

April 2014: Massachusetts Peer Professional Workforce Development Guidelines



INTENT and OVERVIEW

The emergence of peer roles in healthcare has been accompanied by confusion as these roles proliferate without sufficient guidance from experts in the field of peer support. Based on 10 years of broad collaboration and focused inquiry, TRANSKOM* offers that guidance to recovery health providers and integrated healthcare systems in this document, ***“April 2014: MA Peer Professional Workforce Development Guidelines”***. We encourage those who design services and hire individuals into peer roles to study the rich information contained in the guide and to contribute toward future updates.

This document includes five elements: 1) A summary of what sets peer roles apart from other mental health and addiction recovery roles, 2) Essential practices regarding the effective utilization of peer professionals and 3) A chart delineating various stages of peer professional development. Following the chart is: 4) A list of acronyms, web links and references and 5) The Massachusetts Certified Peer Specialist Code of Ethics.

“PEER” PROFESSIONAL or VOLUNTEER

All of the mental health-related positions included here require lived experience of mental health, trauma, and/or co-occurring addiction recovery. Roles in the addiction field allow either lived experience of addiction recovery or lived experience of being a relative or in a close relationship with a person in need of/in addiction recovery.

We urge clarity in language and intent when using the term “peer”; “peer” is used to describe a relationship. In a job title, the term refers to the non-clinical relationships established by the person in this role. Mutuality and the thoughtful sharing of lived experience are key functions of any peer relationship. “Peer” should not be used as the new way to label a person’s status as “patient,” “client,” “consumer” or “mentally ill person.” Instead, when speaking about someone who is using a service, “person” usually provides as much clarity as the often stigmatizing identifier “client.” We expect this language to be widely adopted as healthcare systems evolve.

For example, we applaud the Massachusetts Standardized Documentation Project (MSDP) in which payers, state policy makers and providers concluded that the word “person” is not confusing and, therefore, “person” is used in MSDP forms and documentation processes.

**TRANSKOM=Transformation Committee, a statewide coalition established 2004 in MA to promote peer support & recovery.*

This and other documents online at www.transformation-center.org > Advocacy > Transcom

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STAGES and DEVELOPMENT

The chart contained in the guide describes progressive professional development for Peer Volunteers and Peer Professionals Stage I-V in both mental health and addiction recovery organizations. It identifies masteries gained through experience, current roles in MA, competencies required for those roles, prerequisites and available trainings. Although presented in a linear fashion, development is not always linear or hierarchical; individuals frequently have levels of proficiency and expertise that overlap the different stages presented in the guide.

For example, volunteers may be highly experienced and skilled individuals who choose not to be paid for their work but serve organizations in capacities equivalent to the highest levels of professional development. Conversely, someone employed by an organization at the top level of professional development may not be as proficient in facilitating a specific type of support meeting as a person who is serving the organization in an early stage.

MUTUALITY, ETHICS and SUPERVISION

Mental health and addiction recovery peer relationships and roles have been found to be very effective in assisting a person's recovery. Mutuality is a core value and standard of practice in all peer roles. Peer volunteers and professionals learn skill sets that strengthen their ability to sustain mutually respectful and empowered peer-to-peer relationships, including cultural competence, trauma-informed practice, communication skills and the responsible uses of power.

Mental health peer professional roles in Stages I-V require adherence to the Massachusetts CPS Code of Ethics. Addiction recovery peer professional roles require adherence to Recovery Support Center or other codes of conduct and ethics. It is vital that job tasks not conflict with mutual relationships or with peer support for self-determination. Examples:

Task that conflicts with a mutual relationship: *A program director asks a Peer Specialist to bring medications to someone who will be committed to a hospital if she chooses not to take the meds.*

Task that supports mutuality: *A program participant asks her Recovery Coach to attend a meeting with her probation officer before she has to go to court.*

A peer professional will ideally have a supervisor or mentor who is a Certified Peer Specialist or Recovery Coach. As with any field, experience specific to the role (i.e.: experience with peer participatory processes) and supervision skills training are necessary for supervisors of peer professionals. It may be even more important to the integrity of peer professionals for people to work in an environment with other peer professionals as colleagues. As "peer" job titles and roles are emerging rapidly in healthcare delivery, we strongly advise organizations without peer professionals in Stage IV or V to hire such trainers and consultants to ensure that peer support roles are implemented effectively.

