



Peer Training & Certification

Introduction

Trainings are an integral part of preparing any workforce for their role. They provide employees with an understanding of their role, their responsibilities, and the knowledge and skills needed to do their job. Ongoing trainings allow for continuous education, shared learning, and ongoing connection with other people in the same role. Ideally, there are multiple types of trainings including, opportunities for new hires to learn about their role and the organization during onboarding, and recurring trainings for employees to gain a greater understanding of their role and to retain knowledge.

In this report we refer to certification trainings and/or supplemental trainings which are needed for peers to understand their role.

Certification trainings are those required by the Oregon Health Authority (OHA) for peers to become “Certified”. The OHA certifies peers for the Peer Support Specialist (PSS) role, and the Mental Health & Addiction Certification Board of Oregon (MHACBO) certifies peers for the Certified Recovery Mentor (CRM) role.

Supplemental trainings are those provided by organizations so peers can meet continuing education unit (CEU) requirements and gain additional experience and knowledge that is useful in their role.

Key findings

1 Certifying peers through state-approved programs has become standard practice in the region.

Peer certification is required by the OHA for organizations to be able to bill Medicaid for peer services; however, in the Southern OR region almost all organizations require certification whether the organization bills Medicaid for peer-delivered services or not. Today, thirteen out of 14 organizations interviewed require their peers to complete a PSS or CRM certification training. **Ensuring peers are certified has helped support a shared understanding among peers and many supervisors about the peer role, scope of practice, and skills needed.**

Southern Oregon Peer Workforce Project Background

In 2022 the Center for Outcomes Research & Education (CORE) collaborated with interested parties in Southern Oregon (So. OR) on a project to develop collaborative recommendations to strengthen the peer workforce. The project aims to cultivate and support:

- Shared learning across peer programs
- Increased ability to advocate for funding and workforce improvements
- Strengthened capacity to evaluate what is working within and across peer programs

Project activities included:

- An initial evidence and data review
- Interviews and focus groups with peers and peer supervisors from a total of 14 agencies
- Consultation with peers, supervisors, and other BH/SUD leaders in So. OR

This brief on **Peer Training & Certification** is one of several products from this project. The others are linked below and include:

1. An [Evidence Review](#) about the impact of peer programs and services.
2. A full [Project Report](#) and three additional briefs highlighting promising practices related to [Supervision & Support](#), [Professional Development & Career Pathways](#), and [Additional Priorities for Peer Services](#).
3. A [PowerPoint presentation](#) highlighting information from the project.

The timely availability of certification trainings can be a challenge, especially for peers in behavioral health. The lack of availability can cause delays in peers working directly with clients, and therefore impact an organization's ability to bill for those services. The schedule for certification training (generally Monday-Friday between 9am-5pm) can also be a barrier particularly for individuals who are volunteer peers or interested in taking the training prior to being hired. Some peers suggested hosting occasional trainings over two weekends (Friday-Sunday) for individuals that are interested but unable to dedicate an entire week to the training.

"We're a small community and so it was really a challenge because we would sometimes have peers that would go many months without being certified just because we couldn't get them into a training. So, we're not billing for their services because they're not certified yet and we can't get them certified."—Peer Supervisor

PEER CERTIFICATION

In 2013, the Oregon Traditional Health Worker (THW) Commission was established to support and promote the roles, engagement, and utilization of the traditional health workforce (THW). Peer support specialists (PSS) and peer wellness specialists (PWS) are two types of peer worker types under the THW designation which also includes personal health navigators, community health workers, and doulas. Peer classifications require shared lived experience as a requisite for certification. Within the PSS and PWS classification, peers choose a specific focus for their work such as, adult addictions, adult mental health, family support specialist, or youth support specialist.

