

# Background paper: Draft Consumer, Peer Support and Lived Experience (CPSLE) Workforce Development Action Plan 2022 – 2024

**Growing, supporting and developing the  
Southern CPSLE Workforce**

This is a background paper for workshops to be held around the Southern district in November 2022. We will be looking at **pages 19 – 24** of this document as a starter for our discussions.

If you are able to, it would be helpful (but not essential) to review these pages before the workshop.

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# Purpose

This document includes a draft plan to develop the **Consumer, Peer Support and Lived Experience (CPSLE) workforce** in the **Southern District**.

The CPSLE workforce includes people whose personal (lived) experience of mental health and/or addiction is a requirement of their job/voluntary role. This includes a range of roles such as peer support workers and consumer advisors.

At the end of this document are some discussion questions about the draft plan. Workshops will be held in November 2022 to discuss this plan and another project about peer services. For more information about the workshops please contact Gemma Griffin ([gemma.griffin@southerndhb.govt.nz](mailto:gemma.griffin@southerndhb.govt.nz) 027 562 3400).

## Part 1: Background

Developing and supporting the peer workforce in Southern has been a priority since 2020. A peer workforce development group was established, which developed the *Southern Peer Workforce Development Action Plan 2020 - 2021*. We reviewed that plan when developing this document, and some actions have been included.

In 2021 there was a review of the mental health and addiction sector in Southern. A report was produced, called [\*Time for Change Te Hurihanga\*](#)<sup>1</sup>. This report made a number of comments and recommendations about growing peer services and the peer workforce. Time for Change is now being implemented. Developing this workforce plan is one of the projects to implement Time for Change.

As well as being a local priority, growing the Consumer, Peer Support and Lived Experience (CPSLE) Workforce is a national priority. Key national documents that have talked about peer workforce include:

<a href="#">He Ara Oranga</a> (the report of the Government Inquiry into Mental Health and Addiction)	The national Mental Health Inquiry had a strong focus on peer support, noting in their executive summary that there were “loud and clear calls for more peer support workers” <sup>2</sup> . The Inquiry panel described “a vision for mental health and addiction services, with people at the centre...using a mix of peer, cultural, support and clinical workforces” <sup>3</sup> .
<a href="#">Kia Manawanui</a> Aotearoa – long-term pathway to mental wellbeing	Kia Manawanui is a document about the long-term actions that need to be taken to transform mental health and wellbeing for all in Aotearoa New Zealand, It says that there needs to be a “a strong focus on growing the peer

<sup>1</sup> Or [click here](#) for the summary report

<sup>2</sup> Government Inquiry into Mental Health and Addiction. (2018) *He Ara Oranga – Report of the Government Inquiry into Mental Health and Addiction*. <https://mentalhealth.inquiry.govt.nz/assets/Summary-reports/He-Ara-Oranga.pdf> P10

<sup>3</sup> Government Inquiry into Mental Health and Addiction. (2018) P12

	workforce and peer-led services that bring unique perspectives and understanding.” <sup>4</sup>
The Consumer, Peer Support and Lived Experience (CPSLE) <a href="#">Workforce Development Action Plan 2020 – 2025</a> (Te Pou)	Te Pou is a national workforce development agency for the mental health, addiction and disability workforces. Te Pou led the development of a Workforce Development Action Plan for the CPSLE Workforce. That plan is available by <a href="#">clicking here</a> . It has a number of actions focused on developing: <ul style="list-style-type: none"> <li>• A workforce that has strong leadership and infrastructure to support its development</li> <li>• A workforce that is thriving, effective and self-determined</li> <li>• A workforce that is trained, skilled, and valued within environments that are supportive and nurturing.</li> </ul>

Other relevant documents include:

<a href="#">The Competencies</a> for the mental health and addiction consumer, peer support and lived experience workforce (Te Pou).	Te Pou has published competencies for the CPSLE workforce. These were developed by peers, with strong involvement from people in the sector. A competency is a behaviour, knowledge and/or skill that people need to use to do a job (paid or voluntary). We have used the competencies throughout this document.
The Consumer, Peer Support and Lived Experience (CPSLE) <a href="#">Training Needs Analysis</a> . (Te Pou)	In 2022 Te Pou completed a report on the training needs of the CPSLE workforce across Aotearoa New Zealand. The report was based on a survey that asked people to reflect on the competencies. For this document we also developed a survey. We used a similar format to the Te Pou survey. Most of our results were consistent with the national survey.

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*All of these documents have been reviewed when developing this plan. In the list of actions in the draft plan you can see how the actions link to these documents, and to our survey results.*

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<sup>4</sup> Manatū Hauora. (2021) *Kia Manawanui Aotearoa – Long-term pathway to mental wellbeing*. <https://www.health.govt.nz/publication/kia-manawanui-aotearoa-long-term-pathway-mental-wellbeing> P20

## Part 2: Our current workforce

The CPSLE workforce in Southern is small and is spread across multiple organisations.

We have identified CPSLE staff and volunteers working in the following organisations:

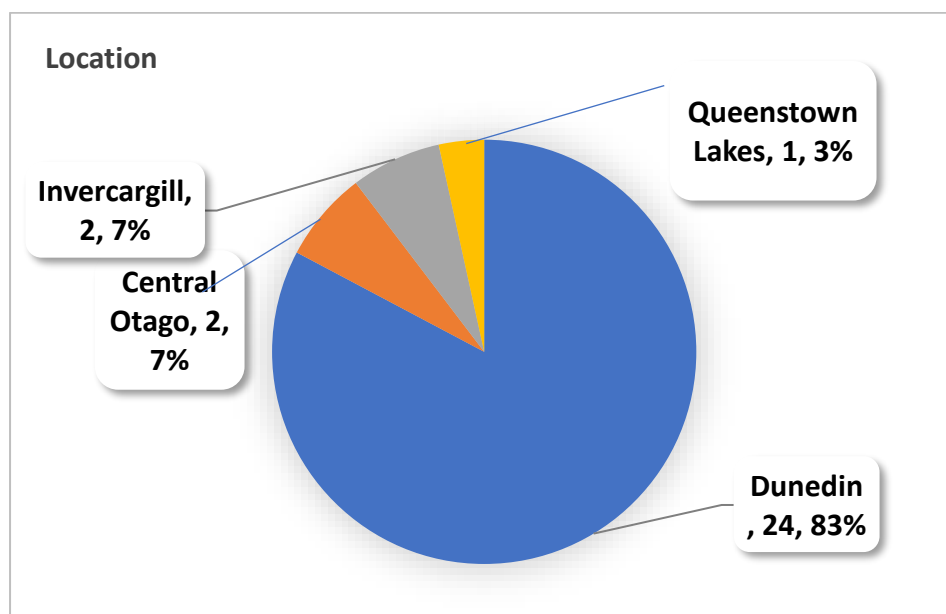
- Able
- ADL
- Artsenta
- CBCT
- Corrections (Milton)
- Happiness House
- Life Matters
- Mirror Services
- Moving Forward
- Nga Kete
- Otago Mental Health Support Trust
- PACT
- Salvation Army
- Te Whatu Ora
- WEKA

It is possible that there are CPSLE staff working in other organisations too.

In October 2022 we ran an online survey for the Consumer, Peer Support and Lived Experience (CPSLE) Workforce. The survey collected information about the people in our workforce, and their training needs. Twenty-nine people responded to the survey. The results are summarised below.

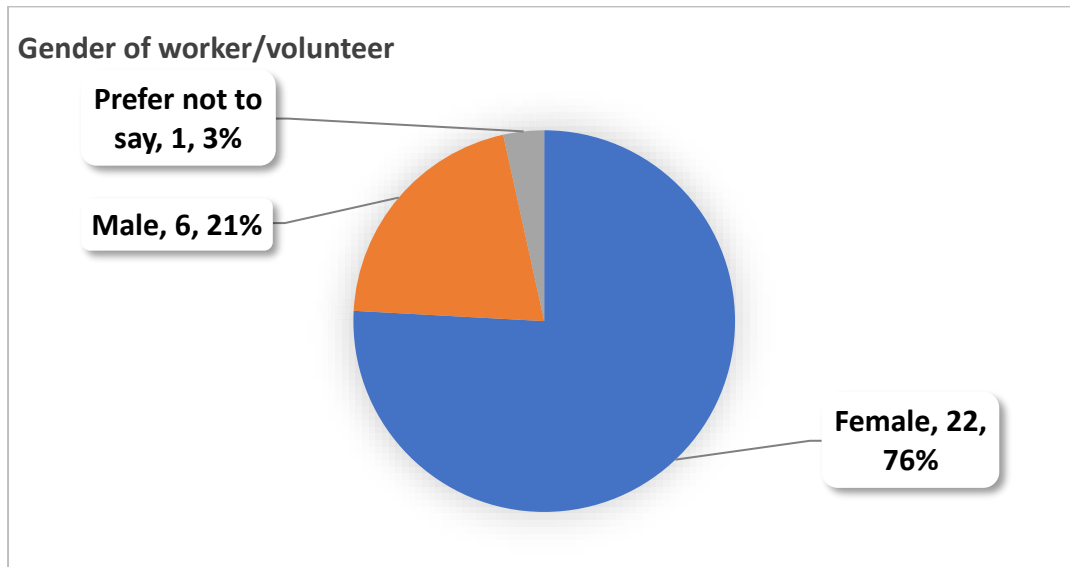
### Location

Most of the respondents (24 people) were from Dunedin, followed by Invercargill (2), Central Otago (2) and Queenstown Lakes (1).



