



State of California—Health and Human Services Agency
Department of Health Care Services



GAVIN NEWSOM
GOVERNOR

DATE: July 22, 2021

Behavioral Health Information Notice No: 21-041

TO: California Alliance of Child and Family Services
California Association for Alcohol/Drug Educators
California Association of Alcohol & Drug Program Executives, Inc.
California Association of DUI Treatment Programs
California Association of Mental Health Peer Run Organizations
California Association of Social Rehabilitation Agencies
California Behavioral Health Planning Council
California Consortium of Addiction Programs and Professionals
California Council of Community Behavioral Health Agencies
California Opioid Maintenance Providers
California State Association of Counties
Coalition of Alcohol and Drug Associations
County Behavioral Health Directors
County Behavioral Health Directors Association of California
County Drug & Alcohol Administrators
United Parents

SUBJECT: Medi-Cal Peer Support Specialist Certification Program
Implementation

PURPOSE: To provide the standards for implementing the Medi-Cal Peer Support
Specialist Certification Program.

REFERENCE: Centers for Medicare and Medicaid Services State Medicaid Directors
Letter #07-011
Welfare and Institutions Code, Division 9, Part 3, Article 1.4, Chapter 7

BACKGROUND:

DHCS acknowledges the role that peer support specialists (hereafter referred to as “peers”) can play in California’s behavioral health systems, and recognizes that peers have long acted as a part of the prevention, early intervention, treatment, and recovery process for individuals living with Mental Health (MH) conditions and Substance Use Disorders (SUD)s. As individuals with either lived experience, or as the parents, caregivers and family members of individuals living with MH and/or SUD conditions,

peers personally understand the experience of the individuals they serve and can help clarify the most effective set of services for each individual's recovery needs.

Senate Bill (SB) 803, chaptered in 2020, authorized DHCS to seek federal approvals to add peer support specialists as a Medi-Cal provider type and peer support services as a distinct service type in counties opting to participate in this program. DHCS is pursuing these federal approvals through the Medicaid waiver and State Plan Amendment processes.

SB 803 also directed DHCS to develop state standards for Medi-Cal Peer Support Specialist Certification Programs that may be implemented by counties, or county-contracted entities, who opt in to provide these programs. This certification is required for Medi-Cal reimbursement, but does not impact peer programs under other funding sources. DHCS has worked extensively with stakeholders to develop these state standards, including multiple behavioral health and peer-led associations, county partners, representatives from various non-profit organizations, representatives from peer-run organizations, existing peer support specialists, consumers, and other interested individuals.

This BHIN provides state standards for California's Medi-Cal Peer Support Specialist Certification Programs and the steps counties who opt in must take to implement these programs. Future guidance will be provided on the implementation of the Peer Support Services Medi-Cal benefit.

POLICY:

SB 803 created the statutory authority for DHCS to establish Medi-Cal statewide certification program standards while counties, or county-contracted entities, are responsible for implementing the programs at the local level. (W&I Code Section 14045.14) By July 1, 2022, DHCS must:

1. Establish statewide requirements to use in developing certification programs
2. Define the qualifications, range of responsibilities, practice guidelines, and supervision standards for peer support specialists
3. Determine the process for initial certification
4. Determine curriculum and core competencies required for certification, including areas of specialization
5. Specify peer support specialist employment training requirements
6. Establish a code of ethics
7. Determine a biennial certification renewal process, including continuing education requirements
8. Determine a process for investigation of complaints and corrective action

9. Determine a process for an individual employed as a peer support specialist on January 1, 2022, to obtain certification
10. Determine requirements for peer support specialist certification reciprocity between counties and out of state

California Medi-Cal Peer Support Specialist Certification Program Standards

Medi-Cal Peer Support Specialist Certification Programs can be established either by counties, or an agency representing counties. The County Behavioral Health Directors' Association (CBHDA) has identified the California Mental Health Services Authority (CalMHSA) as the entity that will represent counties for the implementation of a State-approved Medi-Cal Peer Support Specialist Certification Program, to support consistency statewide.