USING THE CHART

Each row below describes a professional development stage at which peer professionals with increasing experience and training have become qualified to offer recovery health supports relevant to the corresponding roles. The peer professional builds competencies identified in the chart upon the foundation of the person's talents and personal recovery experience. Incrementally increasing skill is gained from the combination of practice and training. With few exceptions, the training opportunities listed are available in Massachusetts at the time of this writing. An asterisk* in each column below indicates that that Competency, Prerequisite or Training applies to all stages that come after where it first appears.

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Volunteer Peer Worker

Mastery Gained Through Experience	Role in Massachusetts	Competencies	Prerequisites	Training Available
	The list of roles below is provided as an example and is not intended to be all-inclusive.	*An asterisk below indicates that the competency pertains to all stages that come after where it first appears	*An asterisk below indicates that the pre-requisite pertains to all stages that come after where it first appears	*An asterisk below indicates that the training pertains to all stages that come after where it first appears
<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • Experience in the community, including volunteering at RLCs or RSCs • Being a contributing part of a peer support meeting or group • Experience on advisory board or active participation in community meetings 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • Peer Support Facilitator • Information and Resource Referral • RLC/RSC peer-operated administrative staff • Dual Recovery Facilitator • 12 Step Facilitator 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • Aware of cultural differences; desire to learn the attitudes, knowledge and skills associated with cultural competence* • Ability to create a mentor relationship with peers* • Uphold and support any code of conduct or group policy* • Experience with, or ability to develop leadership skills* • Organizational skills* • Good interpersonal skills • Ability to engage in supervision* • Demonstrated interest in learning & participating in training* • Reliable & responsible* 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • CORI, as indicated by specific RSC, RLC or other program* <p style="text-align: center;">-----</p> <p>Mental health focus</p> <ul style="list-style-type: none"> • Exposure to MA CPS Code of Ethics, agreement to support it • Uphold and support group or organization's codes of conduct or policies* <p style="text-align: center;">-----</p> <p>Addiction focus</p> <ul style="list-style-type: none"> • Uphold and support group or organization's codes of conduct or policies* 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • Facilitator training* • Trauma training* • Other trainings for knowledge, skills and attitudes related to recovery support competencies specific to this stage of development <p style="text-align: center;">-----</p> <p>Mental health focus</p> <ul style="list-style-type: none"> • Whole Health Action Management (WHAM) and Peer Support Whole Health & Resilience (PSWHR)* • Wellness Recovery Action Plan classes (WRAP)* • Intentional Peer Support (IPS)* • Trauma Sensitive Peer Support* • Massachusetts Leadership Academy (MLA)* • Addiction & Trauma Recovery Integration Model (ATRIUM)* • RI/RO Peer Employment Training* • Core GIFT (Gathering Inspiring Future Talent)* • Emotional-CPR* • Intentional Care* • CommonGround* • Parenting Journey* <p style="text-align: center;">-----</p> <p>Addiction Focus</p> <ul style="list-style-type: none"> • Recovery Messaging* • AREAS training*

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		<ul style="list-style-type: none"> • Beginning understanding of multiple paths to recovery 		<ul style="list-style-type: none"> • NARCAN* • Addiction Recovery Plan (AREAS)* • Addiction/Substance Use Recovery Plan* (CAPRSS)* • Peer Participatory Process • Code of ethics/conduct (at RSC) * • Ethics, confidentiality and boundaries training (related to CAPRSS)* • Relapse prevention* • Navigating the system (insurance, continuum of care, vocational support, and related needs)*
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Peer Professional Development - Stage I