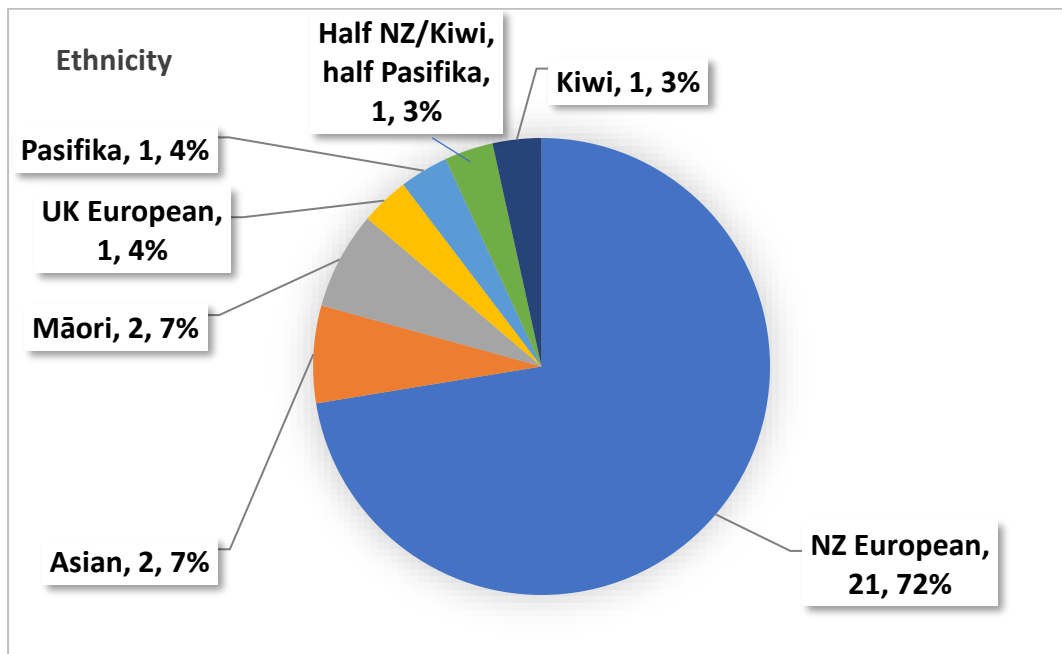
## Gender

Over three-quarters (22, 76%) of the respondents were female. One person did not wish to answer this question, and 6 (21%) of respondents were male.



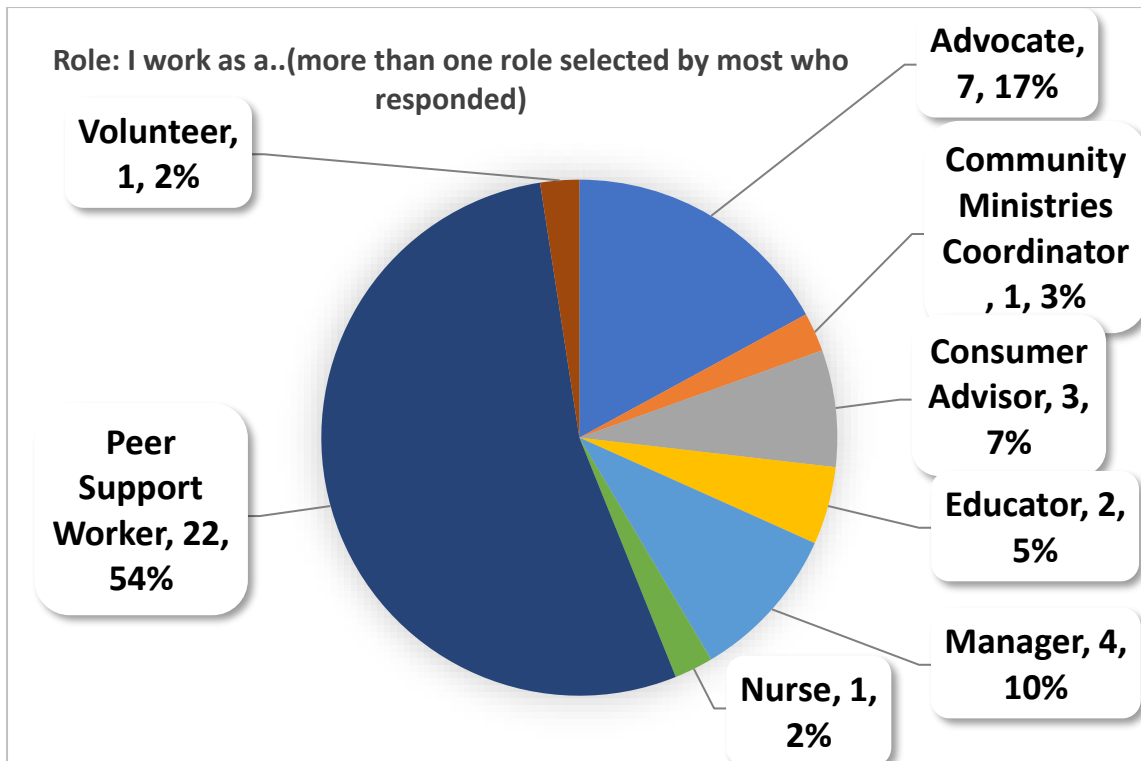
## Ethnicity

The majority of respondents (21, 72%) identified as New Zealand European, followed by Māori (2, 7%) and Asian (2, 7%). One person identified for each of Pasifika, UK European, Kiwi, and Half NZ/Kiwi half Pasifika.



