AMINA DONNA KRUCK: Hello.

Welcome back.

Well, now my illustrious volunteer coordinator that's the glue that holds April together and I are

going to talk to you about our peer mentor volunteer program.

How many of you have taken

this course from us before?

Really?

She does it online.

I don't do any of it.

My name's on there.

I'm lucky,

but I don't do anything.

So we're going to talk

to you about our program

and how it works.

I can't remember.

Who's starting?

APRIL REED: I'm starting.

AMINA DONNA KRUCK: April's starting.

APRIL REED: Actually, Jenny,

I think you should get a free pass

because you just finished

the online course, like,

three weeks ago.

I was feeling kind of bad for you that you had to sit through this.

Hello. Thank you for having me. I'm happy to share a little about our peer mentor program.

It is something we're

both passionate about,

and hopefully you'll see that,

and I'll come through as we present our agenda today.

We just want to give you a definition of what does

a volunteer peer mentor

program mean to us?

We're going to give you an overview of our program.

We're going to talk about

barriers because barriers

are common whether you're

in an urban or rural center.

So there's a lot that no matter where we are in the country,

we're going to relate to some

of these challenges about using

volunteers and creating

a peer mentor program.

And we're also going to

give you some thoughts and

tips about effective

components for a program.

What makes a volunteer

peer mentor program work?

So before I go to the

next slide and start reading,

anybody have peer

mentoring personally?

Someone special in your life?

A teacher, family member?

Yeah.

Peer mentoring is very

much a human experience.

I think it's the way we share information, it's the way we pass

down our wisdom and share

with the younger generation,

and it's a cultural strength in the Native American communities.

That's how they translate

their stories, their history.

Anybody have peer mentoring maybe at your CIL as a professional?

Did you have somebody take you under their wing and help you

out when you were new?

Yeah. Deb talked about it.

I mean, in her presentation

as well, it's so important.

And if you are a younger person

at a center and maybe nobody's

offered that to you yet,

seek that out.

Take somebody to lunch.

Find somebody that you can

connect with and debrief with.

When you have that rough case, it's great to be able to go to

somebody who's done this 10, 15 years longer because they're going

to be able to give you

some good tips and advice.

So I think centers for independent living do this really well,

so I think mentoring not only is a good place ‑‑ it's not only a good

place for our volunteers

and peers to get mentoring,

but it's a good place for

us as staff to get professional

mentoring, so definitely

take advantage of that.

So our definition of a volunteer peer mentor program, peer support is a core service.

We all know that.

And it's offered at every

center for independent living,

but how we do that varies.

So most of us,

like we talk about,

we do peer support

throughout our daily job.

Paid staff do peer support.

Other centers maybe use a volunteer program as well.

They train and supervise volunteers to come in and

offer peer support.

A lot of us do it one‑on‑one.

We are meeting with someone,

sharing information

and resources that way.

But a lot of us are

also doing groups.

Whether it's a discussion

group or maybe we call it

a support group or maybe we

call it IL skills group,

but we're doing groups as well.

Each center really has

to think about what's

going to work for them.

What can your center host?

What can your staff manage?

What might work at ABIL might not work for another center,

but again, we hope that we'll give

you some ideas that maybe can get you thinking about if you're not

already doing it, maybe some

ideas about how to start this.

All right. And I should tell you, Amina and I are pretty collaborative presenters,

so she will jump in if she

has a thought or a story.

So when we're talking about an organized program, what we really

mean by an organized volunteer peer mentor program is that it's a

program that trains and supervises

volunteers who are going to act as

role models and coaches for

others with disabilities.

Our definition, this doesn't include paid staff or paid

independent living

skills or advocates.

AMINA DONNA KRUCK: There is

a PowerPoint on the right side

of your day two handout,

if you want it, or to know

you've got it for backup.

APRIL REED: Real important for you to note, a peer mentor volunteer

program does not replace

staff providing peer support

as appropriate.

So we're not talking about replacing what the staff do,

we're talking about having a volunteer peer mentor program

that comes in and supports what your staff are doing and is like

an additional service,

additional opportunity

that someone can take

advantage of at your center.

Just to give you an idea of what's going on nationally, again,

programs vary from center

to center.

In 2008 there was a CIL‑NET survey where 61 percent of the

respondents stated they did offer a volunteer peer mentor program.

And about 54 percent of them stated that they had a formal

program where they offered curriculum training for their volunteer peer mentors.

About 38 percent of respondents indicated they did not have

a program, and about half those people said we once did,

but we don't now.

So that's interesting.

Always makes us curious,

why isn't it there anymore?

What happened?

And we'll talk about maybe what might have happened when we talk about barriers and challenges.

So this is kind of

an obvious statement,

but sometimes I think

we take it for granted.

Peer mentoring is about sharing information and ideas.

Mentors work with anyone with a disability who is looking to

increase their independence,

get resources,

get information,

learn how to better live

with their disability.

Peer mentors utilize their own experience in living with

a disability to empower

others in reaching their independent living goals.

Sometimes reluctant

leaders are the best.

And so, sometimes our job is to identify people that maybe might

be really good at this,

but they just don't know it yet.

The great things about peer mentoring through support

is we know it works.

There's tons of research,

strong research that supports

the idea of using a

peer support model.

We also have a lot of other groups that have used peer support and done it really well.

Think about AA, right?

They've done this for years.

What about Weight Watchers, right?

Same idea.

People with a shared barrier, shared challenge coming in,

meeting together,

supporting each other.

And also, the mental

health community.

They have really been the leaders as far as the disability community

in developing a program

and using peer support.

And Amina will talk a little bit ‑‑ I think you're

next ‑‑ she'll talk about how our program used that as a model for what we've developed.

AMINA DONNA KRUCK: So when

I first came to the center,

one of the reasons I got hired

is because I had background,

a 20‑year background, doing peer counseling through a thing called re‑evaluation counseling.

Anybody here familiar with that?

And that's a model of, again,

as viewing the person as

whole and brilliant,

and they're the expert on themselves and people could heal

given safety and attention and not brushing them off with emotions,

not trying to pump them out or anything, but letting them come

off as a natural discharge

of the healing process,

and that happened by

just taking turns.

And I'd like to ‑‑ these little mini sessions,

only like an hour at a time,

listening to each other and noticing when people were coming

from that internalized oppression place of accepting those negative

labels and stereotypes about who they were and contradicting that

which is reality about

who they really are,

and out of that came some different theories on

different oppressions.

One of them being

disability oppression.

So I had that background already, and I'm really into that idea

that we lift as we climb.

And so that's why I came

to ABIL was to do that.

Although, the first thing I did was home modification which

I really enjoyed.

So ABIL has this

huge service area,

so I was talking to some other people the other day about people,

oh, I've got 34 counties

I have to cover.

