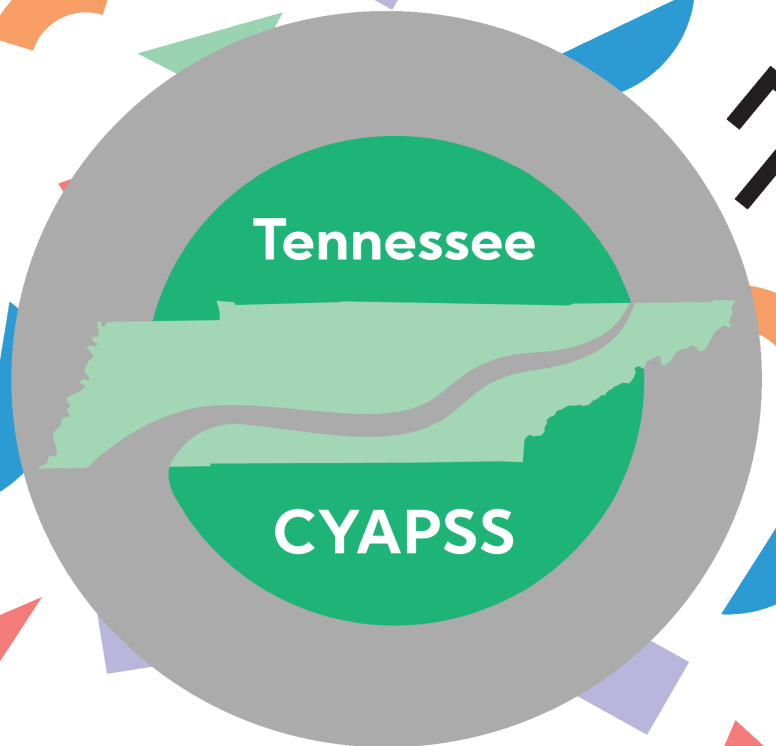




Certified Young Adult Peer Support Specialist Program



Handbook of Guidelines, Standards, and Procedures



Acknowledgments

It is with immense gratitude that we thank the following people and organizations for their dedication to improving the lives of young adults through peer support. Without their critical insight and imaginative visions, the creation of this handbook and the training for the Tennessee Certified Young Adult Peer Support Specialist Program would not have been possible. Whether it was providing input on the program's eligibility criteria or serving as inspiration for the Code of Ethics, their contributions were essential.

Organizations and Agencies:

Statewide Young Adult Leadership Council, a youth advisory council for the Tennessee Department of Mental Health and Substance Abuse Services

Youth ERA, a youth empowerment organization in Oregon

Georgia Certified Peer Specialist-Youth Program, offered through the Georgia Department of Behavioral Health & Developmental Disabilities

Illinois Certified Recovery Support Specialist Program, offered through the Illinois Certification Board

Indiana Certified Recovery Specialist Program, offered through the Indiana Division of Mental Health and Addiction

Kentucky Family Peer Support Specialist Program, offered through the Kentucky Partnership for Families and Children, Inc. and the Division of Behavioral Health

Massachusetts Certified Peer Specialist Program, offered through The Transformation Center and the Massachusetts Department of Mental Health

Nebraska Peer Support and Wellness Specialist Program, offered through the Nebraska Department of Health and Human Services



Individuals:

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Jessica Mullins, Director of Youth and Young Adult Initiatives, Tennessee Department of Mental Health and Substance Abuse Services

Lisa Ragan, Director of Consumer Affairs and Peer Recovery Services, Tennessee Department of Mental Health and Substance Abuse Services

Will Voss, Chief Operations Officer, Tennessee Voices for Children

Michelle Webster, Peer Recovery Coordinator, Tennessee Department of Mental Health and Substance Abuse Services

Jules Wilson, Former Project Director for Healthy Transitions, Tennessee Department of Mental Health and Substance Abuse Services

Matt Yancey, Deputy Commissioner of Behavioral Health Community Practices, Tennessee Department of Mental Health and Substance Abuse Services



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Tennessee's Certified Young Adult Peer Support Specialist Program

I. Introduction

What is peer support?

“Peer support encompasses a range of activities and interactions between people who share similar experiences of being diagnosed with mental health conditions, substance use disorders, or both. This mutuality—often called “peerness”—between a peer support worker and person in or seeking recovery promotes connection and inspires hope.

Peer support offers a level of acceptance, understanding, and validation not found in many other professional relationships (Mead and McNeil, 2006). By sharing their own lived experience and practical guidance, peer support workers help people to develop their own goals, create strategies for self-empowerment, and take concrete steps towards building fulfilling, self-determined lives for themselves.”

--Substance Abuse and Mental Health Services Administration (SAMHSA)'s Bringing Recovery Supports to Scale Technical Assistance Center Strategy

Who are peer support workers/specialists?

“Peer support workers are people who have been successful in the recovery process who help others experiencing similar situations. Through shared understanding, respect, and mutual empowerment, peer support workers help people become and stay engaged in the recovery process and reduce the likelihood of relapse. Peer support services can effectively extend the reach of treatment beyond the clinical setting into the everyday environment of those seeking a successful, sustained recovery process.”

--Substance Abuse and Mental Health Services Administration (SAMHSA)'s Bringing Recovery Supports to Scale Technical Assistance Center Strategy “Value of Peers, 2017”

What about peer support in Tennessee?

Peer support began to play a significant role in the life of Tennesseans in 1989 with the opening of the first Peer Support Center in Nashville. Services expanded in 2007 when Medicaid deemed peer support services an “evidence-based mental health model of care,” which opened the



door for the Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS) and other state agencies to create trainings and certification programs for Certified Peer Recovery Specialists (CPRS) and Certified Family Support Specialists (CFSS) in Tennessee. Both programs have been essential in creating hope in the lives of parents, families, and peers by educating them about the gifts of recovery and providing direct peer support services. Inspired by the incredible growth and accomplishments of the CPRS and CFSS programs, work began in 2015 to create a similar program but for the unique population of young adults.

Transitioning to adulthood can be hard, but with the addition of a behavioral health condition and/or substance use issue, navigating through those challenges can become even more difficult. When a person turns eighteen, they do not suddenly have all the answers. How will they manage continuity of care and obtain stable housing, food, transportation, and employment? Often, young adults fall through the cracks of systems from which they have aged out. However, many of these young adults have gone on to embrace a life of recovery, a journey of healing, and a path of wellness. They are ready to utilize their experiences—as young adults who have overcome hardship—to serve and support others. For these individuals, we offer the Tennessee Certified Young Adult Peer Support Specialist program (CYAPSS).

This program was created for and designed by young adults who self-identify as having lived experience with mental illness, substance abuse, or both. Many of these young people did not identify or connect with the concept of being “in recovery,” so the language was updated to be more inclusive. What makes being in recovery, on a journey of healing, or on a path of wellness so beautiful is that it is self-defined. It is up to each individual person reading this handbook to decide for themselves if this is the right program for them, and every interested person is encouraged to apply and find out. For further clarification on this, please see our Frequently Asked Questions section at the end of this handbook.

Because of their lived experience, Certified Young Adult Peer Support Specialists (CYAPSS's) will be able to, with specialized training and guidance, draw from their own journey of recovery and healing to inspire hope in those they serve. Peers, staff, and community members will benefit greatly from hearing the remarkable stories of resiliency and growth that the CYAPSS's have to share. CYAPSS's will help them achieve their personal goals by promoting self-determination, personal responsibility, and the empowerment inherent in self-directed and strengths-based recovery and wellness. Other direct peer-to-peer services that the CYAPSS's provide include developing community supports and serving as an advocate or mentor. They will also provide information on navigating the behavioral health system and maintaining personal recovery and wellness. CYAPSS's should view the peers they work with as prospective peer support providers, because every peer has the potential to become a colleague.

This handbook defines the role, purpose, functions, and responsibilities of the Certified Young Adult Peer Support Specialist in Tennessee and establishes a fair methodology for evaluation of



qualifications. It elaborates on the knowledge and skills required, as well as the time and determination needed to complete the certification process. To compare the role of a peer support specialist with other behavioral health staff, see the chart on page 8.

Some disclaimers:

1. Tennessee Certified Young Adult Peer Support Specialists are not qualified to diagnose an illness or prescribe medication. They do not provide clinical services or treatment of any kind.
2. Becoming certified as a Tennessee Certified Young Adult Peer Support Specialist is not an offer of employment or job placement by the Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS). Certification in no way guarantees employment.
3. Additionally, the Tennessee Certified Young Adult Peer Support Specialist program does not create any right or entitlement to participate in training, or to receive certification or re-certification. As such, there is no appeal right for a denial or training participation, certification, or re-certification under this program. Please see Section VII for more information.

If you have any additional questions, please do not hesitate to contact the Youth and Young Adult Coordinator at the Office of Children, Young Adults, and Families at the contact information listed herein below.

**Youth and Young Adult Coordinator
Office of Children, Young Adults, and Families
Tennessee Department of Mental Health and Substance Abuse Services
5th Floor Andrew Jackson Building
500 Deaderick Street,
Nashville, Tennessee 37243
Email: cypass.tdmhsas@tn.gov**

Peer Support Specialists and Role Comparisons

	12-Step Sponsor	Peer Support Specialist	Case Manager	Psychosocial Rehabilitation Staff	Substance Use Disorder Professional	Mental Health Professional
Planning Service	Reviews the meaning of the 12 Steps and emphasizes their importance.	Assists the individual in developing and monitoring a recovery and wellness plan.	Assists the individual in developing a service plan.	Assists the individual in developing an employment/housing plan.	Develops treatment plan with the individual.	Develops treatment plan with the individual.
Resource Service	Accesses professional help if assistance outside the scope of the 12 Step Program is needed.	Teaches, role models, and coaches how to use resources and navigate the appropriate systems.	Provides referral and linkage.	Identifies resources needed to implement plan.	Conducts clinical assessment.	Conducts clinical assessment.
Illness Management Service	Encourages the person to work with others in recovery as soon as possible and begins to take them on Twelfth Step calls.	Teaches, supports, and coaches the acquisition and exercise of skills needed for management of symptoms and stressors.	Ensures individual has access, continuity of care throughout the mental health and primary healthcare system.	Assists the individual so that illness symptoms do not negatively impact employment and housing goals.	Provides clinical education and training regarding symptomatology and medication management.	Provides clinical education and training regarding symptomatology and medication management.
Medication Management Service	Refers the person to the literature that discusses medication. Encourages appropriate use of medication and that the person talk openly with their doctor about their symptoms and being a person in recovery.	Encourages appropriate use of medication; holds the person accountable for their actions; teaches, models monitoring symptoms and/or medication reactions, effective communication with doctors, therapists, etc.	Ensures individual has resources to acquire medication, has transportation for appointments, and attends appointments.	Educates employers, landlords on the treatment process, the role of medication, and symptoms in the management of the illness, as appropriate.	Provides clinical treatment to include individual and group therapy focusing on education of the role of medication in the recovery process.	Provides clinical treatment to include individual and group therapy focusing on education of the role of medication in the recovery process.
Employment/Housing Services	Encourages personal responsibility, including getting a job and becoming a productive member of society.	Teaches, models, and coaches skills and attributes needed to attain and maintain employment and housing.	Ensures individual has access to psychosocial rehab, supportive employment, and housing options.	Provides employment and housing support by facilitating opportunities for housing and job placement.	Provides clinical consultation and assessment.	Provides clinical consultation and assessment.
Education Services	Promotes awareness of 12 Step literature, scope of the 12 Steps, and the three Legacies (Recovery, Unity, and Service).	Teaches recovery education such as WRAP®, BRIDGES, and/or 12 Steps for knowledge and skills needed to manage illness.	Encourages individual to utilize community/natural supports to assist in illness management.	Teaches skills needed to maintain housing and employment.	Provides clinical support through individual or group therapy sessions.	Provides clinical support through individual or group therapy sessions.