Mastery Gained Through Experience	Role in Massachusetts	Competencies	Prerequisites	Training Available
<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • Run meetings with some structure as the person increases facilitation skills • Share story with people in an informal way 	<p>The list of roles below is provided as an example and is not intended to be all-inclusive.</p> <p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • Entry-level telephone-based recovery support, peer support line or warm line operator - with supervision <p style="text-align: center;">-----</p> <p style="text-align: center;">Mental health focus</p> <ul style="list-style-type: none"> • Entry-level Peer Researcher • Entry-level one-to-one accompaniment • Peer Mentor for transition age youth • Health and wellness facilitator or coach <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> • Recovery / health navigation support 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • Willing to share lived experience* • Empathic listening skills* • Able to role-model aspects of recovery on a 1-to-1 or group basis* • Aware of the prevalence and impact of trauma; supports a trauma-sensitive environment* • Able to connect individuals to culturally diverse community resources* • Promotes and respects individual choice & autonomy* • Demonstrates professional accountability & work skills* <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> • Dedicated to recovery-focused support of others* • Ability to plan groups • Ability to understand and coordinate participatory process as needed* 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • Previous peer support experience preferred* • Entry-level peer support training and orientation <p style="text-align: center;">-----</p> <p style="text-align: center;">Mental health focus</p> <ul style="list-style-type: none"> • Demonstrate understanding and adherence to MA CPS code of ethics* <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> • Demonstrate understanding and adherence to RSC code of ethics/conduct* • Recovery Messaging* 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • Telephone support training • Trainings above & other trainings for knowledge, skills and attitudes related to recovery support competencies specific to this stage of development <p style="text-align: center;">-----</p> <p style="text-align: center;">Mental health focus</p> <ul style="list-style-type: none"> • WRAP Facilitator training* • Pre-CPS online training* <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> • Recovery Coach training* • Motivational Interviewing or stages of change training* • Prevention education (Hepatitis C and HIV)* • Train-the-Trainer for tobacco cessation * • The Nurturing Program for Families in Substance Use Treatment & Recovery facilitation training* • What is addiction? • Knowing Your Rights

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Peer Professional Development - Stage II

Mastery Gained Through Experience	Role in Massachusetts	Competencies	Prerequisites	Training Available
<p>The list of roles below is provided as an example and is not intended to be all-inclusive.</p>	<p>*An asterisk below indicates that the competency pertains to all stages that come after where it first appears</p>	<p>*An asterisk below indicates that the pre-requisite pertains to all stages that come after where it first appears</p>	<p>*An asterisk below indicates that the training pertains to all stages that come after where it first appears</p>	
<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • Offer more complex meetings and classes, work with people on a one-to-one basis (always voluntary) • Basic connecting and networking with community agencies, resources and activities – structured peer support and natural or informal supports. 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • Peer Support Line or Warm Line Mentor • Telephone Recovery Support Coach <p style="text-align: center;">-----</p> <p style="text-align: center;">Mental health focus</p> <ul style="list-style-type: none"> • Entry-level community support & Peer Bridgers • 1:1 peer support and services • IL/RLC Long-Term Supports (LTSS) Peer Support • Peer Mentor for transition age youth <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> • Recovery Coach • Recovery Advocate • RSC Volunteer Coordinator • RSC Peer involvement leadership development coordinator 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • Open attitude, curiosity and expanding knowledge & skills related to cultural competence* • Ability to identify and support multiple paths to recovery* • Ability to work independently* • Demonstrated interest in skill development, including learning about supervision* • Connects individuals with and maintains current knowledge of community resources* • Ability to work within a team* • Basic computer skills, including the ability to enter and access data* • Able to facilitate or co-facilitate more challenging meetings* • Able to manage conflict or complex situations* • Leadership skills required 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • Previous peer support experience expected* • Demonstrated ability to learn in a group* • Successfully completed at least one multi-session training* <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> • Recovery Coach required or preferred with Grandfather clause to be considered* 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> • Team Building skills training* • Trainings above & other trainings for knowledge, skills and attitudes related to recovery support competencies specific to this stage of development <p style="text-align: center;">-----</p> <p style="text-align: center;">Mental health focus</p> <ul style="list-style-type: none"> • Certified Peer Specialist Training (CPS)* • NYAPRS Peer Bridger Training* • Financial support training* • Hearing Voices facilitator* • Alternatives to Suicide facilitator* • WHAM/ PSWHR Facilitator training • Non-peer supervisors of CPS training online* <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> • Recovery Messaging Train-the-Trainer*

