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Comprehensive Opioid, Stimulant, and Substance Abuse Program (COSSAP)

Effective Integration Toolkit—Introduction

Five Steps to Effective Integration of Peer Recovery Support Services in the Criminal Justice System

November 2022

Overview

As peer practitioners move into professional roles in the criminal justice system, programs need to carefully plan and prepare to integrate peer supports into their portfolio of services.

This introduction to the *Effective Integration Toolkit* provides an overview of each of the five "Ps" for effective integration: (1) promote recovery orientation, (2) prepare to integrate, (3) plan appropriate supports, (4) produce peer-supportive policies, and (5) provide supervision and support.

The toolkit offers suggestions for organizations looking to understand the steps they can take to implement peer support in criminal justice settings while embedding recovery values, principles, and core concepts into their programs. Throughout, there are checklists that will help inform what your program's next steps are related to each of the five Ps.

Readiness

1 Promote Recovery Orientation

2 Prepare to Integrate

3 Plan Appropriate Peer Supports

4 Produce Peer-Supportive Policies and Procedures

5 Provide Supervision and Support

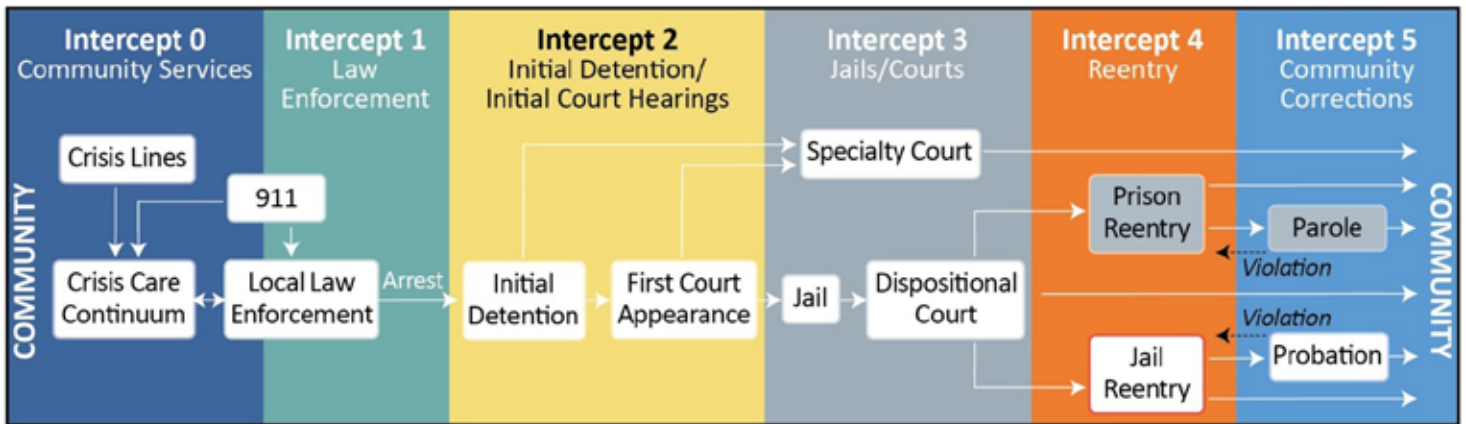Administration

Introduction

In the United States, on any given day, more than 7 million adults are involved in some form of criminal justice supervision (Glaze, 2010). Most of them are on probation or parole and living in the community. Annually, more than

700,000 individuals are released from prison, and 9 million cycle through America's jails (National Institute of Justice, n.d.).

The link between substance use and criminal justice involvement is well recognized. The criminal justice population has a disproportionately high rate of substance use disorders (SUDs), as well as co-occurring mental

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Figure 1. Examples of Peer Support Services at Each Criminal Justice Intercept

Intercept 0 Community Services	Intercept 1 Law Enforcement	Intercept 2 Initial Detention/ Initial Court Hearings	Intercept 3 Jails/Courts	Intercept 4 Reentry	Intercept 5 Community Corrections

