



# PUTTING THE PIECES TOGETHER: ETHICS AND APPLICATION IN PEER SPECIALIST SUPERVISION

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# Peer Support

Peer support services are delivered by individuals who have common life experiences with the people they are serving. (SAMHSA)

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

# Professional Peer Providers in Texas

## **Certified Peer Specialists (CPS)**

Certified Peer Specialist (CPS) is an individual who has progressed in their recovery, has taken training, and passed a certification exam demonstrating that they have mastered a set of competencies related to peer support. A CPS has been trained to effectively share their lived experiences in order to support the recovery of other individuals.

Certified by Via Hope (Mental Health Resource of Texas)

## **Certified Family Partners (CFP)**

A Certified Family Partner is an individual who has lived experience parenting a child with mental or emotional health challenges who has received specialized training and passed a certification exam demonstrating that they have the competencies necessary to successfully navigate systems of care and help other families successfully navigate those systems.

Certified by Via Hope (Mental Health Resource of Texas)

## **Peer Recovery Coach Designation (PRC)**

Peer Recovery Coach Designation are those that work in the peer recovery support field of chemical dependency, mental health, and/or co-occurring disorders with 500 supervised hrs. A PRC has been trained to effectively share their lived experiences in order to support the recovery of other individuals. Provided by TCBAP – Texas Certification Board of Addiction Professional

## **Peer Recovery Support Specialist (PRS)**

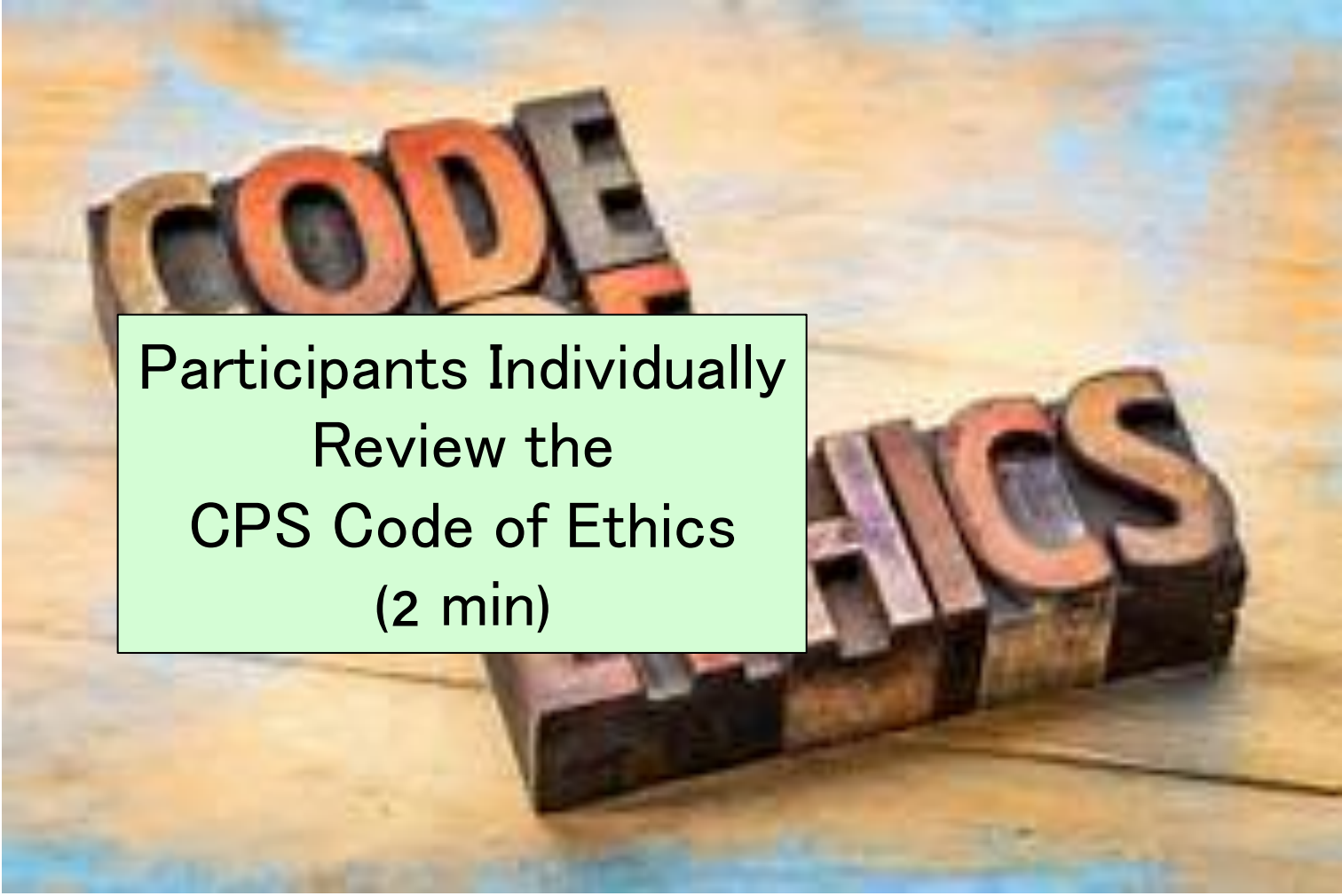
PRS is a recovery coach that has taken and passed the credentialing exam. Passing the PRS exam comes with an IC & RC certification (International Certification & Reciprocity Consortium). Certified by TCBAP – Texas Certification Board of Addiction Professional

