



Integrating and Developing a Healthy Peer Workforce within CCBHCs

Presented By

Erinn Graber, LPC, LCDC, PSS, CFP

Peer Services Manager

What is Peer Support?

Peer support is the process of giving encouragement or assistance to overcome a challenge in life by someone with lived experience.

Lived experience is something we experience first-hand that is so impactful that it becomes part of our identity.



Peer Support is a Profession

- Peer Support Specialists have a state regulated training and certification process.
- Peer Support Specialists must maintain ongoing supervision.
- Peer Support Specialists are governed by a Professional Code of Ethics and are subject to disciplinary action for violation of the Code of Ethics.
- Certification is maintained through ongoing Continuing Education Credits.



Texas Peer Certifications

- Mental Health Peer Specialist (MHPS) - Medicaid billable
- Recovery Support Peer Specialists (RSPS) - Medicaid billable
- Re-Entry Peer Specialist (JI-RPS)
- Certified Family Partner (CFP)
- Peer Support Supervisor (PSS)
- Certified Family Partner Supervisor (CFP-S)

Peer Specialist Code of Ethics

The principles in the following Code of Ethics guide Texas Certified Peer Specialists in their roles, relationships, and levels of responsibility in which they function professionally.

1. The primary responsibility of Certified Peer Specialists is to help individuals achieve their own needs, wants, and goals. Certified Peer Specialists will be guided by the principle of self-determination for all.
2. Certified Peer Specialists will maintain high standards of personal conduct. Certified Peer Specialists will also conduct themselves in a manner that fosters their own recovery.
3. Certified Peer Specialists will openly share their recovery stories, and will likewise be able to identify and describe the supports that promote their recovery.
4. Certified Peer Specialists will, at all times, respect the rights and dignity of those they serve.
5. Certified Peer Specialists will never intimidate, threaten, harass, use undue influence, physical force or verbal abuse, or make unwarranted promises of benefits to the individuals they serve.
6. Certified Peer Specialists will not practice, condone, facilitate or collaborate in any form of discrimination on the basis of ethnicity, race, gender, gender identity, gender expression, sexual orientation, age, religion, national origin, marital status, political belief, mental or physical disability, military status, or any other preference or personal characteristic, condition or state.
7. Certified Peer Specialists will advocate for those they serve that they may make their own decisions in all matters when dealing with other professionals.
8. Certified Peer Specialists will respect the privacy and confidentiality of those they serve.
9. Certified Peer Specialists will advocate for the full integration of individuals into the communities of their choice and will promote the inherent value of these individuals to those communities. Certified Peer Specialists will be directed by the knowledge that all individuals have the right to live in the least restrictive and least intrusive environment.
10. Certified Peer Specialists will not enter into dual relationships or commitments that conflict with the interests of those they support.
11. Certified Peer Specialists will not engage in sexual/intimate activities with those to whom they are currently providing support, or have worked with in a professional role in the past two years.
12. Certified Peer Specialists will not provide services to another when under the influence of alcohol or when impaired by any substance, whether or not it is prescribed.
13. Certified Peers Providers will keep current with emerging knowledge relevant to recovery, and openly share this knowledge with their colleagues.
14. Certified Peer Specialists will not accept gifts of significant value from those they serve.

A peer specialist may not:

- a) practice psychotherapy, make clinical or diagnostic assessments, or dispense expert opinions;
- b) engage in any service that requires a license;
- c) falsify any documentation related to application, training, testing, certification, or services provided under this subchapter;
- d) retaliate against any person who, in good faith, makes a complaint or files a grievance against the peer specialist regarding services provided under this subchapter;

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Peers are Part of the Integrated Care Team



History of Peer Services at The Center for Health Care Services

- The Center hired its first family partner in 2004 and first peer specialist in 2007.
- We operated with less than five peers across CHCS for the first six years.
- Peers were supervised by a clinician or medical staff at the local level.
- The Center became a CCBHC in 2019 and started making an intentional effort with hiring and retaining peer staff as part of the integrated treatment team.



