Accreditation

ARC Committee — Last update: 2016/11/18

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Preface

In the last ten years, peer recovery support services (PRSS) – distinct from both clinical treatment and mutual aid supports – have become established in the continuum of care for people seeking, stabilizing, and sustaining recovery from addiction to alcohol and other drugs. As these services have been conceived, defined, and developed, organizations have realized that they need to address the most effective ways to ensure the highest quality of care, while keeping intact the values, principles, and contexts that were the underpinnings of their work and that would give integrity and fidelity to peer recovery practice.

PRSS accreditation has emerged in this context. Accreditation is an evaluation and approval process for organizations or programs to deliver a specific type of services or set of services. The focus is on the organization/program providing the service(s). Accreditation is sponsored by a non-governmental agency, in which trained external peer and expert reviewers evaluate an organization's compliance with preestablished performance standards. Although it is usually voluntary, it can be a requirement set by many diverse funders and purchasers of services.

The **Council on Accreditation of Peer Recovery Support Services** (CAPRSS) accredits programs, rather than credentialling individual practitioners. This orientation is based on the wider purpose of supporting the development of recovery-oriented, community-based institutions and programs where peer services are delivered, and on a commitment to quality assurance and integrity of those services.

There are several reasons why CAPRSS focuses on accreditation of programs rather than certifying, credentialing, or licensing an individual for a specific service role. An accreditation system allows organizations to:

- oversee an expanding menu of peer support services and activities, as many already do today, providing a broader array of support to meet the needs of people seeking or in recovery
- train, supervise, and support volunteers who may or may not be interested in finding a career ladder in the continuum of addiction care, or who may have barriers to employment, certification or credentialing
- be accountable for quality and ethical peer practice in a number of service settings – both on and offsite, actively support peer workers, and protect the recovery community and peer values inherent in the services

A national accreditation system provides a comprehensive response to a range of peer issues, rather than piecemeal approaches that differ widely from state to state. The accreditation of programs that deliver PRSS will:

- create infrastructure necessary for peer service delivery, including standards-driven continuous quality improvement;
- facilitate and disseminate best – and, ultimately, evidence-based – practices; and
- reinforce the recovery-based values and principles that underly peer services and make them valuable in the continuum of care.

About the Accreditation Review Manual >>

About the Accreditation Review Manual

The Council on Accreditation of Peer Recovery Support Services (CAPRSS) Accreditation Review Committee (ARC) an essential part of the accreditation process. The ARC ensures fair and equitable accreditation reviews of RCOs and qualifying programs.

This manual provides an overview of the accreditation process, and the roles and responsibilities of the Accreditation Review Committee.

<< Preface | Introduction >>

Introduction

Around the country, much attention is now being paid to peer support. Many different titles are used, depending on the type of organization to which the peers are connected: community health worker; outreach worker; social services aide; mental health worker; recovery coach; promotora; youth worker; and peer paraprofessional. Little attention, however, is being given to the settings/contexts in which peers offer support.

The work of CAPRSS is based on the idea that **context** is of utmost importance—that is, that the most effective peer work happens in a setting that honors, nurtures, and actively supports peers. Through its accreditation process, CAPRSS focuses on those special places, and on helping the people who run them make them better. CAPRSS also focuses on a specific kind of peer support—addiction-related peer recovery support services (PRSS).

We believe that accrediting programs that deliver PRSS will:

- create infrastructure necessary for peer service delivery, including standards-driven, continuous quality improvement;
- facilitate and disseminate promising, best, and, ultimately, evidence-based practices; and
- reinforce the recovery-based values and principles that underlie peer services.

Further, we believe that accreditation of PRSS programs embraces and includes the valuable wealth of volunteerism and service-giving that is inherent in the addiction recovery community. Accreditation helps programs to continue to create volunteer work and resume-building opportunities for the many community members: individuals who may face legal barriers in the workplace (including certification) because of their histories with the criminal justice system; individuals without formal work histories; and others who simply want to volunteer and give back.

Accreditation also helps programs to that provide a career path for individuals who choose to do peer work as paid work. Providing a healthy work environment and engaging in supportive workforce development—inclusive of both volunteer and paid peer leaders—are important components of effective PRSS programs. Accreditation can help to strengthen a program's efforts in those areas.

Last, we believe that accreditation is consistent with the philosophy and principles of peer practice, firmly grounding the focus, responsibility, and decision-making within the organized addiction recovery community. PRSS programs happen in a variety of peer services in multiple settings (e.g. community, treatment, primary

care, corrections, etc.); regardless of setting, accreditation can help programs to be accountable for recovery-orientation, ethical practice, strengths-based approaches, peer integrity, and quality assurance.

<< About the Accreditation Review Manual | What is the Council on Accreditation of Peer Recovery Support Services ? >>

What is the Council on Accreditation of Peer Recovery Support Services ?

The **Council on Accreditation of Peer Recovery Support Services** (CAPRSS) is a private organization that provides asset-based accreditation ™ of addiction peer recovery support services (PRSS) provided by recovery community organizations (RCOs) and qualifying programs. CAPRSS promotes the quality, value, and optimal outcome of PRSS through a consultative accreditation process that centers on enhancing the lives of the persons served.