CalMHSA, on behalf of the counties they represent, and any other counties that seek to implement their own Medi-Cal Peer Support Specialist Certification Program, must adhere to the standards set forth in Enclosure 1 of this BHIN and must submit to DHCS their application with supporting documents that will be used to implement their program in accordance with Enclosure 2.

Each Medi-Cal Peer Support Specialist Certification Program must ensure that certified peers meet the following qualifications:

1. Be at least 18 years of age.
2. Possess a high school diploma or equivalent degree.
3. Be self-identified as having experience with the process of recovery from mental illness or substance use disorder, either as a consumer of these services or as the parent, caregiver or family member of a consumer.
4. Be willing to share their experience.
5. Have a strong dedication to recovery.
6. Agree, in writing, to adhere to a code of ethics.
7. Successfully complete the curriculum and training requirements for a peer support specialist.
8. Pass a certification examination approved by DHCS for a peer support specialist.

Counties, or an agency representing a county, pursuing the development of a Medi-Cal Peer Support Specialist Certification Program will be subject to periodic reviews conducted by DHCS to ensure adherence to all federal and state requirements, and must submit annual peer support specialist program reports to the department.

Application and Submission Requirements

DHCS encourages counties to take advantage of the opportunity to work with CalMHSA for their certification programs. Any county not working with CalMHSA must notify

DHCS by August 6, 2021. Counties can send this information to DHCS via email at Peers@dhcs.ca.gov.

CalMHSA, on behalf of counties they represent, and any other counties developing their own certification programs must apply to DHCS by submitting the documents listed in Enclosure 2, and receive approval, prior to implementing a certification program. The program plan shall include: proposed policies and procedures for a candidate's initial certification, including the training curriculum for peers and peer supervisors; the certification exam; the process for biennial and lapsed renewals; the curriculum for the identified areas of specialization; the grandparenting process for qualifying peers; the complaints and corrective actions process; and a certification fee schedule.

Medi-Cal Peer Support Specialist Certification Program plans must be in an electronic format and sent to Peers@dhcs.ca.gov. The opportunity for counties to implement a certification program will be made available annually. For FY 2021-22, counties must submit the certification plan documents prior to November 19, 2021.

List of Enclosures

1. Standards for Initial Certification, Biennial Renewal, Lapsed Certification, Areas of Specialization, Grandparenting, State/County Reciprocity, Complaints and Corrective Actions
2. Medi-Cal Peer Support Specialist Certification Program Plan Submission Requirements
3. Medi-Cal Code of Ethics for Peer Support Specialists in California
4. Practice Guidelines and Supervision Standards
5. Reporting Requirements

Sincerely,

Marlies Perez, Division Chief
Community Services Division

ENCLOSURE 1

1. Initial Certification
2. Biennial Renewal
3. Lapsed Certification
4. Areas of Specialization,
5. Grandparenting, State/County Reciprocity
6. Complaints and Corrective Actions

1. *Standards for Initial Certification of a Peer Support Specialist*

For an initial certification of a peer support specialist, a Medi-Cal Peer Support Specialist Certification Program must:

- A. Ensure a candidate agrees to adhere to the Medi-Cal Code of Ethics for Peer Support Specialists
- B. Ensure a candidate has completed the training curriculum that includes 80 hours of training - including didactic learning
- C. Ensure the candidate has passed the initial certification exam

A. Medi-Cal Code of Ethics

The Medi-Cal Code of Ethics for Peer Support Specialists is contained in Enclosure 3 and posted on the DHCS Peers webpage. DHCS will update the Code of Ethics as appropriate and certification programs must ensure that candidates agree to adhere to the most recent version posted.

B. Training Curriculum

The training curriculum must incorporate the following core competencies:

1. The concepts of hope, recovery, and wellness.
2. The role of advocacy.
3. The role of consumers and family members.
4. Psychiatric rehabilitation skills and service delivery, and addiction recovery principles, including defined practices.
5. Cultural and structural competence trainings.
6. Trauma-informed care.
7. Group facilitation skills.
8. Self-awareness and self-care.
9. Co-occurring disorders of mental health and substance use.
10. Conflict resolution.
11. Professional boundaries and ethics.
12. Preparation for employment opportunities, including study and test-taking skills, application and résumé preparation, interviewing, and other potential requirements for employment.