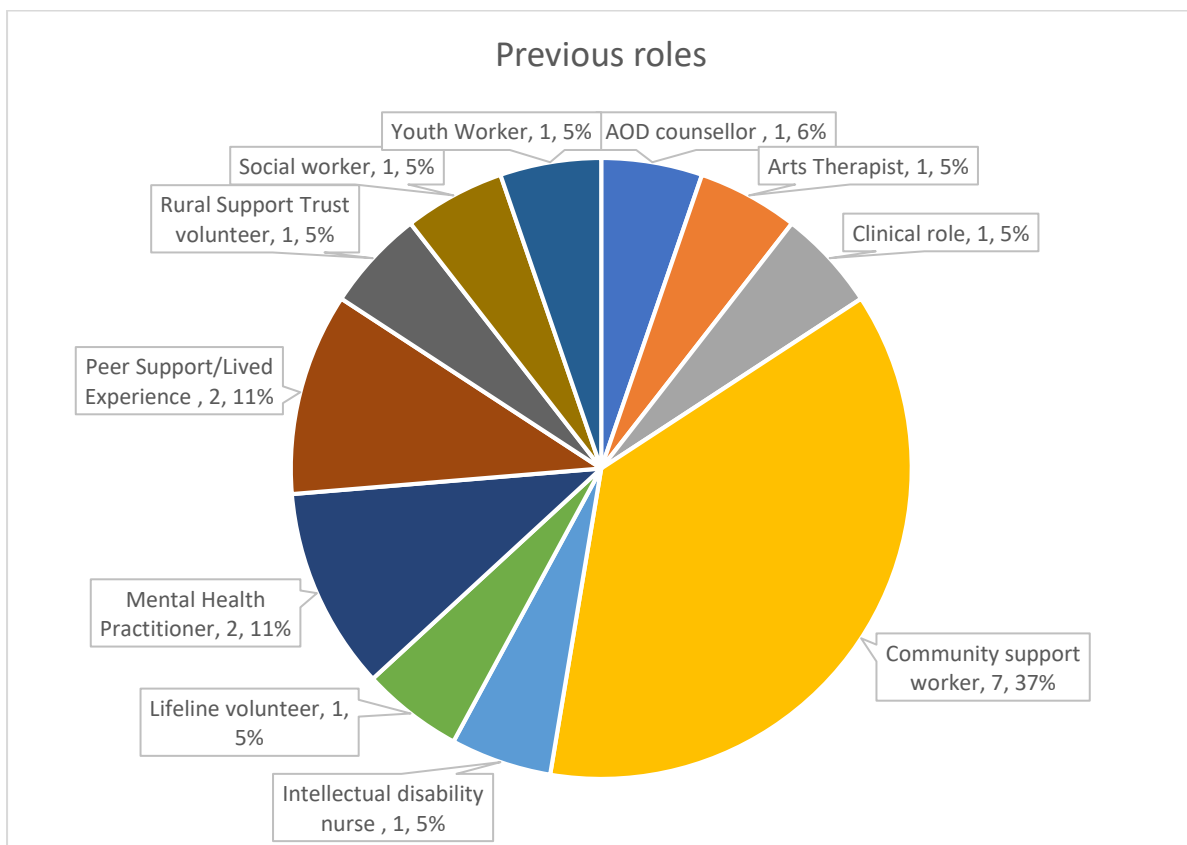
## Role

Respondents were asked to describe their role, and were able to select more than one response. Over half of respondents (54%) identified as peer support workers, and 17% as advocates. 10% were managers, 7% Consumer Advisors, and 5% Educators. One response (2%) was received for each of volunteer, nurse, and Community Ministries Coordinator.



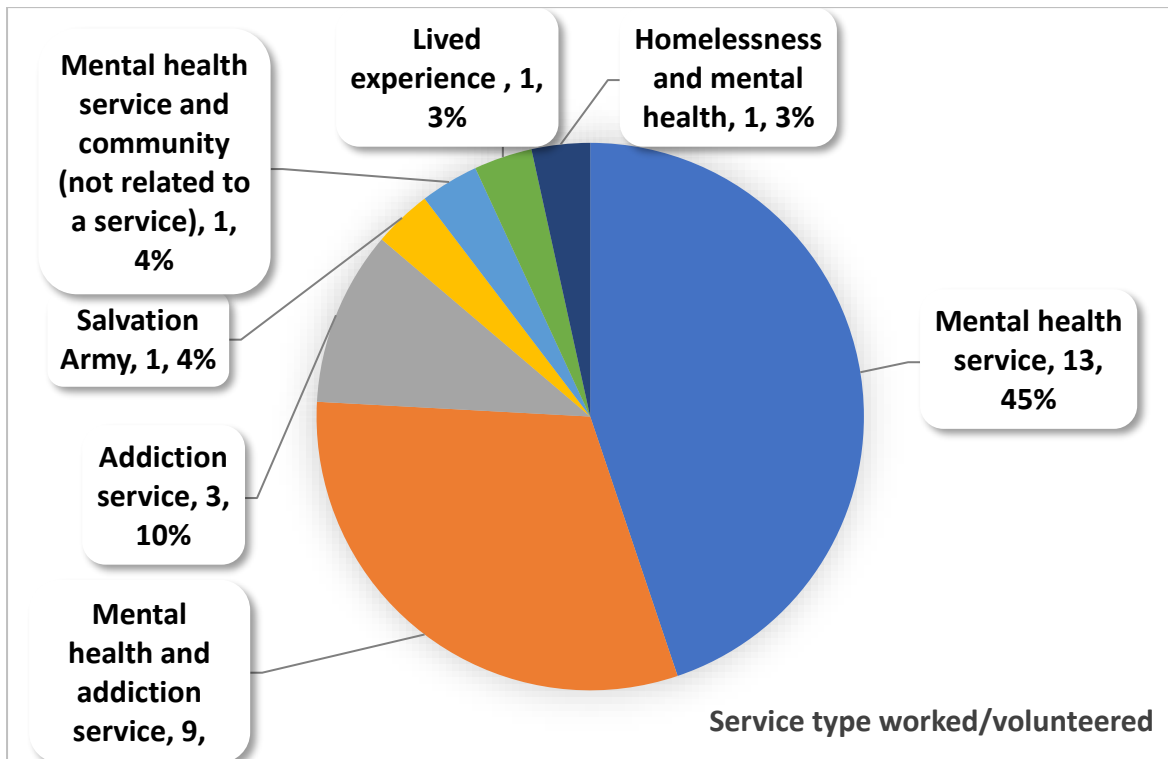
## Career pathways

The survey asked people if they had previously worked in other roles in the mental health and addiction sector. This question was asked to identify what career pathways people were taking to join the CPSLE workforce. A wide range of responses were received, showing the diverse skills held by our CPSLE workforce.



## Service type

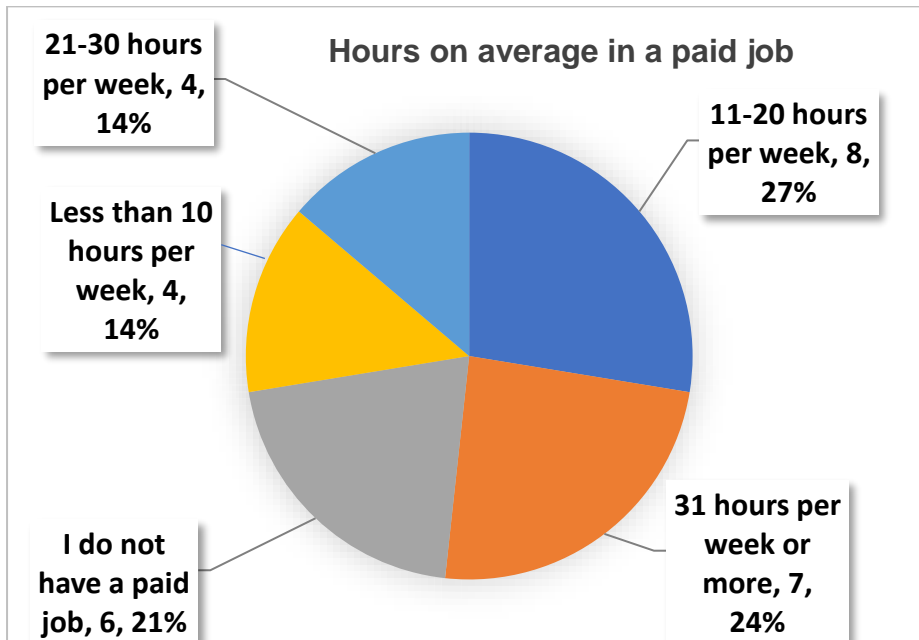
Most respondents worked in a mental health service (45%) or mental health and addiction service (31%). Ten percent worked in an addiction service.