At present time, CAPRSS is the only accrediting body in the United States for recovery community organizations and qualifying programs offering addiction peer recovery support services. CAPRSS offers a recovery-oriented, peer-infused accreditation system that:

- helps emerging and established RCOs and peer programs to build capacity;
- improves the performance of organizations and programs providing peer services by setting and measuring the achievement of standards; and
- increases accountability of peer services providers to funders, the public, and the field.

CAPRSS takes an "accreditation plus" philosophical approach, viewing accreditation as more than the evaluation and approval of organizations or programs based on a set of standards. Offering a process that promotes capacity-building and the achievement of excellence within organizations from beginning to end, CAPRSS offers services for:

- emerging organizations seeking information and resources to develop their programs;
- established organizations looking to improve depth, breadth, scope, and quality of the peer services they provide, and preparing to seek accreditation;
- "accreditation-ready" organizations applying for accreditation;
- accredited organizations; and
- state and other governmental entities seeking to support and assure the quality of peer recovery support services within their jurisdiction.

> ✳ The mission of the **Council on Accreditation of Peer Recovery Support Services** is to identify and support excellence in the delivery of peer recovery support services and other activities by recovery community organizations (RCOs) and qualifying programs.

The Accreditation Program

There are five main aims of the accreditation program. These are presented in the table below.

Purpose	*CAPRSS will:*
1. Increase public confidence, and confidence within the field, in the quality of peer services.	promote the legitimization and efficacy of services
	highlight potential and positive recovery outcomes of peer support
	demonstrate the ability to ensure ethical practice and supervision
	encourage utilization and development of promising and evidence-based practices
	highlight the quality, efficacy, value, and/or scientific and empirical basis of peer services
2. Improve the performance of organizations and programs providing peer services by setting and measuring the achievement of standards.	ensure standards for RCOs and peer programs are established by RCOs and peer programs of host organizations
	embed quality assurance and quality improvement protocols in standards
	define and clarify peer supports/services and service roles
3. Encourage RCOs and peer programs to build capacity and infrastructure.	increase capacity of RCOs and programs to provide peer services that reflect the strengths and needs of geographic and cultural communities being served
	strengthen staff (both paid and volunteer) workforce development
	maintain the integrity of peer programs, including peer processes, principles, values, and ethics
	increase the ability of programs to generate sustainable revenue, including third-party reimbursement
	increase ability of programs to develop responsible fiscal and business practices
4. Increase accountability of peer services providers to funders, the public, and the field.	attract the recognition of funders, other stakeholders
	establish and legitimize authentic peer recovery positions in addictions workforce

5. Increase access to recovery supports for people seeking and in long-term recovery, for those served and those providing services.	increase the number of organizations equipped to deliver PRSS
	increase availability, scope, and outreach of PRSS
	increase recovery capital for individuals, families, and communities
	include measures to promote recovery for those served

Purpose of Accreditation

Accreditation is an evaluation and approval process for organizations or programs that deliver a specific type of services, or set of services. The focus is on the organization/program providing the service(s). Accreditation is sponsored by a non-governmental agency, in which trained external peer and expert reviewers evaluate an organization's conformance with pre-established performance standards. Although it is usually voluntary, it is often a requirement set by many diverse funders and purchasers of services.

At CAPRSS, we believe that accrediting programs that deliver PRSS will:

- create infrastructure necessary for peer service delivery, including standards-driven, continuous quality improvement;
- facilitate and disseminate promising, best, and, ultimately, evidence-based practices; and
- reinforce the recovery-based values and principles that underlie peer services and make them valuable and effective in supporting long-term recovery.

Further, the accreditation of organizations and programs embraces and includes the valuable wealth of volunteerism and service-giving that is inherent in the addiction recovery community. Accreditation will allow organizations and programs to continue to create volunteer work and resume-building opportunities for the many community members who may face legal barriers from the workplace (including certification) because of their histories with the criminal justice system, as well as those without formal work histories, and others who simply want to volunteer and give back. Under the accredtiation system, organizations and programs can also choose to pay peer service workers.

Finally, accredited organizations and programs will be able to oversee a variety of peer services in multiple settings (e.g. community, treatment, primary care, corrections, etc.) and be accountable for quality assurance, ethical practice, risk management, recovery-orientation, strength-based approaches, and peer integrity. This is consistent with the philosophy and principles of peer practice, firmly grounding the focus, responsibility, and decision-making within the organized addiction recovery community.

Many accreditation programs use external peers and expert reviewers as evaluators in a peer review process. Using the peer review approach allows individuals from RCOs with experiential expertise in operating peer support programs to be of service to other organizations, promoting a community of practice. The process has the potential of enhancing the ability of all involved to serve the recovery community by learning from each other.