13. Safety and crisis planning.
14. Navigation of, and referral to, other services.
15. Documentation skills and standards.
16. Confidentiality.
17. Digital literacy.

C. Certification Exam

Upon a candidate's completion of the training, a Medi-Cal Peer Support Specialist Certification Program must administer an examination that has been approved by DHCS. The Medi-Cal Peer Support Specialist Certification Program must provide reasonable accommodations to candidates taking the examination, as needed, including verbal testing and testing in prevalent languages.

2. *Standards for Biennial Renewal*

A Medi-Cal Peer Support Specialist Certification Program must provide a process for biennial certification renewal for certified peer support specialists. This process must include making available continued education trainings and ensuring that renewal candidates perform 20 hours of continuing education every two years. The continuing education must include updates on applicable laws and evidence based best practices. A Medi-Cal Peer Support Specialist Certification Program must also ensure that certified peer support specialists reaffirm in writing the most recent version of the Medi-Cal Code of Ethics for Peer Support Specialists in California every two years.

3. *Lapsed Certification*

For peer support specialists whose certification lapsed, but is still within four years of when certification renewal was due, a Medi-Cal Peer Support Specialist Certification Program must allow certification if the candidate completes 40 hours of refresher training¹, passes the Medi-Cal Peer Support Specialist Certification Program examination, and must affirm, in writing, the most recent version of the Medi-Cal Code of Ethics for Peer Support Specialists in California.

4. *Areas of Specialization*

A Medi-Cal Peer Support Specialist Certification Program must implement a curriculum in the area of specialization for "Parent, Caregiver, and Family Member Peers" upon implementation of the Peer Support Specialist Certification Program.

The following three areas of specialization must also be implemented by January 1, 2023:

- Crisis Services

¹ This training must still cover the core competencies, but would be a condensed version of the full 80 hour curriculum. This refresher curriculum must also be approved by DHCS.

- Forensic (Justice Involved)
- Homelessness

These areas of specialization must be developed in addition to the requirements for certification in the core competencies, and the curriculums must be approved by DHCS.

DHCS will continue to collect information on areas of specialization that may be added at a later date. Any additional areas of specialization must be approved by DHCS.

5. Grandparenting and Out-of-State Reciprocity

For individuals who are employed as a peer as of January 1, 2022 and seek certification under these standards, known in this BHIN as grandparenting, or those individuals certified out of state and are seeking to be certified under these standards, a Medi-Cal Peer Support Specialist Certification Program must grant certification if the individual has:

Either:

- 1 year of paid or unpaid work experience (1550 hours) as a peer specialist AND 20 hours of continuing education (CEs), including law and ethics. CEs can be in relevant professional competencies obtained via relevant in-state, out of state or national educational forums.

OR

- 1550 hours in 3 years, with 500 hours completed within the last 12 months, working as a peer specialist AND 20 hours of continuing education (CEs), including law and ethics. CEs can be in relevant professional competencies obtained via relevant in-state, out of state or national educational forums.

AND has all of the following:

- Completion of a peer training(s)
- 3 Letters of Recommendation as outlined:
 - One from a supervisor
 - One from a colleague/professional
 - One self-recommendation describing their current role and responsibilities as a peer support specialist
- Pass the Medi-Cal Peer Support Specialist Certification Program Exam

As with the initial certification, the Medi-Cal Peer Support Specialist Certification Program must provide reasonable accommodations to the candidate as requested, including verbal testing and testing in prevalent languages.

Peers employed as a peer January 1, 2022 and seeking certification through the grandparenting process must complete or begin the process by December 31, 2022. After this date, peers seeking certification under a Medi-Cal Peer Support Specialist Certification Program must complete the initial certification process. Peers with out of state certification seeking reciprocity have no sunset date to seek certification.

6. County Reciprocity

Peer Support Specialists who are certified through a DHCS approved Medi-Cal Peer Support Specialist Certification Program will be recognized as a Certified Peer Support Specialist in all counties throughout California however, only counties electing to participate in the Medi-Cal peers benefit will have the ability to be federally reimbursed for behavioral health peer services provided to Medi-Cal beneficiaries.