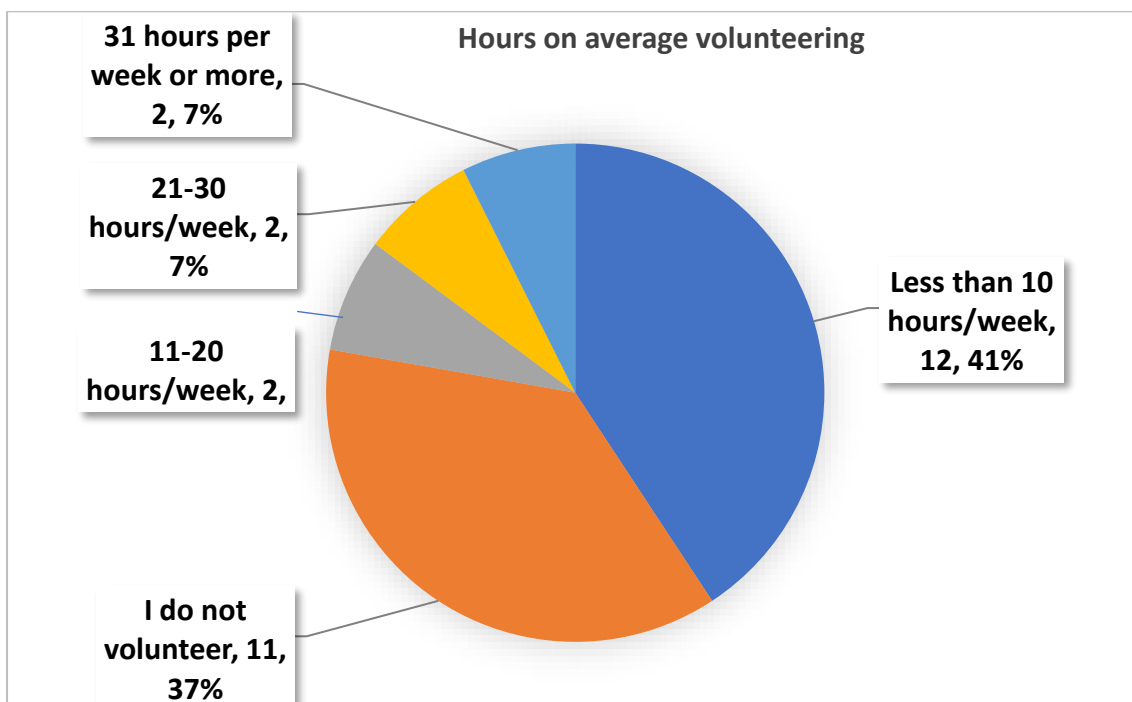


## Hours worked or volunteered each week

The survey was open to people in paid jobs and in voluntary roles. Around a quarter (24%) of respondents worked 31 hours per week or more, followed by 11-20 hours per week (27%). Around one fifth (21%) did not have a paid job, and 14% of respondents answered that they worked 21-30 hours per week, or less than 10 hours per week.

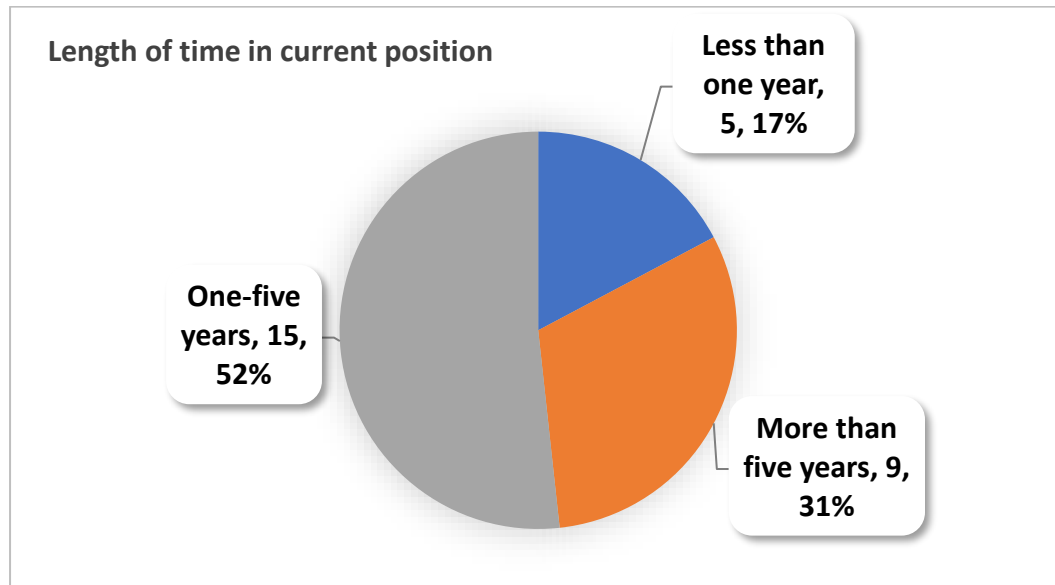


Over one-third of respondents did not volunteer. 41% volunteered for less than 10 hours per week. A small number of people volunteered for 11-20 hours per week (7%), 21-30 hours per week (7%) and 31 hours per week or more (7%).



## Length of time in current position

Over half (52%) had been in their position for between one and five years. Around a third (31%) had been working/volunteering for more than five years, showing that many in our workforce are well-experienced. 17% had joined the CPSLE workforce recently and had been in their role for less than one year.



## Competencies

A competency is a behaviour, knowledge and/or skill that people need to use to do a job (paid or voluntary).

Te Pou has released Competencies for the Consumer, Peer Support and Lived Experience workforce.

The survey asked people to reflect on how well they carried out each competency, using a scale that went from “not well at all” to “well”. We summarised the competencies so they were easier to understand. The point of these questions was to identify potential priority areas for future training and development.

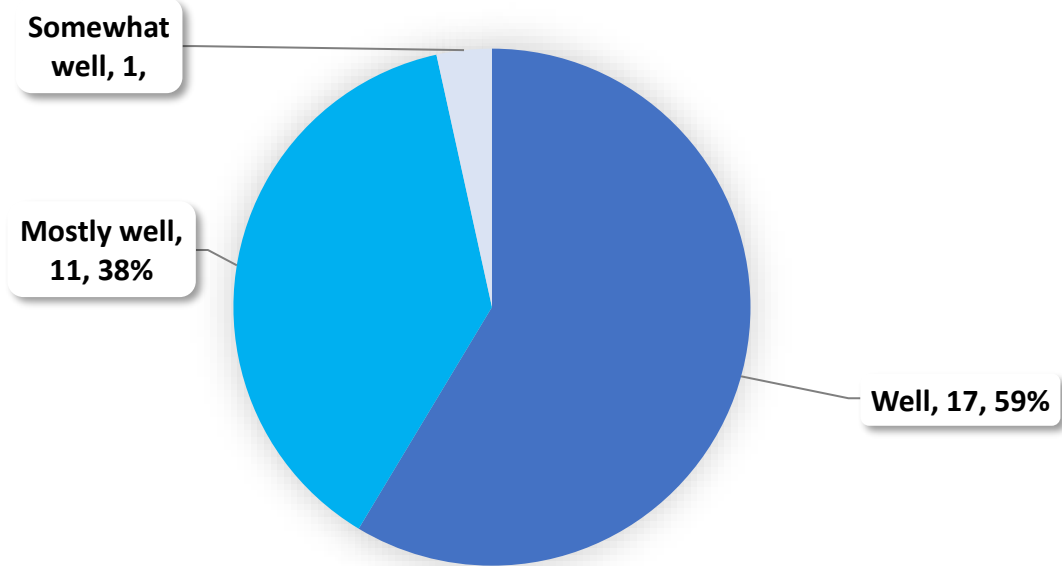
### Competency one – applying lived experience

Competency one is

*“I feel I am able to use my lived experience to support my peers and my lived experience is valued by the service I work for.”*

Over half of respondents (59%) thought they carried this competency out well. 38% said mostly well, and 3% said somewhat well.

### Competency 1: Applying lived experience

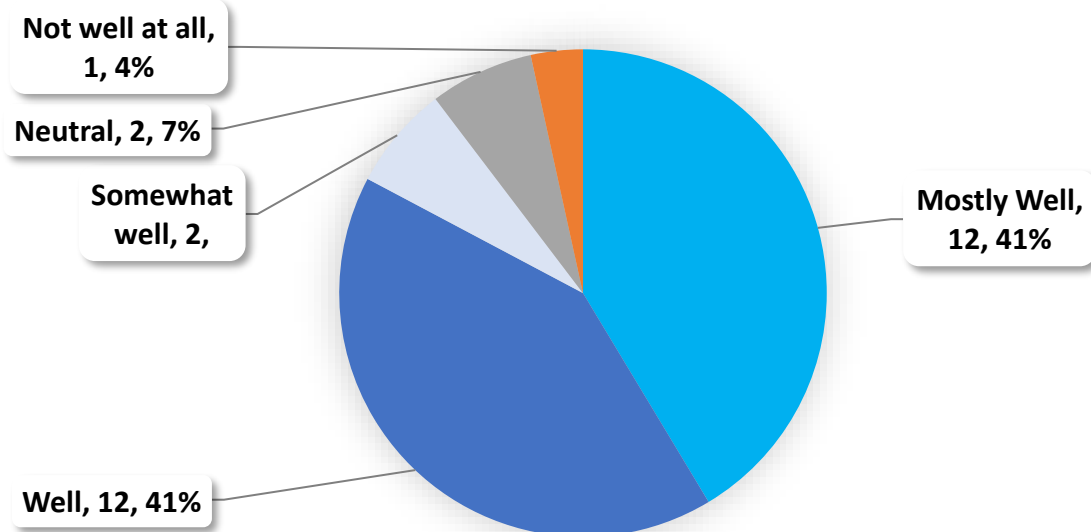


### Competency two – resilience, recovery and wellbeing

*“I have a good set of practices to look after my own wellbeing and I am able to let people know if I need support with my own wellbeing.”*

For this competency, an equal number of people (12, 41%) said that they carried this competency out well or mostly well. One person said “not well at all”, and 2 people said “neutral” or “somewhat well”.