<< The Accreditation Program | Benefits of Accreditation >>

Benefits of Accreditation

Accreditation can bring many things to a PRSS program, such as:

- new ideas for designing and implementing best practices in organizational development, management, and program design
- guidance for providing high-quality PRSS, implementing strategies for quality improvement, and developing specific policies and procedures in all areas
- identification as an organization that meets recovery-community developed standards in the provision of quality addiction peer recovery support services
- increased confidence on the part of persons seeking recovery or family members
- increased confidence of funding sources, referral agencies, other providers, businesses, community leaders, and community resources
- evidence that funds are being used effectively
- documentation that demonstrates good management, accountability, positive outcomes, a recovery-centered and person-driven approach
- continuing support from CAPRSS through online, telephone, and on-site consultation.

Steps to Accreditation

To become accredited, organizations go through eight core steps and two optional ones.

Step	Description	Available Tools
Step 1	Learn about accreditation process	Quick Reference Guide to Accreditation Process *Accreditation Resource Book (this manual)* Accreditation 101: Introduction to Accreditation webinar
Step 2	Determine accreditation readiness	Accreditation Readiness Self-assessment
Step 3	Prepare for core accreditation	Free online resources and reference materials (CAPRSS online Learning Community; registration required) Short assessment tools and online courses (*Learning Community Plus,* coming soon)
Step 4	Become a candidate for Core Accreditation	*Candidacy checklist*
Step 5	Complete and submit Program Inventory	*Organization Profile, Welcome Walk Through, and Accreditation Self Study*
Step r	Prepare for and host Peer Review Site Visit	*Site Visit Preparation Guide*
Step 7	Receive accreditation determination	*Understanding the Accreditation Final Report*
Step 8	Follow-up	*Feedback Form* *PIP template (as needed)* *Annual Update Report*
Step 9	(optional) Apply for accreditation in optional performance domains	
Step 10	(optional) Follow up	

Accreditation Review

For any accrediting body, the accreditation review is a core service. It is doubly important for CAPRSS: As CAPRSS begins granting accreditation, the review provides a sense of the individual applicants *and* allows data gathering that will give a clearer picture of the field. Accreditation review is at the center of an iterative learning process that will lead to the development of ever-more accurate standards and indicators; improved self-review by programs; and a deeper understanding of the capacities needed to provide effective peer supports for recovery.

The CAPRSS accreditation review consists of **self review**, **peer review** and **committee review.** Combined, these help to ensure that accredited organizations will have institutional integrity (clear purposes, high levels of integrity, fiscal stability, systems to fulfill its purposes), PRSS effectiveness (clear and appropriate objectives & design, process of review, collection and use of data that ensure environment for recovery), and sufficient capacity to sustain quality over time.

<< Steps to Accreditation | Peer Review >>

Peer Review

Peer review is a common practice in many fields to maintain standards of quality, improve performance, and provide credibility. For CAPRSS, it is a reflection of the peer support process that is at the heart of PRSS; peer reviewers provide knowledge, experience, and practical help to others in the field.

The cornerstone of the peer review is the *site visit*, which confirms and complements the information contained the applicant's Accreditation Self Study. The purpose of the site visit is to obtain in-depth information concerning all aspects of the PRSS program(s). The site visit permits the Peer Review Team to assess a program's conformance with the CAPRSS Standards and also the achievement of the program's own stated mission, goals, and objectives.

Using the peer review approach gives individuals from recovery community organizations with expertise in operating peer support programs another way to be of service to other organizations and to learn from others at the same time. The process has the potential of enhancing the experience of all involved, promoting a community of practice.

Who is Involved in the Peer Review Process?

The key people involved in the Peer Review Process include:

1. CAPRSS staff member—the CAPRSS Liaison
2. Peer Review Team Leader
3. Peer Reviewers

The Peer Review Team

Each peer review team will consist of 1-3 peer reviewers, who bring expertise from direct experience. This team completes both a pre-site visit review of documents submitted by organizations, and site visits.

Site Visits

Because the duration of a two-day visit is very short, each team will want to make the best use of the allotted time. It is important that teams achieve the desired goals, as well as to honor the time committment that the applicant organization is making.

A high level of teamwork, organization, and communication will be necessary in order to get everything accomplished. Each team will need to communicate before the actual site visit and to coordinate efforts once on location. It is imperative that teams schedule a face-to-face meeting the night before and/or the morning of the first day of the visit. Teams will make use of "face time" throughout, as well as directly following, the visit. Meeting time will offer important opportunities to share notes, divide and assign tasks, and offer/receive support from other team members.

Key Documents Collected During Candidate Review Process

There are many documents that are collected as a part of the Peer Review process. Key documents are listed in the table below.

