

Madison-area Urban Ministry (MUM)  
Reentry Peer Support and Case Management  
Update to Madison Community Services Committee.

**1. Number of WI Certified Peer Support Specialists:**

Through our contract with the City we sponsored two Peer Support trainings, one in January and one in August of this year. In total 35 people went through the 2 trainings. We opened spots up to program partners and members of FIC.

In total 20 of the 35 people passed the Certification test for Peer Support Specialist. Of those 20 individuals, 11 are part of MUM's program. Additionally one individual is a volunteer in a MUM reentry program.

**2. How many participants are connected with a Peer Specialist?**

Currently 13 participants are connected with a Peer

Year to date 47 individuals have been connected with a Peer Specialist.

**3. Where are the referrals coming from in the community?**

Formal referrals have been through: Dane County Jail, Access Housing, Department of Corrections, Employment and Training Association, ATTIC Correctional Services, Madison Police Department.

Informal referrals include: self referral, Access to Independence, Porchlight, Free the 350 Bail Fund, Project Respect, The Beacon, and the Salvation Army.

**4. Please walk us through an assessment, intake plan, and referral.**

Pre-release meeting whenever possible – included in that is an effort to obtain releases of information and begin the assessment process and initial reentry plan;

Upon release we connect with participant, if possible at the jail, otherwise in the office;

We review the peer support program and the services available through it;

If the person is interested the case manager completes an assessment that focuses on works with them to develop a reentry plan that the (6) life areas. (Alcohol & Drugs, Legal, Psychological & Emotional, Social & Family, Health, Vocational, Educational & Financial). Also at that meeting we go over the Client Rights and Grievance Procedures and they receive a copy of those policies and procedures.

The participant and Case Manager and Peer Support Specialist work with the participant to develop a reentry plan that is based on the participant's goals, the participant signs the plan. Referrals to other program partners or services are made. The person is connected (if not during assessment phase) with a Peer Specialist.

## **5. How many participants are receiving case management services?**

Year to date 50 people have received case management. There are currently 23 receiving case management. Two additional individuals are released but who have not decided if they want to receive case management services. They are staying connected to MUM.

## **6. How many participants have been assisted with:**

- Housing: 17
- Employment training: 13
- Family Reunification: 1
- AODA Services: 9

## **7. Describe the training/education for Peer Support Specialists:**

WI State Certified Peer Specialist training is a 48 hour curriculum developed by the State of WI and Access to Independence. The training is facilitated by two Certified Peer Support Specialists who have also been trained as Peer Support Specialist trainers. Two program staff have also completed the Train the Trainer training and have assisted in providing Peer Support training this past fall. In addition to the training, MUM offered study groups for the first cohort completing the training to assist them in preparing for the test.

Maintenance of Certification requires ongoing training.

In 2017 & 2018 MUM Peer Support Specialists have participated in the following meetings/trainings:

- UW School of Social Workers: Confronting Racial Injustice
- Dane County Peer Specialist monthly group networking meetings;
- JustLeadership USA Leadership training;
- CCS Spring 2018 Statewide Meeting (included team facilitation, person-centered planning, utilizing peer support specialist on a team);
- A Home For Everyone Conference in Greenbays;
- Formerly Incarcerated Convicted People's Family Movement (FICPFM);
- National Leadership Conference;
- State of WI Department of Human Services' Mental Health and Substance Use Recovery Training Conference;
- DOJ's Reentry Summit in Milwaukee;
- Hones/Open/Proud (HOP) facilitator training;
- Trauma Informed Care training with Project Respect.

In addition, Peer Support staff have participated in the following webinars:

- Successfully Employing Peer Specialists: A Framework and Tools;
- Supporting Criminal Justice Involved Populations;
- Peer Specialists and Police As Partners: preventing behavioral health crisis;
- Supervision of Peer Workers: Experiences from the Field;
- Unique Housing Needs of Individuals with Criminal Justice Histories;
- Addressing Barriers to Licensing for People Who Have Criminal Records;
- Mental Health Peer Specialists and People Who are Justice Involved;
- Mental Health Peer Specialist: Ethics, Boundaries;
- System's Transformation – WRAP Behind the Walls'
- Peer-Led Seeking Safety for Trauma and Addiction.

## **8. Ongoing supervision for Peer Support Specialists :**

Peers are receiving ongoing weekly supervision by the Peer Support Supervisor. Peer Support Specialists are also receiving ongoing training through conferences, workshops and webinars. Additionally we have Peer program meetings to discuss any concerns or challenges with participants.

## **9. What has gone well:**

- Coordination with Dane County Jail Reentry Coordinator;

- Having availability of transitional housing has worked well for some individuals;
- Increase in referrals and supports for women being released from jail;
- Biweekly meeting with Partner agencies (EATA, Neighborhood Food Solutions, Access Housing)

#### **10. What still needs work:**

- Transitioning into both temporary and permanent housing;
- Retention in program upon release;
- Getting jail access for all Certified Specialists;
- With increase in women being referred there is a severe lack of housing for women with children.
- Getting referrals for individuals who have severe and persistent Mental Health conditions that are NOT appropriate because they need more intensive care, in those instances we try to refer them to appropriate mental health services.