**Peer Supporter Knowledge and Skills Self-Assessment**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Confidence Level:

1: I am not at all confident that I can do this.

2: I am not confident that I can do this.

3: I have a little confidence that I can do this.

4: I am confident that I can do this.

5: I feel very confident that I can do this.

|  |  |  |  |
| --- | --- | --- | --- |
| **Peer Support Activity** | Comfort level at **beginning** of training | Comfort level at **end** of training | Comfort level at end of program |
| Identify open-ended and close-ended questions |  |  |  |
| Ask open-ended questions |  |  |  |
| Use active listening |  |  |  |
| Use reflections to help others figure out their feelings |  |  |  |
| Lead small groups |  |  |  |
| List steps of goal setting |  |  |  |
| Teach others about goal setting |  |  |  |
| Create an action plan for a goal |  |  |  |
| Teach others to create an action plan for a goal |  |  |  |
| Explain what chronic conditions (diabetes, high blood pressure, high cholesterol) are to other people |  |  |  |
| Define self-management |  |  |  |
| Explain self-management to other people |  |  |  |
| Teach others how to self-manage |  |  |  |
| Lead small group exercises |  |  |  |
| Bring a discussion back “on track” |  |  |  |
| Explain why medication adherence is important |  |  |  |
| Add your own goal: |  |  |  |
|  |  |  |  |
| Add another goal: |  |  |  |
|  |  |  |  |