Service Name	PEER SUPPORT
Setting	Peer support services may be provided in an outpatient office/clinic, individual's home
_	and/or community setting.
Facility License	As required by DHHS Division of Public Health.
Basic	Peer support services are provided by individuals who have lived experience with Mental
Definition	Health or Substance Use Disorders (SUD). The service is designed to assist individuals in
	initiating and maintaining the process of long-term recovery and resiliency to improve their
	quality of life, increase resiliency, health, and wellness by living self-directed lives and
	striving to reach their full potential. Peer support is person centered and supports dignity,
	self-advocacy, and empowerment. The core element of this service is the development of
	a relationship based on shared lived experience and mutuality between the provider and
	individual. This service can be provided to Medicaid eligible individuals and their families in
	individual and group settings.
Service	 Complete an Initial Diagnostic Interview (IDI) if one has not been completed
Expectations :	within the 12 months prior to initiating peer support services. The IDI will serve as
For more detail	the initial treatment plan until the comprehensive plan of care is developed. An
see Title 471 chapter 32 and	IDI is not necessary if peer support services are provided for treatment of a
20	substance use disorder. An IDI must be completed by a licensed clinician authorized to perform that service;
20	 Complete a Substance Use Disorder (SUD) assessment, if one has not been
	completed by a licensed clinician prior to initiating peer support services. A SUD
	assessment is not necessary if peer support services are provided for treatment of
	a mental health disorder;
	 The treatment plan is to be developed through shared decision making inclusive of
	the individual and must identify specific areas to be addressed; clear and realistic
	goals and objectives; strategies, and recovery support services to be implemented;
	criteria for achievement; target dates; methods for evaluating the individual's
	progress; a discharge plan, wellness plan, and crisis prevention plan that includes
	defining early warning signs and triggers;
	 The individual treatment plan shall be completed within 30 days following
	admission, reviewed and updated every 90 days, or as often as clinically necessary
	thereafter while receiving services. The individual shall sign the plan to indicate
	involvement in the planning; refusal to sign will be noted on the treatment plan.
	The supervisor is responsible for reviewing and signing off on the treatment plan;
	• Development of a mutual set of expectations for the peer relationship within one
	month of admission;
	Peer support services are provided in conjunction with one or more behavioral
	health services.
	 Peer support services are based on the relationship between the Certified Peer Support Description and the individual Activities of the second support provides are to
	Support Provider and the individual. Activities of the peer support provider are to
	serve and support individuals through sharing their knowledge, beliefs and
	experiences that promote recovery and wellness are possible, and that the individuals being served have the ability to manage their behavioral health
	symptoms successfully;

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	Peer support services are designed as a means of supporting individuals on their recovery journey as that individual defines it by utilizing the following recovery support services as applicable: • Peer coaching to facilitate system navigation, accessing community
	resources, and engagement with formal and informal resources and supports, all of which are designed to enhance the individual's resilience and ability to achieve their individual goals;
	 Building on current strengths of the individual to empower them with advocacy and self-help skills to enhance their process of recovery and increase their capacity to utilize wellness options available;
	 Assist clients to locate and join existing self-help groups; Educating the individual about the peer support relationship to include topics such as healthy personal boundaries, individual rights, and the significance of shared decision making;
	 Sharing of experiences, skills, strengths, supports, and resources used in order to benefit the individual by demonstrating wellness through their own effective symptom management;
	 Meeting the individual "where they are at" in their recovery process and encouraging engagement into services; Model and present self-help activities that cultivate the individual's ability
	to make informed, independent choices and decisions as well as activities designed to assist in developing a personal network of support, enhance problem solving abilities, and to build the personal confidence necessary to enhance and improve health and well-being;
	 Serve as a recovery agent by providing the opportunities and advocating for any effective services that will aid in daily living, coping, or symptom management;
	 Collaborate with the individual served as a treatment team member to develop a person centered treatment plan that incorporates the elements identified above and assist by determining the steps needed in order to achieve the goals identified in the treatment plan;
	 Specific to youth services: the peer support provider will include the individual's caregiver/family in order to help them understand the role of the peer support provider in their child's care.
	Peer support providers are expected to have received training on Trauma Informed Care and be able to incorporate that training into their interactions with the individuals;
	Supervision between the supervising practitioner and the peer support provider must occur at least twice per month for clinical consultation;
	The supervising practitioner must conduct at least one face to face contact with the individual within 30 days of the individual being assigned a peer support provider and no less frequently than every 60 days thereafter to monitor the individual's progress and the effectiveness of the peer support services;
o	Group setting: the peer support provider develops relationships with individuals to share their experiences, skills, strengths, supports and resources used in order to show that recovery is an achievable lifelong process; and model and share problem solving skills;

