

AHCCCS MEDICAL POLICY MANUAL

CHAPTER 900 – QUALITY MANAGEMENT AND PERFORMANCE IMPROVEMENT PROGRAM

964 - CREDENTIALED PARENT PEER/FAMILY SUPPORT REQUIREMENTS

EFFECTIVE DATES: 07/01/16, 10/01/18, 10/01/19, 10/01/20, 10/01/22

APPROVAL DATES: 06/13/18, 09/05/19, 06/23/20, 05/24/22

I. PURPOSE

This Policy applies to ACC, ACC-RBHA, ALTCS E/PD, DCS/CHP (CHP), and DES/DDD (DDD) Contractors as well as Fee-For-Service (FFS) Providers serving: the American Indian Health Program (AIHP), Tribal ALTCS, TRBHA, and all FFS populations, excluding Federal Emergency Services (FES). For FES, refer to AMPM Chapter 1100. This Policy establishes requirements for training and credentialing standards for individuals seeking employment as a Credentialed Parent Peer/Family Support Partner (CPFSP) in the AHCCCS programs. Services outlined in this Policy are monitored by AHCCCS/Division of Community Advocacy and Intergovernmental Relations (DCAIR), Office of Individual and Family Affairs (OIFA).

II. DEFINITIONS

For purposes of this Policy:

CREDENTIALED PARENT PEER/FAMILY SUPPORT PARTNER (CPPFSP) An individual who is qualified under this policy and has passed an AHCCCS/DCAIR, OIFA approved CPPFSP Training Program to deliver Credentialed Family Support Services.

CREDENTIALED PARENT
PEER/FAMILY SUPPORT
PARTNER
(CPPFSP) TRAINING
PROGRAM

AHCCCS/DCAIR, OIFA approved credentialing program in compliance with competencies and requirements as specified in this Policy.

CREDENTIALED TRAINER

An individual who identifies as having lived experience as specified in this Policy and provides training to individuals seeking employment as a Certified Parent Peer/Family Support Partner (CPPFSP).

FAMILY MEMBER (ADULT SYSTEM)

An individual who has lived experience as a primary natural support for an adult with emotional, behavioral health and/or substance use disorders.

FAMILY MEMBER (CHILDREN'S SYSTEM)

A parent or primary caregiver with lived experience who has raised or is currently raising a child with emotional, behavioral health and/or substance use disorders.

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PARENT PEER/FAMILY SUPPORT SERVICES

Home care training (family support) with family member(s) directed toward restoration, enhancement, or maintenance of the family functions in order to increase the family's ability to effectively interact and care for the individual in the home and community.

Additional definitions are located on the AHCCCS website at: AHCCCS Contract and Policy Dictionary.

III. POLICY

A. OVERVIEW

AHCCCS/DCAIR, OIFA recognizes the importance of the peer-to-peer relationship of family members is a viable component in the delivery of integrated services and shall expect Contractors and FFS providers support for these roles. The Contractors and FFS providers shall ensure the provisions of quality Parent Peer/Family services in support of integrated care in the AHCCCS Children System of Care (CSOC) and Adult System of Care (ASOC). Credentialing as specified in this Policy is required for reimbursement of Credentialed Parent Peer/Family Support services.

The Contractors and FFS providers shall ensure all Family Support Services (FSS) provided by a Credentialed Parent Peer/Family Support Partner (CPPFSP) are indicated as credentialed family support services in documentation.

- 1. The peer-to-peer support relationship is available to primary care-givers of Medicaid-eligible children and natural supports of Medicaid-eligible Adults and, as:
 - a. A parent or primary caregiver with lived experience who has raised or is currently raising a child with emotional, behavioral health, and/or Substance Use Disorders (SUD), or
 - b. An individual who has lived experience as a primary natural support for an adult with emotional, behavioral health, and/or SUD.
- 2. AHCCCS/DCAIR, OIFA has established training requirements and credentialing standards for providing Credentialed Parent Peer/Family Support services within the AHCCCS programs.
- 3. Parent Peer/Family Support Services are defined and not limited to:
 - a. Assisting the family to adjust to the individual's needs,
 - b. Developing skills to effectively interact, and/or
 - c. Guide the individual's:
 - i. Understanding of the causes and treatment of behavioral health challenges,
 - ii. Understanding and effective utilization of the system, or
 - iii. Planning for ongoing and future supports for the individual and the family.