Basic Info		
✓	*Document*	*Notes*
	Articles of incorporation (all organizations)	
	501c3 determination letter (nonprofit organizations)	
	List of staff and key peer leaders, including titles	
	Organizational chart	
	Most recent annual report	
	Audited financial statements	
	Certificate of Occupancy (C of O) for each site	
Recovery Principles, Culture, and Climate		
	Mission, vision, and values statement(s)	
	Examples of flyers, brochures, or announcements of activities/workshops you have conducted in past year.	
	Meeting minutes or notes that document participatory process	
Ethical Framework for Service Delivery		
	Code of Ethics	
	Ethics orientation manual	
	Agenda and learning objectives for ethics training	
	Ethics policies/procedures	
	Confidentiality policies/procedures	
	Ethics Committee or Workgroup meeting minutes	
	Guidelines for setting and maintaining peer boundaries	
	Sign-off ethics and boundary pledge form	
Peer Leader Development		
	Job descriptions for key peer leader roles	

	Recruitment plan	
	Staffing plan	
	Peer leaders policy manual	
	Peer leader orientation and training materials	
	Certificate of Training Completion	
	Background check policies and procedures	
	Peer Leader application form	
	Self-care materials	
	In-service training agendas	
Peer Supervisor Development		
	Peer Supervisor job description	
	Peer Supervisor training manual or course description	
	Peer supervision guidelines and/or protocols	
	Peer Supervision log or notes	
	Peer Supervision agenda	
Governance		
	List of board of directors, including officers and committee chairs (with brief bios)	
	Most recent board of directors agenda and meeting minutes	
	List of advisory board members (with brief bios)	
	Most recent advisory board agenda and meeting minutes	
	Board Policies and Procedures:	
	Board job descriptions	
	Bylaws	
	Conflict of Interest policy	
	Other	
	Most recent strategic or long-range plan	
	Board training agendas	
Management Systems		
	Financial policies & procedures	
	Risk management plan	
	Other applicable plans (e.g. crisis management, safety plan)	

	Human resource/ personnel policies	
	Volunteer management policies	
	Sample timesheets	
	Policies on record keeping and confidentiality	
	Agenda for training on confidentiality/ recordkeeping	
Peer Support Capacity: Core Competencies		
	Sample programming calendar	
	Brochure, flyer, or other participant material that describes your PRSS	
	Recovery planning/recovery capital templates	
	Outreach plan	
	Agreements or memoranda of understanding for key partners	

There may be others available; applicants are encouraged to submit other documents that are not on the list that they feel demonstrate commitment to and implementation of the standards.

<< Who is Involved in the Peer Review Process? | The Score Sheets >>

The Score Sheets

The score sheets used by Peer Reviewers list each of the standards and underlying criteria. The score sheets have two dimensions that reviewers rank: (1) "Has It" and (2) "Uses It". The two dimensions have been designed to capture the "structure" of the service (Has It), and the "process" (Uses It), to gauge overall conformance. Often many organizations and programs have good policy and procedure but do not use it; others have very basic policy and procedures but excellent practice. The strongest reviews will have high ratings in both dimensions.

The scoring systems for the criteria for the standards are "0": none; "1": moderate conformance "2": excellent conformance. The score sheets also have an area to check off Supporting Evidence for each rating in the categories that are outlined in the previous sections: D=Documents, O=Observations, I=Interviews, S=Surveys, T=Tracers.

Under the scoring section are three narrative areas. As a peer reviewer, you are expected to complete the first two areas: Findings (s) and Recommended Action(s). The third area is optional; it is a place to write suggestions or comments that will enrich the assessment of the standard. The *Site Visit Handbook* will contain detailed instructions on how to complete the score sheets.

Sample score sheet

RECOVERY PRINCIPLES, CULTURE, AND CLIMATE SCORE SHEET

RPCC-1.0: Core Recovery Principles
The program is grounded in the values of the recovery community—both local community and the national movement.

Criteria	Has It			Uses It			Supporting Evidence				
	0	1	2	0	1	2	D	O	I	S	T
1.1 Keeps recovery first, placing recovery at the center of the effort.											
1.2 Uses participatory processes to engage people who are in and seeking recovery.											
1.3 Maintains the authenticity of peers helping peers, drawing on the lived and shared experience of addiction and recovery.											
1.4 Builds leadership and capacity among members to guide and direct the program.											
1.5 Recognizes, acknowledges, affirms, and celebrates peer contributions.											
1.6 Welcomes, affirms, and embraces cultural diversity and inclusion.											
1.7 Encourages and promotes being of service/ giving back to the community.											
1.8 Engages in advocacy activities.											

Finding(s)

Recommended Action(s)

Peer reviewers, what would you add to enrich assessment of this standard?

CAPRSS/ Score Sheet   A

[Download a copy of a sample score sheet](#)

[<< Key Documents Collected During Candidate Review Process](#) | [Committee Review >>](#)

Committee Review

Committee review is the capstone of the accreditation process; it completes the process begun with the the Accreditation Self Study and furthered by the Peer Review Site Visit. The purpose is to ensure that the Peer Review was conducted fairly and in conformance with CAPRSS guidelines.

Committee Responsibilities

For each accreditation candidate, the ARC will:

- Review the process undertaken for the peer review site visit to ensure that it was fair;
- Review the site visit findings, consultative and performance improvement recommendations made by peer reviewers to ensure that are consistent with the CAPRSS standards and criteria;
- Review the survey recommendation (accreditation outcome) and ensure that it is consistent with CAPRSS guidelines;
- Speak with members of the Peer Review Team, if necessary, to obtain additional information and/or clarification;
- Recommend a formal determination to CAPRSS.

The ARC also conducts follow-up reviews of organizations that are implementing performance improvement plans that may required for accreditation, and review complaints filed by interested parties.