Examples of Peer Titles and Services at Each Intercept

Peer Navigators assist with service linkages and follow-up for individuals who survive overdose **Peer Crisis Interventionists** integrated into mobile crisis outreach/crisis intervention teams and Assertive Community Treatment (ACT) teams **Peer Recovery Specialists** offer comprehensive peer supports—including harm reduction and recovery planning, support group facilitations, and telephone/virtual recovery supports—in recovery community organizations, other community-based settings, and within behavioral health treatment programs	In pre-arrest deflection or diversion programs that engage individuals based on risk factors and needs, **Peer Recovery Coaches** help to develop recovery plans, connect to community services, and keep people engaged through a variety of activities	**Peer Advocates** help individuals to process what has happened and prepare for what is coming next, explain the arrest, detention, and arraignment processes, ensure that the individual feels safe and respected, and give the individual hope that they can cope with criminal justice system involvement while recovering from mental and substance use disorders	Through specialty courts and diversion programs, **Forensic Peer Specialists** offer comprehensive peer supports, including recovery planning, recovery coaching, support groups, and other recovery supports as part of their services Within jails, **Peer Recovery Coaches** offer peer support groups and connect individuals with a range of recovery supports that can be accessed when a person is released on bail	In correctional peer programs, **Peer Recovery Coaches** provide emotional support, promote addiction and mental health recovery, and foster general health and wellness **Peer Re-entry Coaches** assertively connect individuals with community-based services, including comprehensive peer recovery supports as a part of planning for re-entry; offer recovery planning, recovery management, and system navigation, including connection to recovery housing; and support reaching goals for desistance, employment, and education	**Peer Navigators** ensure individuals under community supervision have access to recovery supports that help maintain a life in recovery, balancing the responsibilities of meeting the provisions and conditions of their probation or parole with other daily-living needs, including housing, employment, and benefits

health disorders and SUDs, compared with the general population. The substance misuse or dependence rates of offenders are more than four times those of the general population (Bronson, 2017). Of the more than 2 million people incarcerated in prisons and jails, nearly all of them—95 percent—will eventually return to the community. Many of these individuals struggle with SUDs and co-occurring disorders before, during, and after their release from the criminal justice system.

Across these settings, there are six key opportunities for linking individuals to services that address behavioral health conditions and promote reduced recidivism and improved life outcomes. Peer recovery support services (PRSS) have emerged as important resources for engaging and supporting individuals and families in their recovery at each of these points, as summarized in figure 1—an adaptation of the Sequential Intercept Model (SIM) (Substance Abuse and Mental Health Services Administration [SAMHSA], n.d.).

Defining Terms: Peer, Peer Support, PRSS, Peer Practice

It is helpful first to define the terms frequently used when discussing peer support.

In this context, the term **peer** identifies a single person with a particular lived experience that positions that person as distinct from others. As a label, it has been used to distinguish one group of people from another, often based on differing levels of power, compensation, perceived knowledge, or even social value. While we use the term peer specialist in this technical assistance (TA) package, peers are also referred to by many other titles, such as peer practitioners, peer recovery professionals, and peer navigators.

Peer support is an evidence-based model of care that consists of a qualified peer specialist who assists individuals with their recovery from SUDs and mental illness. People in recovery are drawn to work in the field, often out of a sincere desire to "pass it on," and to use their experience to benefit others. By combining their lived experience of addiction, criminal justice involvement, and recovery with technical knowledge, specialty training, and certifications, peers have been shown to be highly effective members of recovery support teams.

PRSS refers to the wide array of non-clinical supports provided by peer specialists. There are four types of PRSS: (1) emotional, (2) instrumental, (3) informational, and (4) affiliational. (See table A below.) Often a service or support falls into more than one category. Examples for each category are provided in table A. There are five core values (SAMHSA, 2015) that underlie PRSS programs and the work of peer supporters. PRSS are recovery-oriented and person-centered. Through recovery (goal) planning and sharing resources, a peer practitioner encourages clients to engage in a process of making healthful choices; creating or recreating a meaningful life; and being of service to family, friends, and the community.