And that means nothing to me because Maricopa County is as

big as Rhode Island and it has over half the state's population.

And we only have, like, 14,

I think, counties in the

whole state of Arizona.

So I don't know how to relate.

What does that mean when

you tell me how many counties

you're covering, but at the time we had a very small staff.

Less than 18 people.

About 12 people when I got hired.

And there was just no way.

Not only that, but if you assign ‑‑ let's say you have one

peer support person or IL person.

They're one sex,

one personality type,

one kind of disability,

and here we're serving people

with all these different issues,

disabilities, et cetera.

So it was a way to better

serve consumers to support

that staff person.

And I had a boss who hired me

who didn't get mentoring and

didn't think people ought

to have to reinvent the wheel.

And so he had just done the

first peer mentor training

when I arrived.

Then he left and the new

director that we had had,

had peer mentoring in Detroit after she had her spinal cord injury, so she was a big fan.

So I had somebody on my side,

and I started to talk to the

other volunteer programs

in the Valley,

and there was a really big volunteer program with the

community mental health center that I had worked at before.

And what that person

told me was is,

you really need

a dedicated person.

This person is like a human ‑‑ has human resource skills.

It's a higher level of

supervisory kind of capacity,

and you need to dedicate resources to having that person dedicated.

And at the time we had somebody who was doing IL training halftime

and peer volunteer

coordinating halftime,

and the volunteer coordinating

was about peer mentoring.

And back in the old days,

the training was like

three weeks long.

Nothing is three weeks long anymore except for maybe a bachelor's program or something.

So now we've got about

40 active peer mentors.

This is many years later,

and our center has grown,

but the population in Phoenix, gosh, I don't even know how many

times it's multiplied over the years because it's just one

of the most rapidly

growing communities.

And some of the mentors along with other volunteers provide ‑‑ have

provided 82,000 hours altogether, so ‑‑ I mean, 100 hours.

So what happened when we

moved to the DEC, and you'll see,

we used to do all of our services pretty much out in the community.

Not that many people

came to our center.

I think Deb was talking

about that too when you move.

Well, but when we moved to the Disability Empowerment Center,

people wanted to come there and they wanted to volunteer.

And our general volunteers quadrupled after we moved

to the center three and a half years ago because they wanted

to come ‑‑ people want to be productive and they wanted

to be in that environment.

So the peer mentor program goals are to provide peer mentors that

can teach independent living skills and so you see what

people's knowledge base

and strengths already are,

and that's what I mean

by reluctant leaders.

Sometimes people really want

to help other people,

sometimes they're a little overwhelming and they tend

to be a little more enabling.

But often it's the person

who thinks maybe they don't

have anything to offer,

but yet ‑‑ I see people laughing

about this, but yet maybe ‑‑ maybe they lived as a quad for 24 years

and never had skin breakdown,

and they're the only quad I've met that never had skin breakdown

in 24 years so they know something about managing their attendants

and taking care of their health that other people don't know.

So that's what I mean,

sometimes you point out

to them they help people

reach their goals.

So we only work with people

that have identified goals.

And they are working

with a staff member.

So you don't refer somebody

to April for mentoring,

you refer them to the staff person that they would work with and set

those goals and get clarified and then they refer the person over to April to coordinate with a mentor.

And obviously they support

the staff and the mission

of our agency.

So this is something we've

done this over and over.

This is my perspective as the supervisor of the program is

not only is it important to have this full‑time dedicated person,

or you've got somebody who's extremely skilled that can switch

back and forth, but you really need somebody ‑‑ what we did,

I had to go to my director and convince her to spend our

Part C dollars that's

part of our rehab act,

independent living establishment dollars on this volunteer coordinator position.

And she was a business person by her previous profession and she

wanted to know how many hours of volunteerism she was going to

get out of this person to make

it worth the staff time that

was dedicated.

So we first settled on that 2,080 hours is which is about what you say a full‑time staff person does.

And she said that's just

like replace the person you

just took away from me.

And I'm like, well, no, because now that person is different sexes

and different ages and

different disabilities and different knowledge bases.

So we multiply times

30 what that one person was.

So she said, "Okay.

We'll go with those hours.

If you can get those hours,

then I'll do it."

And we had to go to the board and also convince them this is really a human resource position.

It's a different kind of

position so it was really different for our agency to do it,

and it did take a year or two to convince people to allocate their

resources so the volunteer coordinator coordinates

the peer mentor program.

She's responsible for recruitment, orientation, training.

I forget.

I don't multitask well.

I used to when I was younger.

She organizes the matches.

So it's kind of a skill that some people have and some don't.

It's like a matchmaker in a way.

She gets information from

the staff about the person,

she gets a form that tells

her what their goals are,

and then she keeps track of

all of these qualities that each one of the volunteers has.

So she is kind of like a,

you know,

a baseball manager.

She's got to keep track of all the different skills she's got

available for when there's somebody that needs it.

And she conducts program evaluation of volunteer support and recognition,

things to keep the volunteers feeling well trained and appreciated and supported.

Because you don't want to feel like they're hanging out there

with some scary situation that they don't want to feel responsible for.

So part of that is,

she's created a lot of

forms and structure

for the program over the years, each volunteer program,

coordinator that I've had,

but I've had some good

ones and some bad ones.

So you really need somebody

who is very ethical and

good with follow‑through.

Otherwise, you end up with

a bunch of matches on paper,

but they're really not happening and you may not know that as the

supervisor until it's

gone on for a while.

So who are the mentors?

Well, April will talk about

this now, I think.

APRIL REED: So the mentors are individuals with disabilities

who are living independent in

the community and have a desire

to help somebody else.

They are not, nor do we want them to be, nor do we ask them to be

medical professionals,

counselors,

therapists.

We're very clear with them

that is not their role.

Oh, do you want to do

the paid or volunteer?

AMINA DONNA KRUCK: Oh, okay.

Yeah, this is next thing, are they going to be paid or volunteer?

And this discussion has come up several different times here

in Arizona in the mental health system, the recovering model they pay their peer mentors.

So the discussion for paying

a peer mentor is that you want

to compensate them for their skills, and it can be some job training type of thing too.

But in the end, we settled on it being purely volunteer because

the people that come to us

have had mostly all these

paid service providers,

and it really means something different to them to have somebody

who is there voluntarily because they want to be there,

plus that volunteer doesn't have to work during business hours.

And it also ends up meaning ‑‑ like, we just had

this discussion last night at

our volunteer recognition,

that people who receive mentoring from a volunteer are more likely

to want to be a mentor as they progress in their own life.

So it means a lot to them that someone is there because they

want to be there.

And so, you know,

some of these relationships

end up being lifelong friendships and some of them don't.

You know, some of them don't

even work and we'll talk about that later.

So I think that's it.