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	<ul style="list-style-type: none"> • RSC Peer Outreach & Engagement Coordinator • Peer Coach • Community Resource Coordinator • Peer Health & Wellness Coordinator • Train-the-trainers of tobacco awareness 	<ul style="list-style-type: none"> • Understands centrality of trauma and trauma informed care* • Ability to introduce and integrate information from trainings back into work & community* <p style="text-align: center;">-----</p> <p style="text-align: center;">Mental health focus</p> <ul style="list-style-type: none"> • Skillful use of disclosure as a recovery support tool* <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> • Ability to train and coordinate the participatory process model as needed* 		
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Peer Professional Development - Stage III				
Mastery Gained Through Experience	Role in Massachusetts	Competencies	Prerequisites	Training Available
	The list of roles below is provided as an example and is not intended to be all-inclusive.	*An asterisk below indicates that the competency pertains to all stages that come after where it first appears	*An asterisk below indicates that the pre-requisite pertains to all stages that come after where it first appears	*An asterisk below indicates that the training pertains to all stages that come after where it first appears
<p style="text-align: center;">Mental Health & Addiction</p> <ul style="list-style-type: none"> • Offer more complex meetings and classes, work with people on a one-to-one basis (always voluntary) • Work with agency staff in informative change-agent role (using story to demonstrate points about service design, impact etc. from the “person who uses the service” perspective) • Building networks of support in the community across domains of peer support, health, housing, etc. 	<p style="text-align: center;">Mental Health & Addiction</p> <p style="text-align: center;">-----</p> <p style="text-align: center;">Mental health focus</p> <ul style="list-style-type: none"> • Peer Support Line or Warm Line Supervisor • Community and Peer Bridger - supervises entry-level Peer Bridgers • Peer Wellness Coach • Financial Coach • IL/RLC -LTSS Coordinator • ESP Peer Specialist • Peer Respite Worker • Inpatient Peer Specialist • PACT Peer Specialist • Prison/forensic Peer Specialist • Elder Peer Specialist • Peer Suicide Prevention and Support <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> • Recovery Support Navigators • Community Service Providers • Recovery Messaging Trainer 	<p style="text-align: center;">Mental Health & Addiction</p> <ul style="list-style-type: none"> • Learn and use hiring practices that ensure a workforce that reflects the diversity of the community* • Learn about access, culture and identity-based disparities; partner with others to address discrimination* • Able to supervise one or more peer professionals* • Knowledge, skills and ability to provide mentoring, skill-building, and training* • Understands use of multiple tools to support multiple paths to recovery* • Advanced knowledge of community resources and systems* • Provide context for non-peer colleagues and peer groups exploring Code of Ethics/Conduct* • More advanced 	<p style="text-align: center;">Mental Health & Addiction</p> <p style="text-align: center;">-----</p> <p style="text-align: center;">Mental health focus</p> <ul style="list-style-type: none"> • Experience working as peer support professional required unless grandfathered in* • Certified Peer Specialist required or preferred with Grandfather Clause to be considered* • Management and/or supervisory experience preferred* <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> • Recovery Coach required or preferred with Grandfather clause to be considered* 	<p style="text-align: center;">Mental Health & Addiction</p> <ul style="list-style-type: none"> • Supervision & management skills training* • WRAP Advanced Level Facilitator Training (ALF)* • Co-occurring disorders • Trainings above & other trainings for knowledge, skills and attitudes related to recovery support competencies specific to this stage of development