<< Committee Review | Expectations of the Committee >>

Expectations of the Committee

The members of the committee will be expected to:

- Use your professional judgment and maintain integrity in your role on the committee process;
- Maintain confidentiality—the evaluation of applicants should only be discussed with committee members, the Peer Review Team, and CAPRSS staff;
- Remember that there may be a number of acceptable ways for an institution to address the standards;
- Rely on the collective judgment of the committee members to form the basis for any action for committee decisions; and
- Concentrate on being accurate and fair in your findings and observations.

<< Committee Responsibilities | Accreditation Determination >>

Accreditation Determination

After review and discussion of the site visit, if the committee agrees that the site visit was conducted fairly and that the accreditation outcome recommended by the Peer Review Team is within the CAPRSS guidelines, then the Final Determination letter will be sent to the candidate along with the site visit report.

If the committee finds that the Peer Review Site Visit was not conducted fairly or that the findings were not consistent with the CAPRSS standards and criteria, then an extended review process will be initiated to revise the summary report to align the findings, recommendations, and accreditation determination with the CAPRSS guidelines.

Accreditation Outcomes (v1.0)

Accreditation outcomes are on a continuum of performance from exemplary status to non-accreditation, as depicted below.
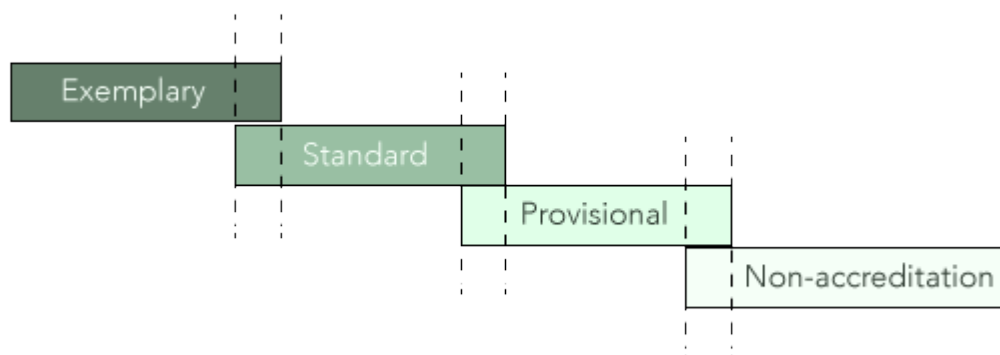
The categories have some elasticity—that is, there is some overlap (plus or minus 5-10%) between the accreditation categories.These bands, depending on context, can be referred to as standard errors, confidence intervals, or errors of prediction. Tighter bands of confidence will emerge as the accreditation process matures, more field experience is gained, and with standards that have been in the field for several years. Nonetheles— and despite inherent variability— the process is designed to be robust, valid, and reliable.

Following are the four categories of accreditation outcomes.

Outcome/ Status	Metrics	Award & Comments
Accreditation, Exemplary	Ranks as exceeding standards on 25 or more of the core standards.	5 year award
Accreditation, Standard	Ranks as meeting or exceeding standards on 20 or more of the core standards.	3-5-year award
Accreditation, Provisional	Ranks as meeting or exceeding standards on 15-19 of the core standards (and requires performance improvement on the other standards).	1-3 year award *(during which the organization needs to address key standards that were not met)*; required to resubmit for accreditation within that time. Performance improvement plan required
Non-accreditation	Ranks as requiring performance improvement on 17 or more of the core standards.	No award; Resubmit within 1 year if desired after improvement activities

The decision of which outcome to grant is driven by: (1) the Accreditation Self-Study conducted by the applicant, (2) the scoring and impressions from the Peer Review Site Visit, and (3) the judgment of the Accreditation Review Committee. The goal is to find the "best fit" on the continuum for each organization, given its implementation of the standards.

At the discretion of the Accreditation Review Committee, within any of the categories:

- variable lengths of accreditation (years) can be awarded
- organizations may be required to submit a performance improvement plan in order to receive accreditation
- a follow-up visit may also be required.

<< Accreditation Determination | The Performance Improvement Plan >>

The Performance Improvement Plan

When there are significant areas that are noted for improvement, a Performance Improvement Plan (PIP) is required for the program. This plan must be submitted by the candidate within 90 days of receiving the final site visit report. If there are critical, time-dependent issues or if the improvement process requires acceleration, the timelines may be adjusted as needed. A sample page from a PIP is below.

Upon submission, the PIP is reviewed and approved by the Accreditation Review Committee (ARC). If the PIP needs additional work, a revised PIP will be required within 60 days— and again, as necessary, in 30 days if the revised plan is not satisfactory.

CAPRSS will provide follow-up, verification, and support for implementing the PIP.

As organizations implement their plans, supportive materials (e.g., new policies), improvement data (e.g., new self study findings), and other evidence of progress will be submitted to CAPRSS, and reviewed by staff, and as appropriate, the ARC.

PIR-1. Further define peer supervision responsibilities and methods.