II. CYAPSS Program Operation

The Tennessee Department of Mental Health and Substance Abuse Services' Office of Children, Young Adults, and Families and Office of Consumer Affairs and Peer Recovery Services operate the Tennessee Certified Young Adult Peer Support Specialist Program with consultation from its Core Management Team and Statewide Young Adult Leadership Council.

The Office of Children, Young Adults, and Families and Office of Consumer Affairs and Peer Recovery Services shall develop and reserve the right to make any changes to CYAPSS Guidelines, Standards, and Procedures without prior notification

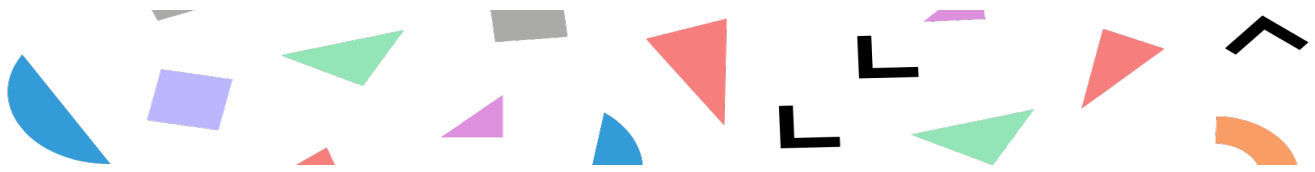
Core Management Team

The Core Management Team meets on an on-going basis to help inform the peer support certification programs in the Tennessee Department of Mental Health and Substance Abuser Services (TDMHSAS). It is made up of internal TDMHSAS stakeholders, and they make decisions that include, but are not limited to, requirements of certification, training, and acceptable continuing education, based on the requirements as outlined by the CYAPSS Guidelines, Standards, and Procedures.

Statewide Young Adult Leadership Council

The Statewide Young Adult Leadership Council is made up of young adults ages 16-30 who have lived experience with mental illness, substance abuse, or other systems involvement, e.g. foster care, justice system, and/or homelessness. Young adults from across the State of Tennessee meet monthly in Nashville to learn how to advocate for themselves and others. They plan and participate in events to raise awareness and educate the public on the needs of youth and young adults statewide. In addition, they provide feedback and input to TDMHSAS on state initiatives and policies, such as the Certified Young Adult Peer Support Specialist program. A participant described the Young Adult Leadership Council, which is called the YALC by its members, as "simultaneously an advocacy group, educational group, and peer support group."

If interested in attending a meeting or gaining more information, please contact the Youth and Young Adult Coordinator. You may also like @healthytransitionstn on Facebook and follow @HT_TN on Twitter and Instagram.



III. Training Application Procedures

To be admitted as a participant to the Certified Young Adult Peer Support Specialist (CYAPSS) training, applicants must meet the Certification Standards #1-4 as outlined in Section IV and submit a completed Training Application (Appendix I) to the Office of Children, Young Adults, and Families (OCYAF) either via email or the online form. If you have any questions about eligibility or meeting these criteria, please contact the Youth and Young Adult Coordinator (contact information is in Section I). **Anyone with a disability who require accommodations should notify the Youth and Young Adult Coordinator (using the contact information below) to request or discuss accommodations at the CYAPSS Training. Three weeks of advance notice is preferred, but every effort will be made to provide accommodations when requested."**

This is an investment in not your time but yourself. The Training Application will help assess your readiness for this commitment through questions about your personal recovery and wellness; motivation, determination, and willingness to learn and help others; and ability to communicate. In addition, you will be asked to submit the necessary documentation in order to verify that you hold at minimum a high school diploma or equivalent. Also, all training applicants will be screened against the Tennessee Sex Offender Registry and the Tennessee Abuse Registry prior to application approval. Applicants on the Sex Offender Registry are handled on a case by case basis and can still be approved for certification in some situations.

It is highly recommended that all applicants also complete Certification Standards #6—review, understand, and agree to the CYAPSS Scope of Activities and Code of Ethics—before submitting the Training Application. During the training, participants will be asked to sign an acknowledgment to uphold the Scope of Activities and Code of Ethics while pursuing and ultimately acquiring the certification. We want you to feel fully confident in your ability to live, work, and lead by these principles.

You will be notified via email when your application has been received by the OCYAF. Within thirty (30) days of receipt, the application will be reviewed and scored base on a pre-determined Scoring Rubric by the Youth and Young Adult Coordinator (YYAC). The YYAC will then deliver a decision to the applicant via email and/or phone call. Please know that you may be contacted prior to this if any information is missing from the application or if further clarification is needed by the YYAC in order to fully process your application. You will have a sixty day period to submit the missing information before your application is closed and you must reapply in order to be considered.

If it is decided that the application does not meet the minimum scoring requirements or offers too many outstanding questions or concerns, then the YYAC will send a letter of non-acceptance. This will include an offer to discuss the non-acceptance with the YYAC and steps of preparation that can be taken, such as joining the Statewide Young Adult Leadership Council, that can be taken in order to re-apply in a few months.

Upon acceptance into the training, you will be placed on a waitlist for the next available training in the closest available city and notified of such. Due to the COVID-19 pandemic, trainings may



continue to be conducted virtually until further notice. The CYAPSS training is provided free to all accepted applicants; however, for in-person trainings, you will be responsible for your own transportation, lodging, meals, and other expenses incurred. The in-person training is forty hours over a five day period. The exact scheduling for virtual trainings is to be determined.

A certification of completion will be provided at the end of the training based on the participant's active participation in daily review Kahoots, participation in group discussion, and attendance. Completing the training does not guarantee certification – you must still complete other training requirements, as outlined in Section IV.

Additional details and information can be found on the Training Application itself or Section XI: Frequently Asked Questions.

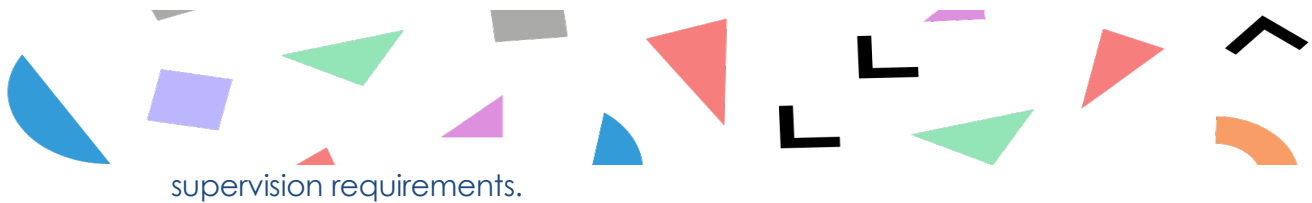
IV. Certification Guidelines, Standards, and Procedures

Each applicant must meet all minimum requirements as outlined by Certified Young Adult Peer Support Specialist (CYAPSS) Guidelines, Standards, and Procedures. After the Office of Children Young Adults and Families (OCYAF) has reviewed the application, applicants will be sent an email confirming their status and will receive their certificate in the mail.

Certification Standards

To become certified as a Young Adult Peer Support Specialist in the State of Tennessee, all applicants must meet the following minimum requirements:

1. Be eighteen through thirty years old;
2. Hold a high school diploma or equivalent;
3. Self-identify as a person who is in recovery from—or on a healing and wellness journey with—mental illness, substance abuse, or both for at least one year;
4. Have successfully completed the state's CYAPSS Training within the past year. If more than one year has passed since taking the training, it must be re-taken. To apply for the CYAPSS Training, review Section III of this handbook and then complete the Certification Application (Appendix I).
5. Complete a minimum of 75 hours of supervised work (paid or volunteer) within the past year providing peer support services to individuals who have mental illness, substance abuse, and co-occurring disorders.
 - Sponsorship in 12-step programs does not qualify to meet this requirement, in part because of the supervision requirement.
 - No less than three hours of supervision (one hour for every 25 hours of service provided) from an approved supervisor. See Section IX for



- Peer support services can include providing one-on-one support, leading support groups, and providing recovery and wellness education.
 - Examples of recovery education include stress management presentations, presenting tools to deal with uncomfortable emotions, and teaching the Wellness Recovery Action Plan (WRAP®), among others.
6. Review, understand, and agree to the following:
- The CYAPSS Scope of Activities
 - The CYAPSS Code of Ethics
7. Enclose all of the following documents prior to sending the application packet:
- Completed CYAPSS Certification Application
 - Completed Employment/Volunteer Summary by supervisor
 - Three completed character or professional reference forms
 - Two of the three professional or character references may come from a Certified Peer Recovery Specialist or Certified Young Adult Peer Support Specialist.
 - Do not use caregivers, family members, therapists, or psychiatrists as a reference. However, you may use a teacher, coach, mentor, sponsor, neighbor, or family friend for a character, as long as you have known them for at least three months.
 - Please only have those who you have known in a professional capacity for at least three month serve as a professional reference. If appropriate, they may serve as a character reference instead.
 - The number of character vs. professional references does not matter, as long as the total number of references is three.

Certification Procedure

It is the applicant's responsibility to ensure that all required documents are submitted and completed as accurately as possible. The completed application and other required documents are to be submitted by the applicant and sent directly to the Office of Children, Young Adults, and Families (see Section I for contact information).



Please allow fourteen business days for documents mailed to the Office of Children, Young Adults, and Families (OCYAF) to be received. The applicant will be notified when their application has been received. If Federal Express or special courier services are used, the OCYAF shall not be responsible for any charges incurred.

The average application processing time is three weeks, during which the application is reviewed for clarification and completion.

If the application is not complete upon receipt by the OCYAF, the applicant will be notified of the deficiency and supporting documentation will be requested. The missing information must be received by the OCYAF within ninety (90) calendar days from the date of the deficiency letter before the applicant can be certified. Applications not completed within ninety (90) calendar days after the date of the deficiency notification will be closed. Once an incomplete file has been closed, all applicants must submit a new application and all required documentation.