Peer support services have been shown to improve clients' access to social supports, decrease criminal justice

Table A. Types of PRSS

Type of Support	Description	PRSS Examples
Emotional	Demonstrate empathy, caring, or concern to bolster a person's self-esteem and confidence.	◄ One-on-one peer mentoring or coaching ◄ Peer-led support groups
Informational	Share knowledge and information, connect people to community resources, and assist them with life/vocational skills training.	◄ Discussing treatment court process ◄ Training for job readiness ◄ Offering wellness seminars or classes ◄ Training on self-advocacy ◄ Offering parenting classes
Instrumental	Provide goal-oriented assistance to help others accomplish tasks. Increase access and opportunities/reduce barriers.	◄ Help in accessing community health and social services ◄ Providing housing or childcare vouchers ◄ Providing public transportation passes
Affiliational	Facilitate contacts with other people to promote learning of social and recreational skills, create community, and acquire a sense of belonging. Help to build a recovery network of supports.	Arranging outings or activities such as: ◄ Sober softball ◄ Bowling league ◄ Alcohol- and drug-free dances and movie nights ◄ Lunches ◄ Celebrations and rituals ◄ Building Community recovery groups

involvement, and provide greater housing stability. They have also been shown to improve clients' relationships with treatment providers, increase treatment retention, increase satisfaction with the overall treatment experience, decrease return to use rates, and decrease substance use overall (Omni, 2020).

Peer practice is the application and implementation of a set of defined principles, structures, and methods for supporting individuals on their path to recovery.

Five Steps to Effective Integration of PRSS in the Criminal Justice System: The Five Ps

Across the SIM, the goal of peer support is to help persons with SUDs initiate and maintain recovery from addiction and co-occurring disorders. As peer specialists are integrated into a variety of roles across the criminal justice system, there are five key actions that programs need to take to foster effective integration:

1. **Promote a recovery orientation among community partners and stakeholders.**

2. **Prepare to integrate peer support into the organizational culture.**

3. **Plan appropriate service offerings of peer supports for context, with fidelity to the selected model(s).**

4. **Produce policies, procedures, and protocols that are consistent with and supportive of peer practice and processes that address barriers to peer support.**

5. **Provide appropriate supervision that is patterned on the best practices of PRSS and on working with criminal justice populations.**

An overview of each of these five Ps is provided below. Subsequent publications in this series will look at each of these areas in more depth.

Step 1. Promote a Recovery Orientation Among Community Partners and Stakeholders

Recovery is not only an individual, personal transformation process; it happens within systems of care that are recovery-oriented and communities that are recovery-rich.

Stage 1 Recovery-contemplating Community	Stage 2 Recovery-oriented Community	Stage 3 Recovery-rich Community

It is imperative to prepare community partners and stakeholders to do the institution-focused and community-focused work that will set a context in which personal recovery can happen. The greater the understanding of recovery—and the role that PRSS can play in that process—the better the chances are for the successful launch and continuation of PRSS in your community.

There are several strategies to promote a recovery orientation among partners and stakeholders; key strategies are summarized in table B. It takes time to transform a system and to move a community from recovery-contemplating to recovery-oriented to recovery-rich. Even amid a crisis, it requires patience and a long-term view of what your initiative or program is working to achieve.

Step 2. Prepare to Integrate Peer Supports Into Your Organization

Peer supports are an essential part of a recovery-oriented approach to addressing opioids and other SUDs. Instead of solely targeting symptom reduction, PRSS focus on recovery outcomes, such as improved health and wellness, an increased sense of self-efficacy, and increased success and satisfaction in a range of factors, such as employment, housing, and education. In many ways, these characteristics complement the rehabilitative aims of the criminal justice system; in others, they may conflict—which may lead to issues within a program, organization, or initiative. The most important reason to