The THW Commission is responsible for approving THW certification training programs. After completing the certification, applying, and completing a background check, a THW is certified and eligible to provide billable services through Medicaid. Peers may also seek certification as a Certified Recovery Mentor (CRM) through the Mental Health & Addiction Certification Board of Oregon (MHACBO). THWs must complete 20 continuing education units every three years to maintain certification.

2 The 40-hour Peer Support Specialist/Certified Recovery Mentor certification training is a useful introduction to the peer role but is not sufficient to prepare peers for their day-to-day work with clients.

Most supervisors and peers agree that additional training beyond the initial 40-hour requirement is necessary to prepare peers for their role. While the certification training includes critical topic areas such as motivational interviewing and peer ethics, peers report that it only "scratches the surface" on each topic area.

Ethics, appropriate boundaries, safety planning, documentation practices (especially for peers that interface with clients in the justice system), and strengths-based approaches were commonly mentioned as topics necessary to understand to begin the role and for continuing education.

There is an 80-hour PWS certification training available in Oregon that could potentially provide additional training hours for the peer workforce, however, neither the title or certification type came up during our conversations with peer supervisors and employees. We would like to note that none of the peer training programs in Southern Oregon offer a PWS certification which could be one possible reason why we did not hear about it.

"It just seems like 40 hours isn't enough to go through really thoroughly, HIPAA and some of the important pieces and I almost wish it was a little bit longer or that maybe they had boosters. You know, you do your 40 hours and then every quarter maybe a booster... I guess it's just, wow, sending a peer out with a client after 40 hours of training when anything could happen."—Peer Supervisor

3 Peers desire advanced and supplemental trainings that are designed specifically for the peer role.

Peers expressed that they want access to advanced and supplemental trainings but that **trainings should be designed specifically for the role to allow peers to gain more knowledge pertaining to the role itself and how best to provide peer services**. Peers can find advanced trainings in topics that they desire, but these trainings are frequently designed for clinical roles such as, a Certified Alcohol and Drug Counselor (CADC). Many times, advanced trainings aren't accessible to peers unless they want to move into a different role (e.g., CADC I, II, or III training).

Advanced trainings designed for the peer role could provide peers:

- A deeper understanding of their role
- More information on how to provide optimal services to their clients
- The opportunity to attain more knowledge while remaining in the peer role

"I think that more training specific to peers would be really beneficial. It could be specific to the way that we document things, the way that we work with peers, the way that we help them, setting boundaries, just more peer-specific focused training."—Peer Employee

According to peers and supervisors, there are several high-quality supplemental trainings currently available and accessible for peers, including ACES and Motivational Interviewing; however, other supplemental trainings have limited/inconsistent availability (e.g., Crisis Prevention, Medically Assisted Treatment). In other cases, the training may be widely available but not widely promoted (e.g., Mental Health Awareness/Mental Health First Aid and ASIST), resulting in a lack of awareness among interested parties. These factors create barriers for peers when they want to receive supplemental training and education regarding their role.

TOP FIVE RECOMMENDED SUPPLEMENTAL TRAININGS*

- ASIST (Applied Suicide Intervention Skills Training)
- Trauma/Trauma-informed care
- Motivational Interviewing
- Collaborative Problem Solving
- Mental Health Awareness/Mental Health First Aid

*Suggested by peers & supervisors

4 There is a wide range of organizational infrastructure, training budgets, and onboarding practices in the region.

While all organizations that we spoke to support peers to attend supplemental trainings, we found that there exists **a wide range of training resources, organizational infrastructure, and onboarding practices amongst organizations**. The range of organizational practices impacts the extent to which peers can receive training on topics important to them.