To obtain a CYAPSS Application, please visit <https://www.tn.gov/behavioral-health/mental-health-services/peers/cyapss.html> or refer to the Appendices at the end of this handbook.

NOTE: Everyone who is certified as a Certified Young Adult Peer Support Specialist must notify the OCYAF in writing within fourteen (14) business days of the following:

- Change in name, address, email, or other contact information
- Change in the agency staff person responsible for providing supervision (even if agency does not change). **Each Certified Young Adult Peer Support Specialist must be under supervision as defined by the State.**
- If you have a professional license and any action is taken against that license
- If you are placed on the Tennessee Department of Health Abuse Registry or Tennessee Sex Offender Registry

V. Scope of Activities

The scope of activities serves to provide Certified Young Adult Peer Support Specialists with direction in determining their role and responsibilities professionally. This scope is not intended to be a set of instructions that are prescriptive and mandatory, but rather, a foundation that can be referenced when seeking clarification and assistance.



Please remember that certification does not mean that the Certified Young Adult Peer Support Specialist is qualified to diagnose an illness, prescribe medication, or provide clinical services and

doing so constitutes at minimum a violation of the Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS) Certified Young Adult Peer Support Specialist Code of Ethics. It may also violate other civil and criminal laws.

1. Utilizing unique recovery and wellness experiences, the Certified Young Adult Peer Support Specialist shall:
 - a. Teach and model the value of every individual's journey of healing, path to wellness, and recovery experience;
 - b. Model effective coping techniques and self-help strategies;
 - c. Encourage peers to develop a healthy independence; and
 - d. Establish and maintain a peer relationship rather than a hierarchical relationship;
2. Utilizing direct peer-to-peer interaction and a strengths-based process for setting goals, the Certified Young Adult Peer Support Specialist shall:
 - a. Understand and utilize specific interventions necessary to assist peers in meeting their individualized recovery and wellness goals;
 - b. Demonstrate and impart how to facilitate recovery and healing dialogues through the use of active listening and other evidence-based and/or best practice methods;
 - c. Demonstrate and impart relevant skills needed for self-management of symptoms, uncomfortable emotions, and/or potential relapse;
 - d. Demonstrate and impart how to overcome personal fears, anxieties, urges, stressors, and barriers;
 - e. Assist peers in articulating their personal strengths, goals, and objectives for recovery and wellness;
 - f. Assist peers in creating their personal wellness and recovery plans (e.g., WRAP®, Declaration for Mental Health Treatment, crisis plan, relapse prevention plan, etc.); and
 - g. Appropriately document activities provided to peers in either their agency records.
3. The Certified Young Adult Peer Support Specialist shall maintain a working knowledge of current trends and developments in the fields of mental health, substance use disorders, co-occurring disorders, youth/young adult development, child and adult-serving systems, and peer support services by:
 - a. Reading books, current journals, and other relevant material;
 - b. Developing and sharing appropriate material with other Certified Young Adult Peer Support Specialists;



- c. Attending authorized or recognized seminars, workshops, and educational trainings.

- 4. The Certified Young Adult Peer Support Specialist may serve as a recovery and wellness agent by:
 - a. Providing and promoting recovery, resiliency, and wellness based services, such as BRIDGES (Building Recovery of Individual Dreams and Goals), WRAP® (Wellness Recovery Action Plan), 12-Step Groups, etc.
 - b. Assisting peers in obtaining services that suit each peer's individual recovery and wellness needs;
 - c. Assisting peers in developing empowerment skills through self-advocacy;
 - d. Assisting peers in developing problem-solving skills so they can respond to challenges to their recovery and journey of healing;
 - e. When appropriate, sharing their unique perspective on recovery and/or healing from mental illness, substance abuse disorders, and co-occurring disorders with non-peer staff; and
 - f. Assisting non-peer staff in a collaborative process in identifying programs and environments that are conducive to recovery, healing, and wellness.

VI. Code of Ethics

These principles will direct Certified Young Adult Peer Support Specialists in the various roles, relationships, and levels of responsibility in which they function professionally. This code serves to provide a set of values, principles, and standards to guide decision making and conduct when ethical issues arise. It is not intended to be a set of rules that prescribe how peer support specialists should act in all situations, but instead, a source of clarification and assistance. If a Certified Young Adult Peer Support Specialist is ever unsure of how to proceed in an ethical situation, they are advised to seek the support of their supervisor.

Each section of the Code of Ethics is defined by a core principle that inspired its ethical guidelines. Section One is Peer Driven, Section Two is Justice and Fairness, Section Three is Honesty, and Section Four is Maintenance and Preservation.

1. Peer Driven

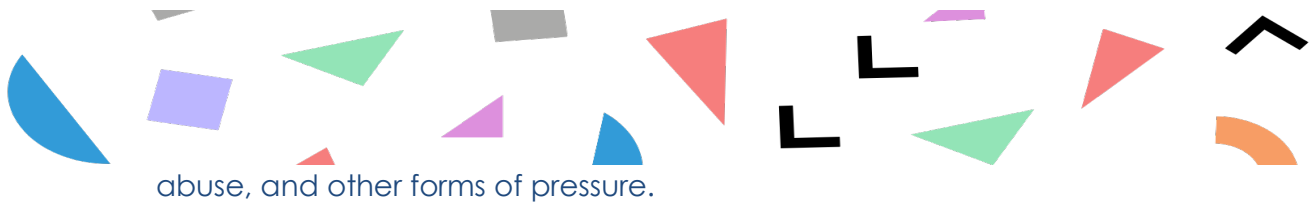
- a. The primary responsibility of Certified Young Adult Peer Support Specialists is to help peers achieve their own needs, wants, and goals.
- b. Certified Young Adult Peer Support Specialists will infuse and emphasize young



- c. Certified Young Adult Peer Support Specialists will promote self-direction and decision making for those they serve. They will advocate for the peer to be allowed to make their own decisions in all matters when working with other professionals. When providing information about services and opportunities, Certified Young Adult Peer Support Specialists will respect the peer's right to refuse or decline services and aid them as best they can.
- d. Certified Young Adult Peer Support Specialists will encourage the peer to take a strengths-based and person-driven approach to wellness in their work with peers.
- e. Certified Young Adult Peer Support Specialists will promote and support services that foster full integration of individuals into the communities of their choice and will promote the inherent value of these individuals to those communities.
- f. Certified Young Adult Peer Support Specialists will be directed by the knowledge that all individuals have the right to live and function in the least restrictive and least intrusive environment.
- g. Certified Young Adult Peer Support Specialists will honor their responsibility to the larger society by adhering to legal obligations and agency policies, particularly around mandatory reporting. This responsibility may on limited occasions supersede the loyalty owed to clients, and CYAPSS should refer to ethical principle 3C.

2. Justice and Fairness

- a. Certified Young Adult Peer Support Specialists will respect, at all times, the rights, dignity, and value of those they serve.
- b. In all communications to and about those the Certified Young Adult Peer Support Specialists serve, they will use language that is respectful. They will be as honest, direct, and transparent as possible. They will strive to break down concepts, use people-first language, and avoid clinical jargon.
- c. Certified Young Adult Peer Support Specialists will not use hate speech.
- d. Certified Young Adult Peer Support Specialists will be mindful of the imbalance of power in their relationship with the individuals they serve and refrain from exploiting that imbalance.
- e. Certified Young Adult Peer Support Specialists will work to keep their environments physically and emotionally safe for others. They will never intimidate, threaten, harass, or make unwarranted promises of benefits to the individuals they serve. They will never use undue influence, physical force, verbal



- f. Certified Young Adult Peer Support Specialists will not practice, condone, facilitate, or collaborate in any form of discrimination or harassment based on ethnicity, race, national origin, sex, gender identity, sexual orientation, age, religion, spirituality, marital status, pregnancy, veteran's status, political belief, mental or physical disability, or any other preference or personal characteristic, condition, or state.
- g. Certified Young Adult Peer Support Specialists will demonstrate respect for the cultural values and beliefs of others and refrain from imposing their own values and beliefs. They will recognize that everyone is different and there is always something to be learned from others.
- h. Certified Young Adult Peer Support Specialists will be aware that, by the nature of the roles and responsibilities of their role as a CYAPSS, dual relationships can be difficult to avoid. They should not purposefully enter into dual relationships or commitments that conflict with the interests of those they serve without seeking the guidance of their supervisor and agency policies regarding dual relationships.
- i. Certified Young Adult Peer Support Specialists will never engage in romantic, sexual, or other intimate activities with peers they serve or have worked with in a professional capacity in the past year. Because of the natural imbalance of power in the relationship, peers are unable to give proper consent to such behavior and to attempt to gain this consent would be inappropriate.
- j. Certified Young Adult Peer Support Specialists will not engage in business, extend, or receive loans, or accept gifts of significant value from those they serve.

3. Honesty

- a. Certified Young Adult Peer Support Specialists will respect the privacy and confidentiality of those they serve.
- b. Certified Young Adult Peer Support Specialists will maintain and secure all information as required by laws, regulations, agency procedures and policies, and confidentiality guidelines.
- c. Certified Young Adult Peer Support Specialists will provide the meaning and limits of confidentiality to those they serve, ensuring that the peers understand the obligation of the CYAPSS to report any abuse, neglect, or intent to harm themselves or others.
- d. Certified Young Adult Peer Support Specialists will inform those they serve about any extended absence or departure from current employment setting and provide options for continuation of services.



- e. Certified Young Adult Peer Support Specialists will not provide services beyond their qualifications or claim professional qualifications that exceed their own. This includes diagnosing an illness, prescribing medications, or providing clinical treatment or therapeutic services.
- f. Certified Young Adult Peer Support Specialists will not provide services, either for employment or on a volunteer basis, without supervision.
- g. A CYAPSS shall only provide services and support within the hours, days, and locations that are appropriate and relevant places to provide peer support services, or as authorized by the agency where the CYAPSS volunteers or works.

4. Maintenance and Preservation

- a. Certified Young Adult Peer Support Specialists will maintain high standards of personal and professional conduct.
- b. Certified Young Adult Peer Support Specialists will conduct themselves in a manner that fosters their own recovery, healing, and integrity.
- c. Certified Young Adult Peer Support Specialists will be aware that their personal and professional choices affect the image of *all* Certified Young Adult Peer Support Specialists and Certified Peer Recovery Specialists in Tennessee, as well as their employer, and therefore, they must hold themselves to a high ethical standard in order to sustain the infrastructure of a young adult-guided system of care. This includes exercising caution when communicating and sharing content on the Internet and various social media platforms.
- d. Certified Young Adult Peer Support Specialists will not abuse substances under any circumstances.
- e. Certified Young Adult Peer Support Specialists will seek immediate support and guidance from their supervisor after any attempted or completed relapses in harmful coping mechanisms, including substance abuse.
- f. Certified Young Adult Peer Support Specialists will maintain personal and professional accountability, as well as accept responsibility for the consequences of their actions.
- g. Certified Young Adult Peer Support Specialists will monitor their well-being by making self-care a top priority. Good self-care will decrease the likelihood of burn out. They will be honest and realistic about their needs when working in difficult situations and recognize when, how, and who to ask for help.
- h. Certified Young Adult Peer Support Specialists will recognize that professional and personal growth is ongoing.
- i. Certified Young Adult Peer Support Specialists will expand and develop



awareness of personal attitudes and beliefs affecting cultural values and biases and strive to attain cultural and linguistic responsiveness.