Challenges with the Historical Model

- Lack of quality training and supervision
- Job role confusion
- Role drift
- Isolation of peer staff
- Siloing of units
- High turnover
- Chronically disengaged and dissatisfied staff
- Inconsistent documentation practices
- Lack of revenue generation and sustainability
- Minimal opportunities for career growth and advancement for peer staff



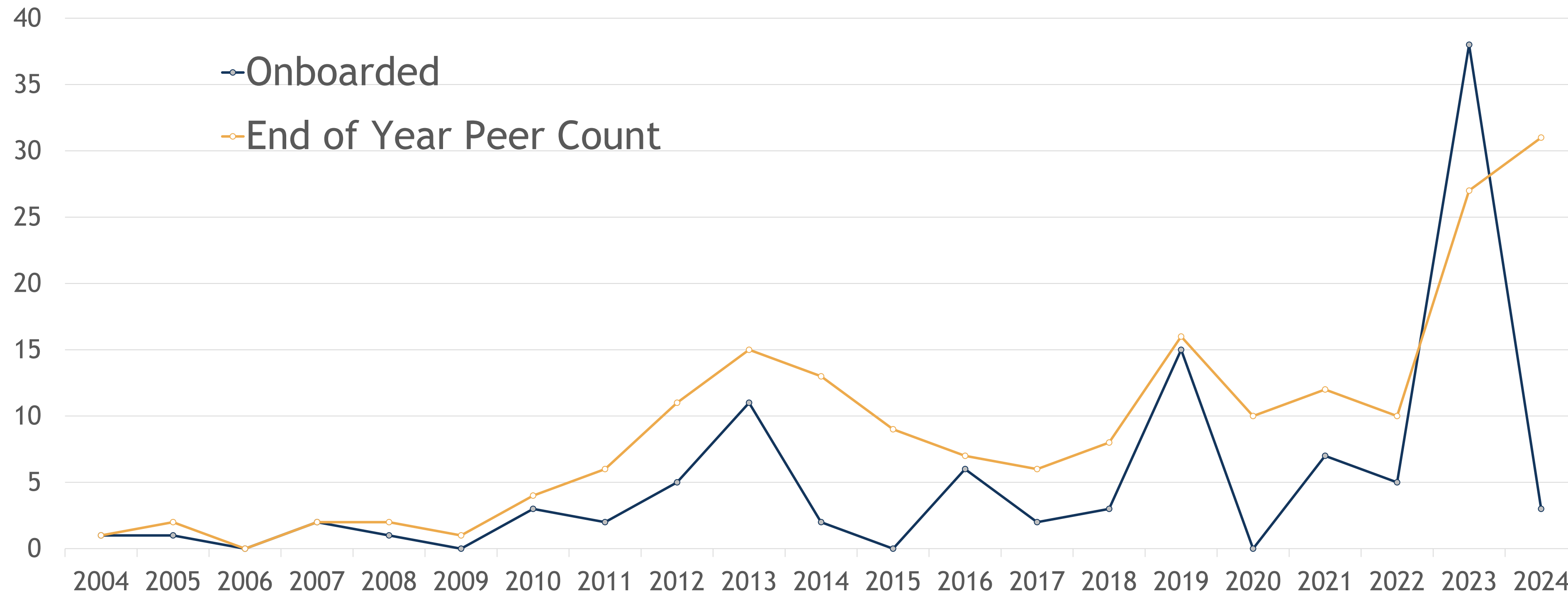
Program Development



In the Fall of 2022, we departmentalized our peer services with the early goals of building and retaining team members, enhancing training and supervision of peer staff, developing billing opportunities and sustainability, and integrating peers into multiple programs.



Hiring and Retention of Peer Staff



Recruiting

- Rewriting job descriptions
- Clear understanding of needs of different areas
- Intentional screening and interview questions
- Being open to hiring non-certified peer providers

We have found the most successful peer candidates are those who express a spirit of gratitude in their interview process. This trait speaks to their coachability, person-directed approaches and overall resiliency.



Training

Peer specific training track to include EHR orientation, documentation training and performance measures.

Peer core training integrated into New Employee Orientation.

Peer supplemental training within two months of hire.

Ongoing retraining and support provided by Peer Support Supervisor.

Peer-to-peer mentorship.

Opportunities for continued growth and development.



Supervision and Team Support

Peers supervised by peers.

All new team members and peers in training receive group supervision support 1x each week.