Table B. Strategies to Promote a Recovery Orientation in Systems and Communities

Strategy	Approach	Rationale
Create a Vision	Create and disseminate a vision and broad plan for your program/initiative.	Community recovery requires a vision and vehicles to sustain commitment and focus.
Increase Trust	Maintain consistent contact and commitment over time. Assure transparency in all decision-making. Over-communicate.	Exploitation and abandonment are the norms in distressed communities; community engagement requires a period of testing, trust-building, and continuity of presence over time. Diversity of communication strategies must reflect knowledge.
Inspire Hope	Host recovery celebration events (such as recovery idol music contests) and recovery conferences. Sponsor recovery mural art projects in the community. Import and locally develop charismatic speakers on addiction recovery and recovery advocacy.	Recovery initiation hinges on changing prevailing pessimism—elevating the idea that personal, family, and community recovery is both possible and a growing reality. People who were once part of the problem could be transformed and mobilized as part of the solution.
Listen and Engage People From Throughout the Community	Conduct ongoing focus groups, town meetings, and other listening forums. Elicit personal, family, neighborhood, and community recovery stories in settings where people can share their personal and collective "experiences, strengths, and hopes."	People in distressed communities—including staff of the organizations that serve them— need opportunities to share their struggles and experiences in order to be heard and understood. Personal and collective transformation can occur through seeing one's personal story as part of a larger story—moving from an "I" story to a "we" story.
Promote Tolerance, Respect, and Mutual Support	Provide centralized training to all stakeholders and the recovery community. Increase contact between people affected by different challenges and between such individuals and members of the larger community. Create a stigma committee to develop a strategy for long-term stigma reduction.	Knowledge and understanding of addiction and recovery are important. Intolerance, stigma, and intergroup conflict are symptoms of community distress. The most effective stigma reduction strategy is a relational contact strategy.

(Evans, Lamb, and White, 2015)

prepare to integrate peer supports is to address these potential conflicts before they arise, ensuring that your organizational culture and climate are ready to support peer practitioners in their work.

Organizational context, setting, and culture can have profound effects on the nature and quality of peer support. There are four key tasks to perform when preparing to integrate peer supports into a comprehensive program: (1) conduct an organizational self-assessment; (2) clarify roles and expectations of peer staff members; (3) orient, train, and dialogue with current staff members; and (4) align policies with a recovery-oriented approach.

Conduct an Organizational Readiness Self-Assessment

A readiness assessment evaluates and documents your organization's preparedness in implementing peer supports, identifying strengths, and surfacing potential challenges in three areas: administrative readiness, staff readiness, and resource readiness. The readiness assessment also provides an opportunity to remedy gaps either before or as part of an implementation plan. Lastly, the readiness assessment can prompt discussion about how peer supports tie into the organizational mission and vision.

Clarify Roles and Expectations of Peer Staff Members

Clarifying the roles and expectations of peer staff members is an important but often overlooked step in the implementation process. Roles can be ill-defined, leaving peers and other staff members to guess at the scope of their work. Deciding that peer staff members will provide peer support is not enough. It does not provide sufficient clarity for peer staff members nor other staff members about **what** the peer specialist will be doing while engaging participants.

In practice, **peer recovery support specialist** is an overarching term that refers to persons with lived experience who are supporting others along their path of recovery—either before, during, after, or instead of treatment, depending on their job description. Peer recovery support specialists may have several different roles or titles, with diverse tasks, as summarized in table C. Given the wide range of roles that they can play, **clarifying the specific roles peer specialists will have in your organization and program is crucial.** The tasks and responsibilities of your peer specialists may be very different from other peer specialists who work in a different context. Your staff members—peer and non-peer alike—need to understand the key peer job duties and how they fit into the program's overall goals, objectives, and tasks. It is also important to consider reviewing these roles as your program evolves and address any specific needs or gaps when identified.

Dialogue, Orient, and Train Current Staff Members

Existing non-peer staff members are important to the success of peer supports. When preparing to integrate PRSS, it is important to:

◄ Talk with existing staff members about the purpose of adding peer supports.

◄ Solicit their ideas during the planning process to surface, address, and reframe any concerns they might have about a new PRSS program—such as changes to their job, qualifications of peer staff, roles of peer staff, or "peer fragility."