- j.** Certified Young Adult Peer Support Specialists will seek education, consultation, and training experience to improve awareness, knowledge, skills, and effectiveness for working in the peer support field and with diverse populations.
- k.** Certified Young Adult Peer Support Specialists will respect, support, and uplift the integrity and well-being of fellow CYAPSS's. They will do what they can to encourage the successes of each other. This includes sharing resources and emerging knowledge relevant to the position.
- l.** Certified Young Adult Peer Support Specialists will seek to establish collaborative relationships with professional and community partners.
- m.** Certified Young Adult Peer Support Specialists will respect and value the opinions, beliefs, strengths, and roles and responsibilities of professional and community partners. They will treat partners with courtesy and fairness.
- n.** Certified Young Adult Peer Support Specialists will openly share with peers, other CYAPSS's, and non-peers their own personal recovery stories and journeys of healing from mental illness and/or substance abuse, but will not share this information as related to others without their permission..
- o.** Certified Young Adult Peer Support Specialists will share their story in a way that is appropriate for the situation in order to promote healing, recovery, and resiliency. They will likewise be able to identify and describe the supports that promote their continuation on a path of wellness.

VII. Denial, Suspension, or Revocation of Certification, and Reconsideration

Certification or recertification as a Certified Young Adult Peer Support Specialist (CYAPSS) may be granted, denied, suspended, or revoked at the sole discretion of the Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS) as it deems fit. There is no legal right to or interest in being granted certification as a CYAPSS, and being granted certification does not create a legal right to or interest in retaining certification. Although TDMHSAS may choose to reconsider any decision it makes regarding the denial, suspension, or revocation of a CYAPSS certification, there is no legal right to reconsideration or to review or appeal of TDMHSAS's decision regarding the same.

If an individual's CYAPSS certification is denied, suspended, or revoked, then that individual's employer is prohibited from billing for services which require them to be a certified CYAPSS. If the individual is employed or volunteering in a position which requires that they be a certified CYAPSS, they must immediately notify their employer or the entity for which they are



volunteering should their certification be suspended or revoked.

Anyone who is not recognized as a certified CYAPSS by TDMHSAS is prohibited from presenting themselves as someone who is certified as a CYAPSS by TDMHSAS.

Should an application for certification or for recertification be denied or if certification is suspended or revoked, TDMHSAS shall attempt to notify the individual of its decision by mail addressed to the last physical address and/or email address provided by the individual. The ability of TDMHSAS to take any such action is not limited or conditioned on its ability to notify the individual. Individuals who are applicants for certification or recertification or who are currently certified shall keep TDMHSAS' Office of Children, Young Adults, and Families informed of their current physical address and email address by emailing that information to CYAPSS.TDMHSAS@tn.gov.

When TDMHSAS denies, suspends, or revokes a CYAPSS certification or request for recertification, the individual has thirty (30) calendar days during which to request reconsideration by TDMHSAS should the individual wish to do so. An extension of this deadline may be granted upon a showing of good cause by the individual. All requests for reconsideration or for an extension of time and any supporting documentation the individual wishes TDMHSAS to consider must be submitted via email to CYAPSS.TDMHSAS@tn.gov. TDMHSAS will notify the individual of its decision at the physical address and/or email address provided by the individual in their request for reconsideration. TDMHSAS will also notify the individual of when they may reapply for certification, if applicable.

VIII. Certification Renewal Guidelines and Procedure

To maintain certification status, each Certified Young Adult Peer Support Specialist must:

- Annually complete and submit a Renewal Application
- Sign a statement certifying that no violations to the Code of Ethics have occurred in the past year and have their supervisor sign off on this as well
- Provide documentation of successful completion of continuing education hours as approved by TDMHSAS
- Provide at minimum 25 hours of peer support services per year (See Section IX in this Handbook for more information on supervision)
- Complete at least ten hours of continuing education to satisfy the Continuing Education Guidelines (See Section IX)



Each Tennessee Certified Young Adult Peer Support Specialist is responsible for maintaining their certification and must submit their Renewal Application and all other required documentation at least fourteen (14) calendar days prior to the end of the recertification date.

To obtain a Renewal Application, refer to the Appendices of this Handbook, or contact the Office of Children, Young Adults, and Families (see Section I for contact information).

Renewal of Certification after Expiration

A certification not renewed by the recertification date will become expired. If a certification becomes expired, the young adult will not be able to claim to be a Certified Young Adult Peer Support Specialist. In addition, the young adult's employer would not be able to bill the State or a third party for services provided by the young adult which require certification in order to be reimbursable under a contract or other State program.

We understand that there are many reasons why a young adult may be delayed in renewing their certification. If a young adult wishes to renew their certification and become an active Certified Young Adult Peer Support Specialist again, they will be able to do so by completing the following steps:

- Complete a Renewal Application
 - The minimum 25 hours of peer support services required for renewal can have been obtained in the last year of active certification
 - Applicants need to ensure that they continue to meet the eligibility requirements for certification
- Complete the 10 Continuing Education hours that were needed for the initial renewal process
- Complete an additional hour of Continuing Education for every month the certification has been expired

The additional Continuing Education hours must be obtained following the guidelines and standards outline in Section IX. If more than four months have passed since the certification has expired, you will be asked to reapply to the program and recomplete the CYAPSS training. If there are additional questions, please contact the Youth and Young Adult Coordinator using the contact information in Section I of this handbook.



IX. Continuing Education Guidelines

Continuing education is required for each Certified Young Adult Peer Support Specialist to maintain active certification and must be earned within the annual certification period. It is an ethical obligation for all Certified Young Adult Peer Support Specialists to complete Continuing Education, as stated in the CYAPSS Code of Ethics:

4i. Certified Young Adult Peer Support Specialists will seek education, consultation, and training experience to improve awareness, knowledge, skills, and effectiveness for working in the peer support field and with diverse populations.

4j. Certified Young Adult Peer Support Specialists will respect, support, and uplift the integrity and well-being of fellow CYAPSS. They will do what they can to encourage the successes of each other, and this includes sharing resources and emerging knowledge relevant to the position.

Continuing education trainings are not transferable to any other certification period. Educational trainings completed prior to obtaining certification as a Young Adult Peer Support Specialist are not eligible for maintaining certification.

Certified Young Adult Peer Support Specialists must complete at least ten (10) hours of continuing education trainings, seminars, workshops, or college courses per certification year. All continuing education must be approved by the Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS). If a CYAPSS is also certified as a Certified Peer Recovery Specialist, continuing education hours earned for the CPRS continuing education guidelines can be applied towards CYAPSS recertification.

We strongly encourage you to gain prior approval for all trainings not listed on the list of Suggested or Accepted Trainings below. Please contact the Youth and Young Adult Coordinator (see Section I for contact information) to determine if the training or webinar you wish to take is satisfactory before attending.

Continuing Education Standards

- Online trainings are limited to five (5) hours out of the 10 hours required.
- A minimum of one (1) hour of continuing education per year must be in ethics.
- A minimum of one (1) hour of continuing education per year must be in cultural responsiveness and/or working with diverse populations (this includes trainings on youth culture).
- Continuing education focused on clinical treatment or therapy will not be accepted. It is a violation of the Code of Ethics for CYAPSS to provide clinical treatment or therapy.



Continuing education must be within, but not limited to, recovery and wellness in the fields of mental illness, substance abuse, co-occurring disorders, or other child and adult-serving systems.

Continuing Education Verification Procedure

The information below is required to confirm successful completion of approved continuing education hours:

- Certificate of attendance or completion
 - Certified Young Adult Peer Support Specialist's name
 - Certificate signed by the instructor, trainer, or supervisor
 - Training date
 - Number of continuing education hours

OR

- Provider agency in-service trainings as required by the Bureau of TennCare
 - Verification on official agency letterhead
 - Certified Young Adult Peer Support Specialist's name
 - Letter signed by the immediate supervisor
 - Hours of attendance
 - Training date
 - Note: Please remember that First Aid, CPR, and Title VI trainings are not acceptable.

OR

- Screenshot of evidence of attendance for webinar
 - If no certificate is included, screenshot the webinar
 - If using a PC computer, use the Print Scrn button or Snipping Tool application. For more detailed instructions, click [here](#).
 - If using a Mac/Apple computer, use the computer key pattern of Shift-Command-4. For more detailed instructions, click [here](#).
 - Try to select a slide/page with the name of the webinar, presenter, and date or add the information manually
 - Print the screenshot, have supervisor sign and date it, and add the start and end time of the webinar
 - Sign the document and include it with the other certificates when submitting renewal application

OR



- College or university courses in behavioral-health, child or adult-serving systems, or related subjects
 - A syllabus signed by the professor with a copy of grades for the course, or
 - Transcript showing course and grade

Suggested Curriculum for Continuing Education

The Continuing Education Standards require that one of the ten hours must be on ethics and another hour must be on cultural responsiveness, but the remaining eight can be in a variety of other areas.

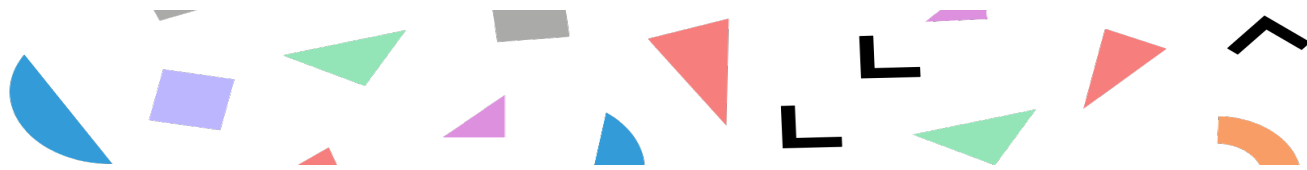
TDMHSAS has compiled a list on the next page of suggested topics for trainings and bolded the trainings that were personally recommended by young adults who are currently Certified Peer Recovery Specialists. These CPRS's emphasized the importance of learning about self-care for oneself and how to maintain professionalism.