7. Complaints and Corrective Actions

A Medi-Cal Peer Support Specialist Certification Program must also submit a process for reviewing complaints and corrective actions, including the suspension and revocation of certification, as well as the appeals process for DHCS approval. DHCS will approve processes that include the following:

- Specifications for the Medi-Cal Peer Support Specialist Certification Program to investigate submitted complaints within a specified timeframe.
- A disciplinary process for substantiated allegations that requires either education hours, suspension, and/or revocation.
- An appeal process.

Monitoring of the program will be incorporated into DHCS' current processes, including DHCS' triennial audits and the EQRO quality improvement program efforts.

ENCLOSURE 2 – Medi-Cal Peer Support Specialist Certification Program Plan Submission requirements

Submission Package for Medi-Cal Peer Support Specialist Certification Program		
<p>CalMHSA, on behalf of represented counties, and other counties who seek to implement a Medi-Cal Peer Support Specialist Certification Program must submit a plan for DHCS approval of how the certification program will meet all of the federal and state requirements for the certification and oversight of peer support specialists (W&I Code 14045.14 (a)(1)).</p> <p>Please include the signature of the authorized representative from CalMHSA, or the county Behavioral Health Director.</p> <p>The plan must include the following:</p>		
<input type="checkbox"/>	Initial Certification Policies And Procedures	How applicants can apply for certification and how the training curriculum and the exam will be administered.
<input type="checkbox"/>	Certification Exam	The exam that applicants will be required to take. Also include the alternative ways the exam will be administered for those with difficulty taking written exams. Include accommodations that will be available for those with disabilities, or those who require translations or interpreters, including the prevalent languages in which the exam will be made available.
<input type="checkbox"/>	Biennial Certification Renewal Policies And Procedures	How the program will make continuing education (CE) training available for certified peers, how certified peers can demonstrate successful completion of CE training, and how peers can submit a renewal of the Code of Ethics.
<input type="checkbox"/>	Training Curriculum For: <ul style="list-style-type: none"> • Peer Support Specialist • Parent, Caregiver and Family Member Peers • Peer Supervisors 	The curriculum for initial certification, the curriculum for lapsed certification, a curriculum for the area of specialization for parent, caregiver and family member peers, and peer supervisors.
<input type="checkbox"/>	Certification Fee Schedule	Per W&I Code Section 14045.18, a participating county, or an agency representing a participating county, is authorized to establish a certification fee schedule for the purpose of supporting the activities associated with the ongoing administration of the peer support specialist certification program. Before the fee schedule may be implemented, the department shall review and either approve or disapprove the fee schedule of the participating county or an agency representing the participating county.

<input type="checkbox"/>	Grandparenting/Reciprocity Process	The policies and procedures for how an applicant can apply for certification and how the program will operationalize reviewing applications and issuing the certification.
<input type="checkbox"/>	Complaints/Corrective Actions Process	The policies and procedures for how complaints will be submitted and processed, including a timeline, disciplinary actions, and appeals process.
<input type="checkbox"/>	Reporting Process	The policies and procedures for the timely submission of the identified data to meet the reporting requirements.