All fully certified peer staff receive group supervision 1x each month.

All staff have additional group supervision options 2-3x each week.

Monthly one-on-one with peer supervisor, with a focus on growth and development.

Quarterly in-person meeting with all staff and work on team building.

Daily check-ins with all team members focused on wellness, self-care and reflection.

Co-Supervision support with peer supervisor and on-site clinical administrator.



Supervision and Team Support


Our supervision structure has provided a safe space for peer staff to grow, ask questions, and find support from other peers. Peers are encouraged in their professional development and are valued members of the team.



Growth and Development



Centerwide Training

**THE CENTER**
FOR HEALTH CARE SERVICES
Mental Health & Substance Use Solutions
Where hope and healing begin.

Recovery Plan: Peer Intervention


CODE

Presented By
Career & Learning
8.2023

**THE CENTER**
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Peer Services: How are they different?

Jacob Ben...

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Mental Health & Substance Use Solutions

The History and Development of Peer Professionals

Presented By
Erinn Graber and Tu'Sheila Stewart



**THE CENTER**
FOR HEALTH CARE SERVICES
Mental Health & Substance Use Solutions
Where hope and healing begin.

Service Code
1075/1076
Peer Specialist Services

Care Manager Reference Sheet

When INTRODUCING peer services, inform the consumer that Peers provide...

- Recovery and wellness support services:
 - provide information and support for recovery planning
- Mentoring:
 - serve as a role model & assist the consumer in finding community resources and services
- Advocacy:
 - provide support during stressful or urgent situations
 - help to ensure the consumer's rights are respected

In addition, peer specialists use their lived experience to support the consumer with the following:

- Achieving the goals and objectives of the consumer's individualized recovery plan
- Skill development
- Problem-solving strategies
- Coping mechanisms for stressors and barriers encountered when recovering from a mental health condition or substance use disorder

When WRITING a recovery plan...

The care manager must include service code 1075 or 1076 in the recovery plan if the consumer agrees to work with a Peer Specialist.

DO NOT include 1075 or 1076 in the recovery plan if the consumer declines peer support

DO NOT add a new goal/objective for peer services

DO attach the 1075 or 1076 Peer Services Code under the goal/objective that best matches the service description

Example: Adding 1075 Peer Specialist Services to a Recovery Plan

Goal: John wants to utilize community resources to help him obtain groceries twice a month within the next month. "I'm always short on money for food. I want to know where I can go for some help."

Objective: John agrees to utilize food resources in his area to help him obtain groceries twice a month in the next month.

Intervention 1: (2095/4011)
QMHP-CS will link John to 2-3 community resources such as food pantries, SA food bank, or other resources identified by John.

Intervention 2: (1075)
Using lived experience, Certified Peer Specialist will provide advocacy and mentoring to John to help him find food-grocery resources and services.

4009 -Skills Training & Development Services
4006 -Med Training & Support Services
4012 -PSR Independent Living Services
4013 -PSR Employment Services
4014 -PSR Housing Services
4016 -Employment Related Skills
4017 -Housing Related Skills
4109 -Group Skill Training & Development
4106 - Group Med Training & Support Services

Peer Specialist Services frequency, quantity, duration:

- Based on consumer needs
- 104 Units of Services per 6 month period
- 1 unit=15 minutes
- 6.93 hours per 180 days

1075/1076 are the only service codes requiring a separate peer intervention.

Peers simply need to be added as a service provider for all other listed service codes.



Working alongside unit leadership and our Center of Excellence team to develop training to enhance the knowledge of the peer role and the peer specialist as part of the integrated treatment team.

Successful integration results in people feeling fully supported to reach their personal goals.



Integration from Outreach to Discharge

- Intake and Enrollment
- Primary Care
- Adult Behavioral Health
- Complex Care (POWER, AOT, FACT)
- SMART
- Adult TCOOMMI
- SASH Star Plus Pilot
- Neonatal Abstinence Syndrome (NAS)
- Integrated Treatment Program (ITP)
- Comprehensive Continuum of Care for Women (CCC)
- Children's Behavioral Health
- Juvenile Justice



QUESTIONS?

Erinn Graber, LPC, LCDC, PSS, CFP
Peer Services Manager
egraber@chcsbc.org