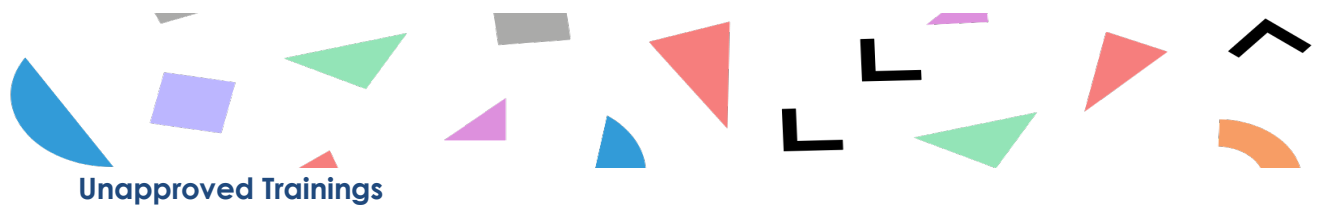
It is the hope of TDMHSAS that CYAPSS's will work their way through this list during their time as a CYAPSS and attempt to educate themselves in each unique

category. The role of the CYAPSS covers much more than mental and emotional wellness, so please remain open-minded when selecting trainings. It is also good to remember that some of these courses may aid a CYAPSS in their own journey of healing as well.

In order to peruse the full list of approved trainings, please contact the Office of Children, Young Adults, and Families (see Section I for contact information) and request a copy. If you would like to request a training in one of the areas listed, please contact the SOCAT Training and Technical Assistance Center at soc.tacenter@tn.gov.

- Cultural and Linguistic Responsiveness:
 - Cultural Differences and Beliefs, Diversity, and Sensitivity
 - Spirituality and Recovery
 - The Impact of Beliefs and Values on Recovery
- Ethics, Confidentiality, and Professional Development:
 - Maintaining Appropriate Boundaries
 - Protecting Health Information (HIPAA)
 - Working with Clinical Staff
 - Professional Responsibility

- 
- Peer Support Services Promoting Recovery, Resiliency, and Self-Care:
 - **Wellness Recovery Action Planning (WRAP) I** – an evidence-based practice for learning how to maintain your own wellness and recovery
 - **WRAP II** – teaching you how to help others create their own WRAP plans
 - **Whole Health Action Management (WHAM)** – how to set resiliency and health goals and succeed at self-management
 - **BRIDGES** – Building Recovery of Individual Dreams and Goals through Education and Support – a peer-led psychoeducational program
 - Stress Reduction
 - Recognizing Workplace Burnout
 - Identifying Relapse Urges and Triggers and other Relapse Prevention
 - Conflict Resolution in the Workplace
 - Coping with Transference of Feelings
 - Working With Youth
 - **Youth Mental Health First Aid** – teaches common mental health challenges for youth and how to aid a young adult through crisis
 - **Transition to Independence Process (TIP) Model**
 - **Silver Linings Advocacy (Silver Linings International)**
 - **Lessons in Time (Silver Linings International)**
 - **Adolescent Development**
 - Youth and Young Adult Engagement
 - Working with Those Who Have Mental Health and Substance Use Disorders:
 - Stages of Change
 - Detoxification
 - Crisis Management
 - Mental Health Disorders
 - The Impact of Diagnoses
 - Understanding Mental Health or Substance Use Treatment
 - Mental Health in Rural Settings
 - System of Care:
 - Discrimination Issues in Mental Health
 - High-Fidelity Wraparound
 - System of Care Values and Principles
 - Other potential topics or areas of interest to explore:
 - Grief
 - Working in Juvenile Justice and Child Welfare
 - Suicide prevention
 - Communication Skills/Active Listening



The following training topics, while important to maintain general employment, are not considered peer specialist related training. Additionally, please keep in mind that no trainings for clinical services will be accepted. The unapproved training list below is not exhaustive, and other trainings not listed below may also be considered unapproved. If you have any questions about whether or not a proposed training is approved or not approved, please contact the Office of Children, Young Adults, and Families using the contact information in Section I.

- First Aid Classes (Medical, not Mental Health)
- Cardio Pulmonary Resuscitation (CPR)
- Driver Education
- Food Safety
- Handling Fire and Other Emergencies
- Protective Equipment
- Material Safety Data Sheets (MSDS)
- Blood Borne Pathogens
- Universal and Standard Precautions
- Patient Neglect/Abuse
- Sitting and Lifting
- Electrical Safety
- Hand Hygiene
- Sexual Assault Dynamics and Treatment
- Trauma-Informed Treatment of Addiction
- Clinical Supervision
- Solution Focused Brief Therapy in Behavioral Health
- Cognitive Behavioral Therapy
- Emotion Focused Therapy
- Integrative Therapy
- Multicultural Therapy
- Relational-cultural Therapy
- Client-Directed Outcome-Focused Therapy
- Mindful Therapy
- Feminist Therapy
- Treatment of Suicidality
- Repair and Reattachment Grief Therapy



X. General Supervision Requirements

To be certified, a Certified Young Adult Peer Support Specialist, as either an employee or a volunteer, must be under supervision. The amount, duration, and scope of Certified Young Adult Peer Support Specialist's activities may range from direct oversight to periodic care consultation.

Supervisors of CYAPSS's will adhere to the following core principles:

1. Supervisors of CYAPSS's are trained in quality supervisory skills.
2. Supervisors of CYAPSS's understand and support the role of the CYAPSS.
3. Supervisors of CYAPSS's understand and promote recovery and wellness in their supervisory roles.
4. Supervisors of CYAPSS's advocate for CYAPSS's and for peer support services across the organization and in the community.
5. Supervisors of CYAPSS's promote both the professional and personal growth of the CYAPSS within established human resource standards.

Adapted : Daniels, A.S., Tunner, T.P., Powell, I., Fricks, L., Ashenden, P., (2015) Pillars of Peer Support – VI: Peer Specialist Supervision. www.pillarsofpeersupport.org; March 2015

A supervisor of Certified Young Adult Peer Support Specialist shall meet the following criteria:

1. **TRAINING:** Complete supervision training that includes understanding how to support the role of Certified Young Adult Peer Support Specialists and/or Certified Peer Recovery Specialists.
2. **EDUCATION/EXPERIENCE:** Fulfill at least one of the following criteria:
 - a. Be a current Certified Peer Recovery Specialist (CPRS) with at least 6,000 hours of experience working as a CPRS and have regular, on-going consultation with a mental health professional or qualified alcohol and drug abuse treatment professional,
or
 - b. Be a mental health professional or qualified alcohol and drug abuse treatment professional in accordance with acceptable guidelines and standards of practice as defined by the State and as defined in the TDMHSAS Licensure rules, Chapter 0940-05-01, as follows:
“Mental Health Professional” means a board eligible or a board certified



psychiatrist or a person with at least a Master's degree and/or clinical training in an accepted mental health field which includes, but is not limited to, counseling, nursing, occupational therapy, psychology, social work, vocational rehabilitation, or activity therapy.

“Qualified Alcohol and Drug Abuse Treatment Personnel” means persons who meet the criteria described in subparagraphs (a), (b), and (c) as follows:

- a) Currently meet one (1) of the following conditions:
 1. Licensed or certified by the State of Tennessee as a physician, registered nurse, practical nurse, psychologist, psychological examiner, social worker, substance abuse counselor, teacher, professional counselor, associate counselor, or marital and family therapist, or if there is no applicable licensure or certification by the State, has a bachelor's degree or above in a behavioral science or human development related area; or
 2. Actively engaged in a recognized course of study or other formal process for meeting criteria of part (1) of subparagraph (a) above, and directly supervised by a staff person who meets criteria in part (1) of subparagraph (a) above, who is trained and qualified as described in subparagraph (b) and (c) below, and who is minimum of two (2) years' experience in his/her/their area of practice; and
 3. Are qualified by education and/or experience for the specific duties of their position; and
 4. Are trained in alcohol, tobacco, and/or other drug abuse specific information or skills. (Examples of types of training include, but are not limited to alcohol or other drug abuse specific in-services, workshops, substance abuse schools, academic coursework and internships, field placement or residences).

NOTE: If the delivery of the Certified Young Adult Peer Support Specialist service is to be rendered as a Medicaid (TennCare) covered service, then the supervision requirements outlined in the Employment Standards for Reimbursable Services apply as well.



XI. Additional Employment Standards for Reimbursable Services with TennCare

NOTE: The information in this section will become applicable pending conversations with TennCare. Please check back for updates on if CYAPSS's are Medicaid-reimbursable.

If the delivery of the Certified Young Adult Peer Support Specialist service is to be rendered as a Medicaid (TennCare) covered service, then the following guidelines must be met:

- Applicants must be employed to work in the role as a paid Certified Young Adult Peer Support Specialist by an agency that is licensed by TDMHSAS and authorized to participate in the Medicaid (TennCare) program.
- Agencies that are licensed by TDMHSAS and authorized to participate in the Medicaid (TennCare) program shall:
 - Establish criteria, under which they hire, train, and retain Certified Young Adult Peer Support Specialists.
 - Provide supervision for Certified Young Adult Peer Support Specialists in accordance with acceptable guidelines and standards of practice as defined by the State and the Centers for Medicare and Medicaid Services.
- Each Certified Young Adult Peer Support Specialist providing Medicaid-reimbursable services must be under the direct clinical supervision of a licensed behavioral health professional as defined by the State. The licensed behavioral health professional must work for an agency that is licensed by TDHMHSAS and authorized to participate in the Medicaid program. The amount, duration, and scope of supervision may range from direct oversight to periodic care consultation.



XII. Frequently Asked Questions

1. What does CYAPSS stand for? What about TDMHSAS?

CYAPSS = Certified Young Adult Peer Support Specialist

TDMHSAS = Tennessee Department of Mental Health and Substance Abuse Services

Some other acronyms in this handbook and the appendices include:

YALC = Young Adult Leadership Council

CPRS = Certified Peer Recovery Specialist

CFSS or FSS = Certified Family Support Specialist or Family Support Specialist

ACES = Adverse Childhood Experiences

OCYAF = Office of Children, Young Adults, and Families

OCA = Office of Consumer Affairs and Peer Recovery Services

CMT = Core Management Team

YYAC = Youth and Young Adult Coordinator

WRAP = Wellness Recovery Action Plan

COE = Code of Ethics

BRIDGES = Building Recovery of Individual Dreams and Goals Through Education and Support

CE or CEUs = Continuing Education or Continuing Education Units

CPR = Cardiopulmonary Resuscitation

SOCAT = System of Care Across Tennessee

SOC = System of Care

TTAC = Training and Technical Assistance Center

WHAM = Wellness Health Action Management

TIP = Transition to Independence Model

HIPAA = Health Insurance Portability and Accountability Act

MCOs = Managed Care Organizations

GED = General Educational Development

HiSET = High School Equivalency Test

TASC = Test Assessing Secondary Completion

LADAC = Licensed Alcohol and Drug Addiction Counselor

LCSW = Licensed Clinical Social Worker



2. What is the purpose of Tennessee's Certified Young Adult Peer Support Specialist program?

State certification as a Young Adult Peer Support Specialist is intended to ensure that individuals who provide direct peer-to-peer services meet a set of state-approved minimum standards. The program was created because the Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS) sees the value in peer support, specifically for the population of young adults, and wished to create a Certification process for it. Please refer to the Introduction for a comprehensive history of peer support programs in Tennessee.