Who gets volunteer peer mentoring?

Well, they are people with disabilities who are ABIL

consumers and have been through the initial application,

assessment process, and they've got a consumer service record,

they're working one‑on‑one with ABIL staff and they have identified specific goals.

And, so, that's where the mentor comes in is ‑‑ and sometimes

people have more than one mentor because the people have expertise

in different goals like transportation.

Learn how to use the public transit system might be one goal.

While another goal might be to learn how to speak up to your

doctor to get your needs met,

and somebody else might mentor them on that goal.

Not every ABIL consumer is referred to participate in the

mentor program, and it is not a dumping ground for people you don't know what to do with.

So that sometimes takes

some reinforcement,

especially with new staff.

It takes a little while for them to get it, how to use the mentors.

APRIL REED: And we also require that they be working with the

independent living skills staff for at least one month or four appointments.

We want the staff to be able to sit down and meet with the person,

get to know them and hash out, what are the goals,

and then how could a

peer mentor assist?

AMINA DONNA KRUCK: So just recently we realized, well,

we should not be putting these referral forms in the intake

packets with all the other stuff that the independent living

advocate meets with them in the first place because then there's

just a natural tendency, oh, yeah, I want one of those too.

It's like shopping at the,

you know, Circle K.

So we just pulled

that out recently.

And then they came running

around like, where is it?

Over time you learn these tricks about what's going to work best.

APRIL REED: What do

ABIL mentors do?

They work with any ABIL consumer who is adapting to a disability,

seeking to increase

their independence.

They help newly disabled individuals adapt to

living with a disability.

They have regular contact with their mentee.

So for us that means that we are asking these mentors to be in

touch with their mentee at

least two times a month.

And so that can be in phone, e‑mail, in person.

We're not asking them to

do 40 hours a week.

That's not our program.

We don't want to see them

doing 20 hours a week.

That's not our program.

We're asking them

to be a volunteer,

and that's one of the reasons we justify having a volunteer group

is we're not expecting them ‑‑ we want this to be something that

they can incorporate into their life easily that ‑‑ we don't want it to be a stressor.

We want it to be something

they enjoy doing,

but also they can have a work life, a family life balance.

This is one thing that ‑‑ of

many that they can do.

Mentors teach specific independent living skills, like Amina said,

budgeting,

using public transportation,

working to increase

their self‑esteem.

Whatever that consumer

or we call them mentees.

Whatever that mentee has identified as their

independent living goal.

We also ask the mentors

to be role models.

They need to be practicing independent living in

their own lives.

That's how they're going

to be a good role model.

We also ask them to teach self‑advocacy skills.

That's something we can leave somebody with is ability to advocate for themselves.

Mentors also provide support and encouragement and they advocate with service providers.

Interestingly enough,

a couple of years ago,

I got kind of curious about what was our most requested goal.

So we went back and did some research and found that over

the last five or six years,

our most requested type goals have been self‑esteem, self‑advocacy,

recreation and a lot of people dealing with isolation.

I need somebody to chat with.

I need to get out of my house.

I need some support learning

about my disability.

We kind of moved away a little

bit from maybe budgeting and transportation,

we moved in a little bit

more to maybe some self‑esteem, self‑advocacy.

AMINA DONNA KRUCK: So we decided they would be volunteers,

but we also do reimburse them

for mileage or using the bus, public transit expenses.

On rare occasions, we will front them a little money to go out and do something with their mentee.

That's pretty rare.

We don't get asked to do that very much, but that has happened

on occasion when that was part of the independent living goal,

but that way at least we're not costing them money for the

transportation and stuff because many of them are still living

on limited incomes.

Not all, but...

APRIL REED: As the economic times have changed, we are having more and more requests.

It used to be more common to have people say,

"This is part of my donation

to ABIL. I don't need to be reimbursed."

Now that's more common that

people are needing that, so we

are glad to be able to do that.

Peer mentor volunteers

participate in a variety of

other ways at our center.

They give disability

awareness presentations.

So I would go out with our youth transition coordinator and

I'll take a panel of peer mentors and we'll go into one of the

schools into one of the special education rooms where she works,

and I'll give a presentation about our first job or talk about,

how do you tell a boss

about your disability?

Whatever the students have

been working on,

and we'll go in and

give that presentation.

We also do monthly

mentoring groups.

Which as I mentioned earlier,

a lot of centers are doing that,

especially if they have a

limited amount of volunteers,

getting people together in

a group is a great way to

meet a lot of needs.

If any of you do groups,

you know that amazing things can

happen when you get a few people with disabilities in a room.

I always tease my mentors that we're going to end up talking

about doctors and we're going

to end up talking about

transportation and we're going

to end up talking about meds.

But you know what, that's a great

way for people to share and

connect and really easily

support each other.

AMINA DONNA KRUCK: I walked in the last group and there was oh, gosh,

probably 15 or 16 people in the room, and it was a day they

decided they were going to share their passions, and six or seven

of them brought in what

their passions were.

So one person played the cello

and one person sang.

We had no idea she had

this incredible voice.

Very soft spoken woman.

And one person brought in some of the craft projects that she does that were very skilled.

One person was an animal advocate and brought in whole bags of things for everybody.

I mean, it was just like so cool.

And these are things that they didn't know about each other.

Now they have multiple resources, even within themselves as a team, so that was really cool.

APRIL REED: Yeah.

And it's neat to be able to see them coming into the group maybe

needing mentoring, and turning around and some of our mentees

were giving those presentations and I'm like, who are you?

That's amazing.

It's nice to see them be able to grow and feel safe and supported in a group setting.

As Amina mentioned, we also have a lot of volunteer activities that

we can do at our center now which maybe in the past we didn't have

the facility or the location,

the ability to do that.

And so a lot of our peer mentors get involved that way as well.

Community advocacy, really,

really easy to tie your mentors

into the advocacy program because I'm in the advocacy department,

so I'm getting ‑‑ I know

about the events.

I'm usually there.

I'm usually helping plan,

so why not have the mentors come

and be a part of that and it develops their advocacy skills.

We were at the capital last month and we had mentors and insight

guides and tours and supporting somebody that was new for the

first time and a little overwhelmed by that experience.

So it's really great to be able

to get them involved in whatever advocacy your center's doing.

And community outreach.

The mentors can really

be a great resource.

I'm sure you get asked a lot,

as we do, to give presentations

and come out and talk

about your center.

It's nice to be able to bring

a trained mentor along to

offer a perspective.

And so, community outreach

is a great way to use a peer mentor volunteer.

All right.

Barriers.

These are pretty common.

When I worked with other centers, these are things everyone was listing.

Pretty common to face

some of these barriers.

Inappropriate referrals.

Sometimes people in our community, our staff, they might not get what a volunteer can and can't do.