Table 1

Plan of Action to be Taken	Measures/Indicators of Improvement	Date to be Completed	Supporting Materials
Develop a written Peer Supervisor Description with role, responsibilities and duties	Evaluation of progress and performance, 1x month	Feb 18	(Evidence) Job Description, Recovery Coach and Peer Leader Supervision Manual (Resources) SAMHSA guidelines for Peer Recovery Coaching,
Continuing education re Peer Supervision responsibilities and methods	Measure and document performance of Peer supervision and supervisors with 3-month evaluations. Show decrease in questions concerning difficult supervisor challenges Show increase in Peer Leader/recovery coach knowledge, skills and attitudes	Ongoing	(Resources)Recovery Coach and Peer Leader Supervision Manual, Recovery Coach Manual, Risk Management procedures, Boundaries Scale, Evaluation form
Create a Peer Supervision Test Test created with assistance from Peer Leaders, Peer Coaches, Consultant, Board Members	Test results	Feb 15	(Evidence) RCO Supervision Exam
Practice strengths-based personal path for long term recovery	Minimum of 2 years of continuous recovery. Continued practice of principles of recovery by attendance of support groups, verbalize benefits of recovery and benefits of being a Peer Leader supervisor for the RCO	Jan 10	Personal path practice in recovery verbalized and written for Faces and Voices of Recovery media message training, Supervisor Job Description,
Definition of peer supervision in Policies and Procedures, RCO supervision practices and performance	Policies and Procedure approved by Board of Directors, Consultant and Peer Leaders	Feb 15	RCO, Peer Leader, Recovery Coach Supervision Policies and Procedures,

Performance Improvement Plan   1

<< Accreditation Outcomes (v1.0) | The Standards >>

The Standards

Introduction

Standards are the core of an accreditation process. They can be seen as an external guide to assess the capacity and efficiency of a PRSS program: Organizations and programs that are applying for accreditation will be evaluated on the extent to which they can demonstrate their ability to meet specific standards.

They can also be considered a guide which a recovery community organization or peer program can conduct a self-inventory of how well it works by engaging in a reflective and participatory process. This may, in fact, be their best use, as programs continuously work to offer the best peer recovery support for their communities.

CAPRSS employs a set of rigorous standards that come directly from the recovery community and reflect current practice in peer recovery support.There are 30 core standards that are assessed the initial accreditation process, which are categorized into seven domains, which in turn are organized into four functional areas.

Once an organization has core accreditation, it can apply for accreditation in one or more of the optional domains. There are **optional (elective) standards** in four performance-related domains: (1) Peer Support Capacity: Recovery Community Centers; (2) Peer Support Capacity: Recovery Coaching; (3) Peer Support Capacity: Training and Technical Assistance; and (4) Furthering the Field.

Core Standards: Summary (v1.1)

Principles-related Standards

Recovery Principles, Culture, and Climate		
RPCC-1.0	Core Recovery Principles	The program is grounded in the values of the recovery community—both local community and the national movement.
RPCC-2.0	Core Recovery Culture and Values	The program incorporates key practices that support and enhance recovery.
RPCC-3.0	Recovery Climate/ Environment	The program establishes a welcoming climate that is conducive to/facilitates personal recovery.
Ethical Framework for Service Delivery		
EFSD-1.0	Code of Ethics	The PRSS program has guidelines, policies, procedures, and practices related to ethics that are consistent with peer values, protecting both providers and recipients of peer services.
EFSD-2.0	Ethics Training and Support	The PRSS program ensures that training and guidance are provided on the implementation of ethical guidelines.
EFSD-3.0	Confidentiality	The PRSS program has guidelines, policies, procedures, and practices related to maintaining confidentiality of personal information.
EFSD-4.0	Boundary Setting	The PRSS program provides supervision, support, and learning opportunities to address boundary-related conflict before, during, and after conflict happens.

People-related Standards

Peer Leader Development		
PLD-1.0	Recruitment	The program uses efficient and effective processes to recruit quality peer leaders.
PLD-2.0	Selection and Orientation	The program has clearly defined processes for screening, selecting, and orienting peer leaders to the PRSS program.
PLD-3.0	Training and Development	The program provides peer leaders with training to help them gain the knowledge and skills necessary for their assigneds job, to help them develop within the organization.
PLD-4.0	Retention	The program has clearly defined methods for increasing peer leader retention.
Peer Supervisor Development		
PSD-1.0	Recruitment	The program uses efficient and effective processes to recruit quality peer supervisors.

PSD-2.0	Selection	The program has clearly defined processes for identifying needed qualifications, screening, and selecting peer supervisors.
PSD-3.0	Training, Mentoring, and Support	The program provides peer supervisors with training and ongoing support to gain knowledge, skills, experience, attitudes, and attributes necessary to effectively supervise peer leaders in a non-clinical context.