3. Who oversees Tennessee's Certified Young Adult Peer Support Specialist program?

The Office of Children, Young Adults, and Families (OCYAF) in the Tennessee Department of Mental Health and Substance Abuse Services oversees the policies and procedures around the training and certification process for the Tennessee Certified Young Adult Peer Support Specialist program. They have established the acceptable professional minimum standards for Certified Young Adult Peer Support Specialists.

4. Where are some places that a CYAPSS could potentially work or volunteer?

A CYAPSS might choose to work or volunteer in places and programs that include, but are not limited to: Peer Support Centers, Crisis Stabilization Units, licensed alcohol and drug abuse treatment centers, alcohol and drug abuse recovery support services centers, detoxification centers, psychosocial rehabilitation programs, inpatient hospital settings, community mental health agencies, recovery courts, veteran's hospitals, juvenile justice centers, child welfare agencies, and educational facilities, among others. This list continues to grow.

5. Does the Tennessee Department of Mental Health and Substance Abuse Services provide employment or job placement?

No. Tennessee's Certified Young Adult Peer Support Specialist Program is not an offer of employment or job placement by the TDMHSAS. However, certification as a Young Adult Peer Support Specialist, Peer Recovery Specialist, or Family Support Specialist is a qualification for many jobs in the peer support field. CYAPSS's can check the Recovery within Reach website for employment opportunities.

6. Do provider agencies hold Certified Young Adult Peer Support Specialist employees to the same standards as other employees?

Yes. Provider agencies should maintain the same expectations for Certified Young Adult Peer Support Specialist employees as for all other employees.



7. When and where is the Certified Young Adult Peer Support Specialist Training offered? Is there a fee?

Typically, the training is a 40 hour training offered over the course of five days (Monday-Friday). There is no fee for the training itself; however, each training participant is responsible for their own transportation, lodging, meals, snacks, beverages, and other expenses incurred. For an application and dates of upcoming trainings, contact the Office of Children, Young Adults, and Families at 615-532-3754 or CYAPSS.TDMHSAS@tn.gov. If you are interested in hosting a training on your school's campus or in your community, we are open to collaborating.

8. What if I want to attend the Certified Young Adult Peer Support Specialist training but I can't take off 5 days from work?

We absolutely understand that a lot of the young people who would be ideal for the Certified Young Adult Peer Support Specialist program are currently in school or working jobs that would prevent them from attending a Monday through Friday training.

We want to do our best to reduce the barriers preventing young adults from entering the peer support workforce. Depending on the level of interest, we may be able to split up the training into two portions that would then be offered on weekdays or weekends. Please contact the Office of Children, Young Adults, and Families to discuss this further.

9. Do I have to take the Certified Young Adult Peer Support Specialist training if I am already a Tennessee Certified Peer Recovery Specialist?

While the Certified Young Adult Peer Support Specialist training and program were inspired by the Certified Peer Recovery Specialist program, only about 30% of the training material is the same. In addition, the CYAPSS material provides a unique perspective designed to help you understand and support other young people. Therefore, it is necessary that you complete the Certified Young Adult Peer Support Training if you want to be a CYAPSS. The good news is that both trainings are provided for free through TDMHSAS. We hope that many young adults will choose to become dually certified as both a CPRS and CYAPSS.



10. Do I have to take the CYAPSS training if I am already certified as a Youth or Young Adult Peer Support Specialist in another state and I am moving to Tennessee?

Please contact the Office of Children, Young Adults, and Families to discuss this further.

11. What happens when I turn 31? Can I still be a CYAPSS?

Per the Eligibility Criteria, you must be between the ages of eighteen and thirty to be a Certified Young Adult Peer Support Specialist. If you turn 31 while you are still certified as a CYAPSS, you will maintain your certification for the remainder of that certification period. The period for certification is one year from the date you were certified or recertified. Once that date passes, your certification will become expired.

You may want to consider applying for the Certified Peer Recovery Specialist program before you age out of the CYAPSS program. Please refer to the CPRS Handbook for questions about their certification process.

12. If I have involvement in systems such as foster care or juvenile justice, but I don't identify as having mental illness or substance use issues, can I still apply to be a CYAPSS?

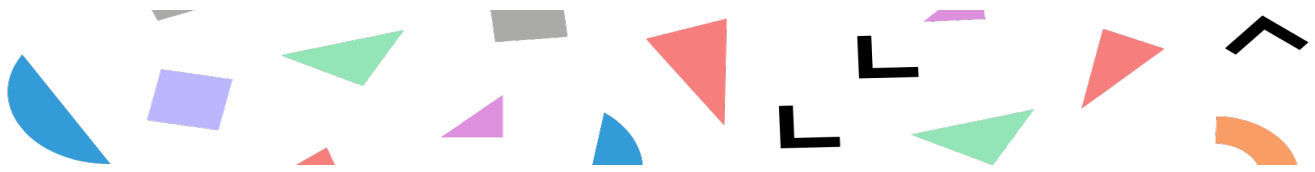
At this time, only young adults who have lived experience with mental illness and/or substance abuse are eligible for the CYAPSS program. However, we are looking into potential avenues for including these populations in future iterations of the certification.

Some folks may read this and automatically assume that they do not fit the eligibility criteria, but we would urge people to take a moment to consider this: many of us have struggled with mental health issues without ever getting diagnosed, receiving help, or fully processing the significance of our experience. In addition, living through trauma can sometimes lead to mental health issues, but people may not use that label for what they're experiencing. However, many young adults with trauma histories can uniquely empathize with the peers that CYAPSS serve because they share that lived experience.

It never hurts to fill out an application or reach out to the Youth and Young Adult Coordinator with further questions. Even if the CYAPSS program is ultimately not the right fit, you may find that joining the Statewide Young Adult Leadership Council fulfills your desire for leadership opportunities.

13. Will the information I reveal in my CYAPSS application and communications remain confidential?

Pursuant to T.C.A. §10-7-503, all state records are considered open for public inspection, unless otherwise protected under the law. The State cannot guarantee the confidentiality of your application, any communications, or other related documents received by the State or in possession of the State.



With this in mind, please be thoughtful and deliberate about the information you share in your application and other written communications with the State. As a Certified Young Adult Peer Support Specialist, you will be asked to share your personal story of recovery and wellness. Think about the details that you would be willing to share in that narrative and use that as a guide for what information you choose to disclose in your application, communications, and any other related documents to/with the State.

If you have questions or concerns about this, please do not hesitate to contact the Office of Children, Young Adults, and Families using the contact information in Section I.

14. How do I bill TennCare (Medicaid) for Certified Young Adult Peer Support Specialist services?

NOTE: The information in this answer will become applicable pending conversations with TennCare. Please see Section XI for more information.

Only agencies that have included peer recovery services in their contracts with the health plans, also called Managed Care Organizations (MCOS), will be able to bill for a Certified Young Adult Peer Support Specialist's services to TennCare members and only when deemed medically necessary. Individual Certified Young Adult Peer Support Specialists cannot bill TennCare (Medicaid).

15. Once certified, can I provide billable peer recovery or peer support services from my own home or office?

Per the CYAPSS Code of Ethics #3G: *A CYAPSS shall only provide services and support within the hours, days, and locations that are appropriate and relevant places to provide peer support services, or as authorized by the agency where the CYAPSS volunteers or works.* In addition, in order for peer recovery or peer support services to be billed to the state, they must be provided at a place acknowledged by Tennessee State government as a relevant and appropriate.

16. Why is there a requirement in Continuing Education about cultural and linguistic responsiveness?

Cultural and linguistic responsiveness is the ability to interact successfully with people of different identities, backgrounds, cultures, and languages. This includes meeting their social, cultural, and linguistic needs. TDMHSAS understand that everyone did not grow up with the same level of education about other cultures, but in order to provide impactful peer support, the Certified Young Adult Peer Support Specialists should constantly strive to learn more about other backgrounds and how to navigate situations where they do not necessarily know everything about the peer's culture. The skills



needed for engaging in cultural responsiveness are the same for providing effective peer support – keeping an open mind, maintaining a strengths-based attitude, and practicing active listening. In order to reflect this dedication to building cultural responsiveness, applicants for the CYAPSS Training must answer a question about cultural responsiveness and for those seeking recertification, it is required that a minimum of one hour of continuing education be in cultural responsiveness and/or working with diverse populations. In addition, young adults are a unique population because of their in-between status for so many aspects of society, so this recertification requirement also encourages Certified Young Adult Peer Support Specialists to take advantage of trainings and webinars around how to best work with youth and young adults specifically.

17. What makes peer support different than counseling or therapy? Why is it ideal for young adults?

Peer support is the act of one peer supporting another. What makes someone a peer is their shared experiences – they attend the same school, are the same age, come from the same racial or social background, have both been through the foster care system, have both sought out behavioral health services, etc. The peers may have never met before, but they are bonded together by knowing that each other understands what they've been through. Receiving support from a peer instead of a health professional often feels more comfortable and safe, even if the location is a hospital or courthouse.

While the CYAPSS holds a certification, they do not have any licensure that allows them to provide clinical services, such as counseling and therapy, and it is against the CYAPSS Code of Ethics to provide such services. Additionally, this would violate both state and federal law, and the CYAPSS could be subject to potential criminal and civil liability. Counseling and therapy usually involve a trained medical professional using evidence-based strategies to help a person change their behavior. Certified Young Adult Peer Support services involve a young adult using their lived experience to support others on their path of wellness and journey of healing. The CYAPSS program is built off of the ideology that anyone with lived experience can provide peer support, and they can become certified after showing they are ready to take the step from peer to peer specialist.

Because of the many challenges that can arise for transition-age youth, there is a need for developmentally appropriate programs that seek to improve their emotional competency, knowledge of wellness and recovery, and propensity to seek help as needed. The Certified Young Adult Peer Support Specialist program aims to offer those exact components by training and certifying young adults to provide direct peer-to-peer services.

Appendices

for the

Certified Young Adult Peer Support Specialist Program

Appendix I: Application for CYAPSS Training

Appendix II: Application for CYAPSS Certification

Appendix III: Letter of Character or Professional Reference

Appendix IV: Employment or Volunteer Summary

Appendix V: Renewal Application

Date Received _____ Initials _____	Date Approved _____ Initials _____	Notes _____ _____
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Certified Young Adult Peer Support Specialist

Part One: Training Application

Eligibility Criteria

In order to be eligible for the Certified Young Adult Peer Support Specialist (CYAPSS) training, all applicants must meet the following minimum requirements:

- *Be eighteen (18) through thirty (30) years of age*
- *Hold a high school diploma or equivalent (GED, HiSET, or TASC)*
- *Self-identify as a person who is in recovery from—or on a healing and wellness journey with—mental illness, substance abuse, or both for at least one year*
- *Be willing to discuss your lived experience and share your personal story of healing with peers, staff, and the public*
- *Do not have a conservator*

To receive your certification, you must complete the CYAPSS training and a minimum of 75 hours of supervised paid or volunteer work providing peer support, receive a recommendation from your supervisor, obtain three character reference letters, and complete the Certification Application.