Table C. Diverse Roles of Peer Recovery Support Specialists

Title/Role	Key Tasks	Locations
Peer Recovery Coach	Serve as guide and mentor to persons seeking or already in recovery. Help identify and remove obstacles and barriers, support connections to the recovery community (and other resources useful for building recovery capital), and respect the path to recovery chosen by persons seeking support.	Peer recovery support centers, virtual support, inpatient and outpatient addiction treatment programs, behavioral health organizations, community health organization centers supporting medication-assisted treatment (MAT) or medication for opioid use disorder (MOUD) and recovery, jails, recovery residences, places of faith-based support, educational settings, community and home settings (as determined by organizational policies), job description, and source of funding
Forensic Peer Specialist	Support people involved with the criminal justice system as a mentor, guide, and/or resource connector while they are incarcerated, on probation (or in lieu of probation), or in the reentry process.	Jails, prisons, jail diversion programs, drug courts, community-based programs
Recovery Interventionist/ Crisis Interventionist	Provide support and guidance to persons at critical intercept points along the recovery support continuum, linking persons to treatment or other recovery support services as requested by persons being supported.	Hospitals, emergency rooms, courts, child welfare offices, schools, treatment programs, police departments, and other first responders
Recovery Support Staff	Facilitate the development of peer-to-peer affiliational, emotional, informational, and instrumental recovery support. Provide training, education, and peer leadership development.	Peer recovery support center, recovery community organizations, community venues
Peer Navigator	Provide support and guidance in accessing appropriate services from complex medical and treatment systems. Support the application process for health insurance and other entitlement benefits.	Community health centers, emergency rooms, crisis centers
Peer Bridger	Support transition from long-term or recurring involvement in institutions, such as jails, treatment centers, and residential programs to community living and recovery resources.	Institutions, community health centers, treatment programs
Peer Advocate	Provide assertive advocacy on recovery-related issues that transcend personal, professional, and institutional interests; advocate to reduce/eliminate service disparities; reduce/eliminate stigma and discrimination; and make addiction treatment more responsive, effective, and efficient.	Addiction recovery organizations, addiction treatment centers/programs
Firestarter	Implement recovery support based on tribal elders' knowledge as peer leaders.	Native American communities, Wellbriety Movement
Promotora	Provide common culture community-based health education and recovery support (recovery coaching).	Spanish-speaking communities: homes, community venues, health centers

◄ Provide job-appropriate training to increase staff members' knowledge of addiction and recovery.

◄ Support non-peer staff members in rethinking and adjusting their workflows.

These processes increase staff readiness for the launch of PRSS. They provide a foundation for the exploration of needed policy and practice changes. They provide exposure to the realities of the recovery process. Lastly, they help each staff member consider how peer supports relate to and can help them in their work.

Roles and Expectations Quick Assessment

1. **Determine (or update) the roles of your organization's peer specialists:**

   ☐ Have you clearly defined the role your program's peer specialists will have?

   ☐ What core tasks or responsibilities will be essential to that role?

   ☐ What unique aspects of the role will peer specialists bring to the position that that could not be performed by other staff members?

2. **Identify your organization's expectations based on the peer specialists' roles you have defined:**

   ☐ Where will the peer specialists' work take place, what hours will they be expected to work, and how many individuals will they be expected to support?

   ☐ What knowledge, competencies, and aptitudes will your peer specialists need for their job?

   ☐ Will you require your peer specialists to be state certified?

3. **Consider how your organization's peer specialists will interface with other staff members:**

   ☐ What will be the roles and responsibilities of other staff members who will work with your peer specialists?

   ☐ Will changes be made to your organization's existing jobs when peer specialists join the team?

   ☐ Are there any tasks that are currently being performed by your current staff members that will be transferred to peer specialists upon hire, and how will your existing staff respond to this shift in responsibilities?

Current Staff Quick Assessment

1. **Identify your organization's existing staff members with which peer specialists will be working:**

   ☐ Has your organization participated in a discussion about starting a PRSS program?

   ☐ What issues or concerns, if any, have been raised about adding peer supports and/or peer specialists, and how does your organization ensure these concerns are addressed?

   ☐ Do your existing staff members currently receive training about SUD and the process of recovery?

2. **Consider how to engage your organization's staff members in program planning:**

   ☐ Does your organization already have established working groups, quality improvement groups, or committees that should be engaged in planning?

   ☐ Can you establish a change team or another group committed to the successful implementation of PRSS?

   ☐ Will your organization's peer specialists be invited to participate in any multidisciplinary teams?

Step 3. Plan and Implement an Appropriate Selection of Peer Supports

The overarching purpose of peer support is to help individuals build and sustain a life in recovery. SAMHSA defines recovery as a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. Through its Recovery Support Strategic Initiative, SAMHSA has delineated four major dimensions that support a life in recovery, summarized in table D.

