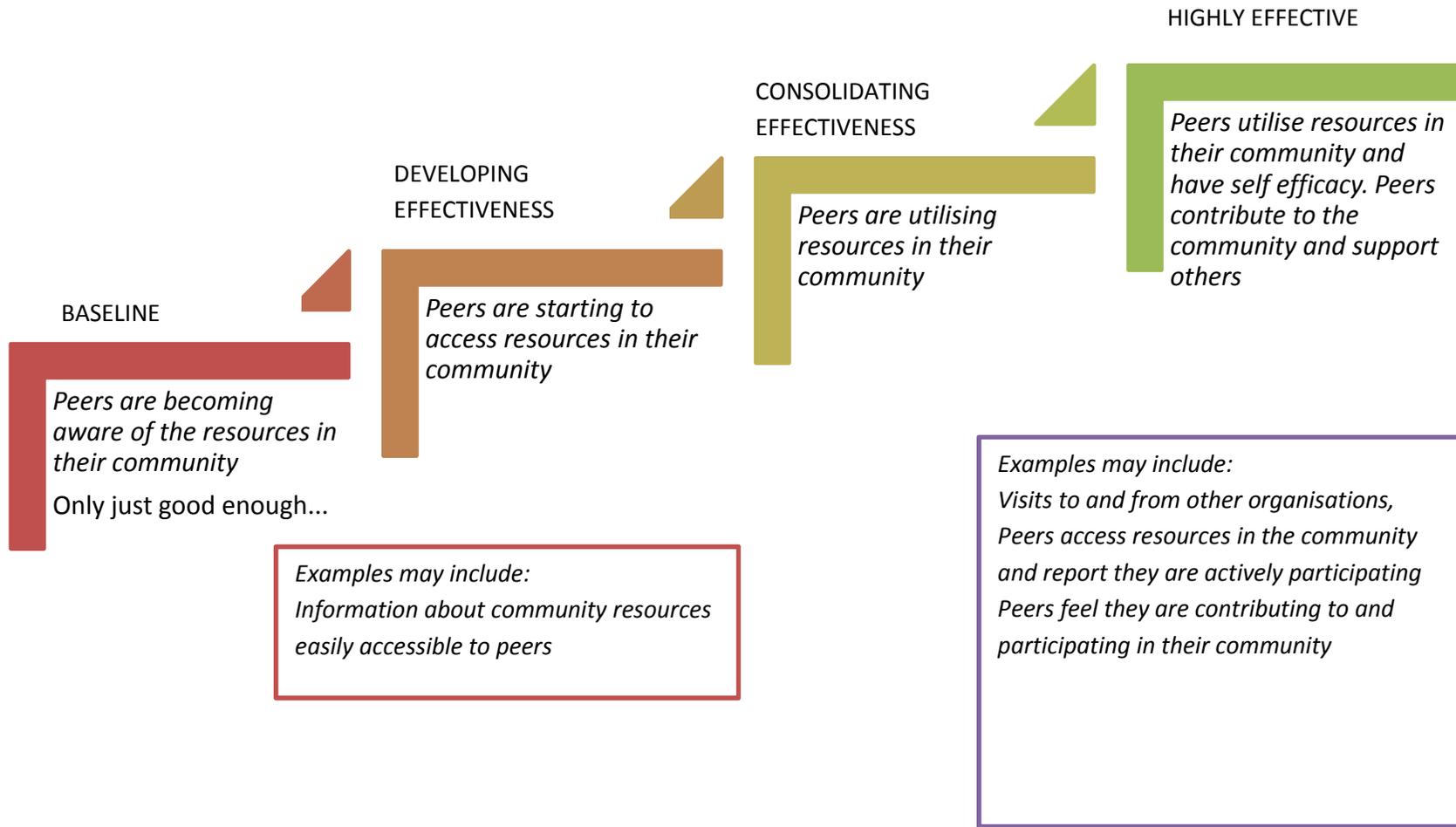
Criteria 6 Transformational Outcomes

6a Make a Difference



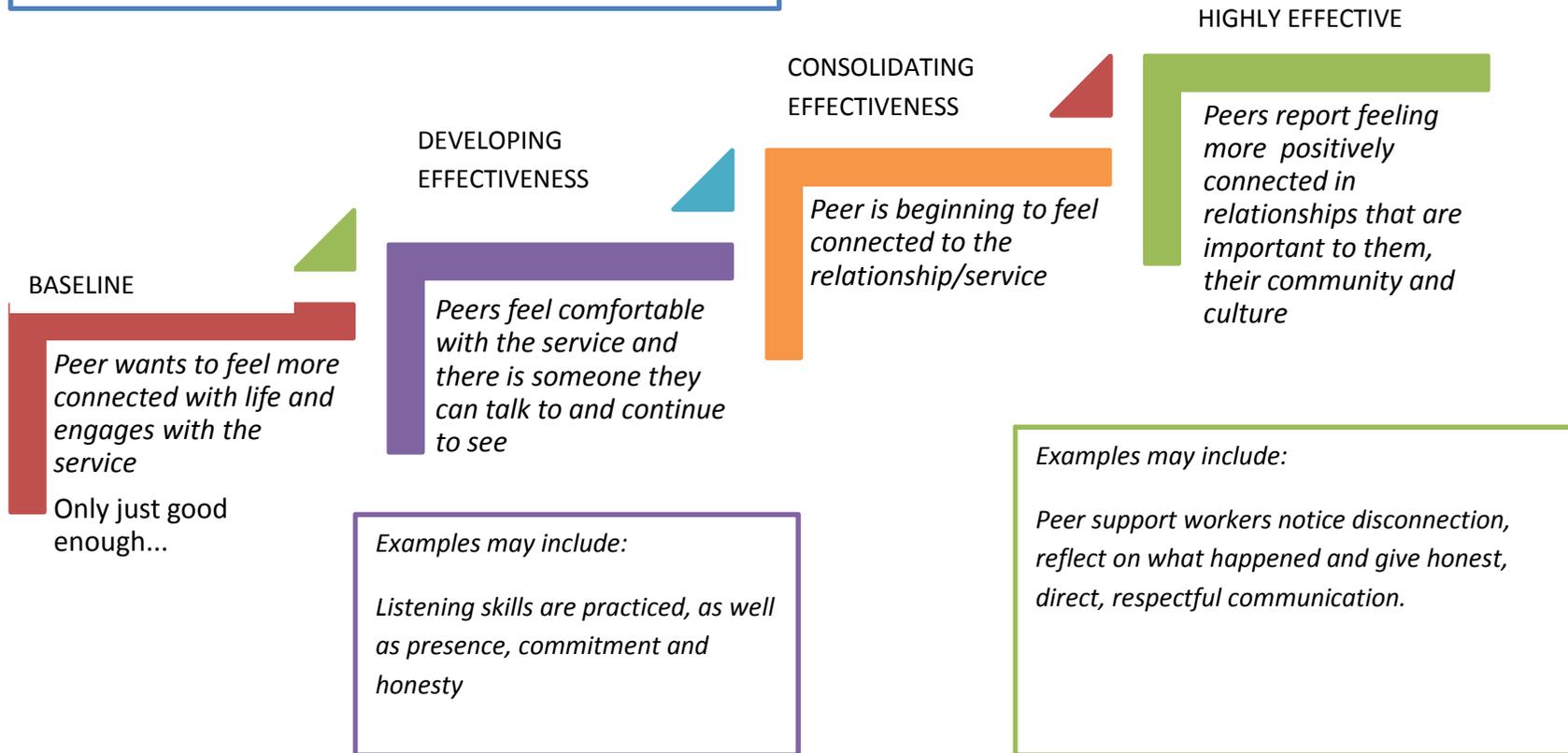
Criteria 6 Transformational Outcomes

6b Community Engagement



Criteria 6 Transformational Outcomes

6c Connectedness



Recording results

These **assessment sheets** can be used to record your findings. Once you have identified the quality criteria you would like to reflect upon, copy the number of pages and add in one sub criteria per page. The completed sheets can then be consolidated into the proceeding form.

Date:

Evaluative Criteria:

Sub criteria:



Our organisation is:

Baseline	Developing Effectiveness	Consolidating Effectiveness	Highly Effective

What is the reason for our rating? Do we think our evidence supports this rating?

Summary Chart

Date:

EVALUATIVE CRITERIA	SUB-CRITERIA				
Criteria 1: Organised Support		Baseline	Developing Effectiveness	Consolidating Effectiveness	Highly Effective
	1 a Professional Development				
	1 b Understanding & promoting the service				
	1 c Supervision				
	1 d Culture of Enquiry				
	1 e Resourced				
Criteria 2: Shared Experience		Baseline	Developing Effectiveness	Consolidating Effectiveness	Highly Effective
	2 a Lived Experience of mental distress and/or addictions				
	2 b Negotiating the relationship				
Criteria 3: Respect		Baseline	Developing Effectiveness	Consolidating Effectiveness	Highly Effective
	3 a Diversity				
	3 b Trust				
	3 c Ethics				
Criteria 4: Recovery		Baseline	Developing Effectiveness	Consolidating Effectiveness	Highly Effective
	4 a Shared Responsibility				
Criteria 5: Mutual Agreement		Baseline	Developing Effectiveness	Consolidating Effectiveness	Highly Effective
	5 a Choice				
	5 b Mutuality				
Criteria 6 Transformational Outcomes		Baseline	Developing Effectiveness	Consolidating Effectiveness	Highly Effective
	6 a Make a Difference				
	6 b Community Engagement				
	Connectedness				



Our action plan

What we will do	Who will do it	By When	Comments



Reflections

Helping the Toka Tū project to learn from your experience

Using this worksheet;

- Describe the process your organisation used to complete the rubric. Include what you did to get started, how you reflected on the information provided and how you completed the action plans.
- Record who in your organisation was involved, how they were involved and the amount of time spent completing it.
- Finally – was this useful? What did you like, dislike and what would you change?

Contact Kites Trust: admin@kites.org.nz

Phone 04 384 3303