You must also review, understand, and agree to uphold the Code of Ethics and Scope of Activities, which we recommend you read through before completing this application. For more specific information on the Certification Process, please see the Certified Young Adult Peer Support Specialist Handbook.

The two key differences between the Certified Young Adult Peer Support Specialist and Certified Peer Recovery Specialist programs are the age distinction and length of recovery or healing.

Please note that pursuant to Tenn. Code Ann. § 10-7-503, all state records are considered open for public inspection, unless otherwise protected under the law. Accordingly, the State cannot and does not guarantee the confidentiality of this application, any notes, files, reports or other documents received by the State or in possession of the State in conjunction with this application. With this in mind, please only provide information in this application that you are comfortable sharing with the State, and, with the understanding, that any information contained in this application may be disclosed as required by law or as necessary for the CYAPSS program as determined by the State.

Important Information

All training applicants are screened against the Tennessee Sex Offender Registry and the Tennessee Abuse Registry prior to application approval. Applicants on the sex offender registry are handled on a case by case basis and can still be approved for certification in some situations. For this reason, we ask for your name assigned at birth (if different), any other names used (for example, previous married names), and your social security number.

We request a personal email, as opposed to a work email, in the case that you change employment.

Everything in this application requires an answer except the optional Demographic Section.

Please list any and all versions of your name that you have gone by:

Preferred Name / Name You Want on Certificate _____

Preferred City for Training: Memphis Nashville Chattanooga Knoxville

How willing are you to travel for the training? _____

Social Security Number _____

Gender Male Female Other

Address _____

City, State, ZIP _____

Phone (w/area code) _____ Can we: Text? Call? Leave Voicemails?

Personal Email _____

Today's Date _____ Date of Birth _____

Conservator Status

In Tennessee, the definition of a conservator is "a person appointed by the court to provide partial or full supervision, protection and assistance" for a person with a disability who is found to lack the capacity to effectively make decisions for themselves. The conservator thus has the specific authority and duty to act on behalf of the individual in making important choices affecting that person's life. Certified Young Adult Peer Support Specialists are expected to not only manage their own affairs, but also to be able to provide peer support to others. As such, if you have a conservator, you do not meet the requirements for certification as a CYAPSS at this time.

Please check the appropriate box:

I confirm that I

do have a conservator

do **not** have a conservator

Experience and Education

Working as a Certified Young Adult Peer Support Specialist in Tennessee can be an immensely rewarding occupation. It is a way to help others experience the wellness and recovery that you have experienced yourself. To help us know how ready you are, please answer the following questions.

List two previous jobs, community service engagements, and/or extracurricular commitments that you have held. Please include the name of your employers or organization and the dates of employment or involvement.

1. _____

2. _____

Indicate your highest level of education and **include a copy of your high school diploma (or equivalent), college diploma, unofficial college transcript, and/or other certification(s) with your application in order to be considered.**

- High School Diploma GED, HiSET, or TASC
- Vocational certificate, specialty _____
- Associate's Degree, concentration _____
- Bachelor's Master's PhD _____
- LADAC LCSW Not Listed (Please Specify) _____
- Copy of high school diploma (or equivalent), college diploma, unofficial college transcript, and/or other certification(s) included with application **(Required)**
- Please indicate any special concentrations, majors/minors, or other certifications:

Please answer YES or NO to the following questions, and on Question #2, please select all that apply.

1. Are you between the ages of 18 and 30? YES NO
2. Do you identify as having lived experience with:
 - a. A mental health challenge? YES NO
 - b. A substance abuse challenge? YES NO
3. Do you identify as having been in recovery or on a path of healing and wellness for at least 12 consecutive months? YES NO
4. Are you willing to disclose to peers, staff, and the public that you have lived experience with mental illness and/or substance abuse? YES NO

- 5. In the training, you will be asked to participate in discussions and role-play activities using elements of your own story of recovery and healing. Are you comfortable listening to others' journeys and recovery stories, as well as sharing how you found a path of wellness yourself? YES NO

- 6. If accepted, you must attend the entire 40 hour, weeklong training. Can you commit to that? (Please note that if the training is virtual, the schedule may look different) YES NO

- 7. The training is highly interactive and requires activities that involve small groups, discussions, and reading to the group. Are you comfortable with this kind of participation? YES NO

- 8. Is there anything about your culture, background, or community you feel is important and would like for us to know about you? (Optional):

- 9. Please tell us about your interests, talents, and hobbies, and how they shape your life. (Optional):

Journey of Healing

Please write complete answers to the following questions without outside help. Your answers can be brief, but use complete sentences and be as specific as possible. Type or make your handwriting clear and legible, and limit your responses to the space provided. This is not a test with right and wrong answers. It is a way to assess your readiness to take the certification training.

10. Using your own words and experiences, please define the following concepts: wellness, recovery, and peer support.

11. Describe your support system and how it has helped you in your recovery and journey of healing.

12. What does self-care mean to you? What is your plan to mindfully manage uncomfortable emotions, triggers, or a recurrence of symptoms that could possibly be brought on by your work as a CYAPSS?

13. Please describe how you relate to others with different backgrounds and viewpoints. Provide an example.

14. Describe why you want to become a Certified Young Adult Peer Support Specialist and how your lived experience with mental illness and/or substance abuse has shaped your decision.

15. When was a time you advocated for yourself and/or others?

16. Describe at least two of your strengths. How have they helped you in your own recovery and wellness? How will they aid you in your role as a CYAPSS?

17. Have you ever taught a group or class before? If yes, what did you like about it? If not, how do you feel about teaching one?

18. What do you foresee being your greatest challenge in becoming a CYAPSS? How will you address that challenge?

19. Is there anything else you would like us to know?

My signature below affirms that all of the information contained in this application is true and correct to the best of my knowledge and has been completed by no other person. I understand that knowingly providing false information shall be grounds to deny my certification.

Your signature _____ Date _____

Your printed name _____

Are you currently employed? YES NO

If you are employed, please have your immediate supervisor sign below attesting that you are approved to attend all of the 40-hour training.

Supervisor's Name _____ Credentials _____

Title _____

Agency/Organization _____

Phone (with area code) _____ Email _____

Signature of Immediate Supervisor _____ Date _____

If you have any questions about how to complete this application, please do not hesitate to reach out to the Youth and Young Adult Coordinator at the contact information below.

The Certified Young Adult Peer Support Specialist training is provided free to all accepted applicants; however, you will be responsible for your own transportation, lodging, meals, beverages, snacks, and other expenses incurred.

Anyone with a disability who require accommodations should notify the Youth and Young Adult Coordinator (using the contact information below) to request or discuss accommodations at the CYAPSS Training. Three weeks of advance notice is preferred, but every effort will be made to provide accommodations when requested.

Once complete, scan and email your application, as well as a copy of your diploma or other appropriate certification. Please do not mail or fax your application. You will be notified when we receive your application. Please allow up to a month for us to process your application and inform you of our decision.

Youth and Young Adult Coordinator

Tennessee Department of Mental Health and Substance Abuse Services

Email: CYAPSS.TDMHSAS@tn.gov

Date Received _____	Date Approved _____	Notes _____
Initials _____	Initials _____	_____



Certified Young Adult Peer Support Specialist

Part Two: Application for Certification

Eligibility Criteria

In order to be eligible for the Certified Young Adult Peer Support Specialist (CYAPSS) training, all applicants must meet the following minimum requirements:

- *Be eighteen (18) through thirty (30) years of age*
- *Hold a high school diploma or equivalent (GED, HiSET, or TASC)*
- *Self-identify as a person who is in recovery from—or on a healing and wellness journey with—mental illness, substance abuse, or both for at least one year*
- *Be willing to discuss your lived experience and share your personal story of healing and recovery with peers, staff, and the public*
- *Do not have a conservator*

To receive your certification, you must complete the CYAPSS training and a minimum of 75 hours of supervised paid or volunteer work providing peer support, receive a recommendation from your supervisor, obtain three character or professional reference letters, and complete the Certification Application (Part Two).

You must also review, understand, and agree to uphold the Code of Ethics and Scope of Activities, which we recommend you read through before completing this application. Failure to uphold the Code of Ethics and Scope of Activities shall be grounds for suspending, denying or revoking certification. For more specific information on the Certification Process, please see the Certified Young Adult Peer Support Specialist Handbook.

The two key differences between the Certified Young Adult Peer Support Specialist and Certified Peer Recovery Specialist programs are the age distinction and length of recovery or healing.

Please note that pursuant to Tenn. Code Ann. § 10-7-503, all state records are considered open for public inspection, unless otherwise protected under the law. Accordingly, the State cannot and does not guarantee the confidentiality of this application, any notes, files, reports or other documents received by the State or in possession of the State in conjunction with this application. With this in mind, please only provide information in this application that you are comfortable sharing with the State, and, with the understanding, that any information contained in this application may be disclosed as required by law or as necessary for the CYAPSS program as determined by the State.

Name _____ Date _____

Address _____

City, State, ZIP _____

Phone (w/area code) _____

Personal Email (required) _____

1. Have you successfully completed Tennessee's Certified Young Adult Peer Support Specialist Training within the past year? *(If not, complete the CYAPSS Training Application before proceeding.)* YES NO
2. Have you disclosed to peers, staff, or the general public that you have lived experience with mental illness and/or substance abuse? YES NO
3. Have you enclosed three separate character reference forms? You need to have known each reference for at least three months. YES NO
4. Have you provided peer support services to individuals who have mental illness, substance abuse, for at least 75 hours (paid or volunteer)? YES NO
5. Have you provided peer support services under the supervision of an individual who meets the Supervision Requirements outlined in the CYAPSS Handbook? YES NO
6. Did your supervisor complete the Employment/Volunteer Summary form and enclose it with this application? YES NO
7. Was your position paid or volunteer? PAID VOLUNTEER
10. Have you upheld the Code of Ethics and Scope of Activities since your training? YES NO
11. Do you agree to uphold the Code of Ethics and Scope of Activities moving forward? YES NO

Briefly describe your **peer support** responsibilities/duties and how you use your lived experience in your work. *Attach more pages as needed for additional work or volunteer experience providing peer recovery services.*

Your Position _____ Start Date _____
Agency/Organization _____ End Date _____
Supervisor _____ Credentials _____
Supervisor's Phone _____

My signature below affirms that all of the information contained in this application is true and correct to the best of my knowledge and has been completed by no other person. I understand that knowingly providing false information shall be grounds to suspend, deny or revoke my certification.

Additionally, I understand that, pursuant to T.C.A. §10-7-503, all state records are considered open for public inspection, unless otherwise protected under the law. Accordingly, I understand that the State cannot and does not guarantee the confidentiality of this application or any notes, files, reports, or other documents received by the State or in possession of the State in conjunction with this application. With this in mind, I have only provided information I am comfortable sharing. Further, I understand that the information I have provided in this application may no longer be considered confidential and I waive any protection to this information and allow the State to use or disclose the information contained in this application as required by law or as necessary for the CYAPSS program as determined by the State.

