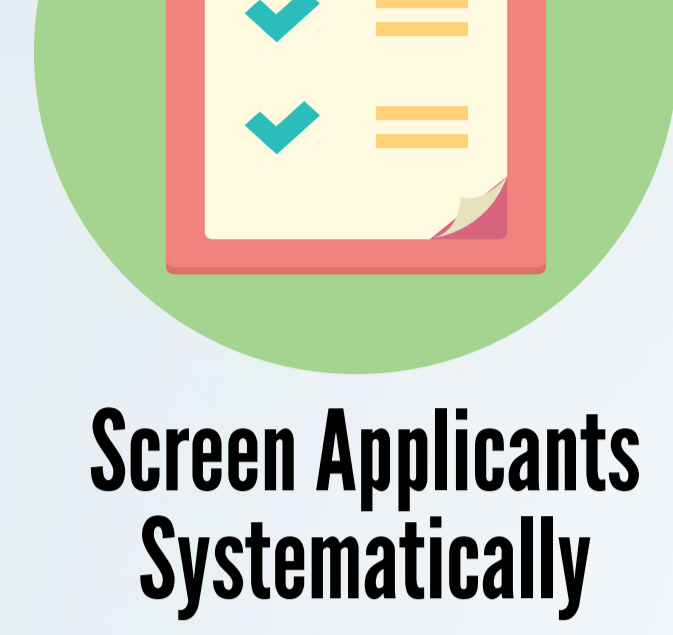
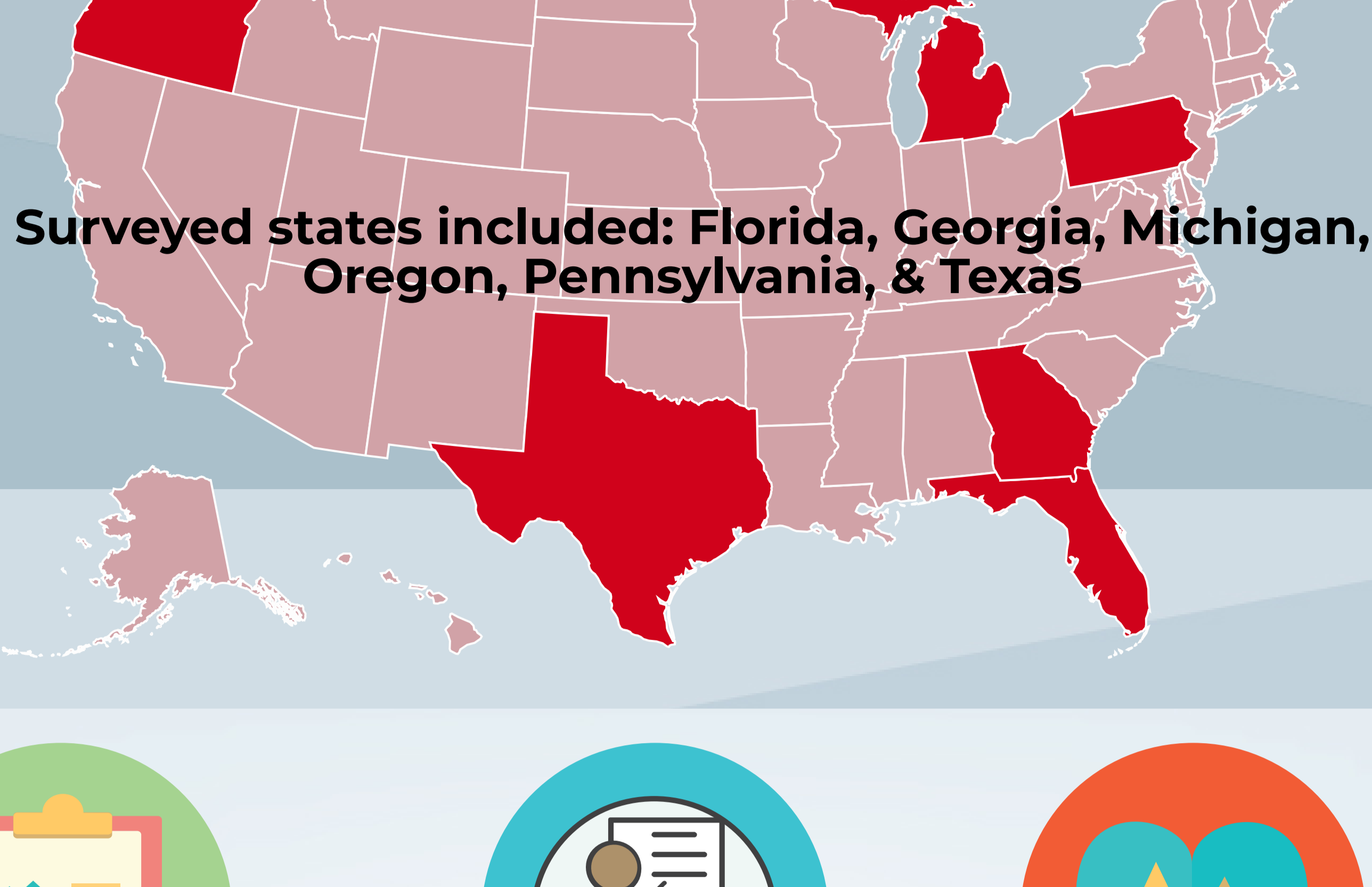


Leading Practices for Certifying Mental Health Peer Specialists

Summary of Key Findings
U.S. Government Accountability Office (GAO)
Report to Congressional Committees

Under the 21st Century Cures Act, the GAO sought to identify best practices for training & certifying mental health peer specialists. They surveyed 6 states that receive funding from SAMHSA & interviewed 10 key stakeholders.