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B. CREDENTIALED PARENT PEER/FAMILY SUPPORT PARTNER AND TRAINER QUALIFICATIONS

All individuals employed as a CPPFSP or as a Trainer in the Children System or Adult System shall meet the definition of a family member. To be eligible to train individuals as CPPFSP you must have lived experience as an adult who is the primary supporter of a child or the primary supporter of an adult who has experience navigating the adult and or child systems of care.

C. CREDENTIALED PARENT PEER/FAMILY SUPPORT PARTNER TRAINING PROGRAM APPROVAL PROCESS

- A CPPFSP Training Program shall submit its program curriculum, competency exam, and exam-scoring methodology (including an explanation of accommodations or alternative formats of program materials available to individuals who have special needs) to AHCCCS/DCAIR, OIFA, at OIFA@azahcccs.gov. AHCCCS/DCAIR, OIFA shall issue feedback or approval of the curriculum, competency exam, and exam-scoring methodology as specified in this Policy.
- 2. A CPPFSP Training Curriculum shall not be combined with any other training and shall be recognized as a stand-alone program. A CPPFSP Curriculum shall be specific to the delivery of Parent/Family Support Services.
- 3. If a program makes substantial changes (e.g. change to content, classroom time) to its curriculum or if there is an addition to required elements, the program shall submit the updated content to AHCCCS/DCAIR, OIFA, at OIFA@azahcccs.gov for review and approval before the changed or updated curriculum is to be utilized.
- 4. Approval of the curriculum, competency exam, and exam-scoring methodology is based on the elements required in this Policy. If a CPPFSP Training Program requires regional or culturally specific training exclusive to a Geographical Service Area, (GSA) or specific population, the specific training cannot prevent employment or transfer of Parent/Family Support credentials based on the additional elements or standards.
- 5. A Training program operator shall ensure that the curriculum is maintained and as substantial changes in the Integrated System of Care (ISOC) occur the curriculum is revised. The program shall submit the updated content to AHCCCS/DCAIR, OIFA, at OIFA@azahcccs.gov for review and approval before the changed or updated curriculum is to be utilized.

D. COMPETENCY EXAM

Individuals seeking employment as a CPPFSP shall complete and pass a competency exam with a minimum score of 80 percent upon completion of required training. Each CPFSP Training Program has the authority to develop a unique competency exam. However, all exams shall include questions related to each of the curriculum core elements as specified in this Policy. Agencies employing CPPFSP who are providing Parent Peer/Family Support Services are required to ensure that its employees are competently trained to work with the populations served.

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Upon completion of each class, all AHCCCS registered providers operating a CPPFSP program shall utilize Attachment B to submit the names of trainees and dates of graduation to AHCCCS/DCAIR, OIFA, via email at oifa@azahcccs.gov. These reports shall contain no other information apart from what is required.