So that falls on me to

do some education.

Let our staff know and the community know these are volunteers.

It's not a dumping ground.

We don't want the most difficult consumer to go to a volunteer.

Remember, we're not expecting them to be counselors or therapists.

This is a volunteer, so.

There are other places that we can send somebody that's in crisis or that's needing extensive services.

So sometimes we have to work to make sure we're getting the right kind of referral.

That's why we make sure that person stays with an independent

living skills staff person

for at least a month or

four appointments.

Get to know them.

You get to find out

what they need.

Is that appropriate

for a peer mentor?

Making effective matches.

That's a real challenge.

You have to make sure that the mentor is at a place where

they're ready to be having that level of responsibility to take

on this challenge.

Similarly, you want to make sure that the mentee is ready.

If there's somebody, again, that's in crisis or has a lot going on,

maybe this isn't the best time

to have them start working

with a peer mentor.

You know, related to this too is the ‑‑ is that the mentees need

to be willing to take mutual responsibility for the relationship.

So if they're only always waiting for the mentor to call them.

So we got a grant from, it's now 15 years ago –

Robert Wood Johnson Grant to

bring mentoring and to teach

self‑determination and self‑advocacy to people

with developmental disabilities that were really entrenched in

the system.

They went from a group home to a day program, and we thought, well, this is great.

We'll do peer mentoring for them.

And boy, did that fall flat.

Because these were people

who had ‑‑ I mean,

it was eye opening for us.

We thought the system gets

so much money in our state.

What do they need?

And luckily we had some really good leadership in our division

of developmental disability that realized there was a lot of –

a lot of program provider control going on with funding sources and

the philosophy that was happening.

You know, the sheltered workshops and the day programs and group homes and stuff.

And they really wanted to

bring self‑determination and philosophy to our state,

and we were the ‑‑ we were

the ones that they chose

to do it with.

So we've had targets on our

back for a few years now.

And so it was just completely surprising to us because we

weren't familiar with that population as an independent living center.

These are people who had never had the privacy of closing ‑‑ locking

their own door of who walked in their room,

had never had phone

calls with anybody.

Their whole life was really going from one program to another.

That was the target group.

And we found out some of our mentors had been put in

special ed programs.

People with physical disabilities with people with cognitive disabilities,

and had some very bad memories of those experiences and had a lot

of prejudice about

that population.

So that didn't work the way we thought it was going to work.

In some ways, our staff person, who's actually been with that

program for 15 years now,

became a prime mentor to people.

We had to make adjustments

as we went along.

So not everybody is ready

for the mentor relationship.

They didn't understand

somebody being there that

wasn't a paid staff.

They wanted money from us.

They did it ‑‑ it was just starting from the very

beginning is all I can say.

So we had a lot of work to do

with the entire systems change.

When they tell you it's their idea and there's a new thing in town

called self‑determination

and consumer choice,

and they tell you that's why they need to go to a workshop because

it's their consumer choice,

you've kind of succeeded

in a funny way.

So that's that.

More barriers.

Funding, funding, funding.

Talking somebody into giving you the money to do it for sure to dedicate that staff person.

That was definitely

our first barrier.

We had the willingness,

but we had to find the way.

And then service area sometimes, rural versus urban.

We have mentors that

really did phone mentoring.

And then we had an event and that was really the first time they

got together face‑to‑face at

this event that we facilitated.

APRIL REED: One of our matches

of the year once was they had

worked together for years and

had never met in person because

they just could connect

that way by the phone.

So sometimes I think we assume that in person is the only way

to do these, and that's

really not the case.

With technology,

it's really easy to

connect with people.

We were talking about

Skype earlier.

That's really easy.

E‑mailing, phone, in person.

So it's easier to connect with people than it used to be.

Transportation isn't the

barrier that it might have

been in the past.

Still an issue.

AMINA DONNA KRUCK: It's still

an issue, but in the city it's much less than an issue.

In the rural areas,

it's still a big problem.

And then the volunteer coordinator, and this I added

because if you get the

wrong person for the job,

it doesn't work and I talked before about the issue about

an introvert versus an extrovert.

I don't want to offend

any introverts,

and I love them very much.

My daughter is actually a trainer and an excellent trainer and

she's an introvert,

but it exhausts her to do

it and she has to

rehabilitate afterward.

You need a volunteer coordinator.

They are constantly,

constantly talking to people.

They are on the phone making matches, checking in,

and you can maybe tell a little bit ‑‑ she's got a little bit

of a mother hen in her.

She's protective of her volunteers with staff and stuff because

staff can kind of be abusive

to volunteers and not realize.

Either treat them like

they're not there,

or ask them to do things

nobody else wants to do.

I see some nods.

She really watches out for her volunteers and stays on top of it.

So I can tell you, I've had some volunteer coordinators that had

matches that were a name only and I didn't find out for a while.

And that's where we discovered,

we need to make sure that

the matches are working.

So within the first month,

you need to do an evaluation.

Did you really get connected?

Some people need you to be

there and some don't.

That has as much to do with

the mentor as the mentee.

What kind of person they are.

We had one mentor,

he was a great transit

advocate and he would meet people in rehab and take you right away

to a transit advocacy meeting

on the public bus system,

and he would recruit people

to our program at the bus stops.

So he had no problem.

But other people need

you to be there with them.

So the coordinator ‑‑ and then also ethical issues do come up,

so you need somebody who's not afraid to show where they have

weaknesses or need help or support so that you're kept in the loop

if there's anything tricky going on and you can make decisions

together and not expect them

to handle that kind of thing

on their own.

So you need somebody who has

a certain level of humility.

And it doesn't have to be

a person with a master's degree,

but I can tell you someone who's been through a master's in

a social work program has some of those ethical boundaries that

sometimes a person without that training doesn't have because

that's emphasized in

their training.

So I'm not saying it has to be that, but I'm saying I've seen

a real advantage to having somebody with that background.

And some of that background

I didn't even have as training that I learned from.

And getting the appropriate forms and things that support your

documentation and everything that you need to keep continuing

to improve the program.

Darrel talked about that.

Giving staff the ball and

letting them run with it.

There's another side to that

which is, they can run right

off a cliff, you don't know it.

So you need somebody who's really willing to communicate with you

about it and has those real professional standards.

And I say that not that they

know more than anybody else,

but they take that

level of responsibility.

That's what I mean when they say that professionalism about them.

To take charge of that program

and to be able to say if there's

something not working

well with it.

So certainly checking out and

make sure your matches are

working early on.

There's a big difference.

Because if you go very long

and it's not working,

it's never going to work.

You want to know right away because then you figure out why isn't it working and not ready.

You know, all matches don't work.

They just don't work.

And then you regroup

and find somebody else.

So that's key.

Your volunteer coordinator is key, and we didn't used to have that

in this training, but it makes all the difference in the world.