# Texas Certified Peer Specialist Practice Values

- Authenticity
- Honesty
- Open-Mindedness
- Mutuality
- Respect



The  
Foundation  
of Our  
Practice

A photograph of wooden blocks spelling out 'CODE OF ETHICS' on a wooden surface. The blocks are arranged in two rows: 'CODE' on top and 'ETHICS' on the bottom. The background is a blurred wooden surface with some blue paint splatters.

Participants Individually  
Review the  
CPS Code of Ethics  
(2 min)

# Texas Certified Peer Specialist Code of Ethics

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

- 1. The primary responsibility of Certified Peer Specialists is to help individuals achieve their own needs, wants, and goals. Certified Peer Specialists will be guided by the principle of self-determination for all.
- 2. Certified Peer Specialists will maintain high standards of personal conduct. Certified Peer Specialists will also conduct themselves in a manner that fosters their own recovery.
- 3. Certified Peer Specialists will openly share their recovery stories, and will likewise be able to identify and describe the supports that promote their recovery.
- 4. Certified Peer Specialists will, at all times, respect the rights and dignity of those they serve.
- 5. Certified Peer Specialists will never intimidate, threaten, harass, use undue influence, physical force or verbal abuse, or make unwarranted promises of benefits to the individuals they serve.

# Texas Certified Peer Specialist Code of Ethics

(Continued)

- 6. Certified Peer Specialists will not practice, condone, facilitate or collaborate in any form of discrimination on the basis of ethnicity, race, gender, gender identity, gender expression, sexual orientation, age, religion, national origin, marital status, political belief, mental or physical disability, military status, or any other preference or personal characteristic, condition or state.
- 7. Certified Peer Specialists will advocate for those they serve that they may make their own decisions in all matters when dealing with other professionals.
- 8. Certified Peer Specialists will respect the privacy and confidentiality of those they serve.
- 9. Certified Peer Specialists will advocate for the full integration of individuals into the communities of their choice and will promote the inherent value of these individuals to those communities. Certified Peer Specialists will be directed by the knowledge that all individuals have the right to live in the least restrictive and least intrusive environment.

# Texas Certified Peer Specialist Code of Ethics

(Continued)

- 10. Certified Peer Specialists will not enter into dual relationships or commitments that conflict with the interests of those they support.
- 11. Certified Peer Specialists will not engage in sexual/intimate activities with those to whom they are currently providing support, or have worked with in a professional role in the past two years.
- 12. Certified Peer Specialists will not provide services to another when under the influence of alcohol or when impaired by any substance, whether or not it is prescribed.
- 13. Certified Peers Specialists will keep current with emerging knowledge relevant to recovery, and openly share this knowledge with their colleagues.
- 14. Certified Peer Specialists will not accept gifts of significant value from those they serve.



# Striking an Important Balance



Concept by Dr. Patricia Deegan

# Texas Certified Peer Specialist Code of Ethics

Facilitated Discussion by Amy Pierce, CPS



# Via Hope CPS Ethics Complaint Process

- Process for Identifying and Addressing Ethical Violations
- Developed in Conjunction with CPS Advisory Council
- 2 Applicable Bodies of Standards (both in Policy & Procedure Manual)
  - ▣ Code of Ethics
  - ▣ Rules of Conduct
- Sanctions Range from Verbal Warning to Permanent Disqualification
- Who Can Submit?
  - ▣ Employers
  - ▣ Other Employees
  - ▣ Certified Peer Specialists
  - ▣ Anyone Who Identifies a Potential Ethical Violation

# Via Hope CPS Ethics Complaint Process

## Steps:

1. Complaint Form Sent to Via Hope
2. Via Hope Determines Credibility of Complaint
3. Redacted Documents Sent to CPS Advisory Council Subcommittee
4. Advisory Council Subcommittee Makes Recommendation on Sanction (If Any)
5. Via Hope Makes Determination & Contacts Individual (Subject of Complaint)
6. Individual Has Opportunity to Appeal
7. Determination on Appeal is Final