	 Exploration of community resources related to the individual's independence and recovery, and assist the individual through the relationship developed to become empowered to work towards goals as defined by the individual. 		
Length of Service	As identified by the individual, the treatment team, and as determined medically necessary.		
Staffing	 The peer support provider must meet the following criteria: Be 19 years of age or older; Self-identify as having lived experience as an individual diagnosed with a mental health/substance use disorder or as a parent to a child with a mental health/substance use disorder; Be able to demonstrate, via attestation, one year navigating a personal recovery and resiliency journey using relevant indicators such as ongoing use of illicit drugs or alcohol, or avoidance of frequent inpatient levels of care; Have a high school diploma or equivalent with a minimum of two years of paid or volunteer experience working in a human service field; Obtain state and/or national certification as a peer support provider; Maintain state and/or national certifying organization. The supervising practitioner assumes professional responsibility for the services provided by the peer support provider. Supervising practitioners must be licensed as one of the following: Psychiatrist; Licensed Psychologist; Advanced Practice Registered Nurse (APRN) or Nurse Practitioner (NP); Licensed Independent Mental Health Practitioner (LIMHP); Licensed Mental Health Practitioner (LIMHP); Provisionally Licensed Psychologist (Licensed Alcohol and Drug Counselor (PLADC) for substance use only. 		
Staffing ratio	The ratio for supervising practitioner to peer support provider is 1:6. Caseloads for peer support providers must not exceed 1:25. Groups are a minimum of three and a maximum of 12.		
Hours of Operation	Peer support services will be available during times that meet the need of the individual and when applicable the individual's family/caregiver, which may include evenings, weekends or both. The peer support provider must ensure the individual and their parent/caregiver (if applicable) have on call access to a licensed mental health or substance use counselor 24 hours a day, seven days per week.		
Desired Individual Outcome	 The individual has achieved maximum benefit from the service or no longer wishes to receive the service; The precipitating condition and relapse potential is stabilized such that the individual's condition can be managed without professional or external supports and interventions; 		

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	 The individual demonstrates the ability to identify their strengths, needs, access resources and successfully navigate various systems to engage with those resources;
	 The individual has formal and informal supports in place;
	 The individual has developed a discharge plan that can be sustained post
	discontinuation of service.
Admission guidelines	 An established DSM (current edition) diagnosis which requires and will respond to therapeutic intervention;
	 Presence of a mental health and/or a substance use disorder diagnosis that would benefit from this service;
	 The individual is enrolled in active behavioral health services;
	 The services must meet medical necessity as outlined in regulations NAC 471 Chapter 1;
	 Presents with symptoms and/or functional deficits that interfere with the individual's ability to aid in their own recovery;
	• To receive family peer support the parent/guardian must have a child who meets the criteria listed above.
Continued stay guidelines	 The individual continues to meet the admission guidelines for peer support services;
	 There is reasonable likelihood of substantial benefit as a result of active
	continuation of this service as demonstrated by objective behavioral
	measurements of improvements;
	 The individual is making progress toward goals and is actively participating in the interventions.