APRIL REED: I think you highlighted one really good point

which is sometimes when we start

a program like this, you know,

we start out getting

the forms ready.

We think we're good to go,

but what we really need to

remember is that programs like this change and adapt based

on what you're experiencing.

So if something's not working,

you need to address it.

You don't let it go.

You always have to be

updating and looking at things.

I remember when I first came over,

we did a big review of

our training manual.

And I thought, okay, that is good.

That is done.

And then I found myself doing

a training with it and I was like,

well, I need to take

a look at that.

And then I thought, okay,

now it is done.

No, it's never done.

It's always a good idea to be taking a fresh look at the

forms and your policies because your policies and procedures when

you're working with volunteers, that's what keeps you out

of trouble.

That's what keeps yourself

out of trouble

and the volunteers

out of trouble.

Boundaries are a really

good thing in this program.

So if you're not taking a pretty often chance to look at those,

that's when centers

get into trouble.

I taught an online

class a couple weeks ago,

and one of the gentlemen told me we've had this program for years

and he said it never quite worked and he said now I realize.

And it was about never updating the policy and procedures to fit

what they were doing at the center today versus five years ago,

so that's really important.

AMINA DONNA KRUCK: Yeah, so like recently,

the Arizona Council of the

Blind is having a conference

at our center, and they asked us if we would provide some people

to be sight guides and to volunteer to help out because

she knows us well from other coalitions we belong to.

And so April thought about

it and she's really helped

me a lot in this area.

She came to me and she had

created guidelines for that

kind of volunteering when our volunteers are working for

another group,

what they can and can't do.

Clear as a bell.

So there's this agreement upfront, this is what we can do

and what we can't do.

Same thing in the volunteers ‑‑ that form isn't,

but all the other forms are

in the manual that's up

on the ILRU website.

So you have access to all of this stuff we're talking about.

So right away she thought,

okay, if we're going to do this,

let's get really clear guidelines so they know what to expect and

the volunteers know

what to expect.

And even then,

sometimes there's trouble.

You have way less trouble.

You just cut all of your trouble down right then and there.

Everybody signed it and

knows what's going on.

APRIL REED: One barrier we didn't mention was recruiting.

And so often when I talk

to other centers that are

working with volunteers,

they talk about how hard it is to constantly train people and get

them oriented to the agency and how exhausting that is.

But what's amazing is the clearer you are in your recruiting when

you know what you're looking

for in a volunteer,

when you know what kind of person you want to have come into your

office and represent your

agency as a presenter or

as a peer mentor,

when you get really clear about that, training gets a lot easier,

orientation gets a lot easier.

Recruitment gets a lot easier.

So sometimes we have to be really clear about what works,

what kind of volunteer do we need, and then that really cuts down on

the amount of time and energy

you spend kind of recruiting

and looking for people.

AMINA DONNA KRUCK: You can spend all of your time worrying about other things.

So this is some of that stuff

I was just talking about depending on the right person.

And some of the qualities that

I actually sat down for the first

time that I identified that

I learned over the years,

having good and bad

volunteer coordinators.

So, you know, good organization, good communication skills,

good collaboration skills.

She's, like I said, the one person in our agency that really crosses

across all the other boundaries and works with the other staff,

and she's going to be able to do that because each department has

their own culture,

even with your own agency,

and then each individual within that has their own way.

That's the best way

to approach them.

Good coaching and

motivational skills.

Very good judgment.

Clear judgment about what's

okay and what's not okay.

So she's got very clear boundaries and that makes a big difference.

Probably clearer

boundaries than me.

She's helped me get clear over time about what makes sense

and what doesn't make

sense ultimately.

And then you avoid the kind of troublesome situations that most

people are afraid of working with volunteers, you don't have them.

Assessment skills, commitment to ongoing professional development, ongoing learning herself.

And one thing is, if you've got somebody to ‑‑ in our state,

we have licensing for social workers and counselors and stuff.

You have to take ethics

training every ‑‑ you know,

every two years, you have so

many credits you have to do.

And that's really a good thing,

it turns out, because it keeps

you thinking about some of those things that can be tricky.

And what people always worry

about with volunteers,

we have not had any problems.

Good independent living philosophy that healthy versus dependency

kind of attitude is

just really key.

APRIL REED: I want to just

spend the last few minutes

of our presentation talking to you about ‑‑ talk about some key components that we feel like will

help you develop a program or maybe revamp a current program

that you might have, and the first we'll talk about is recruitment.

Do you want to switch to this

side for me? Thank you.

Ongoing outreach is important.

You want to keep getting fresh blood into your program and you want to be diverse.

You want to have mentors with different types of disabilities.

You want to have mentors with cultural and ethnic backgrounds.

So recruitment is something that you'll need to be doing.

Volunteers sometimes call the center looking for opportunities.

We will advertise

in our newsletter.

We have a monthly newsletter.

I'll go out and do presentations.

Some other agency support groups, hospital support groups are

a really good place to recruit mentors because there are people

that are already seeking support and have already experienced

support groups and what

that's like.

A large majority of my referrals for mentors and mentees comes

from our staff.

It helps to have staff who understands who the peer mentors

are and what they can do

and how they can help.

Occasionally we have consumers

who come back and say, listen,

I got mentoring 20 years ago when I was in rehab or I got mentoring

with your program and

I want to give back.

Again, mentee recruitment.

Mentees are people already work with our IL skill staff.

We've created programs ‑‑ excuse me, paperwork specifically to our

program so there's a consumer request for a peer mentor.

This is the form that the staff are going to have to fill out

for that consumer.

Why are you requesting a mentor?

How can a mentor help you?

Again, that's all provided in

our peer mentor manual which

is on the Wiki, and we also have

a confidentiality agreement

specific for our

peer mentor program.

So explaining to that mentee

what can they expect from

a peer mentor.

What are the dos and don'ts.

What is our policy about confidentiality.

Really doing that informed

consent with the consumer.

Some recruitment tips.

This should say mentor

recruitment tips.

I apologize.

Talking to people in your community that are really good

at advocacy or really good about transportation or housing,

or maybe you always see

them at your agency's event.

They're really knowledgeable.

Tap into those kind of people.

They often make great mentors.

Again, have an application

form for your mentors.

We provided that in

our training manual.

You can screen and really learn a lot from people by what they tell

you on an application,

if your application is

asking the right questions.

So you want to make sure you have a good application so you can really get a good screening tool.

For our program,

mentors must be 18

years old or older.

They complete an application

and provide three character references.

And before they attend our training, they must complete a screening interview with me.

We do have a mentor rules and guidelines form that sets

boundaries and establishes expectation.

Again, it's not really fair for you to recruit somebody who has

no idea what they're

getting themselves into.

