



Supervisor Checklist for Peer Supporters

This checklist is intended for use by supervisors of people in the role of peer supporter/peer specialist. It will help supervisors support the unique contribution of peer supporters. It will also help determine if the peer supporter is remaining peer, or drifting into clinical culture.

The supervisor can use this checklist to structure supervision of the peer supporter. It will help determine if key job responsibilities are being performed. Remember, peer supporters are not junior clinicians. They have a unique job and function, which is captured in the checklist below:

Remaining Peer

- When working with program participants, the peer supporter keeps the focus on learning together, rather than assessing problems and prescribing help?
- The peer supporter is skilled in sharing relevant personal experiences in-the-service-of supporting program participants' self-discovery/recovery/wellness?
- The peer supporter seeks to understand program participants' evolving understanding of "what happened to me" which often involves non-traditional, non-clinical meaning making?
- The peer supporter's program notes and verbal communication to clinicians are peer-centric and do not include overtly clinical language. Specifically, communication does not include common clinical idioms (e.g. diagnosis, low functioning, manipulative, decompensating, suicidal, etc.) and does not attribute motive to behavior (triangulating, manipulative, sabotaging, help-seeking-rejecting, etc.)?
- The peer supporter is networking with other peer supporters via mentoring, training, conferences, publications, web-forums, etc. The peer supporter is not isolated from others in similar peer roles?
- Check for signs of "drift" from the role of peer supporter:
 - Is the peer supporter adopting clinical language and terms in verbal or written communication?
 - Is the peer supporter reluctant to share lived experience with participants and families?
 - Is the peer supporter telling/advising what to do?
 - Is the peer supporter performing assessments such as determination of suicide risk?
 - Is the peer supporter making decisions for program participants?
 - Is the peer supporter inviting program participants to co-produce or review notes in the record?

Influencing Organizational Culture

- The peer supporter is not being "siloes" as the only voice of self-discovery/recovery/wellness in the org?
- What are the peer supporter's impressions/observations of the culture shift that is occurring on the team/org?
- What are the peer supporter's experience(s) of micro-aggression and role conflict at work?
- Are the peer supporter's opinions carefully considered in the clinical decision-making process?
- (If applicable) Does the peer supporter feel free to express diverse cultural/ethnic and socioeconomic identities, sexual orientation/gender identification and do they experience respect in the workplace?



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Team/Organizational Communication

- The peer supporter speaks up during meetings in an effort to respectfully present non-clinical perspectives and understandings. For instance, at times he/she may speak from human rights, feminist or social justice perspectives?
- The peer supporter demonstrates the ability to communicate the peer framework respectfully to clinicians both verbally and in writing?
- The peer supporter works collaboratively with clinicians, as needed, to help participants achieve goals?

Connection

- The peer supporter facilitates connection with program participants and family members (if applicable)?
- The peer supporter facilitates connection with probation officers, primary care physicians, etc. (if applicable)?

Relationship Building

- The peer supporter develops authentic peer-2-peer relationships with program participants?
- The peer supporter shares personal experiences with participants?
- The peer supporter role models self-discovery/recovery/healing for program participants?

Embraces Alternate Frameworks of Understanding

- The peer supporter is open and willing to follow program participants' evolving understanding of the meaning of "what happened to me"?

Advocacy

- The peer supporter invites program participants to attend clinical meetings to advocate for their interests?
- The peer supporter rehearses and helps program participants to prepare for self-advocacy?
- The peer supporter speaks up at clinical meetings to advocate for alternative, non-clinical understandings of the experience of mental illness and self-discovery/recovery/wellness?

Co-Creating Support and Wellness Tools

- The peer supporter has mapped community resources, peer resources and natural supports available to all citizens in the community?
- The peer supporter has assisted program participants in developing Personal Medicine and Power Statements as directed by the program participant?
- The peer supporter provides decision support and discovery of options as directed by the program participant?