ENCLOSURE 3 – Medi-Cal Code of Ethics for Peer Support Specialists in California

<p>Purpose</p>	<p>Peer support services are recovery-oriented and resiliency-focused services for those managing behavioral health challenges as well as the parents, family members, and caregivers that support them. Peer support services are evidence-based practices that provide role models to inspire hope, demonstrate a life of recovery and resiliency, and encourage real advocacy.</p> <p>This Values and Ethics document promotes a consistent message to those who are providing, receiving, and supervising services from a Peer Support Specialist. The Values and Ethics described here formalizes and advances peer support services in California’s behavioral health system of care.</p> <p>For the purpose of this document “Peer Support Specialist” refers to anyone who is providing services in the behavioral health field using their “lived experience” to establish mutuality and build resiliency and recovery.</p>
<p>Values Hope</p>	<p>Ethical Standards</p> <p>Peer Support Specialists:</p> <ul style="list-style-type: none"> • Inspire hope in those engaging in services by living a life of Recovery and/or Resiliency.
<p>Person-Driven</p>	<p>Peer Support Specialists:</p> <ul style="list-style-type: none"> • Support individuals receiving services and their support network within the context of the individual’s worldview, to achieve their goals based upon their needs and wants. • Focus on self-determination, as defined by the person engaging in services, and support the person’s participation in their own recovery. • Inform others about options, provide information about choices, and then respect peers’ decisions. • Encourage people to look at the options, take risks, learn from mistakes, and grow toward healthy interdependence with others. • Uphold the principle of non-coercion as essential to recovery and encourage those engaging in services to make their own decisions, even when the person engaging in services is under mandated treatment. • Assist those they support to access additional resources. • Disclose lived experiences of recovery in a way that maintains the focus on and is beneficial to the person engaging in services. • Support the recovery process for the peer, allowing the person to direct their own process.

**Family Driven
and Child-
Centered**

- Shall not force any values or beliefs onto the person engaging in services.
 - Recognize there are many pathways to recovery that can be very different than their own journey.
- Peer Support Specialists:
- Promote the family member's ethical decision-making and personal responsibility consistent with that family member's culture, values, and beliefs.
 - Respect and value the beliefs, opinions, and preferences of children, youth, family members, parents, and caregivers in service planning.
 - Promote the family members' voices and the articulation of their values in planning and evaluating behavioral health related challenges or concerns.
 - Support other family members as peers with a common background and history.
 - Disclose personal lived experiences of building resiliency in a way that focuses on and is beneficial to the child, youth, family member, parent, or caregiver engaging in services.
 - Build supports on the strengths of the child, youth, family, or caregiver.
 - Build partnerships with others who are involved in the care of our children, youth, or adult family members.
 - Communicate clearly and honestly with children, youth, family members, and caregivers.

**Holistic
Wellness**

- Peer Support Specialists:
- Promote the family member's ethical decision-making and personal responsibility consistent with that family member's culture, values, and beliefs.
 - Practice in a holistic manner that considers and addresses the whole health of those engaging in services.
 - Recognize the impact of co-occurring challenges (substance use, developmental and physical challenges) in the recovery resiliency journey and provide supports sensitive to those needs.
 - Recognize the impact of trauma on the recovery/resiliency journey and provide the support specific to those challenges.
 - Honor the right of persons engaging in services to choose alternative treatments and practices, including culturally-specific traditional methods, healing arts, including acupuncture and meditation, spiritual practices or secular beliefs, and harm reduction practices.

Authenticity

- Peer Support Specialists:
- Practice honest and direct communication in a culturally relevant manner, saying what is on their mind in a respectful way. Difficult circumstances are addressed with those who are directly involved. Direct communication

**Cultural
Responsiveness
& Humility**

moves beyond the fear of conflict or hurting other people to the ability to work together to resolve challenges with caring and compassion

- Share own lived experience to provide hope and inspiration for recovery.
- Practice healthy disclosure about their own experience focused on providing hope and direction toward recovery and/or resiliency.
- Work within their scope of practice as defined by this Code of Ethics and their employing agency.
- Remain aware of their skills and limitations, and do not provide services or represent themselves as an expert in areas for which they do not have sufficient knowledge or expertise.
- Know that maintaining the authenticity and integrity of their role is critical to the effectiveness of peer support services.
- Seek supervision, peer support services, and/or other contact with peer colleagues or other supports to stay within their scope of practice.

Peer Support Specialists:

- Acknowledge the importance of language and culture, intersecting identities, knowledge, and acceptance of dynamics of cultural differences, expansion of cultural knowledge, curiosity, and adaptation of services to meet culturally unique needs.
- Strive to provide culturally responsive and relevant services to those they support.
- Respect cultural identities and preferences of those engaging in services and their families and respect the right of others to hold opinions, beliefs, and values different from their own.
- Shall not discriminate against others on the basis of gender, race, ethnicity, sexual orientation or gender identity, age, religion, national origin, marital status, political belief, or mental or physical differences.
- Shall not discriminate against others on the basis of any other preference, personal characteristic, condition, state, or cultural factor protected under Federal, State or local law.
- Seek further information, education, and training in cultural competence as necessary to assist those they support.