Practices-related Standards

Governance and Program Oversight		
GPO-1.0	Program Oversight	The program oversight is inclusive of and responsive to local communities of recovery.
GPO-2.0	Board of Directors	The board of directors is appropriately representative of and responsive to local communities of recovery.
GPO-3.0	Organizational Policies and Practices	The board of directors ensures that the organizational policies and practices are consistent with the principles of good governance.
GPO-4.0	Community Linkages	The board of directors facilitates linkages with other organizations to strengthen the larger community's network of support for recovery
Management Systems		
MS-1.0	Fiscal Management	The organization is a good steward of financial resources, accountable to the recovery community, funders, and donors in its use of funds.
MS-2.0	Human Resource Management	The organization uses best practices in human resources management to create a safe and healthy work environment.
MS-3.0	Quality Assurance	The organization establishes ongoing, data-driven, quality assessment and improvement processes and methods.
MS-4.0	Peer-compatible Recordkeeping	The organization establishes record keeping processes and methods that are compatible with peer-led efforts.
MS-5.0	Confidentiality of Records	The organization establishes record keeping processes and methods that ensure compliance with state and federal regulations related to confidentiality and privacy.
MS-6.0	Participant Protection and Informed Consent	The organization is committed to providing a safe, secure, and respectful environment.
MS-7.0	Cultural Competence	The organization has clear goals, policies, and oversight practices to provide culturally and linguistically appropriate peer services.

Performance-related Standards

Peer Support: Core Competencies

PSCC-1.0	Determining Community Strengths and Needs	The program uses participatory processes to assess community strengths and needs.
PSCC-2.0	Planning	The program plans to offer PRSS that that will have a measurable impact, based on community assets and needs.
PSCC-3.0	Offering Support	The program is an opportunity-rich recovery environment that builds individual and community strengths (recovery capital) and addresses individual and community needs.
PSCC-4.0	Supervising Peers Providing Services	The program provides regular guidance, support, and skills-building through non-clinical supervision to all peer leaders, whether service is provided at the program site or elsewhere in the community.
PSCC-5.0	Evaluating the Supports/ Services	The program uses evaluation data as a management tool.

Criteria Related to Each Core Standard

Each of the core standards has several underlying criteria, which are used to assess how well an organization is meeting the parent standard. Two primary instruments are used in assessing standards and criteria: the Accreditation Self Study (completed by applicants) and Peer Review Score Sheet (completed by Peer Review Team after a site visit).

View complete listing of core standards and criteria

<< Core Standards: Summary (v1.1) | Key CAPRSS Policies >>

Key CAPRSS Policies

On the following pages you will find key CAPRSS policies that relate to the accreditation process.

<< Criteria Related to Each Core Standard | CAPRSS Information Release Policy >>

CAPRSS Information Release Policy

All information gathered during the accreditation process and under review will be kept strictly confidential.

Information about specific candidates and their accreditation process will be shared with Peer Reviewers, Accreditation Review Committee members, consultants, and other authorized agents of CAPRSS.

The following information may be released by CAPRSS staff at the discretion of CAPRSS:

- received and filed applications for accreditation
- list of organizations scheduled for site visits, without indication of dates
- scheduled site visit dates (after notification has been given to organizations)
- indication of site visit completion
- notice of an organization appealing a non-accreditation or provisional decision

The following information will be released upon completion of the accreditation process:

- final accreditation status of an organization

Policy effective date: 10/4/13
Last updated: 9/5/14

<< Key CAPRSS Policies | Confidentiality Policy >>

Confidentiality Policy

For a number of reasons, onsite reviewers must be mindful in advancing a confidential relationship between CAPRSS and the candidate organization. Organizations are rightfully concerned about their reputation. Nothing
about the process nor their accreditation status should be revealed until CAPRSS officially and publicly releases
that information. Also, any information leaks or early disclosure could severly alter and compromise the accrediting
and peer review process.

Confidentiality begins the moment you step foot on site. At the beginning of each meeting, observation, and interview, everyone needs to be assured that what they say will be used only to evaluate the various components of
the program. In addition, all documents and process findings, as well as the final report are to be kept strictly
confidential. Please take precautions to protect and safeguard any notes, information, or files you have documented
in hard copy and especially on your laptop.

The final report is the sole property of CAPRSS. Copies and content from the report cannot be shared with anyone.
Hard and electronic copies of all reports sent to CAPRSS need to be completely secured and carefully monitored.
Similarly, Peer Review Team members can only discuss the site visit between themselves and with CAPRSS. Any
final accreditation suggestions or decisions must be kept confidential between team members and CAPRSS.

Conflict of Interest Policy

1. Avoid all actual, potential, and perceived conflicts of interest.

Peer Reviewer Code of Conduct

CAPRSS is committed to ethical behavior for all who are involved in the accreditation process. The purpose of this code is to describe the high standards of conduct to which our peer reviewers must hold.

CAPRSS peer reviewers:

1. Value recovery.
2. Embrace the CAPRSS-defined principles.
3. Accept assignments within their areas of competency.
4. Accept assignments only when there is no actual, potential, or appearance of conflict of interest.
5. Report to CAPRSS any improper Peer Reviewer behavior that represents a violation of ethics or the Code of Conduct.

Throughout the accreditation process, peer reviewers:

6. Maintain and exemplify a high degree of confidentiality about the process nor an organization's accreditation status.
7. Are mindful of the confidential relationship between CAPRSS and the applicant organization.
8. Discuss accreditation only with person authorized by CAPRSS.
9. Keep all documents, process findings, and reports strictly confidential.
10. Take precautions to protect and safeguard any notes, information, or files, both hard copy or electronic versions.