# Via Hope CPS Ethics Complaint Process

- *Different than CFP Ethics Complaint Process*
- *Separate from Decisions on Employment*

To Request an Ethics Complaint Form, contact Via Hope at [info@viahope.org](mailto:info@viahope.org)



# Ethics In Practice

# Ethics in Practice: Mary

Mary is in recovery from mental illness and substance abuse. Over the past two years she has performed exceptionally well as a peer specialist on an ACT Team, but currently she is going through a very difficult divorce. Mary has commented to other peer specialists on the team that the strain of the divorce has resulted in sleeping difficulties, a significant loss of weight, and she is concerned about her mental health and sobriety. You are Mary's supervisor and have noticed that Mary seems to be having some difficulties, but she has not mentioned any of this to you. In spite of her difficulties, Mary continues to function OK at work. The quality of her work has not been negatively impacted by her difficulties. What are your responsibilities as Mary's colleague? And what if you were her supervisor? What would you do?

# Ethics in Practice: Charlotte

Charlotte is a peer specialist. She passionately believes that WRAP saved her life and that all peers should have a WRAP and be actively working it. She feels that it is the only viable tool to sustain recovery over the long haul. Some of the peers in the program are tired of Charlotte always asking them “Do you have a WRAP?” “Are you working your WRAP?” They have tried to talk to her, but she continues to tell them she is sorry if this makes them uncomfortable, but that having a WRAP and working it is the only way to really stay in recovery. Some of the peers have come to you for help. What is your responsibility as a colleague, and as a supervisor? What would you do?



# Ethics in Practice: Cindy

Cindy is a peer specialist and has been assigned to work with Freda, a female peer who is in a relationship with a man who is probably physically abusing her and is very controlling. Freda does not want to end the relationship. Discussing the situation triggers a lot of emotions and past memories for Cindy because of a past relationship where she had been the victim of domestic violence and, after a long struggle, had ended the relationship. Cindy is not sure that she can continue to work effectively with Freda. She comes to you for advice. What is your response as a supervisor? As a colleague?

# Ethics in Practice: Laura

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Laura is a peer specialist and is beginning to show signs that she may not be doing well. She seems to be getting worked up about small things, but is not willing to talk about them. She is not following through with certain of her work responsibilities. She is having conflicts with co-workers and has become disrespectful to people that the agency serves. Laura does not see the problem, but co-workers are complaining. What should you do, as Laura's supervisor?

# Ethics in Practice: Carrie

Carrie is a new peer specialist at a mental health center at which she does not receive her services. Her supervisor is constantly asking her about her “mental health issues”, what medication she is on, what she wants from the supervisor if Carrie gets symptomatic at work. The supervisor has asked Carrie to go over her WRAP with her. Carrie does not want to discuss these issues with her supervisor. She feels that she wants to keep these issues at the mental health center where she is receiving services. The supervisor continues to push “out of her concern for Carrie” and says she needs to know these things in order to supervise her. In what way is Carrie’s supervisor responsible for Carrie’s ‘mental health issues’? Are there times when Carrie’s supervisor needs to play the role of ‘therapist’ to Carrie? As a colleague to Carrie’s supervisor, what might you do?

# Ethics in Practice: Joyce

Joyce has been a client at the Middletown Mental Health Center for four years. She has developed many skills, resources and supports to manage and maintain her recovery. Over the past four years she has developed many strong relationships with other peers at Middletown. Currently the only service she receives from Middletown is a monthly meeting with her psychiatrist. The agency has decided to hire a peer specialist on the ACT Team, and Joyce has applied for the position. Would you have any concerns about hiring her? If so, what are they? What questions would you want the job interview team to ask her?

# Continuing Education Credit

- LOOK FOR INSTRUCTIONS AND LINKS IN FOLLOW UP EMAIL!  
(Later today)
- Feedback Form & Quiz
- Free for Peer Providers
- \$10 Charge and Additional Form for Clinicians (SW, LPC, LMFT, Psychologist)

# Contact Info and Resources

- **Amy Pierce, CPS, Chief Executive Officer, Resiliency Unleashed**
- [Amy@ResiliencyUnleashed.com](mailto:Amy@ResiliencyUnleashed.com)
  
- **Darcy Kues, JD, Via Hope Peer and Family Training Coordinator**
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- **Via Hope** - For general questions, contact [Info@ViaHope.org](mailto:Info@ViaHope.org)
- Website: [viahope.org](http://viahope.org)
  
- **TCBAP – Texas Certification Board of Addiction Professionals**
- Website: [tcbap.org](http://tcbap.org)

*Thanks for participating!*