So giving them some information about what do we expect

from peer mentors,

what do we have you do.

They must agree to maintain consumer confidentiality,

report any consumer suicidal

or homicidal attack or suspicion of abuse.

Other things they agreed

to is maintaining a proper

mentor friendship.

This is not a dating relationship.

I am not match.com and

I don't want to be.

So just, again, laying out

for the mentors what do

we expect from you.

What are you going to be

doing as a peer mentor.

What are you not

going to be doing.

Audience: I have a question.

Do you do background checks?

APRIL REED: We do.

Very good.

Next line.

Good question.

We didn't in the beginning,

but we instituted that now

for about seven years, I guess.

AUDIENCE MEMBER: Started to do

it because our insurance required us to do it for our staff.

And some contracts had to

require it previously,

but not all of them.

And so then we decided to do it for our mentor volunteers as well.

Now we do it for all of our volunteers that are ongoing volunteers.

APRIL REED: We started with

the peer mentors and now we

do it with every volunteer.

In addition to the fingerprint

and background check,

the state of Arizona has

a form called the criminal self‑disclosure form.

Some of you might have something similar in your state.

Basically, if anyone volunteers

at a nonprofit organization,

they have to complete that form with a notary indicating that

they do not have any

felony convictions.

Did you have a question?

AUDIENCE MEMBER: I have two.

One is on the felony form,

as long as it wasn't a form

of abuse, that they do have a felony like a drug felony?

And then also,

do you do a drug‑free test?

APRIL REED: Well, for our

center what we've decided

is if they have

a felony conviction,

we would not allow them to be

a mentor if that conviction

involved harming someone else and harming themselves in some way.

AUDIENCE MEMBER: Yes, there's

a way to ‑‑ they can get their

voting rights restored if

they paid their dues,

so to speak,

to society.

So there's a list of the

okay felonies and the not

okay felonies,

and we have the same list for our personal assistance program.

So we modeled it

after their program.

So it hasn't come up very often for us, but sometimes there's

a judgment call about what was it, how long ago was it.

That kind of thing.

APRIL REED: And we'll sit down

and we'll do that,

Amina and I and our

other directors.

AMINA DONNA KRUCK: Drug testing, we don't do that.

We do have that policy for staff.

If somebody has an accident on the job, they need to get a drug test,

but we don't have

that for volunteers.

APRIL REED: A funny story

about that.

If you saw this, you would think she's just like your typical sweet little grandma and she is.

But she came to the training and we did the fingerprinting and

she pulled me aside and she said, "April." She said, "When I was 18,

I shoplifted and it was a

felony conviction, I think."

I said, "Okay."

She's in her mid‑70s now.

I'm like, "Okay.

Well, don't worry about it.

Let's see what comes

back from DPS."

Amina and I met and

we talked about it.

Of course that was something

she did when she was young.

It didn't impact who she is

today and what she can

share with somebody.

We have a process.

Audience: Just a comment.

This is Richard.

There are background checks

that you can do that are

through your state,

as April and Amina mentioned.

There are also federal

background checks.

And as mobile as our

populations are,

you may want to

consider doing that.

And I think April may

have alluded to this.

You can do background checks based on a Social Security number,

or you can do them on

fingerprints or both.

If you don't have a facility

for doing it yourself,

you can often make an arrangement with your local police department,

or you can ‑‑ often UPS stores will do that, but there are some

legal ins and outs about going through that process.

And just make sure you're covered as you do that as an organization.

APRIL REED: Thank you.

AMINA DONNA KRUCK: And there

is a cost involved.

I think now it's up to 45.

APRIL REED: 65.

AMINA DONNA KRUCK: 65 per person, so there is some cost.

APRIL REED: But is it

cheaper in other states?

I've had other centers tell me it can be as cheap as $20 a person.

And we chose to do the federal

and state background check.

That's what we've chosen to do.

AUDIENCE MEMBER: I have

a question.

APRIL REED: Hi.

AUDIENCE MEMBER: Hi. Does

the mentor pay for the

background check?

AMINA DONNA KRUCK: We pay for it.

AUDIENCE MEMBER: You pay for it?

AMINA DONNA KRUCK: Yeah.

Finger background check,

sometimes you have to do it more than once to get a good check.

I think it's pretty funny.

APRIL REED: Just a tip on recruiting, something we've learned over the years.

Before you start recruiting,

have those forms in place.

Have your application in place.

Know what you want

from a peer mentor.

Have a volunteer job description.

We provided that for you

in our training manual.

Write your rules and guidelines policy for your volunteers.

Let them know what

skills you need,

what abilities they should have.

Really give them

informed consent upfront.

Let them know what they're

signing up for when you're recruiting them.

It's mandatory for all of

our peer mentors to attend

a two‑day training.

I think when you look at it,

it's 10 hours exactly.

What's great is, it's not me up there talking for two days which would be a nightmare for me.

It's a combination of our staff coming in, our CEO comes in,

Amina comes in, different IL skills staff come in.

For example, we will have

our early intervention

coordinator come in.

He works with people who are newly injured in the rehab or hospital.

And what better person to talk about grieving and adapting to

disability and the stages

of grief than him, right,

because he does that every day.

So it's definitely collaborative training that we offer.

And we provided you, again,

with our training manual so

you can look over each of the sections that we provide.

We also have a peer mentor panel, so they get to meet some current

mentors and kind of pick their brains and hear their experiences.

And everyone receives

a training manual,

so they're getting materials

that they can take with them.

One of the most interesting training I've ever done

in January,

and I told her probably if

it was my first training,

I would have run

out the door screaming,

but it was ‑‑ it was just fascinating.

We had people there that by the end of the training were really

identifying that they needed mentoring and I ‑‑ I was torn.

I told Amina, I'm torn

between being frustrated.

You know, we just

did this whole ‑‑

AMINA DONNA KRUCK: We hardly got any mentors out of the training,

and it was one of the bigger trainings we'd ever done.

APRIL REED: And I had to stop myself because I realized these people still got something.

There was a lady in that training,

and she will be a really

great mentor one day.

She will be awesome, but going through that training and hearing

us talk about independent

living skills and IL history

and IL philosophy,

she said, "You know what,"

she said, "I'm in a situation

in my home.

I live with my attendant and

I pay the rent and they live

there with me for free.

And I realize hearing you talk about advocacy and IL philosophy,

I'm not in a good situation and

I need to fix this."

And so it was amazing because

I was like, "Okay, great.

Let's get you hooked up

with our coordinator."

AMINA DONNA KRUCK: She

actually chose to go back

into a nursing home.

She's functionally quadriplegic.

To facilitate she needed to get safely away from these people that

were providing care from where she was living,

but were ripping her off

and not being kind to her.

And then RA is working

with Fernando,

our reintegration coordinator,

to move back out again.