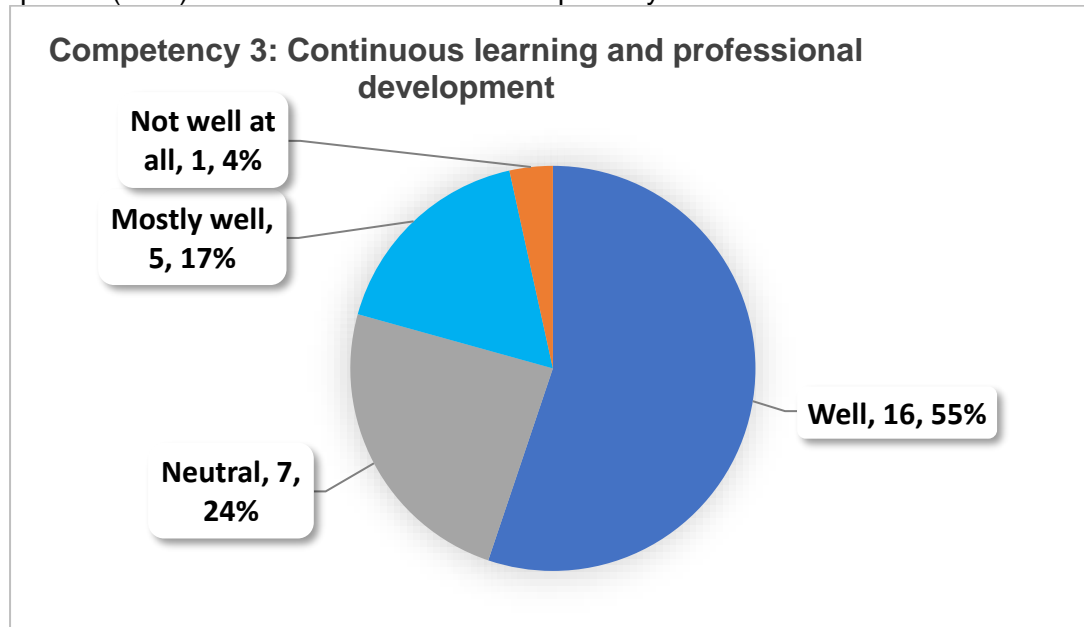
### Competency 2: Resilience, recovery and wellbeing



## Competency three – continuous learning and professional development

*“I am able to access the training I need to grow professionally and also to support my personal development”*

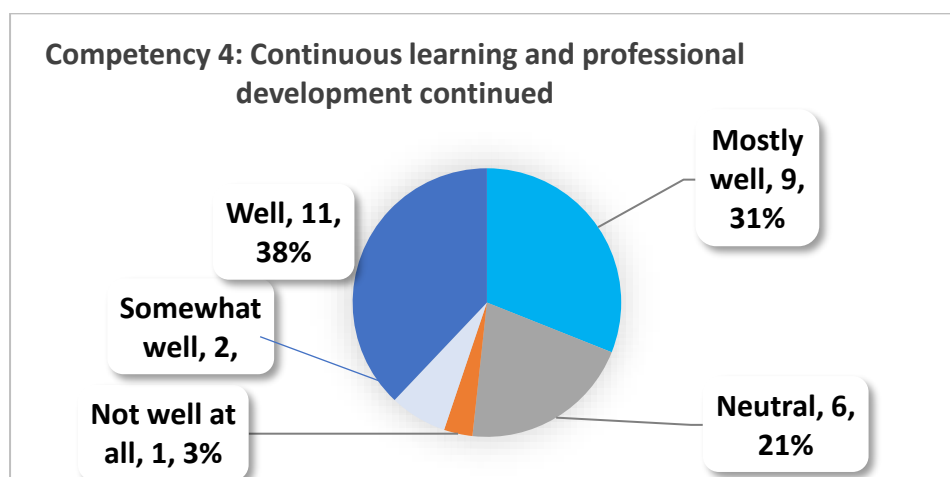
The majority of respondents (55%) said they carried out this competency well. Nearly one-quarter (24%) were neutral about this competency.



## Competency four – continuous learning and professional development continued

*“I feel well connected to my peer community and this helps to support (‘ground’) me in the work that I do.”*

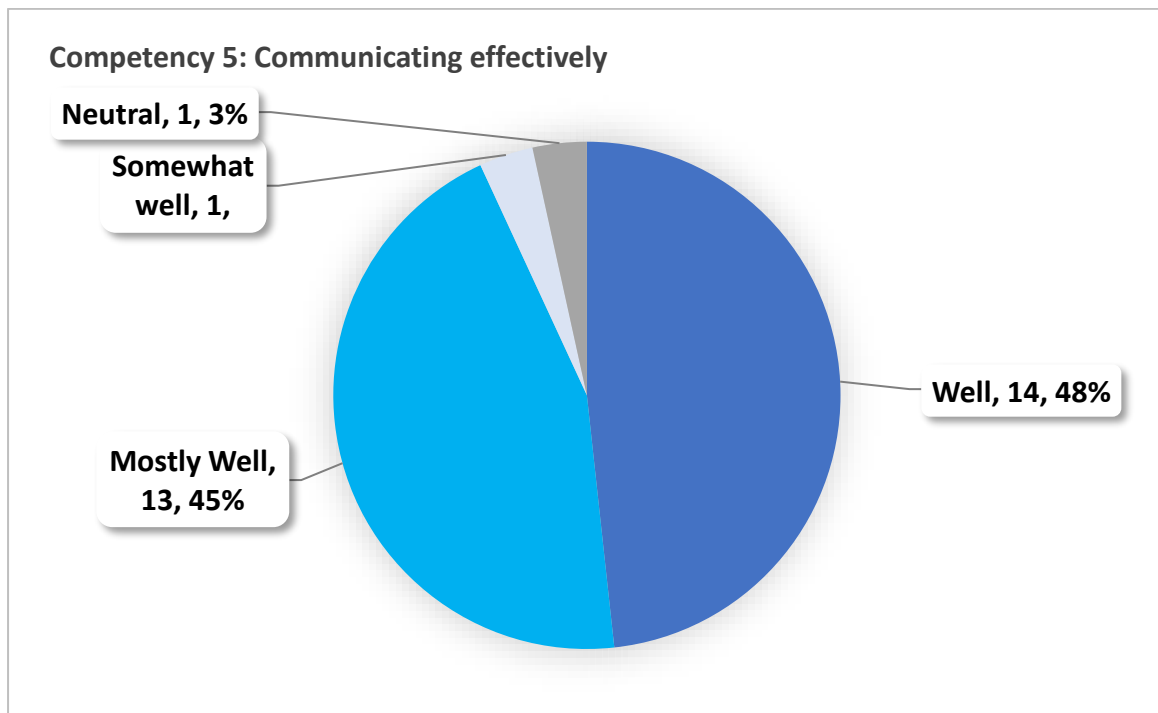
Most respondents (69%) carried out this competency well or mostly well. 21% were neutral.



## Competency five – communicating effectively

*“I am confident in my ability to communicate with my peers and colleagues. I have a good understanding of recovery and wellbeing focused language; I am able to use this language that focuses on the strengths of my peers in my work.”*

The competency on communicating effectively was one of the higher-rated competencies. 93% of respondents said they carried out this competency well or mostly well.

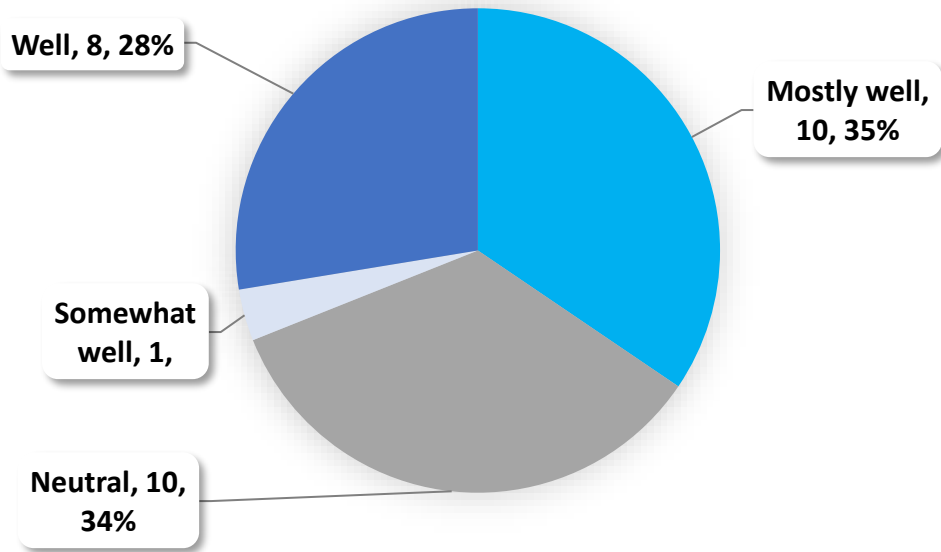


## Competency six – working with family, whānau and community

*“I understand that family / whānau and community can be a valuable source of support for people who are experiencing challenges with mental health and addiction. I work to actively include these people when working with my peers.”*

Working with family, whānau and communities was one of the lower-rated competencies. 28% of respondents said that they did this well.