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		<p>leadership skills*</p> <ul style="list-style-type: none"> • Ability to inform and help transform organizations to integrate peer recovery services* • Ability to work collaboratively and to build teams* • Higher-level computer skills* • External networking skills* <p style="text-align: center;">-----</p> <p style="text-align: center;">Mental health focus</p> <ul style="list-style-type: none"> • Application of MA CPS code of ethics to complex real life situations* <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> • Application of RSC code of ethics/conduct to complex real life situations* 		
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Peer Professional Development - Stage IV

Mastery Gained Through Experience	Role in Massachusetts	Competencies	Prerequisites	Training Available
	The list of roles below is provided as an example and is not intended to be all-inclusive.	*An asterisk below indicates that the competency pertains to all stages that come after where it first appears	*An asterisk below indicates that the pre-requisite pertains to all stages that come after where it first appears	*An asterisk below indicates that the training pertains to all stages that come after where it first appears
<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> Higher levels of responsibility and administrative oversight 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> Directors of RLCs/RSCs Director of Operations in RLC/RSC Director of Quality Management in RLC/RSC Director or Manager of Recovery Services in behavioral health care company, organization, state agency or integrated health program <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> Recovery Coach Trainer 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> Aware of macro-level system and role integration Professional supervisory responsibilities Understands stages of professional development of peer professionals Able to coach staff, give feedback, manage conflict, develop staff skills Hire and evaluate staff Train, coach and supervise others on MA CPS code of ethics or RSC code of ethics/conduct* Versatile and flexible Management responsibilities - finances, budgeting, contracts Educates larger system about recovery and peer roles Knowledgeable about national and local emerging trends in the profession Develops RSC/RLC policies with input from community & host agency* 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> Management and supervisory experience expected* Skilled at digital / e-communication* <p style="text-align: center;">-----</p> <p style="text-align: center;">Mental health focus</p> <ul style="list-style-type: none"> Experience working as peer support professional required unless grandfathered in* Certified Peer Specialist required or preferred with Grandfather Clause to be considered* <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> Recovery Coach required or preferred with Grandfather clause to be considered* 	<p>Mental Health & Addiction</p> <ul style="list-style-type: none"> Trainings above & other trainings for knowledge, skills and attitudes related to recovery support competencies specific to this stage of development* Recovery Coach train-the-trainer*

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		<ul style="list-style-type: none">• Manages quality assurance/improvement responsibilities related to RSC/RLC as member of host organization's QA/QI committee*• Manages annual ethics audit*		
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Peer Professional Development - Stage V

Mastery Gained Through Experience	Role in Massachusetts	Competencies	Prerequisites	Training Available
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<p style="text-align: center;">Mental Health & Addiction</p> <ul style="list-style-type: none"> Identified as key leader in the system 	<p style="text-align: center;">Mental Health & Addiction</p> <ul style="list-style-type: none"> Director of RLC/RSCs Peer-operated organization Executive Director, Director of Quality Management, Director of Operations Director of Recovery Services Director of Office of Empowerment and Recovery Board Chair 	<p style="text-align: center;">Mental Health & Addiction</p> <ul style="list-style-type: none"> Provide leadership for policies and practices that increase access and expand the workforce to reflect the cultures and identities of communities Operates within and knowledgeable about macro-level system Ability to communicate knowledge and awareness to own organization and the larger system Leader in organizational processes including mission, vision, strategic planning and implementation Identified externally as a key leader in the system 	<p style="text-align: center;">Mental Health & Addiction</p> <ul style="list-style-type: none"> Management, supervisory, and strategic planning experience expected Skilled at digital / e-communication <p style="text-align: center;">-----</p> <p style="text-align: center;">Mental health focus</p> <ul style="list-style-type: none"> Experience working as peer support professional required unless grandfathered in Certified Peer Specialist required or preferred with Grandfather Clause to be considered <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> Recovery Coach required or preferred with Grandfather clause to be considered 	<p style="text-align: center;">Mental Health & Addiction</p> <ul style="list-style-type: none"> National leadership institutes, training and mentorships Trainings above & other trainings for knowledge, skills and attitudes related to recovery support competencies specific to this stage of development <p style="text-align: center;">-----</p> <p style="text-align: center;">Addiction focus</p> <ul style="list-style-type: none"> Quality improvement NIATx