Respect

Peer Support Specialists:

- Provide a welcoming environment for persons engaging in services.
- Approach each person, youth, parent or family member with openness, genuine interest, and appreciation.
- Accept each person/family and situation as unique.
- Provide empathy and able to “put oneself in the other person’s shoes.”
- Will make an honest effort to empathize with the emotional connection and cultural context that the persons engaging in services bring to the

recovery/ resiliency relationship.

- View everyone as having something important and unique to contribute.
- Value and treat others with kindness, warmth, dignity, and without judgment.
- Accept each other and are open to sharing with people from many diverse backgrounds including ethnicity, educational levels, socio-economic background, sexual preference, and religion/spirituality.
- Honor and make room for everyone's opinions and see each other as equally capable of contributing.
- Demonstrate respect toward those supported, colleagues and the community.
- Use language that is respectful, "person-first," and culturally mindful to, and with, those supported, colleagues and the community.
- Never use language that could be construed as, or is, derogatory, insulting, or demeaning in written, electronic, or verbal communications.
- Communicate with co-workers and colleagues in ways that promote hope, compassion, and solution-focused interactions.

Integrity

Peer Support Specialists:

- Act in accordance with the highest standards of professional integrity.
- Avoid relationships or commitments that conflict with the interests of persons engaging in services, impair professional judgment, imply a conflict of interest, or create risk of harm to those supported.
- Conduct themselves in a way that does not jeopardize the integrity of the peer relationship.
- Seek supervision to handle any real or potential conflicts when and if a dual relationship is unavoidable.
- Follow organizational policies and guidelines regarding giving and receiving gifts.
- Consider the cultural context and other potential considerations related to gifts.
- Do not lend, give, or receive money or payment for any services to, or from, persons they support.
- Demonstrate accountability in fulfilling commitments.
- Resist influences that interfere with professional performance.
- Shall not commit fraud, waste or abuse in the delivery of Medi-Cal services.
- Cooperate with complaint investigations and supply information requested during complaint investigations unless such disclosure of information would violate the confidentiality requirements of Subpart 2, Title 42, Code of Federal Regulations.

- Shall not provide services under the influence of any amount of alcohol, marijuana, or illicit drugs. “Illicit drugs” means any substance defined as a drug in Section 11014, Chapter 1, Division 10, Health and Safety Code, except:
 - Drugs or medications prescribed by a physician or other person authorized to prescribe drugs, in accordance with Section 4036, Chapter 9, Division 2, Business and Professions Code, and used in the dosage and frequency prescribed; or
 - Over-the-counter drugs or medications used in the dosage and frequency described on the box, bottle, or package insert.
- Shall not secure a certification by fraud, deceit, or misrepresentation. This includes, but is not limited to:
 - Making a false statement on any application for certification.
 - Withholding material information on any application for certification.
 - Impersonating another Peer Support Specialist or permitting or allowing another person to use their certification for the purpose of providing peer support services.
- Shall not engage in gross negligence or incompetence in the performance of peer support services. This includes:
- Failing to maintain records consistent with sound judgement, the standards of the profession, and the nature of the services being rendered.

Advocacy

Peer Support Specialists:

- Support the formulation, development, enactment, and implementation of public policies of concern to the profession.
- Demonstrate and promote activities that respect diversity.
- Support and defend human rights and freedoms regardless of nationality, national origin, gender identity, ethnicity, religion or spiritual persuasion, language, disability, sexual identity, or socio-economic status. Human rights include civil and political rights, such as the right to life, liberty, and freedom of expression; social, cultural, and economic rights including the right to cultural expression, the right to have basic needs met, and the right to work and receive an education.
- Advocate for inclusion of those supported in all aspects of services.
- Advocate for the full involvement of those supported in the communities of their choice and will promote their value to those communities.
- Understand, encourage, and empower self-advocacy.
- Recognize that all individuals/families have the right to live in the safest and least restrictive, culturally congruent environment.
- Strive to eliminate stigma and discrimination