Table D. SAMHSA's Core Dimensions of Recovery

Health	Overcoming or managing one's disease(s) or symptoms (e.g., abstaining from the use of alcohol, illicit drugs, and non-prescribed medications) and making informed, healthy choices that support physical and emotional well-being
Home	A stable and safe place to live
Purpose	Meaningful daily activities such as employment, education, volunteerism, family caretaking, or creative endeavors, as well as the independence, income, and resources to participate in society
Community	Relationships and social networks that provide support, friendship, love, and hope

(SAMHSA, 2015)

An appropriate selection of peer services and supports helps individuals with each of these four dimensions. Some may be provided directly by your program; others may be offered by or in collaboration with community partners. The key is to ensure that a full range of services is available to program participants across many pathways to recovery, with the intensity and length of time necessary for the individual to establish a stable path to recovery. Figure 2 provides a sample calendar of PRSS.

Selection of Peer Recovery Support Services Quick Assessment

1. **Identify the core needs of the individuals your organization's PRSS program will serve:**
   ☐ What are the most significant barriers to health, home, purpose, and community?

2. **Identify the recovery resources available to your organization:**
   ☐ What individual, family, and community recovery capital exists on which to build PRSS?

3. **Based on the barriers and assets you identified, consider:**
   ☐ Should your PRSS program offer short-term supports, long-term supports, or both?
   ☐ What might an offering of emotional, instrumental, informational, and affiliational supports look like?
   ☐ Is your organization equipped to provide alternative forms of PRSS, such as telephonic and/or virtual support?

Figure 2. Sample Calendar of Peer Recovery Support Services

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Meditation Monday **12-2pm** Recovery Discussion **2-3:30pm**	Chat 'N Chew **12-2pm** PRTC GED **1-4pm** Art for Recovery **2-3:30pm** PPLA Advanced **5-8pm**	Coffee and Conversation **10-11:30am** Relapse Prevention **11am-12pm** Recovery Enhancement **1-2:30pm**	Dual Recovery **12:30-2pm** Latinos in Recovery **1:30-3pm**	Women's Recovery Support **1-2:30pm** Acupuncture **1-3pm** Men's Recovery Support **3-5:30pm** Fun Friday Nights **4-7pm**	Coffee and Conversation **9:30-11am** Coffee and Conversation **1-2:30pm** GED **1-3:30pm** (must register)

> ## Core Policies and Procedures Quick Assessment
>
> 1. **Identify the core policies that may need review:**
>   - ☐ Recruitment, hiring, and work hours
>   - ☐ Privacy and confidentiality
>   - ☐ Data and information management/sharing
>   - ☐ Supervision and disciplinary procedures
>   - ☐ Code of conduct and ethics/boundaries
>
> 2. **For each policy, consider:**
>   - ☐ What is the purpose, goal, or objective of the policy?
>   - ☐ How could implementing the policy as intended affect the delivery of PRSS?
>   - ☐ Can the language within the policy be altered to reflect a more recovery-oriented organizational philosophy and approach?

Step 4. Produce Policies, Procedures, and Protocols

Organizational policies impact the nature and quality of PRSS. Policies reflect the organizational culture, which shapes the structure and functioning of a peer support program. While peer support approaches need to be tailored to the characteristics of your organization and its culture, it may also be necessary to create new policies and procedures—and to review and adapt existing ones—to guide the work of all staff members. The aim is to make sure your policies and procedures line up with the core practices of peer support.

Workflow procedures and protocols will also need to be developed or refined. A well-designed protocol informs all team members of their tasks and sets the stage for quality assurance and quality improvement. Peer support protocols should describe key tasks and associated tools (e.g., recovery plan, recovery capital assessment), offer approaches for how to address common situations that a peer specialist may encounter, and provide guidelines on when to ask for help from a supervisor or relevant team members.

Step 5. Plan to Provide Supervision

Supervisors play a key role in the successful integration of peer supports within criminal justice settings. The most important thing about supervision is that it happen with adequate frequency; the second most important is that it be appropriate—that is, tailored to and supportive of the roles of peer specialists. In settings where there is a limited understanding of the role and value of peer support, supervision must include thoughtful, intentional support of peer specialists to (a) maintain the peer nature of the services and supports offered, (b) ensure the well-being of those served, and (c) facilitate the just and respectful treatment of peer recovery support staff members. Supervisors provide a safe space to address ethical dilemmas and boundary issues, engage peer specialists in strengthening the PRSS program, and support self-care. Supervisors also are advocates for organizational culture, systems, structures, and processes that are recovery-oriented.

Supervision of peer supports is based on three interrelated functions that are summarized in table E.