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Training Acronyms & Resources

- Alternatives to Suicide** = Peer support and training around this taboo topic. Offered in MA by the Western MA RLC
<http://www.westernmassrlc.org/alternatives-to-suicide>
- AREAS** = Addiction Recovery Education Access Services. Developed by Massachusetts Organization for Addiction Recovery (MOAR) as a recovery community educational support system to help people in early recovery to take action on a variety of health and resource needs.
- ATRIUM** = Addiction & Trauma Recovery Integration Model (ATRIUM). A series of groups developed by Dusty Miller that helps people explore the impact of trauma in one's life and identify new ways for self-care and personal empowerment in recovery.
- CPS** = Certified Peer Specialist.
- CPS Training** = In Massachusetts, The Transformation Center provides training and skill practice in CPS ethics and core competencies as a foundation for a broad variety of mental health recovery support roles in the field. Certification includes passing an oral and written examination.
<http://transformation-center.org>
- CPS Supervisor training** = On-line training developed by the Transformation Center for non-peer supervisors of CPS, also helpful for peer professionals who are orienting colleagues to the peer role.
- CommonGround** = A web-based application that helps people prepare to meet with psychiatrists or treatment teams and arrive at the best decisions for treatment and recovery. Developed by Pat Deegan <https://www.patdeegan.com/commonground>
- Core GIFT** = Gathering Inspiring Future Talent. A training adapted by Kim Bisset to prepare young adults for peer mentoring and helps young adults who want to apply for the Certified Peer Specialist training. www.speakingofhope.org
- E-CPR = Emotional CPR (C=Connecting, P=emPowering, R=Revitalizing)**. A training developed by the National Empowerment Center to teach people to assist others through an emotional crisis through the three steps of CPR. <http://www.emotional-cpr.org>
- Financial Support** = Skills training and support for financial literacy and wellness.
- Hearing Voices** = Support group and training founded in the United Kingdom, first offered in USA by the Western MA RLC <http://www.hearing-voices.org>
- Intentional Care** = Developed by Pat Deegan and adopted by Advocates. Standards and training for mental health service providers.
<http://www.advocatesinc.org/images/uploads/ICManual-2013.pdf>
- IPS** = Intentional Peer Support. A training developed by Shery Mead to build conscious, mutual relationships and to change the dynamics of power in society.
<http://www.intentionalpeersupport.org>
- MLA** = Massachusetts Leadership Academy. Adapted for mental health leadership development by the state of Idaho and by CONTACT, a peer-operated national technical assistance organization. The Transformation Center currently offers this training in Massachusetts.
- NIATx** = Based at the University of Wisconsin–Madison's Center for Health Enhancement Systems Studies (CHESS). Training that facilitates peer networking and provides research, case studies, and tools that encourage use of a process improvement model (former acronym for the Network for the Improvement of Addiction Treatment) <http://www.niatx.net>
- NYAPRS Peer Bridger** = New York Association for Psychiatric Rehabilitation Services Peer Bridger. A training that prepares people to help others move from hospitals to living in the community or from a higher intensity of service to lower intensity of service.