Confidentiality

Peer Support Specialists:

- Respect the rights, dignity, privacy, and confidentiality of persons engaging in services at all times.
- Respect the right to privacy of those supported and shall not solicit private information from those supported unless it is essential. Once private information is shared, standards of confidentiality apply.
- Respect confidential information shared by colleagues in the course of their professional relationships and interactions unless such information relates to an unethical or illegal activity. However, confidentiality should be honored when Peers are supporting clients with a substance use disorder where the illegal activity is limited to personal use of substances.
- Comply with all applicable federal and state confidentiality laws and guidelines. (In accordance with Part 2, Title 42, Code of Federal Regulations and HIPAA requirements).
- Discuss with persons engaging in services, and other interested parties, the nature of confidentiality and limitations of the right to confidentiality.

Safety & Protection

Peer Support Specialists:

- Never engage in romantic or sexual/intimate activities with the persons engaging in services.
- Shall not provide services to individuals with whom they have had a prior romantic or sexual relationship.
- Shall not engage in exploitive relationships with coworkers or those they support to further their personal, religious, political, or business interests.
- Follow applicable federal, state and local laws in the prevention of harm.
- Inform appropriate persons when disclosure is necessary to prevent serious, foreseeable, and imminent harm to persons served or other identifiable persons. In all instances, Peer Support Specialists should disclose the least amount of confidential information necessary to achieve the desired purpose.
- Never intimidate, threaten, harass, use undue influence, physical force, or verbal abuse, or make unwarranted promises of benefits to persons engaging in services.
- Recognize the unique nature of the peer relationship and seek supervision and/or peer support services, as necessary, to maintain appropriate boundaries with persons engaging in services.
- Treat colleagues with respect, courtesy, fairness, and good faith, and uphold the Code of Ethics.
Strive to provide a safe environment that is respectful of the impact of trauma on persons engaging in services.

Education

Peer Support Specialists:

Mutuality	<ul style="list-style-type: none">• Remain current regarding new developments in recovery, resiliency and wellness theories, methods, and approaches of related disciplines/systems with whom those who are engaging in services interface.• Accept responsibility for continuing education and professional development as part of their commitment to provide quality services.• Become familiar with local resources for self-sufficiency, including benefits and employment opportunities and supportive resources for families, parents, and caregivers. <p>Peer Support Specialists:</p> <ul style="list-style-type: none">• Engage in a relationship of mutual responsibility where power is shared and the Peer Support Specialist and the persons engaging in services are equally responsible for maintaining a peer relationship that is mutually beneficial.• Take responsibility for voicing their own needs and feelings.• Make decisions in collaboration with persons served and do not make decisions for persons engaging in services.• Ensure that people give and take the lead in discussions, everyone is offered a chance to speak, and decisions are made in collaboration with one another.
Reciprocity	<p>Peer Support Specialists:</p> <ul style="list-style-type: none">• Ensure that the relationship is reciprocal. Every participant in the peer relationship both gives and receives in a fluid, constantly changing dynamic.• Belief that peer relationships are not hierarchical; no one is more qualified, advanced, or better than another.• Learn from each other.• View asking for help as reaching across (not up nor down).
Strengths-Based	<p>Peer Support Specialists:</p> <ul style="list-style-type: none">• Provide strength-based services acknowledging that every person has skills, gifts, and talents they can use to better their lives.• Focus on what is strong, not what is wrong.• Assist others to identify these strengths and explore how those identified strengths can be used for their benefit.
Wellness, Recovery and Resiliency	<p>Peer Support Specialists:</p> <ul style="list-style-type: none">• Engage in and model regular self-care activities.• Communicate and behave in ways that promote wellness, recovery, and resiliency.• Use language that reflects wellness, recovery, and resiliency principles.• Shall not impose limitations on the possibility for wellness, recovery, and

- resiliency of those engaging in services.
- Recognize the importance of supportive relationships and community in wellness, recovery and resiliency and encourage persons to identify and develop natural supports.
- Promote self-sufficiency in the wellness, recovery, and resiliency journey.

