



West Virginia Certification Board for Addiction and Prevention
Professionals

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Peer Recovery Support Specialist
(PR)

Manual

ROLE OF PRSS

The Peer Recovery Support Specialist (PR) is not a professional credential. The role of the Peer Recovery Support Specialist (PR) reflects a collaborative and strengths-based approach, with the primary goal being to assist individuals in achieving sustained recovery from addiction and/or mental health issues. PR's will not be clinicians; they will instead serve in a supportive role within the community and/or within a treatment setting to enhance the current treatment array. PR's are trained in the domains of Advocacy, Mentoring/Education, Recovery/Wellness Support, and Ethical Responsibilities to better support individuals in achieving recovery and resiliency. Services provided by the PR become a permanent critical component of the continuum of care services that will substantially improve an individual's ability to sustain recovery/wellness.

The primary function of the PR is to help individuals gain access to needed resources in the community by assisting them in overcoming barriers and helping them bridge gaps between their needs and available resources. PR's will serve as recovery navigator/mentors by helping individuals connect with needed services, including addiction and mental health treatment services, and assisting them in acquiring resources that will facilitate their recovery (e.g., acquiring childcare services, stable housing, developing wellness plans and employment support). Each PR will serve individuals in the recovery process by supporting them in accessing community-based resources, implementing recovery/wellness plans, navigating state and local systems (including addiction and mental health treatment systems), and providing recovery support services. The PR will coach service recipients to help them develop a strong foundation in recovery (e.g. establishing support systems, self-care, independence/self-sufficiency, healthy coping skills and other skills) that support long-term recovery.

REQUIREMENTS FOR PR

Employment

- 500 hours of volunteer or paid experience specific to the domains (500 hours of a 2000 hour full time work year is approximately three months full time work experience).
- Volunteer and part-time experience is acceptable if it is provided under direct supervision. Actual time spent in a supervised substance abuse or mental health internship or practicum may be applied toward the employment requirement.
- Supervised work experience must be in the four PR domains.

Supervision

- 25 hours of supervision specific to the domains, with a minimum of six hours in each of the four domains listed below, are required. Supervision must be provided by an organization's documented and qualified supervisory staff per job description.
- Include letter (on company letterhead) from previous employer verifying your duties and dates employed.

Education

- High school diploma/GED or jurisdictionally certified high school equivalency.
- 46 clock hours of education specific to domains, of which ten (10) are specific to Advocacy; ten (10) are specific to Mentoring/Education; ten (10) are specific to Recovery/Wellness Support; and sixteen (16) are specific to Ethical Responsibility. A nationally recognized Peer Support Specialist certification training will meet the majority of these qualifications and is required. If necessary, additional training may be provided.
- Education is defined as formal, structured instruction in the form of workshops, seminars, institutes, in-services, college/university credit courses and WVCBAPP approved distance education. There is no limit to the number of distance learning/online education that can be submitted.
- Three college credits are equivalent to 45 clock hours.
- Education, (as defined above,) which the applicant provides to others may also be used providing it is verified in writing by sponsoring school or agency.

Examination

- Pass the IC&RC Peer Recovery Support Specialist Examination
- Current photo ID. Name on ID must match the name WVCBAPP used to register you with the testing center.

Other

- Signed and dated Code of Ethical Conduct.
- Signed and dated Statement of Personal Recovery.
- Signed, dated and notarized release.

- Current job description dated and signed by supervisor and applicant. Persons already working in a peer support role may submit that job description.
- Applicant must either live or work in WV 51% of the time.

Domains

1. Advocacy
2. Mentoring/Education
3. Recovery/Wellness Support
4. Ethical Responsibility

Fees

Certification:	\$75
<i>(fee must accompany application and materials)</i>	
Test:	\$100
Recertification:	\$75

CERTIFICATION TIME PERIOD

A PRS certificate is valid for two years after candidate's successful completion of the IC&RC examination. Recertification date will be assigned in accordance with date of passing of exam. Certificates will expire on September 30th two years later. The date of issue and expiration date will appear on the certificate, along with a certification number.

EXAMINATION INFORMATION

Type: This certificate requires successful completion of the Peer Recovery Support Specialist exam which is offered as a computer based test. Candidates will be notified by the WVCBAPP, once application for certification is approved, on how to register for the exam.

Content: The Job Task Analysis for this certification identified domains which make up the questions in the exam. Within each domain are several identified tasks that provide the basis for questions in the exam.