Your signature _____ Date _____

Your printed name _____

Once complete, please scan and email the following five items to TDMHSAS at the address below. Please do not mail or fax any information.

1. CYAPSS Application for Certification
2. Employment Summary **OR** Volunteer Service Summary completed by supervisor
3. Letter of Character or Professional Reference (see form on website or Appendices of the CYAPSS Handbook)
4. Letter of Character or Professional Reference
5. Letter of Character or Professional Reference

Send to:

Youth and Young Adult Coordinator

Tennessee Department of Mental Health and Substance Abuse Services

Email: CYAPSS.TDMHSAS@tn.gov

Date Received _____	Date Approved _____	Notes _____
Initials _____	Initials _____	



Certified Young Adult Peer Support Specialist Letter of Character Reference

In order to be eligible for the Certified Young Adult Peer Support Specialist (CYAPSS) training, all applicants must meet the minimum requirements as stated in Section IV of the CYAPSS Handbook. The applicant named below is applying for certification as a Young Adult Peer Support Specialist with the State of Tennessee. You have been chosen by the applicant to provide a professional reference. If intending to complete a character reference, please complete the first half of this document, and if intending to complete a professional reference, please complete the last half. If you have any questions about how to complete this form, please contact the Youth and Young Adult Coordinator at CYAPSS.TDMHSAS@tn.gov.

Please note that pursuant to Tenn. Code Ann. § 10-7-503, all state records are considered open for public inspection, unless otherwise protected under the law. Accordingly, the State cannot and does not guarantee the confidentiality of this application, any notes, files, reports or other documents received by the State or in possession of the State in conjunction with this application. With this in mind, please only provide information in this application that you are comfortable sharing with the State, and, with the understanding, that any information contained in this application may be disclosed as required by law or as necessary for the CYAPSS program as determined by the State.

Applicant's name _____

Describe the nature of your professional relationship with the applicant and how long you have known them.

Describe the applicant's work (paid or volunteer) providing peer support services. For examples of peer support services, see the Scope of Activities in Section V of the CYAPSS Handbook.

Describe your knowledge of the applicant's strengths that will make the applicant a good candidate for becoming a Certified Young Adult Peer Support Specialist.

Provide any additional information pertinent to this applicant. Please feel free to attach any additional forms if desired.

Reference Contact Information

Name _____ Credentials _____

Title _____

Agency/Organization/Business _____

Address _____

City, State, ZIP _____

Phone (with area code) _____

Email _____

Additionally, I understand that, pursuant to T.C.A. §10-7-503, all state records are considered open for public inspection, unless otherwise protected under the law. Accordingly, I understand that the State cannot and does not guarantee the confidentiality of this application or any notes, files, reports, or other documents received by the State or in possession of the State in conjunction with this application. With this in mind, I have only provided information I am comfortable sharing. Further, I understand that the information I have provided in this application may no longer be considered confidential and I waive any protection to this information and allow the State to use or disclose the information contained in this application as required by law or as necessary for the CYAPSS program as determined by the State.

My signature below affirms that all of the information contained in this document is true.

Signature of Reference _____ Date _____

Date Received _____	Date Approved _____	Notes _____
Initials _____	Initials _____	



Certified Young Adult Peer Support Specialist

Letter of Professional Reference

In order to be eligible for the Certified Young Adult Peer Support Specialist (CYAPSS) training, all applicants must meet the minimum requirements as stated in Section IV of the CYAPSS Handbook. The applicant named below is applying for certification as a Young Adult Peer Support Specialist with the State of Tennessee. You have been chosen by the applicant to provide a professional reference. If intending to complete a character reference, please complete pages the first half of this document, and if intending to complete a professional reference, please complete the last half. If you have any questions about how to complete this form, please contact the Youth and Young Adult Coordinator at CYAPSS.TDMHSAS@tn.gov.

Please note that pursuant to Tenn. Code Ann. § 10-7-503, all state records are considered open for public inspection, unless otherwise protected under the law. Accordingly, the State cannot and does not guarantee the confidentiality of this application, any notes, files, reports or other documents received by the State or in possession of the State in conjunction with this application. With this in mind, please only provide information in this application that you are comfortable sharing with the State, and, with the understanding, that any information contained in this application may be disclosed as required by law or as necessary for the CYAPSS program as determined by the State.

Applicant's name _____

Describe the nature of your professional relationship with the applicant and how long you have known them.

Describe the applicant's work (paid or volunteer) providing peer support services. For examples of peer support services, see the Scope of Activities in Section V of the CYAPSS Handbook.

Describe your knowledge of the applicant's strengths that will make the applicant a good candidate for becoming a Certified Young Adult Peer Support Specialist.

Provide any additional information pertinent to this applicant. Please feel free to attach any additional forms if desired.

Reference Contact Information

Name _____ Credentials _____

Title _____

Agency/Organization/Business _____

Address _____

City, State, ZIP _____

Phone (with area code) _____

Email _____

Additionally, I understand that, pursuant to T.C.A. §10-7-503, all state records are considered open for public inspection, unless otherwise protected under the law. Accordingly, I understand that the State cannot and does not guarantee the confidentiality of this application or any notes, files, reports, or other documents received by the State or in possession of the State in conjunction with this application. With this in mind, I have only provided information I am comfortable sharing. Further, I understand that the information I have provided in this application may no longer be considered confidential and I waive any protection to this information and allow the State to use or disclose the information contained in this application as required by law or as necessary for the CYAPSS program as determined by the State.

My signature below affirms that all of the information contained in this document is true.

Signature of Reference _____ Date _____

Certified Young Adult Peer Support Specialist Employment / Volunteer Summary

The applicant named below is applying for certification as a Young Adult Peer Support Specialist with the State of Tennessee. For Young Adult Peer Support Specialists currently employed or in a volunteer position, the supervisor should complete the following form regarding the applicant's employment or volunteer position, peer support responsibilities, and supervisory plan. For questions, please contact the Office of Children, Young Adults, and Families at CYAPSS.TDMHSAS@tn.gov.

Please note that pursuant to Tenn. Code Ann. § 10-7-503, all state records are considered open for public inspection, unless otherwise protected under the law. Accordingly, the State cannot and does not guarantee the confidentiality of this application, any notes, files, reports or other documents received by the State or in possession of the State in conjunction with this application. With this in mind, please only provide information in this application that you are comfortable sharing with the State, and, with the understanding, that any information contained in this application may be disclosed as required by law or as necessary for the CYAPSS program as determined by the State.

Applicant's Name _____

Agency _____

Title of applicant's position _____

Does the applicant provide peer support services in this position? YES NO

Has the applicant provided a minimum of 75 hours of peer support services? YES NO

Start date of employment or volunteer position providing peer support services and number of hours assigned to work in this position per week _____

A Certified Young Adult Peer Support Specialist must be under appropriate supervision as defined by the State in Section IX of the Certified Young Adult Peer Support Specialist Handbook. Please provide the following information regarding who provides supervision.

Supervisor's Name _____ Credentials _____

Title _____

Agency/Organization _____

Address _____

City, State, ZIP _____

Phone (with area code) _____

Email _____

Describe the nature of the applicant's work or volunteer responsibilities providing **peer support services**. For examples of peer support services, see the Scope of Activities in Section V of the CYAPSS Handbook. *Note: it is a violation of the CYAPSS Code of Ethics for a CYAPSS to provide clinical treatment services.*

Describe in detail the nature of your one-on-one supervision interactions with this applicant:

Describe in detail the professional development plan or goals for the applicant within the agency/organization:

My signature below affirms that all of the information contained in this document is true.

Additionally, I understand that, pursuant to T.C.A. §10-7-503, all state records are considered open for public inspection, unless otherwise protected under the law. Accordingly, I understand that the State cannot and does not guarantee the confidentiality of this application or any notes, files, reports, or other documents received by the State or in possession of the State in conjunction with this application. With this in mind, I have only provided information I am comfortable sharing. Further, I understand that the information I have provided in this application may no longer be considered confidential and I waive any protection to this information and allow the State to use or disclose the information contained in this application as required by law or as necessary for the CYAPSS program as determined by the State.

Signature of Supervisor _____ Date _____

Date Received _____	Date Approved _____	Notes _____
Initials _____	Initials _____	_____



Certified Young Adult Peer Support Specialist Renewal Application

Renewal Applications are due at least fourteen (14) calendar days prior to the recertification deadline. Email the completed Renewal Application and accompanying continuing education certificates to cyapss.tdmhsas@tn.gov.

Requirements for the ten hours of continuing education needed for annual recertification can be found in Section VIII—Continuing Education Guidelines—in the CYAPSS Handbook. Also, all renewal applicants are screened against the Tennessee Sex Offender Registry and the Tennessee Abuse Registry prior to application approval. Applicants on the sex offender registry are handled on a case by case basis and can still be approved for certification in some situations.

Name _____ Renewal Application Date _____

Certification Number _____ Certification Expiration Date _____

Address _____

City, State, ZIP _____

Phone (with area code) _____

Personal Email (required) _____

CYAPSS Code of Ethics and Scope of Activities — By affixing my signature below, I certify that I have not violated the CYAPSS Code of Ethics and Scope of Activities within the last annual certification period.

My signature below affirms that all of the information contained in this application is true and correct to the best of my knowledge and has been completed by no other person. I understand that knowingly providing false information shall be grounds to deny my certification.

CYAPSS Signature _____ Date _____

CYAPSS printed name _____

Employment/Volunteer Service Summary for Renewal Application

This section is to be completed by the supervisor. All Certified Young Adult Peer Support Specialists must be under appropriate supervision as defined by the State in Section IX of the Certified Young Adult Peer Support Specialist Handbook.

Supervisor _____ Credentials _____

Title _____

Agency/Organization _____

Address _____

City, State, ZIP _____

Phone (with area code) _____

Email _____

CYAPSS's position within the agency _____

Has the CYAPSS provided a minimum of 25 hours of peer support services in the past year? YES NO

Has the CYAPSS received supervision as defined by the State? YES NO

Has the CYAPSS supervisor completed supervision training on how to support the role of the CYAPSS? YES NO

CYAPSS Code of Ethics and Scope of Activities — By affixing my signature below, I certify that the applicant has not violated the CYAPSS Code of Ethics and Scope of Activities within the last annual certification period.

My signature below also affirms that all of the information contained in this document is true.

Signature of Supervisor _____ Date _____

Once complete, scan and email your entire renewal application, including certificates of completion or proof of attendance for the trainings, to the address below. If you have any questions on how to complete this form, please contact the Youth and Young Adult Coordinator.

Youth and Young Adult Coordinator
Tennessee Department of Mental Health and Substance Abuse Services
Email: cypss.tdmhsas@tn.gov