### Competency 6: Working with family, whānau and community

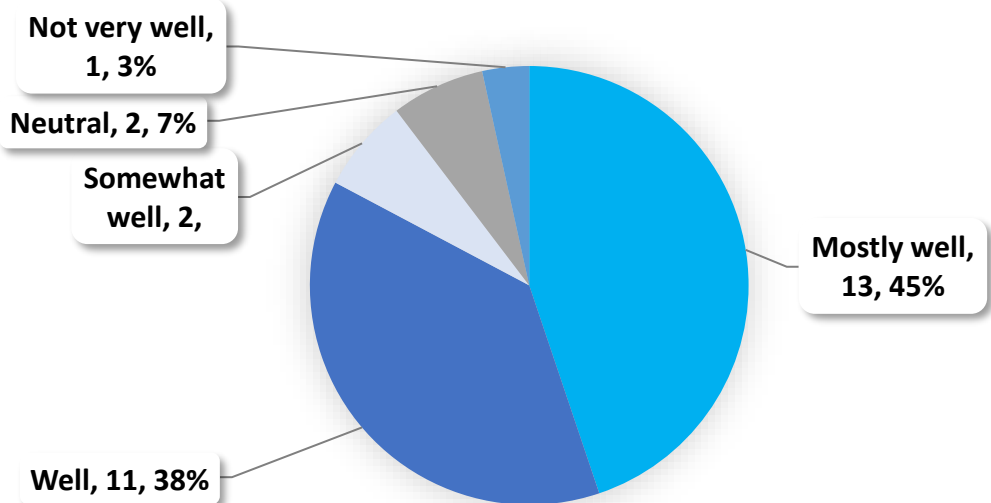


### Competency seven – working with teams and systems

*“I understand relevant health and disability policies, standards and other relevant legislation. I am able to align these expectations and values to the work I do. I enjoy working with my team and respect my colleague’s roles and responsibilities.”*

The most common response to this competency was “mostly well” (45%) followed by “well” (38%).

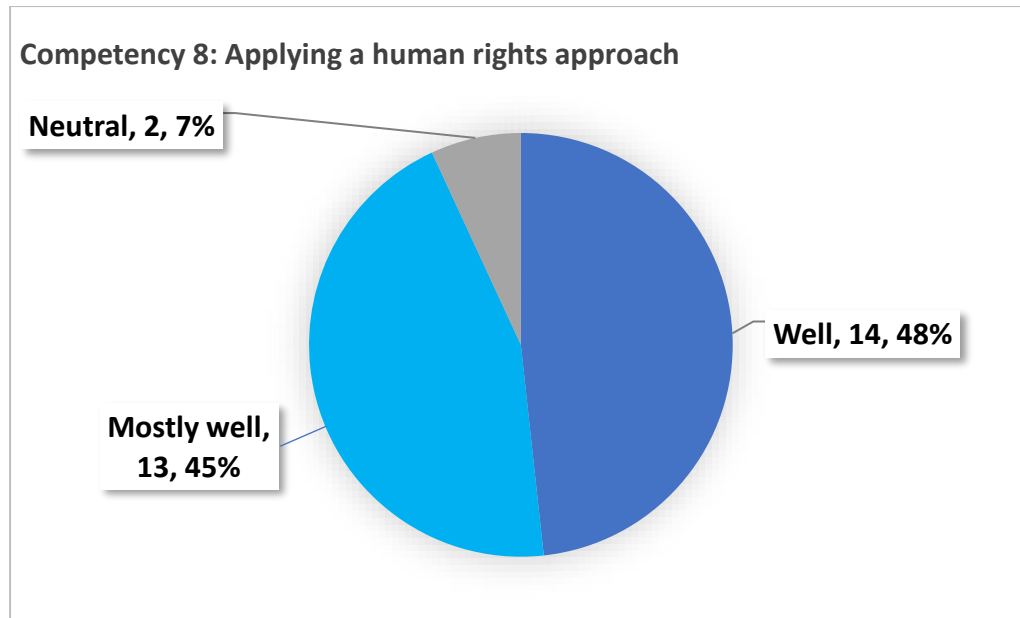
### Competency 7: Working with teams and systems



## Competency eight – applying a human rights approach

*“I understand what my human rights are and the rights of my peers. I am able to use my own lived experience to advocate for positive change in my work.”*

The human rights competency was highly-rated. Nearly half (48%) said they carried it out well, and 45% said they carried it out mostly well. Two people (7%) rated this competency neutral. No one said “somewhat well” or “not well at all”.

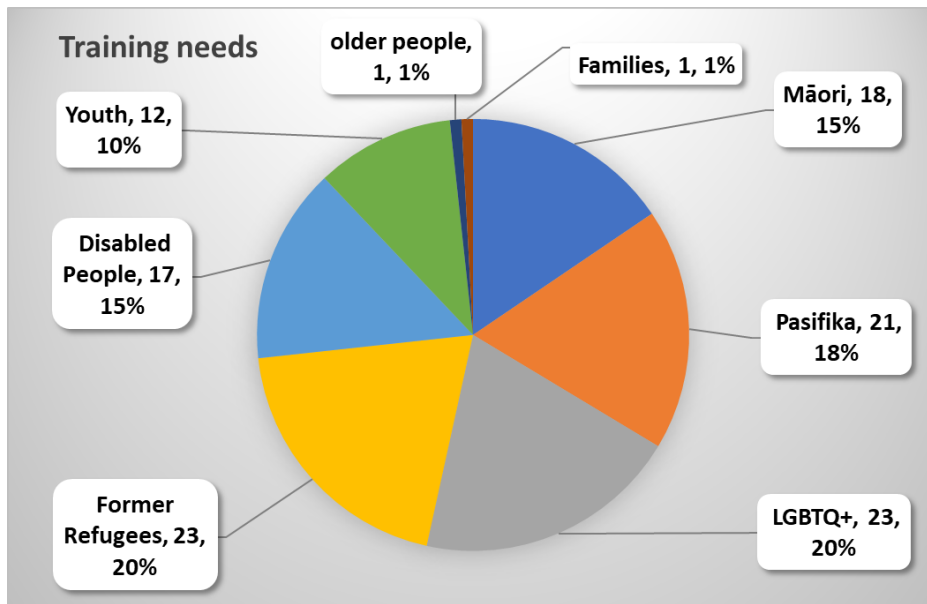


## Training needs

Respondents were asked if they felt they needed more training to better support these groups of people:

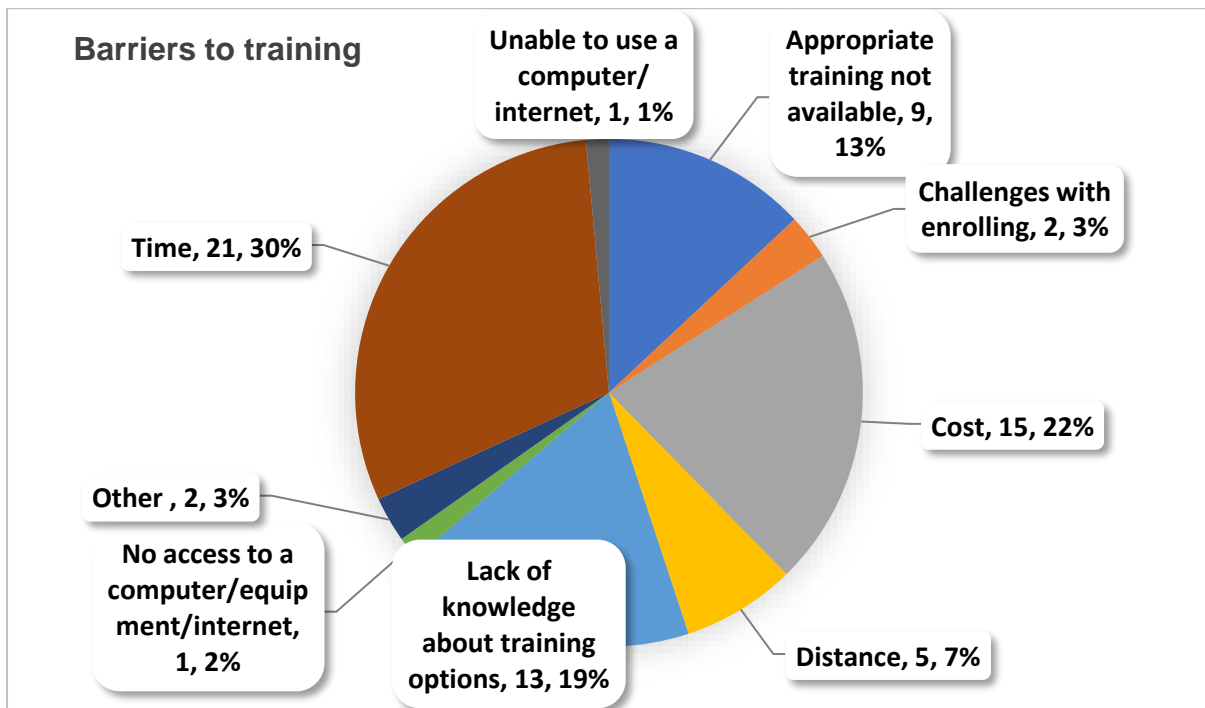
- Māori
- Pasifika
- LGBTQ+
- Former Refugees
- Disabled People
- Youth

The most common responses were former refugees (20%) and LGBTQ+ (20%), followed by Pasifika (18%), and then Māori and disabled people (both at 15%). Two people suggested additional groups – one person suggested family, and one person suggested older people.



## Training barriers

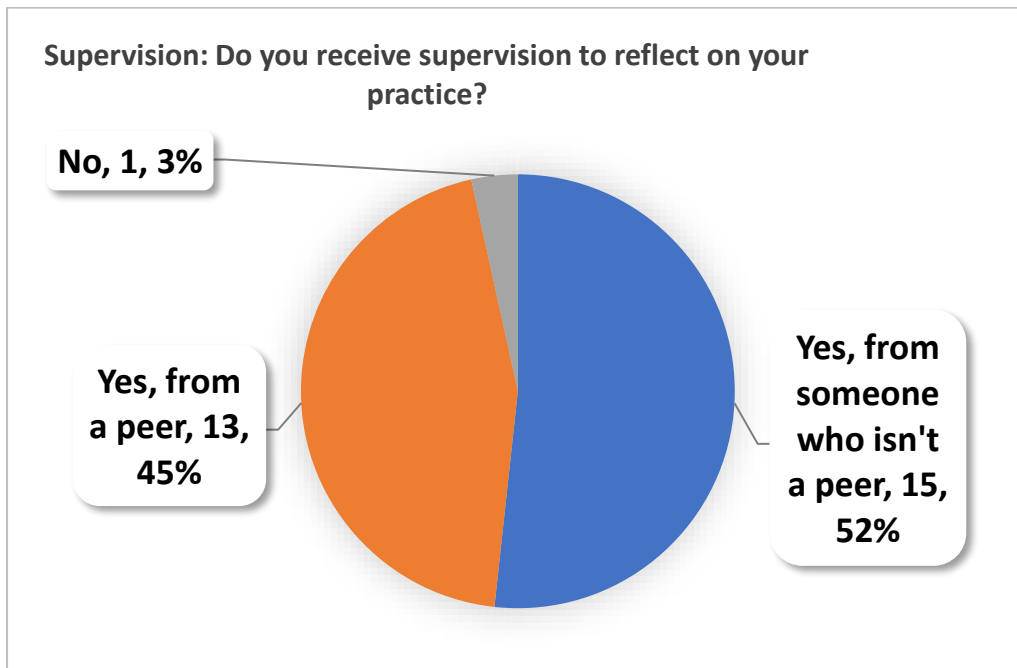
The most common barrier to training was time (30%) followed by cost (22%). Lack of knowledge about training options was identified as a barrier by 19% of respondents, and a lack of appropriate training was identified by 13%.



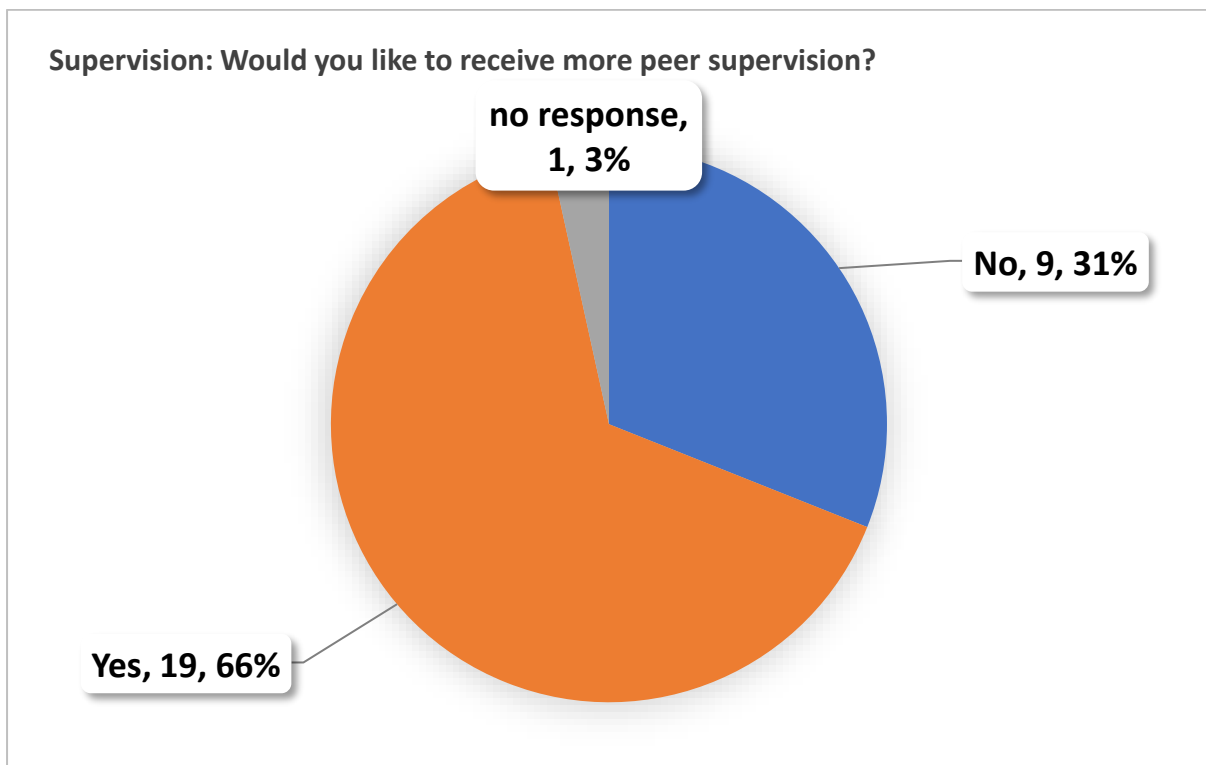


## Supervision

All respondents except one reported receiving supervision to reflect on their practice. The majority (52%) received supervision from someone who isn't a peer.



There was strong support (66% of respondents) for having more peer supervision.



# Part 3: Our future workforce

## Our model of care

There is another Time for Change Te Hurihanga project about designing a model of care for peer-led services in Southern.

A model of care is a way of describing what types of services should be available, and how they should work.

Once we have agreed the model of care, we will know more about what type of future workforce we need.

While we are designing the model of care, we can still consider two key aspects of the future CPSLE workforce – our values, and our competencies.

## Our values

The CPSLE Action Plan and the CPSLE Competencies describe a set of key values that guide the CPSLE workforce.

The values are:

**Participation:** valuing people's right to participate in and lead service delivery and design, including their own treatment.

**Self-determination:** valuing and supporting people's right to make their own life choices, free from coercion.

**Equity:** the right to be treated fairly with equity and be free from discrimination.

**Mutuality:** authenticity in relationships based on common experiences.

**Experiential knowledge:** valuing and sharing the expertise and wisdom developed from our personal experiences.

**Hope and wellbeing:** the belief there is always hope, and that resilience and wellbeing are possible for everyone.<sup>5</sup>

## The competencies

The CPSLE Competencies were developed by Te Pou in consultation with the lived experience sector.

