California	WEC Recommendation Letter Re: BHIN – Peer Supervisor Trainings
Behavioral Health Planning	April 8, 2022
Council CHAIRPERSON Noel J. O'Neil, LMFT EXECUTIVE OFFICER	DHCS Medi-Cal Behavioral Health Division California Department of Health Care Services 1501 Capitol Avenue Sacramento, CA 95814
Jane Adcock	To whom it may concern:
 Advocacy Evaluation Inclusion 	The California Behavioral Health Planning Council thanks you for the opportunity to comment on the draft Behavioral Health Information Notice (BHIN) for Peer Support Specialist supervisor trainings. Pursuant to state law, the Council serves as an advisory body to the Legislature and Administration on the policies and priorities that this state should be pursuing in developing its behavioral health system. Our membership includes persons with lived experience as consumers and family members, professionals, providers, and representatives from state departments whose populations touch the behavioral health system.
	The Council's Workforce and Employment Committee (WEC) supports the certification of Peer Support Specialists to be Medi-Cal billable providers as these individuals are an invaluable resource to beneficiaries in the public behavioral health system. The committee appreciates having an opportunity to review this information notice and are providing input and recommendations that we believe will strengthen the policies contained in the BHIN to ensure consumers of the public behavioral health system are able to access and receive high-quality services to lead full and purposeful lives. These recommendations encompass providing culturally appropriate and responsive care with respect to all populations including but not limited to, immigrant and refugees, children and families, LGBTQI2S and various cultural and ethnic populations.
	Provided below are the committee's recommendations for the proposed BHIN regarding peer supervisor trainings:
MS 2706 PO Box 997413 Sacramento, CA 95899-7413 916.701.8211 Fax 916.319.8030	Recommendation #1: Standardize Peer Supervisor Trainings The WEC acknowledges that DHCS finds that the state does not have the authority to set requirements for a Peer Supervisor and that supervision is a Human Resources function. The committee also acknowledges that there are existing supervisor training programs in counties that are robust and the state does not want to reduce these trainings to one standard training. The WEC sees value in the establishment of a minimum set of core competencies for all Peer Supervisor trainings as a means to promote consistency and quality similar to the certification training. This will allow for programs to go beyond the minimum requirements while ensuring consistency across the state. Additionally, we invite DHCS to explore establishing discrete expectations for Peer Supervisors who do not have lived experience as peers such as requiring them to partake in a peer

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training course where the Peer Supervisor would "audit" the course to gain knowledge on what the employee is trained to do.

Recommendation #2: Increase the Number of Peer Supervisors

With respect and acknowledgement to the fact that the number of experienced and qualified peers will vary between counties and that DHCS would like to offer the greatest amount of flexibility to fill these roles, the WEC recommends that each county program seeks to eventually achieve a level of not less than 50% of the supervisory positions go to peers with lived experience who have been promoted based on their work record and success as Peer Support Specialists. We invite DHCS to strongly encourage counties to establish a career ladder for the promotion of Peer Support Specialists who demonstrate ability to go into supervisor roles. Additionally, the WEC recommends that data be collected to monitor how these career ladders are functioning across the state. This would help support Peer Support Specialists to have an established career ladder and opportunities to become Peer Supervisors.

Recommendation #3: Qualifications - Peer Supervisor Experience

The WEC has concerns about the minimum time an individual would work to qualify as a Peer Supervisor. We encourage DHCS to explore increasing the minimum time of working in the public behavioral health system before an individual may qualify as a Peer Supervisor.

We hope that the recommendations put forth in this letter are taken into consideration as the Department of Health Care Services finalizes the BHIN for Peer Support Specialist supervisor trainings. We appreciate the opportunity to submit comments, and ask to be included in conversations hosted on this topic. If you have any questions, please contact Jane Adcock, Executive Officer, at Jane.Adcock@cbhpc.dhcs.ca.gov.

cc: Kelly Pfeifer, M.D., Deputy Director, Behavioral Health California Department of Health Care Services

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