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- Parenting Journey** = Offered by The Family Center in Somerville in multiple languages. Uses experiential techniques to focus on the parents' relationship with their children, with others, and with their own personal histories with a unique emphasis on helping parents explore the deep personal roots of their parenting practices, and find their own personal and parenting strengths. <http://www.thefamilycenterinc.org/OurPrograms/Video.html>
- Pre-CPS** = On-line training on The Transformation Center website to help people prepare for MA CPS training. <http://transformation-center.org>
- Recovery Coach Academy** = The Recovery Coach Academy (RAC) provides a comprehensive overview of the purpose, tasks and roles of a recovery coach. It offers skills and tools for effective communication, enhancing motivation, recovery action planning, cultural competency and recovery ethics. In MA, trainings are held by Adcare Educational Institute <http://ccar.us/recovery-coach-academy/>
- Recovery Messaging** = Developed by Faces and Voices of Recovery to guide people in telling their recovery story. <http://www.facesandvoicesofrecovery.org/action/host-recovery-messaging-training>. Link to Faces article, "Why Peer Integrity Matters".
- RI/RO Peer Employment Training** = Recovery Innovations/Recovery Opportunities, Inc. A training developed by Lori Ashcraft and Gene Johnson based on the principles of the recovery organization they founded.
- PSWHR** = Peer Support Whole Health and Resilience. A health action practice developed by Appalachian Consulting Group that has been shown to be effective in supporting people to help each other to select and carry out health improvement action steps.
- WHAM** = Whole Health Action Management. Adapted from Appalachian Consulting Group's PSWHR, a health action practice facilitated by peer specialists that is available through the National Council on Behavioral Health. <http://www.integration.samhsa.gov/health-wellness/wham>
- Tobacco Cessation** = Training and peer support in MA <http://makesmokinghistory.org/1-800-quitnow.html>
- WRAP** = Wellness Recovery Action Plan. A personal planning process developed by Maryellen Copeland to promote mental health recovery and listed by SAMHSA in the National Registry for Evidence Based Practices.

One Care Acronyms & Resources

One Care is a new integrated physical and behavioral (addiction or mental health recovery) health managed care option now available in Massachusetts to people who are dually-insured by both Medicare and Medicaid. The following are acronyms for roles within One Care-funded services: <http://www.mass.gov/eohhs/docs/masshealth/onecare/one-care-enrollmt-guide.pdf>

- LTSS** = Long Term Services and Supports (LTSS). A category of funded services and supports available through Massachusetts' One Care model.
- LTSS Coordinator** = Long Term Services and Supports Coordinator. A person in this role works directly with the person enrolled in One Care to identify and coordinate services and supports. This role *is not* inherently a peer role.
- IL/RLC LTSS Coordinator** = Independent Living (IL) / Recovery Learning Community (RLC) Long Term Services and Supports Coordinator. A person in this role is employed by a peer-operated service organization called an Independent Living (IL) Center and/or a Recovery Learning Community (RLC). He/she works directly with the person enrolled in One Care to identify and coordinate services and supports. This *is* inherently a peer role.
- IL/RLC LTSS Peer Support** = Independent Living (IL) / Recovery Learning Community (RLC) Long Term Services and Supports (LTSS) Peer Support. A service delivered by a peer professional who is employed by an IL Center or RLC and funded through the One Care model.