Our future workforce needs to meet the competencies.

Our survey collected information on how people feel they meet the competencies currently.

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<sup>5</sup> Te Pou (2021). *Consumer, Peer Support and Lived Experience (CPSLE) Workforce Development Action Plan*. <https://www.tepou.co.nz/resources/consumer-peer-support-and-lived-experience-workforce-development-action-plan>

We have used the information from the survey to develop actions based on two lower-rated competencies.

<b>This competency was lower-rated</b>	<b>So we are proposing this action in the workforce plan</b>
<i>“I am able to access the training I need to grow professionally and also to support my personal development”</i>	Multiple actions about providing training for the CPSLE workforce (see section 8).
<i>“I feel well connected to my peer community and this helps to support (‘ground’) me in the work that I do.”</i>	Action 1.1 to create a network for the CPSLE workforce.
<i>“I understand that family / whānau and community can be a valuable source of support for people who are experiencing challenges with mental health and addiction. I work to actively include these people when working with my peers.”<sup>6</sup></i>	Action 8.2 to provide training on working with family, whānau and community.

These competencies were also some of the lowest-rated competencies in a national survey that asked people to reflect on the competencies.

## Part 4: Starting to build the plan

We have reviewed background documents, our workforce survey results, and our future workforce needs and have identified the following potential actions.

In the survey we also asked people if they had any other feedback about developing the future workforce. Some key themes from this feedback were identified and relevant actions have been proposed.

The final plan will outline the key actions we need to take to support our Southern CPSLE workforce.

A range of possible actions are proposed, across **five domains of workforce development**<sup>7</sup>:

- **Workforce development infrastructure**
- **Recruitment and retention**
- **Organisational development**
- **Information, research and evaluation**
- **Learning and development**

<sup>6</sup> Note – this competency about working with family/whānau was one of the lower-rated competencies. On another question about training needs for specific population groups, one person suggested family. All of the other population groups were options on the question – family was an additional suggestion from one respondent. If family had been included as an option on this question, it is possible more people would have selected it.

<sup>7</sup> The Te Pou workforce planning guide, *Gettting it Right*, suggests including actions across all of these domains

Some potential actions are focused on those who work in the peer workforce or would like to do so. Other potential actions are focused on developing the **mental health and addiction workforce** as a whole, because we know from existing research that this is critical to ensuring that peer roles are understood, appropriately utilised, and ultimately successful.

Alongside this workforce development action plan, action is required to develop/increase peer services and the employment opportunities available to those who wish to work within them. Another Time for Change Te Hurihanga project is focusing on this.

Proposed Action	Workforce Development Domain	Links to
<b>1. Build a network</b>		
<p>1.1 Support the <b>development of a local network/s</b> to connect peers across different organisations, share information and provide regular development opportunities.</p> <p>1.2 Develop a formal <b>mentoring programme</b> to support isolated peers</p>	Workforce development infrastructure	<p>Southern Peer Workforce Development Action Plan 2021-2022.</p> <p>Survey feedback.</p> <p>Time for Change (recommendation 24 – re consumer advisory networks).</p> <p>CPSLE Workforce Development Action Plan</p> <p>Te Pou CPSLE Training Needs Analysis</p>
<b>2. Grow the workforce</b>		
<p>2.1 Implement 2 partially-funded part-time <b>peer support apprenticeships (0.5FTE)<sup>8</sup></b></p> <p><b>2.2 Develop peer-led services</b> in one or two sites.</p>	Recruitment and retention	<p>Southern Peer Workforce Development Action Plan 2021-2022.</p> <p>CPSLE Workforce Development Action Plan 2020-2025 (Te Pou) – action 2.6.</p> <p>Time for Change, p66</p> <p>He Ara Oranga</p> <p>Kia Manawanui</p>

<sup>8</sup> Additional funding may be available through the Apprenticeship Boost programme

### 3.Support the Māori and Pasifika workforce

3.1 Ensure that at least one of the peer support apprenticeships implemented under action 2.1 is for Māori or Pasifika CPSLE workers.	Recruitment and retention	He Ara Oranga  CPSLE Workforce Development Action Plan 2020-2025 (Te Pou)
3.2. Identify kaupapa Māori and Pasifika peer support trainers	Learning and development	
3.3 Identify if there is cultural-specific training for peer support.	Learning and development	

### 4.Raise awareness and clarify roles

4.1 Develop promotional resources to <b>raise awareness about CPSLE roles.</b>	Organisational development	Southern Peer Workforce Development Action Plan 2021-2022.  Survey feedback.  CPSLE Workforce Development Action Plan 2020-2025 (Te Pou) – action 3.3.
4.2 Deliver <b>training about peer support for the clinical workforce.</b>	Organisational development	Southern Peer Workforce Development Action Plan 2021-2022.  Survey feedback.

### 5.Support non-peer organisations

5.1 Provide <b>resources to support non-peer organisations</b> to implement peer services.	Organisational development	Time for Change, p66  CBCT Peer Support Internship Report
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<b>6. Leadership</b>		
6.1 Re-establish the <b>Southern Peer Workforce Development Group</b> . Ensure the group is peer-led	Workforce development infrastructure	
6.2 Provide training/support to develop people with lived experience to take <b>management and/or governance roles</b> .	Learning and development	He Ara Oranga  Te Pou CPSLE Training Needs Analysis
<b>7. Support best practice</b>		
7.1 Identify and collate new <b>resources</b> /articles relevant to the peer workforce and make them easily accessible. (Could be a function of the network established under action 1.1)	Information, research and evaluation	Southern Peer Workforce Development Action Plan 2021-2022.  Survey feedback.  CPSLE Workforce Development Action Plan (Te Pou). Action 1.5.
7.2 Promote consistent use of the <b>Competencies</b> for Consumer, Peer Support and Lived Experience Workforce	Learning and development	Competencies for Consumer, Peer Support and Lived Experience Workforce.  Survey feedback.
<b>8. Learning and development</b>		
8.1 Support access to core/introductory peer support training.	Learning and development	Required to grow the peer workforce (section 2)
8.2 Provide training to support the CPSLE workforce to support these <b>priority population groups</b> – Māori,	Learning and development	Survey results  Te Pou CPSLE Training Needs Analysis

former refugees, LGBTQ+, disabled people, youth.		
8.3 Provide training for peers on <b>working with families/whanau.</b>	Learning and development	Survey results
8.4 Provide <b>support for consumer advisors.</b>	Learning and development	Te Pou CPSLE Training Needs Analysis recommends development and national rollout of this training.
8.5 Enable access to <b>peer supervision.</b>  Require peer supervision for all peer support workers.	Learning and development	Survey results (majority wanted more peer supervision).  Te Pou CPSLE Training Needs Analysis (recommends increased access to peer supervision training).

## Part 5: Review

It will be important to monitor and review the action plan to see how well it is working.

To monitor the final plan we will use a dashboard to measure progress.

A dashboard is used to bring together and summarise information about progress on multiple actions.

We will identify data to monitor each action, and find a way to collect the data. We will use the data to measure progress

We will regularly produce reports for the Time for Change leadership team.

In June 2023 responsibility for this plan will be handed over to the Mental Health, Addiction and Intellectual Disability (MHAID) directorate.

## Part 6: Discussion questions

This draft plan will be discussed at workshops held throughout the Southern district in November 2022.

There will be a chance for you to provide any feedback you have on the draft plan.

We will also ask the following questions.

- 1. Are these proposed actions what the CPSLE workforce needs to develop into the future?**
- 2. Does this draft plan reflect the needs and aspirations of the Māori and Pasifika CPSLE workforce? How could it be improved?**
- 3. Are there any important actions that are missing from the current list?**

Workshops will be held at the following times and places:

**Ascot Hotel, Invercargill**

Monday 7 November, 10.00am (lived experience only) or 1.30pm (community)

**The Gate, Cromwell**

Tuesday 8 November, 10.00am (lived experience only) or 1.30pm (community)

**Oamaru Opera House**

Friday 11 November, 10.00am (lived experience only) or 1.30pm (community)

**Dunedin, venue to be confirmed**

Friday 18 November, 10.00am (community)

Thursday 24 November, 6.00pm (lived experience only)

If you need more information about the workshops please contact Gemma Griffin ([gemma.griffin@southerndhb.govt.nz](mailto:gemma.griffin@southerndhb.govt.nz), 027 562 3400).