Candidate Guide: The domains, including the knowledge and skill areas of each domain, sample exam questions, and a list of references, are included in the free *Candidate Guide*. *Candidate Guides* will be sent to candidates prior to exam scheduling. Candidate Guides are also available from the WVCBAPP website at www.wvcbapp.org by clicking on the "Applications" tab.

ID: A candidate will not be permitted to test without a valid government issued photo ID (drivers license, state ID, military ID, or passport). The name on the photo ID **MUST MATCH** the name WVCBAPP used to register the applicant to sit for the exam. If it does not, the testing fee will be forfeited.

RECERTIFICATION

To maintain the high standards of this practice and to assure continuing awareness of new knowledge in the field, WVCBAPP requires recertification every two years.

To be recertified as a PR, an individual must:

1. Hold a current and valid certificate issued by WVCBAPP;
2. Acquire 20 contact hours of WVCBAPP approved training/education including six (6) hours in NAADAC/NCC AP National Certified Peer Recovery Support Specialist (NCPRSS) ethics received within the two year recertification cycle;
3. Verify that he/she has reviewed, read, and will uphold by practice the NAADAC/NCC AP National Certified Peer Recovery Support Specialist (NCPRSS) Code of Ethics for appropriate behavior;
4. Complete an application, and pay the \$75 recertification fee.

LAPSED CERTIFICATION

The completed recertification application should be received at the WVCBAPP prior to the expiration date. If the application is incomplete, applicant will be notified by phone or email.

There is a 90-day grace period after the expiration date to apply for recertification with a \$75 late fee. Hours cannot be accumulated in the 90 days. This period is only for processing late applications, not for acquiring additional hours.

After the recertification date expires, the individual will no longer hold a PR, and no further use of the PR is permitted until the individual has recertified.

LATE FEE:

A late fee of \$75.00 is charged to any re-certification applicant if the application has not been postmarked by August 30th.

INACTIVE STATUS:

Once a certified professional fails to submit the re-certification packet by August 30th of the year in which he/she is supposed to re-certify, the credential is considered to be “inactive” and may not be used until re-certification is obtained. The individual may not identify him/herself as a Peer Recovery Support Specialist (PR) and must notify his/her employer of the inactive status of the credential.

The individual can regain his/her credential up to 90 days past the expiration date by completing the re-certification process and paying all late fees (\$75.) After the 90 day period, the certification will be null and void and the individual will have to re-apply, complete all certification paperwork and take all tests in order to be re-credentialed.

Statement of Personal Recovery:

The signed Statement of Personal Recovery is intended to signify personal lived experience with a substance use disorder and a period of successful recovery prior to assisting others in early recovery from a SUD or co-occurring disorder. By signing the statement, the candidate is affirming successful pursuit of his own personal recovery experience. Any attempts to defraud the board by falsifying the statement or exaggerating the length the recovery time will be investigated as a part of an ethics violation and could result in denial of an initial application, denial of recertification application, sanctions against or removal of the PR certification from the individual. Listed below is the Statement of Personal Recovery:

I, the undersigned individual, affirm that I have successfully pursued my own personal health recovery experience involving the use of alcohol and/or other drugs. I affirm that I have not used any alcohol or other drug affecting my central nervous system, or other drug causing physical or psychological dependence, to which I was addicted or upon which I was previously dependent, within the past two years. I further affirm that I have not used controlled substances which were obtained illegally, or misused any controlled substances which were obtained with a valid prescription order from a licensed health care provider, within the past year. I affirm that in the event I experience a relapse in my recovery or experience other psychological or physical health conditions which may interfere with and impair my professional functioning, I will seek appropriate therapeutic care, and I will not provide services as a peer recovery professional during my care.

My present period of continued recovery from alcohol or other psychoactive drugs
is _____ years and/or _____ months.

Applicant Signature/Date

Please Print or Type Your Name

Ethical Code of Conduct Peer Recovery

It is the policy of the West Virginia Certification Board for Addiction Professionals to promote and safeguard the quality, effectiveness and competence of Peer Recovery through the insistence of adherence to its Code of Ethics by all WVCBAPP certified Peer Recovery specialists.

The ethics committee develops and recommends an ethical code of conduct for adoption by the Board of Directors. Currently, the Board has adopted the code of conduct adhered to by the NAADAC/NCC AP National Certified Peer Recovery Support Specialist (NCPRSS) Code of Ethics The NCPRSS code of ethics can be found at <https://www.naadac.org/ncprss-code-of-ethics>

The ethics committee has jurisdiction over all matters of violation and misconduct by WVCBAPP certified peer recovery specialists in the state of West Virginia. It immediately and thoroughly investigates such charges and makes recommendations to the Board of Directors for appropriate action.