Meanwhile, she was at the council.

She's out at everything now.

It lit a fire and she's going

to be a fabulous mentor.

So that was amazing.

There was another woman

who at the next one,

the tip is it's a good place

to evaluate volunteers.

So there's this woman

who volunteered, okay.

I've seen this woman for

20 years at transit hearings.

One of them she came into the building doing somersaults and

I heard her testify for 20 years and said, "What do you think about

this person being a mentor?"

And I said, "Well, I've only seen her in this one context and she

seems a little off

the wall to me."

And, I mean, I know public transit advocates, that was not the issue.

It was her demeanor and

how she handled things.

And so I said, "Well,

let her go to the training

and let's just see."

You know, some people go through the training and then they go,

"I'm not ready for this."

And that was another group of people that started going to

the group mentoring session.

They felt more comfortable

doing that at first.

But, you know,

So this person was

in the training,

and we could just see that she was basically oppositional about

everything no matter what and

she was not really ready

to be a mentor.

We thought, oh, my God,

how is this going to work?

We didn't know.

And then we had somebody else who was a relative of one of our staff

members who was also

not ready to be a mentor.

And he came to see it in

the end which is really neat.

After they go through all of that and meet all the other people,

most people have a fairly realistic picture about

whether they're ready

to move forward or not.

APRIL REED: That particular gentleman, what he said to me,

"I can see this is a lot of responsibility."

He said, "I have a hard time showing up for things.

I'm not going to follow through."

And I was like, "I noticed

because you came two hours

late for the training.

I noticed that."

AMINA DONNA KRUCK: Yeah, she'd already came to me and said,

"I don't know. This guy's a relative of a staff member.

He didn't even come the

first day and came in halfway through the second.

What am I going to say?"

It all worked out.

When they walk through it,

it's like a good testing ground.

APRIL REED: And it's about laying out for people really clearly what

are they going to be doing and allowing them to assess,

is this something I can do,

and that's what's nice about spending two days with people.

You get to know them a bit better.

So we're going to hustle.

So we, of course, cover our philosophy in our training.

We talk about

people first language,

we talk about IL history.

We show the Ed Roberts

"60 Minutes" interview.

A lot of the people that are coming to the training,

even though they're

people with disabilities,

first time getting exposed

to IL philosophy, history.

We have a voluntary report form, and this is the form people must

sign at the training and it outlines for them what they are

agreeing to do if they have a mentee who is suicidal,

homicidal or reports

any incidents of abuse.

Again, this form is

clearly laying out for them,

what do you do,

what do you not do.

And I think we have

one more slide on this.

So our crisis intervention policy,

we kind of lovingly call this

our pass the buck policy.

Basically what we're training the mentors is that their only legal,

ethical, moral responsibility as a peer mentor volunteer is that

if they hear their mentee make

a statement that's concerning

to them, they are required

to report that to me.

I am then legally, ethically, morally responsible to follow

up and make sure that person has resources, is safe at getting

the appropriate intervention

that they need.

So we have a process.

If there's not ‑‑ if I'm not

there for some reason,

someone's monitoring my phones, again, the breakdown of the

peer mentor training

and we talk about ABIL.

Who are we? Again, it's really important as a volunteer to know who are you working for.

Do you agree with

their philosophy?

Do you like what they offer?

We talk about adapting to disability,

the grieving process, loss.

How do we help someone

through the stages of grief.

We talk about disability liberation and awareness.

It gets people really excited about thinking about

what are the barriers,

what are the stereotypes,

what are those false beliefs

I hold about my own disability, and how can I counter about

those in myself and

with somebody else?

We talk about self‑advocacy,

we talk about language etiquette.

It's becomes really important

for us to really do a good job

of training our mentors on language and etiquette because

we expect them to work with

people with different types

of disabilities than

their own at times.

And so they need to be really educated about how to work with

somebody who has a completely different disability experience

than they do and

to be appropriate.

We talk about goal planning.

What are the goals

your mentee has,

how do you start working on those,

how can you collaborate

with the staff.

We also offer a lot of

follow‑up training because

two days is two days.

And so having trainings

at the center anyway,

what a nice thing to get

the mentors involved in.

So we do self‑advocacy trainings.

We do legislative

advocacy trainings.

We have workshops and barriers, and we get our peer mentors

to come in for that,

for those trainings,

so they're getting ongoing support and educational development.

I also do one‑on‑one

training with the mentors.

If somebody's going to be working with a person that they've never experienced that disability,

then they definitely need to have some training and be able to be

coached and have some information about what that disability means

for that person and

what's that experience.

Richard, do you have a question? I'm sorry.

AUDIENCE MEMBER: Just very quick.

Back to duty to warn,

duty to report,

those laws are different

state by state,

and it's really crucial that you make sure you comply with those.

So find out, find someone who has real expertise about that in your

state and find out what your

staff and your volunteers,

what responsibilities

you have, so.

APRIL REED: Really good point.

Thank you.

Judy?

AUDIENCE MEMBER: My question was a lot like Richard's explanation.

Your volunteers, their only obligation is to report to you.

APRIL REED: Right.

AUDIENCE MEMBER: You have a mandatory question mark.

You have a mandatory reporting obligation to your DHR?

APRIL REED: Yes, I do.

Amina is a licensed counselor.

AMINA DONNA KRUCK: What

is the DHR?

AUDIENCE MEMBER: Department of Human Resources in our state.

AMINA DONNA KRUCK: No, that's

not who we report to.

APRIL REED: Right.

It's a little bit different.

We do have a mandatory reporting requirement, as we are licensed social workers and counselors.

And so our mandatory duty is to intervene, get that person help,

intervention through crisis services and to document what

we've done to assist that person.

AMINA DONNA KRUCK: If it's an intent to hurt others,

we have to report

it to the police.

If we feel like it's an abuse situation that's related to

a staff person, then that

gets reported to our

executive director.

APRIL REED: And we would

also report that to adult protective services.

That's the agency that we would report that to and then they

would do follow‑up.

AMINA DONNA KRUCK: And our state does have one of those laws that

protects volunteers so they

don't have to feel responsible

for doing whatever.

That's all they need to do

is let somebody else know.

And, again, I've supervised this program for 22 years and we've

had very, very few incidents.

APRIL REED: Only just last year had our case of someone ‑‑ our

first case of somebody

threatening somebody else,

and that was the first

time that had happened to us.

AMINA DONNA KRUCK: So some of that is luck and some of it is because

of the guidelines that we already have set up that help us out.

And over those years,

we've only had one or two

dating inappropriate types

that we had to intervene.

APRIL REED: When I first started doing training, I thought this crisis intervention would be

the hardest part to teach

the peer mentors.

Honestly, it's the easiest

because they want to know

you have a policy.

They want to be really clear

about what do I do and don't do.