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Other Acronyms & Resources

- BRSS TACS** = Bringing Recovery Supports to Scale Technical Assistance Center Strategy aimed at integrating mental health and addiction recovery supports, funded by SAMSHA http://www.umassmed.edu/uploadedFiles/cmhsr/Program_for_Recovery_Research/BRSS-TACS%20.pdf
- CAPRSS** = Council on Accreditation of Peer Recovery Support Services. A national body which sets standards for capacity-building, efficiency and accountability of peer-operated recovery community organizations.
- CORI** = Criminal Offender Record Information.
- HIV/AIDS** = Human Immunodeficiency Virus / Acquired Immunodeficiency Syndrome.
- MSDP** = Massachusetts Standardized Documentation Project. Collaborative effort to unify mental health and addiction documentation in MA, including tools for electronic records. <http://www.abhmass.org/msdp.html>
- NARCAN** = A trade name for Naloxone, a drug used to counter the life-threatening effects of opiate overdose, such as an overdose of heroin.
- QA/QI** = Quality Assessment / Quality Improvement.
- RLC** = Recovery Learning Community. Communities staffed and directed by people with lived experience of recovery from mental health, trauma, addiction and/or extreme emotional states. There are six RLCs funded through the Department of Mental Health in Massachusetts. <http://www.mass.gov/eohhs/consumer/behavioral-health/mental-health/recovery-learning-communities.html>
- www.westernmassrlc.org/ www.centralmassrlc.org
www.metrosubrlc.org www.nilp.org/nerlc/
www.metrobostonrlc.org www.southeastrlc.org
- RSC** = Recovery Support Center. Centers staffed and driven by people with lived experience of addiction recovery. There are seven RSCs funded through the Department of Public Health in Massachusetts. <http://www.helpline-online.com>
- www.recoverproject.org (West)
www.everydaymiraclesprsc.org (Central)
www.therecoveryconnection.org (Metro Suburban)
www.lhi.org/aboutus/LHI_Brockton/Services_atBrockton.aspx (Stairway 2 Recovery, Brockton)
www.psychologicalcenter.org (PEOPLE Recovery Center, Lawrence)
www.gavinfoundation.org/programs/community-programs/devinerecoverycenter (South Boston)
www.mydorchester.org/STEPRox-Recovery-Support-Center (Roxbury)
- CULTURAL COMPETENCY** = Assessment tool for MH and peer-run programs and self-help groups, from Support, Technical Assistance Resource (STAR) Center http://www.consumerstar.org/resources/Star_Center_Resources.html
- TRANSCOM** - The MA Transformation Committee was established by a grant in 2004 and has continued as a volunteer organization since 2007. We are a state-wide coalition of people in recovery, representatives from provider & state agencies, and other advocates. Our work is driven by 3 priority goals:
- Support, safeguard, and expand peer specialists, peer workers, and peer-run programs;*
 - Promote information, education and training on innovative recovery practices;*
 - Advocate for funding for peer workers and innovative recovery oriented services.*

This and other documents online at: <http://transformation-center.org/contact/about/outcomes-quality/transcom-transformation-committee/>

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Certified Peer Specialists Code of Ethics Massachusetts

Written and approved by the Georgia Mental Health Consumer Network for the State of Georgia Certified Peer Specialist Training Program – Revised and Updated by members of the Massachusetts Consumer Operated Programs & Activities leadership in 2006. Further revisions were done in the summer of 2008 and summer of 2013, based on survey and other feedback from the field.

The following principles will guide Certified Peer Specialists in the various roles, relationships, and levels of responsibility in which they function. These expectations also apply to training participants with respect to interactions with their colleagues.

The CPS Code of Ethics are rooted in the following core principles:

- * CPSs will always respect the rights of service users to be self-governing within their social and cultural framework (Autonomy)
- * CPSs will always promote the well-being of people we're supporting, understanding that people self-define well-being. (Beneficence)
- * CPSs will always be transparent and truthful with the people they support. (Fidelity)
- * CPSs will always promote justice and fairness for all people they support. (Justice)
- * CPSs will DO NO HARM to people they're supporting. (Non-maleficence)

1. The primary responsibility of Certified Peer Specialists is to help people achieve what they want most in life, their own goals, needs and wants. Certified Peer Specialists will be guided by the principles 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 and integrity.
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 the people with whom they work.
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 with whom they work.

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6. Certified Peer Specialists recognize that everyone is different and we all have something to learn from one another. Therefore, Certified Peer Specialists will not practice, condone, facilitate or collaborate in any form of discrimination on the basis of ethnicity, race, sex, sexual orientation, or state.
7. Certified Peer Specialists will advocate as a partner with those they support 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 support.
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 people have the right to live in the least restrictive and least intrusive environment of their choice.
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 never 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 year.
12. Certified Peer Specialists will keep current with emerging knowledge relevant to recovery, and openly share this knowledge with the people with whom they work.
13. Certified Peer Specialists will not engage in business, extend or receive loans, or accept gifts of significant value from those they support.
14. Certified Peer Specialists will not offer support to another when under the influence of alcohol or when impaired by any substance, whether or not it is prescribed.

I _____ fully understand the Code of Ethics and commit myself to carrying out the fourteen principles listed above during my CPS training, and on becoming Certified and obtaining a role as a Certified Peer Specialist.

Signature: _____

Date: _____