E. CREDENTIALED PARENT PEER/FAMILY SUPPORT PARTNER EMPLOYMENT TRAINING CURRICULUM STANDARDS

- 1. A CPPFSP Training Program curriculum shall include the following core elements:
 - a. Arizona Vision,
 - b. Twelve Principles for Children Behavioral Health Service Delivery,
 - c. Communication Techniques:
 - i. Individuals first, strengths-based language, using respectful communication, demonstrating care and commitment,
 - ii. Active listening skills, by having the ability to demonstrate empathy, provide empathetic responses and differentiate between sympathy and empathy, listening non-judgmentally, and
 - iii. Use of self-disclosure effectively, sharing one's story when appropriate.
 - d. System History Overview and history of the Arizona Behavioral Health System,
 - e. System Transformation as a result of the Jason K. Lawsuit, Jacob's Law, Jake's Law
 - f. Children's System of Care (CSOC) Vision and Guiding Principles for Child and Family Team (CFT),
 - g. CSOC Levels of Care, Covered Services, referrals
 - h. DES/DDD, DCS/CHP,
 - i. Adult System of Care Nine Guiding Principles for Recovery-Oriented Adult Behavioral Health Services and Systems and Adult Recovery Team (ART),
 - j. Arnold v. Sarn,
 - k. Office of Human Rights and Special Assistance (OHR)
 - I. Office of Individual and Family Affairs
 - m. Family and peer movements and the role of advocacy in systems transformation,
 - n. Introduction to the Americans with Disabilities Act (ADA) and funding sources for behavioral health systems,
 - o. Rights of the caregivers and individual,
 - p. Transition Aged Youth
 - i. Guardianship, and
 - ii. Timelines of transition to adulthood into the ASOC, role changes when bridging the ASOC and CSOC at transition for an individual, family, and team.
 - q. Building Collaborative Partnerships and Relationships:
 - i. Engagement, identification and utilization of strengths,
 - ii. Utilization and modeling of conflict resolution skills, and problem solving skills,
 - iii. Understanding of:
 - 1) Individual and family culture, biases, stigma, and systems' cultures, and
 - 2) Trauma informed care approaches,
 - iv. Identification, building, and connecting individuals and families, including families of choice, to community and natural/informal supports.
 - r. Empowerment:

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- i. Empowerment of family members and other supports to identify their needs, and promote self-reliance, and
- ii. Identification and understanding of stages of change, and unmet needs.

s. Wellness:

- i. Understanding of:
 - 1) The stages of grief and loss,
 - 2) Self-care and stress management,
 - 3) Compassion, fatigue and burnout,
 - 4) Resiliency and recovery, and
 - 5) Healthy personal and professional boundaries.
- CPPFSP Training Programs shall not duplicate training required of individuals for employment with a licensed agency or Community Service Agency, (CSA). Training elements in this Policy are specific to the CPPFSP role in the AHCCCS Programs and instructional for CPPFSP interactions.
- 3. Contractors shall develop and make available policies and procedures as well as additional resources for development of curriculum, including Contractor staff contacts for questions or assistance.

F. SUPERVISION OF CREDENTIALED PARENT PEER/FAMILY SUPPORT PARTNER

Contractors shall establish amount and duration of supervision of CPPFSP and follow the requirements outlined below:

- Agencies employing CPPFSP shall provide supervision by individuals qualified as BHT or BHP. Supervision shall be appropriate to the services being delivered and the qualifications of the CPPFSP as a BHT, BHP, or BHPP. Supervision shall be documented and inclusive of both clinical and administrative supervision.
- 2. Individuals providing supervision shall receive training and guidance to ensure current knowledge of best practices in providing supervision to CPPFSP.
- 3. Contractors shall develop and make available to the providers policies, and procedures regarding resources available to agencies for establishing supervision requirements and any expectations for agencies regarding Contractor monitoring/oversight activities for this requirement.

G. PROCESS OF SUBMITTING EVIDENCE OF CREDENTIALING

- 1. Contractors shall ensure provider agencies maintain documentation of required qualifications and credentialing for CPPFSP.
- Contractors shall develop and make available to providers policies and procedures that describe monitoring and auditing/oversight activities and where records specific to supervision and training of CPPFSP are reviewed and maintained.



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3. Contractors shall submit information noting Credentialed Parent Peer/Family Support Specialist Involvement in service delivery as specified in Contract and utilizing Attachment A.

H. CONTINUING EDUCATION AND ONGOING LEARNING REQUIREMENTS

Ongoing training requirements of current best practices, similar to other practitioners, shall be established for individuals employed as CPPFSP to obtain continuing education and ongoing learning relevant to family support.

The Contractor shall develop and make available to providers' policies and procedures describing requirements for individuals employed as CPPFSP to obtain a minimum of 16 hours of continuing education and ongoing learning relevant to family support, per year. At least one hour shall cover ethics and boundaries related to the practice of family support.