Supervision of peer supports is a strengths-based process that enhances and develops the unique knowledge and skills necessary for successful peer practice. Specific core competencies for supervisors have been identified by others, including an understanding of peer roles, recovery orientation, and knowledge of community resources (Martin and Jordan, 2017; Daniels and Tunner et al., 2015). Supervision takes many forms depending on the organizational resources and the context where peer support is delivered. The structure and frequency of

Table E. Functions of Supervision

Administrative	Educative	Supportive
Effective implementation of the agency's policies and procedures and the management of the peer worker's work performance: ◄ Quality of work ◄ Workload ◄ Liaison to operations (payroll, human resources) ◄ Using program resources effectively (including time) ◄ Conformance or fidelity to the program model ◄ Record keeping	Professional development of the worker through training, modeling, and structuring learning experiences: ◄ Provide time and space to reflect on peer practice ◄ Focus on knowledge, skills, and attitudes ◄ Provide individualized training and support ◄ Provide a venue for supporting the peer worker's professional development	Morale and job satisfaction: ◄ Give feedback on work ◄ Discuss personal reactions to the work ◄ Validate and promote encouragement ◄ Promote self-care practices ◄ Advocate for peer-support roles

supervision can be determined by considering the skill-level, comfort, and needs of both the peer specialist and the program. For example, a seasoned peer specialist who is facilitating groups on-site may require less frequent one-to-one supervision than a newly trained peer worker who is providing mobile one-to-one support to individuals in crisis.

Developing creative structures for supervision—such as co-supervision, group supervision, and peer-to-peer supervision—can ensure that support for peer specialists is available when needed and can provide opportunities for other meaningful elements of supervision to happen consistently.

Conclusion

This introduction to the *Effective Integration Toolkit* provides an overview of the five Ps for effective integration, offering suggestions for embedding recovery values, principles, and core concepts in peer support in criminal justice settings.

Upcoming publications in the series will offer a more in-depth look at each of the elements.

For more information or to request COSSAP training and technical assistance, visit https://www.cossapresources.org/Program/TTA/Request.

Supervision Quick Assessment

1. **Identify a clear supervision structure within your organization to determine:**

   ☐ Who will your peer specialists receive supervision and guidance from?

   ☐ Is the frequency of supervision appropriate for the context, complexity, and intensity of peer services being provided?

   ☐ Will peer specialists have access to a network of other peer specialists for the purposes of learning, mutual sharing, and problem solving?

2. **Consider the training needs of your organization's supervisors:**

   ☐ Do supervisors have knowledge and understanding of the history, values, principles, competencies, and philosophy of PRSS?

   ☐ Do supervisors have knowledge and understanding of advocating for peer roles, navigating community resources, and providing strengths-based supervision from a recovery-oriented approach?

   ☐ Does your organization have the capacity to provide ongoing training and support for peer specialists, supervisors, board members, senior leadership, and other staff members?

Additional Resources

Meaningful Roles for Peer Providers in Integrated Healthcare: A Guide

The Provider's Handbook on Developing & Implementing Peer Roles

Peer Support Toolkit

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About Altarum

Altarum is a nonprofit organization that works with federal and state agencies and foundations to design and implement solutions to improve the health of individuals with fewer financial resources and populations disenfranchised by the health care system. We achieve measurable results by combining our expertise in public health and health care delivery with technology, workforce training and continuing education, applied research, and technical assistance. Our innovative solutions lead to better health for beneficiaries and better value for payers. Under a grant from BJA, Altarum provides nationwide training and technical assistance to COSSAP grantees, states, and communities to build, enhance, and sustain peer recovery support services programs as part of multidisciplinary criminal justice responses to the opioid epidemic. To learn more about peer recovery training and support, visit https://altarum.org/services/solution/coap-bja. To learn more about Altarum, visit www.altarum.org.

Visit the COSSAP Resource Center at **www.cossapresources.org**.

About BJA

BJA provides leadership and services in grant administration and criminal justice policy development to support local, state, and tribal law enforcement in achieving safer communities. To learn more about BJA, visit www.bja.gov and follow us on Facebook (www.facebook.com/DOJBJA) and Twitter (@DOJBJA). BJA is part of the U.S. Department of Justice's Office of Justice Programs.