And honestly, they're relieved when they know it's real simple.

This is what I do.

This is how I get

this person help.

This is what I should listen for.

This is what I say and then I get April or I get Amina and so it's

really clear and honestly is

one of the easier sections of

the training to teach.

AMINA DONNA KRUCK: I was

a crisis counselor.

I ran a crisis clinic.

I can talk to people

about that straight out.

And when you have that role modeling, you're not going

to make anything

worse by aggression.

I talk to them about warning

signs to look for if they

have a concern.

If they have any concern,

they know to talk to us

and it's not cheating.

That's the one place we tell them, that's the place we don't maintain confidentiality.

We have a concern about you hurting yourself or anybody else,

we have a duty to report that

and to get you the help because

we want you to get help.

And that 99.9 percent of the cases always calms down everybody to know you want to get help.

APRIL REED: And, again,

I mentioned that informed consent

we do with the mentees before they're even meeting a peer mentor

that outlines this

policy for them.

Okay.

Amina, I think we have

a couple more slides.

Free training, provide a manual.

Don't be afraid to train

on the hard topics.

People want to know

that you have a policy,

that you have a procedure.

Mentors need to be

treated as individuals.

Some of my mentors I hardly

ever hear from because

they're out doing it.

They report their hours.

They don't need me.

They're good.

Others are just one step ahead

of their mentee and they need a lot of support and supervision.

So you need to treat

people individually.

Some mentors don't

like working one‑on‑one.

That's why you have groups.

That's why you have presentations.

That's why you do community advocacy opportunities

for your peer mentors.

At ABIL I am the primary

contact for the mentors.

It's critical that you have that communication and that you're able

to ‑‑ that they're able to contact you with questions and concerns.

And really we've learned this over the years is that mentors stay

active longer if they feel

like they have a supportive relationship with the center.

Again, we do documentation,

we track the volunteer hours

which can be used as in kind donations for purposes of our program funding matches.

I meet regularly with our referring staff to give

them updates.

I can go in our database and

do a note about a match or

something people are working on,

and that will be copied to

the consumer file as well.

So there's a lot of communication and updating documentation to let

the staff know what's

happening in the match.

AMINA DONNA KRUCK: So like

when we get a new staff,

I'll talk with April about

how are the referrals coming,

and there may be a staff member that never does referrals and

so we'll talk ‑‑ we'll problem solve how to help that person

feel more comfortable

using a mentor program.

We may discover there's one staff person that's sending people over

before they're ready and they

just don't understand.

And most often is that,

in the beginning I had to.

I don't anymore.

Remind her to go to that ‑‑ to

the other ‑‑ most of the referrals

do come from our community integration unit where the

IL skills training is going on.

To go to that staff meeting and remind them again about what we can do and what we can't do.

That they just need periodic updates as a unit to remember

that referral process.

So that communication with the other units is really important

where we're trying to develop

more mentors that help people in the employment area,

and that's a little harder because when somebody gets working,

they don't have time to do that.

APRIL REED: And that's

a good thing.

AMINA DONNA KRUCK: And there

are people looking.

I would say that's one of the areas we lack is more mentors

that can do that.

So we're looking at how can

we enhance that right now.

APRIL REED: We do regular consistent evaluation.

We have an evaluation schedule

of one month, three months,

six months.

I do the evaluation

with the peer mentor.

The staff is doing a separate evaluation with that consumer.

How's the match going?

Are you progressing on your goals?

AMINA DONNA KRUCK: You have

to bug the staff to do that because they're busy.

And then we do exit interviews also when they're done.

APRIL REED: Right.

Which gives us a lot

of good feedback.

What did they like about

the mentoring experience,

what could be better.

And we definitely do use

that to develop our program

and make improvements.

We have a reward that goes to Amina and a report that goes to

our board that is statistical information that we're getting.

AMINA DONNA KRUCK: And that's

how we know when things

aren't working, and how

I know if the volunteers

are working and that's

how that got developed.

We had a fun night last night.

I had to sneak out a little bit early because last night was our "Spirit of ABIL" awards.

Again, recognition.

Someone, I think it was Deb yesterday, had mentioned about how

important it is as staff that we celebrate with our consumers those

little accomplishments and little steps towards the goals,

and that's very much important with the peer mentors and mentees.

We also hold an annual holiday party for the peer mentors

and their mentees.

We do some news stories to kind

of recognize volunteers that are

making a difference in the community, and it really does

not need to be expensive.

I mean, people ‑‑ we give out little ABIL pins with the

number of years they've been volunteering, T‑shirts,

little things that make people ‑‑

AMINA DONNA KRUCK: A lot of

thank you cards all the time.

APRIL REED: Lots

of thank you cards.

So finally the benefit of mentoring for the mentors,

mentors report being able to give back that that was a benefit.

It increases their

own advocacy skills,

their awareness of

community resources,

their leadership skills,

the benefits to the mentees.

They don't have to

start from scratch.

They don't have to

reinvent the wheel.

They have a peer mentor that they can call when their staff is not available or on the weekends.

They've got somebody to connect with that can help them out

in the community,

help support them,

offer knowledge.

Mentors and mentees often go on to contribute in the community.

We've seen them going on to

other volunteer opportunities.

Continuing education,

finding employment.

A lot of times it gives them the confidence to step out and keep

working on some of

these other goals.

So, again, just to summarize,

if you're thinking about offering

this program or you're thinking about using peer mentors

or thinking about doing some groups, really focus on those

key components.

Recruitment, looking for mentors.

What kind of qualifications

do we want our mentors to have.

Look at your training

and supervision.

Look at your evaluation

and build in recognition.

Those are the key components for

a successful peer mentor program.

And most importantly, as Amina said, a lot of times centers

talk to us about the fears they have about using volunteers.

And what we always

come back to is,

you can address so many of those fears and barriers by developing

a program and policies that incorporate those key components.

AMINA DONNA KRUCK: And right

now I should say that our

we only work with mentors that

are adults, that are over 18.

There is another program that's doing mentoring with youth in

our community, and that ‑‑ that was really because our board

just did not want to take

on that liability, so.

APRIL REED: And I think that comes back to each center has to look at what can their center manage.

What can you offer that feels comfortable to the staff.

Again, our peer mentor training manual is up on Wiki,

all the forms, everything.

Everything we talked about, evaluations.

AMINA DONNA KRUCK: Things you want.

Leave the rest behind.

APRIL REED: And of course you have our contact information if you do have follow‑up questions.

Thank you.

AMINA DONNA KRUCK: Any questions or comment before we go to a break?

I want to remind you about your sticky pads on the table.

Tim's running around.

He'll pick them up.

So thank you very much

for filling those out.

You've been great about that.

So have a 15‑minute break and we come back at 3:00.

Thank you.