When on Peer Review Site Visits, each member of the Peer Review Team will:

11. Approach all staff, volunteers, peers, family members, stakeholders, and the community at large with dignity and respect.
12. Maintain a balance of professional reserve and community-friendliness in self-presentation.
13. Honor the authority of key leadership and respect organizational protocols within candidate organizations
14. Minimize interference with the organization's regular operations and honor organization's internal policies.
15. Limit all contact with the candidates to site visit-related business and keep focus on the site visit process.
16. Accept no gifts nor anything of value from the organization.

17.   Report all findings in an honest and fair manner.

Supporting Documents

Peer Reviewer Description

Purpose

As part of a CAPRSS Peer Review Team, review applications for core accreditation to assess a program's conformance with core standards. Prepare for and participate in peer review site visit, score results of visit, and assist in preparing and presenting findings and recommendations, using an asset-based and strengths-based approach.

Time Commitment

- Prospective Peer Reviewers will attend a two-hour orientation session.
- Selected peer reviewers will need to complete a self-guided, online peer reviewer training.
- Peer Reviewers will be asked to complete at least two Peer Review Site Visits per year.
- The total time commitment for a peer review is approximately 5 days per site visit: half-day for review of organizational materials; 2 days travel; 2 days on-site; and half-day for follow-up reports.

Honorarium: $1,000 per site visit (airfare and hotel paid)

Knowledge, Qualifications, and Skills

- Knowledge of the recovery community
- Experience in coordinating, managing, or delivering addiction peer recovery support services
- Experience in one or more of the following areas: governance; organizational management, including human resources, finance and budgeting; participatory process; leadership development; peer supervision; program evaluation
- Mature judgment and objectivity
- Ability to work effectively in a team
- Strong interpersonal communications skills

Additional Requirements

- Commitment to CAPRSS' mission
- Knowledge of mental health peer recovery support services a plus
- Must review and sign CAPRSS Confidentiality and Code of Conduct Agreements

Responsibilities

- Become familiar with CAPRSS Peer Reviewer Manual, and the policies and procedures it describes.
- Become familiar with the CAPRSS core standards.
- Become familiar with the Peer Reviewer score sheet, both printed and online form.

In preparation for each Peer Review Site Visit:

- Review the self-assessment information and documentation materials submitted by the assigned organization.
- Participate in Peer Review Team phone calls to prepare for site visits and to finalize site visit reports.

During Peer Review Site Visit

- Adhere to CAPRSS Policies & Procedures and Code of Ethics
- Act in a consultative capacity to focus on quality improvement and program alignment with CAPRSS standards
- Conduct information-gathering interviews with staff, peers leaders, peers, and other stakeholders.
- Conduct onsite surveys to gather information about the organization and its peer program.
- Review documents presented onsite.
- Participate in on-site Peer Review Team meetings to discuss interpretations of the assigned organization's conformance to standards and criteria.
- Participate in exit conference with Executive Director and key staff.
- Work with team to identify areas of excellence and to make recommendations in areas that need improvement.
- Immediately notify the Peer Review Team Leader of any serious issues uncovered during the course of a Peer Review Site Visit, or of any issues, conflicts, problems or concerns that might jeopardize or compromise a Peer Review Site Visit.
- Assist and support other team members as needed and appropriate.
- Complete Peer Reviewer score sheets, restricting opinions to documents, activities, policies and processes that are covered by the standards.
- Review and provide feedback on the draft site visit report.
- Make suggestions to the CAPRSS Accreditation Review Committee and the Standards Committee for addition, deletion, or revision of existing standards.

After Peer Review Site Visit

- Complete and submit Peer Reviewer score sheets online.
- Review and comment on the Site Visit Summary Report that is prepared by the Team Leader.

<< Supporting Documents | Accreditation Review Committee Description >>

Accreditation Review Committee Description

Purpose

Review site visits conducted for core accreditations, to ensure CAPRSS standards and guidelines are being applied appropriately and fairly.

Equipment Requirements

Computer with Internet access; telephone

Time Commitment

- One or two full committee meetings per year of two hours
- One review meeting per month, which includes a three-hour web-based meeting to discuss site visits and recommendations
- Reviewer workload should not exceed 24 review assignments per year

Responsibilities

- Review the process taken during a candidate's peer review site visit to ensure that it was fair;
- Review the site visit findings, consultative and performance improvement recommendations made by peer reviewers to ensure that they are consistent with the CAPRSS standards and criteria;
- Review the survey recommendation (accreditation outcome) and ensure that it is consistent with CAPRSS guidelines for accreditation;
- Speak with members of the Peer Review Team, if necessary, to obtain additional information and/or clarification;
- Recommend a formal determination to CAPRSS.

Qualifications

- Knowledge of the recovery community and peer recovery support services
- Knowledge and commitment to CAPRSS' mission.
- Mature judgment and objectivity.
- Ability to work effectively in a group.

<< Peer Reviewer Description |