Wellness is the conscious and deliberate process of creating and adapting patterns of behavior that lead to improved health in the following wellness dimensions: Emotional, Financial, Social, Spiritual, Educational/Occupational, Physical, Intellectual, and Environmental.

Recovery is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. This process of change recognizes cultural diversity and inclusion and honors the different routes to resilience and recovery based on the individual and their cultural community.

Resiliency is an inner capacity that, when nurtured, facilitated, and supported, empowers individuals and communities to successfully meet life's challenges with a sense of self-determination, mastery and hope.

By signing below, I agree not to violate, or assist in or abet the violation of, or conspire to violate, any provision or term of this Code of Ethics. All Peer Support Specialists shall be notified, in writing, of any changes to this Code of Ethics.

Name (printed)

Name (signature)
Date (mm/dd/yyyy)

Enclosure 4 – Practice Guidelines and Supervision Standards

Practice Guidelines

Counties must use the practice guidelines developed by the Substance Abuse and Mental Health Services Administration, *What are Peer Recovery Support Services*.

Supervision Standards

DHCS acknowledges the efficacy and evidenced based practice of the utilization of certified peer support specialists as supervisors of other peers. DHCS highly encourages the employment of peers as peer supervisors. However, due to the variability of counties and availability of the peer workforce, DHCS will allow the utilization of other behavioral health professionals as follows:

Peer Support Specialist Supervisors must meet at least one of the below qualifications:

- Have a Medi-Cal Peer Support Specialist Certification Program certification; have two years of experience working in the behavioral health system; and have completed a DHCS approved peer support supervisory training curriculum.
OR
- Be a non-peer behavioral health professional (including registered & certified SUD counselors) who has worked in the behavioral health system for a minimum of two years, and has completed a DHCS approved peer support supervisory training;
OR
- Have a high school diploma or GED, four years of behavioral health direct service experience that may include peer support services; and have completed an approved peer support supervisory training curriculum.

ENCLOSURE 5 – Annual Reporting Requirements

California Peer Support Specialist Certification Program Annual Reporting Requirements		
Reports must reflect information on certifications occurring within a fiscal year (July 1 – June 30), and are due to DHCS by the December 31 st following the end of the fiscal year. DHCS may add additional reporting requirements in subsequent years. Reports must contain the following information:		
1) Number Of Peer Support Specialists Certified:		[field]
2) Number Of Applicants That Did Not Receive Certification:		[field]
3) Number Of Applicants Employed In Peer Services Prior To Certification:		[field]
4) Number Of Applicants Certified In An Area Of Specialization:		
	a) Crisis Services	[field]
	b) Homeless	[field]
	c) Forensic	[field]
	d) Parent, Caregiver and Family Member Peer	[field]
5) Number Of Certified Peers That Renewed Certification:		[field]
6) Number Of Peer Supervisor Trainings Provided:		[field]
7) (For FY 2021-2022) Number of Applicants that received Certification through Grandparenting Process:		[field]
8) Number of Applicants that received Certification through State Reciprocity:		[field]
9) Peer Support Specialist Demographics		
	a) Age	
	i. 18-25	[field]
	ii. 26-64	[field]

	iii. 65+	[field]
	b) Gender Identity	
	i. Male	[field]
	ii. Female	[field]
	iii. Non-binary	[field]
	c) Race/Ethnicity	
	i. American Indian/Alaskan Native	[field]
	ii. Asian/Pacific Islander	[field]
	iii. Black	[field]
	iv. Hispanic	[field]
	v. White	[field]
	vi. Not Reported	[field]
	d) Proficient Languages (multi-lingual peers may be counted under multiple fields)	
	i. Arabic	[field]
	ii. Armenian	[field]
	iii. Cambodian	[field]
	iv. Chinese (combined Cantonese or Mandarin)	[field]
	v. English	[field]
	vi. Farsi	[field]
	vii. Hmong	[field]
	viii. Korean	[field]
	ix. Russian	[field]

	x. Spanish	[field]
	xi. Tagalog	[field]
	xii. Vietnamese	[field]