National Certified Peer Recovery Support Specialist (NCPRSS) Code of Ethics

Preamble

The NAADAC/NCC AP National Certified Peer Recovery Support Specialist (NCPRSS) Code of Ethics outlines basic values and principles of peer recovery support practice. This Code serves as a guide for - responsibility and ethical standards for NCC AP National Certified Peer Recovery Support Specialists. Peer Recovery Support Specialists have a responsibility to help persons in recovery achieve their personal recovery goals by promoting self-determination, personal responsibility, and the empowerment inherent in self-directed recovery.

Peer Recovery Support Specialists shall maintain high standards of personal conduct, and conduct themselves in a manner that supports their own recovery. Peer Recovery Support Specialists shall serve as advocates for the people they serve.

Peer Recovery Support Specialists shall not perform services outside of the boundaries and scope of their expertise, shall be aware of the limits of their training and capabilities, and shall collaborate with other professionals and Recovery Support Specialists to best meet the needs of the person(s) served.

Peer Recovery Support Specialists shall preserve an objective and ethical relationship at all times. This credential does not endorse, suggest or intent that a Peer Recovery Support Specialist will serve independently. The Peer Recovery Support Specialist shall only work under supervision.

I. Conduct

As a Peer Recovery Support Specialist, I will:

1. Agree to maintain a minimum of two (2) clinical supervision sessions per month totally at least 2 hours of documented clinical supervision.
2. Accurately identify my qualifications, expertise, and certifications to all whom I serve and to the public.

3. Conduct myself in accordance with the NCC AP NCPRSS Code of Ethics.
4. Make public statements or comments that are true and reflect current and accurate information.
5. Remain free from any substances that affect my ability and capacity to perform my duties as a Peer Recovery Support Specialist.
6. Recognize personal issues, behaviors, or conditions that may impact my performance as a NCPRSS.
7. Maintain regular supervision and ongoing support so I have a person with whom I can address challenging personal issues, behaviors, or conditions that may negatively effect my own recovery. I understand that misconduct may result in the suspension of my credentials.
8. Respect and acknowledge the professional efforts and contributions of others and not declare or imply credit as my own. If involved in research, I shall give credit to those who contribute to the research.
9. Maintain required documentation for and in all client records as required by my agency or the Federal requirements making certain that records are documented honestly and stored securely. Agency disposal of records policies shall be adhered to.
10. Protect the privacy and confidentiality of persons served in adherence with Federal Confidentiality, HIPAA laws, local jurisdiction and state laws and regulations. This includes electronic privacy standards (Social Media, Texting, Video Conferencing etc).
11. Use client contact information in accordance with agency policy.
12. Not to create my own private practice.

II. Conflict of Interest

As a Peer Recovery Support Specialist, I will:

13. Reveal any perceived conflict of interest immediately to my professional supervisor and remove myself from the peer recovery support specialist relationship as required.
14. Disclose any existing or pre-existing professional, social, or business relationships with person(s) served. I shall determine, in consultation with my professional supervisor, whether existing or pre-existing relationships interfere with my ability to provide peer support services person(s) served.
15. Inform clients of costs of services as established by the agency for which I am employed and not charge person served beyond fees established.
16. I will not sponsor individuals with whom I have previously served or currently serve as a Peer Recovery Support Specialist.

III. Support Specialist/Client Relationship

As a Peer Recovery Support Specialist, I will:

17. Clearly explain my role and responsibilities to those serve.
18. Terminate the relationship with a person(s) served when services appear no longer of benefit and to respect the rights of the person served to terminate services at his/her request.
19. Request a change in my role as a NCPRSS with a person being served if the person served requests a change.

20. Not engage in sexual activities or personal relationships with persons served in my role as a NCPRSS, or members of the immediate family of person(s) served.
21. Set clear, appropriate, and culturally sensitive boundaries with all persons served.
22. If at any point I feel I am unable to meet any of these requirements, I will immediately cease performance as a Peer Recovery Support Specialist and seek professional assistance.

I hereby attest that I have read, understand, and will adhere to the NAADAC/NCC AP NCPRSS Code of Ethics, as described above.

The above principles will guide me in my role as a Peer Recovery Support Specialist, as well as in my relationships and levels of responsibility in which I function.

Name (typed or printed)

Date

Signature