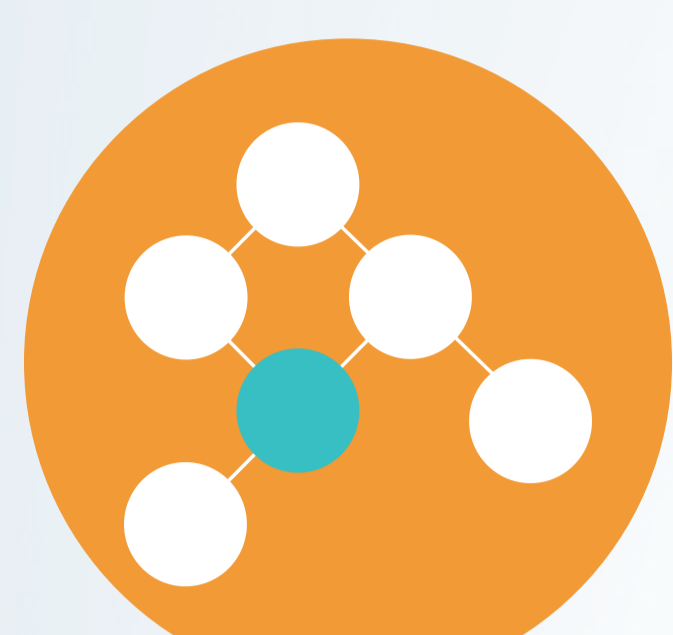
Screen Applicants Systematically



Conduct Core Training In-Person



Incorporate Physical Health & Wellness



Prepare Organizations to Employ Peer Specialists



Offer Continuing Education



Engage Peers in Leadership & Development of Programs

1



Screen Applicants Systematically

The majority of states reported that it is important to ensure comprehensive & consistent screening of applicants.

Screening Approaches:

- Assess applicant's understanding of the peer role
- Telephone interviews
- Use a standardized rubric for a fair review of applications
- Use multiple reviewers for objectivity

Special Considerations:

- Screening questions should not unnecessarily exclude people with little work history, given the employment barriers faced by many people in recovery

Leading Practice Example:

In Florida, peer support specialists are provisionally certified, if they meet all criteria other than 500 hours of work or volunteer experience. Peer support specialists are then granted 1 year to complete this requirement to achieve full certification.

2

Conduct Core Training In-Person

The majority of states & stakeholders endorsed in-person training (rather than online) as a leading practice.



Benefits of In-Person Training:

- Incorporates experiential learning to develop skills
- Fosters relationship-building & networking
- Allows observation of skills that cannot be assessed with written tests alone

Special Considerations:

- Cost of conducting in-person training & observations is often higher
- Yet, observations are a more accurate assessment than written exams alone

3



Incorporate Physical Health & Wellness

Given the high prevalence of co-morbid medical conditions among people in recovery, training programs need to include strategies for addressing physical health & wellness.

Effective Strategies:

- Teach how to set personal health goals that promote wellness
- Create access to needed care & prevention services
- Teach healthy habits to prevent or lessen the impact of medical conditions

Leading Practice Example:

In Georgia, peers are certified in Whole Health Action Management, are trained to work in primary care & behavioral health settings, & receive support from registered nurses. Their services are Medicaid-billable.

4

Prepare Organizations to Employ Peer Specialists

Most states agree that community & hospital preparation & planning to make the most effective use of peer specialists in their workforces.



Organizational Strategies:

- Ensure that staff understand the peer role & its benefits
- Train supervisors to understand the role, including differences between peer specialists & clinical providers
- Encourage organizations to employ multiple peers to prevent isolation & help embed peer staff in the workforce

Leading Practice Examples:

Michigan embeds a peer liaison at all community mental health programs. Liaisons prepare agencies to effectively incorporate peer specialists. They also help the State identify training topics to ensure peer specialists will succeed in the workplace.

Texas runs a 12-month program to help organizations effectively implement peer services. The program operates as a learning community. It focuses on changing organizational culture, defining & clarifying the peer specialist role, & supervising these staff.

5



Offer Continuing Education

It is important to provide access to continuing education for peer specialists to help them maintain their credentials & remain aware of developments in the field.

Leading Practice Example:

Pennsylvania expects that provider agencies ensure that certified peer specialists meet their continuing education requirements. Licensed provider agencies are required to develop a staff training plan. Pennsylvania also requires these agencies to provide opportunities for certified peer specialists to network with their peers both within & outside the agency. The state monitors compliance with these requirements through annual inspections.

6



Engage Peers in Leadership & Development of Programs

Certification programs are more effective & relevant when peers are involved in creating & leading them.

Leadership Opportunities:

- Screening applicants
- Developing curricula
- Training other peer specialists
- Serving as mentors & supervisors to others

Leading Practice Examples:

In Oregon, peer specialists help develop education & training requirements for their peers through participation in the Oregon Health Authority's Traditional Health Worker Commission.

Michigan runs its continuing education courses in the same location as its initial core training, in order to provide experienced peer specialists an opportunity to mentor new peers.

Source:

Access the full report at:
<https://www.gao.gov/assets/700/695435.pdf>

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