Several factors are associated with differing organizational practices and include:

- Budgets for peer trainings
- Organizational support for peers to access training dollars
- Development of internal trainings on critical topics

"Unfortunately for peer staff, I don't think there's really any assistance with training dollars, so that is a gap that I wanna see if we can't address. I think there is some inequity in the way things are set up."—Peer Supervisor

- Existence of agency/program-wide trainings
- Identification of appropriate trainings
- Encouragement and assistance from supervisors to identify and attend potential trainings (compared to those peers that find trainings and request approval on their own)

“They pay for whatever training we wanna take. If it's appropriate to the work that we do or even loosely appropriate to the work we do, they're willing to pay for it if you're willing to do it...education and training is super well supported here.”—Peer Supervisor

Peers and supervisors alike acknowledged the importance of providing onboarding and additional training to adequately equip peers for their roles. To help bridge the gap between initial training and confidence to serve clients directly, some organizations require newly hired peers to shadow experienced peers and then reflect on that practice with their supervisor. Other suggestions included: gradual increases in caseload numbers/intensity and individual support with documentation practices. Additionally, peers without prior office experience may need additional support with computer skills, email composition, addressing conflict in professional settings, etc. Improving onboarding procedures will be especially important as the region prepares for an influx of new peers entering the workforce due to funding from Measure 110 (Measure 110 provides grant funding for Behavioral Health Networks that have peer support services and has allocated a total of \$25.5 million dollars in 2022 for Jackson, Josephine, Douglas, and Curry Counties).

BRIGHT SPOTS for Peer Training in Southern Oregon

- **Family Nurturing Center** has a relatively structured onboarding process for newly hired peers, including dedicated time with the peer supervisor, shadowing, and support from the IT department to help with computer and technology skill development.
- **Options** has dedicated funding to support peers' training and encourages peers to attend trainings across the state, including sending all their peer staff to Peerpocalypse in Seaside, OR each year.
- Peers from **Pathfinder Network** report that their organization's robust training offerings have supported them to feel confident and become skilled at regulation and strength-based approaches – and they can see the benefit of these skills in their work and in their lives outside of work.

Recommendations

The following recommendations coincide with statements by peers and supervisors and were vetted by interested parties, including a peer community of practice and a behavioral health workforce workgroup (both located in Southern Oregon). Recommendations are grouped at the organizational and regional levels and can be used to grow and strengthen the Southern Oregon peer workforce.

RECOMMENDATIONS TO SUPPORT PEER TRAINING

ORGANIZATIONAL BEST PRACTICES*	WHY IS IT NEEDED?
Develop enhanced onboarding protocols to support peers entering the workforce	To ensure newly hired peers are capable, confident, and supported as they begin working with clients and that onboarding processes expectations are clear and consistent.
Dedicate funding and organizational budgeting specifically for peer supplemental trainings	Explicit funding for supplemental trainings allows organizations to be responsive to emerging training needs/interests of their peers instead of relying on whatever free offerings are available. Currently, only some peers have access to training funds.

Cultivate a general culture of support for professional development and continuous learning	Peers in organizations with strong culture of professional development not only felt confident and excited about their growing skillsets, but they also articulated how their organization's investment in their development communicated their value. In other organizations, peers must find and pursue supplementary trainings on their own or go through multiple steps to have trainings approved by leadership, both of which can be burdensome.
REGIONAL BEST PRACTICES*	WHY IS IT NEEDED?
Expand access to and promotion of key trainings	This can include training offerings such as Crisis Prevention, Medically Assisted Treatment, Mental Health Awareness/Mental Health First Aid and ASIST to help strengthen skills of the peer workforce.
Support access to documentation training	Support the development of a "Smart & Safe" documentation training to help peers across organizations learn tips to be efficient and protect themselves and their clients.
Support access to culturally specific Spanish language peer certification training	A culturally specific Spanish language training can support a community of Latinx peers to strengthen their skills and knowledge around the specific context, community assets, and barriers that the Latinx community faces in relation to behavioral health and recovery.
Provide support and a clear pathway for peers to become trainers/facilitators of peer trainings.	Trainers who are peers themselves would be helpful to deliver content in an applicable way for peers and could help alleviate the challenge of trainings not being widely available.

*Best practices elevated by peers and peer supervisors



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