

The Regional Facilitation Center

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Substance Use Disorder Forensic Peer 10 Best Practices Curriculum

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Introduction to Curriculum

Forensic Peer Services are a subspecialty of substance use disorder peer services. This best practice analysis is specifically designed for training purposes. Competencies with specific KSA's (Knowledge, Skills, and Attitudes) are described in checkboxes for classroom participant self-assessment.

Classroom Directions

This text is designed for in-class training.

- 1. Review and discuss a best practice.
- Ask each participant to complete the self-assessment checklist. The selfassessment checkbox can also be used as an "agency self-assessment" checkbox.
- In groups, have participants discuss their strengths and any areas that may need improvement based on their self-assessment.
- Facilitate a class discussion around the insights gained by individuals through self-assessment and group discussions.
- 5. Move on to the next best practice and repeat the process.

Methodology

- Stage One: Systematic Review of the Literature. We identified 28 documents, manuals, credentialing standards, curriculum outlines and PowerPoints specific to Forensic Peer Mentors. We identified ten common practices which were then ranked by frequency of identification within the literature. (See bibliography)
- Stage Two: DACUM (Developing Curriculum) Subject Matter Experts (SME). The SME were assembled from experienced forensic peer mentors, all of whom have had experience within the criminal justice system and are in long-term recovery from a substance use disorder. The workgroup analyzed the systematic review and generated best practices. They then edited language and developed an organizational storyboard to define attributes of the best practice and task descriptions.
- 3. Stage Three: Quantitative Peer & Supervisor Likert Validation Surveys. The SME developed survey questions for forensic peer mentors regarding the best practices. 26 employed forensic peer mentors completed the Likert survey and feedback portion of the validation survey which resulted in subsequent edits to competencies/task based on results (mean, median, variance, confidence intervals and standard deviation). Best Practice statements with the lowest reliability were referred to the SME group for editing. (Appendix #1)
- 4. Stage Four: Qualitative Managerial & Administrative Validation. A draft document was distributed to administrators with peer/recovery experience for validation through managerial and administrative review, with subsequent edits to best practices based on results.
- Stage Five: DACUM Curriculum. Final edits to the Forensic Peer Best Practices were produced by the SME and the curriculum selfassessment grids were edited for training and self-evaluation.

Systematic Literature Review and DACUM Workgroup

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Substance Use Disorder Forensic Peer 10 Best Practices Curriculum

The Regional Facilitation Center

Best Practice One: Supporting Positive Engagement in the Criminal Justice System

Best Practice Two: Advocate for Individuals while Supporting Compliance

Best Practice Three: Barriers to Housing

Best Practice Four: Barriers to Employment

Best Practice Five: Eliciting Individual Needs & Goals

Best Practice Six: *Inspiring Hope and Change*

Best Practice Seven: Person-Centered Trauma-Informed

Best Practice Eight: Adhere to Professional, Ethical and Legal Guidelines

Best Practice Nine: Assist Individuals in Discovery of Healthy Lifestyle Choices

Best Practice Ten: SUD Forensic Peer Mentor Qualifications

Introduction

As of 2016, there were 2.3 million individuals incarcerated in jails and prisons in the United States, and another 4.7 million were on probation, post-prison release or parole. It has been estimated that nearly 80% of adjudicated offenders have substance use disorders and a 2010 CASA report, Shoveling Up II: The Impact of Substance Abuse on Federal, State and Local Budgets, found that 65% meet the criteria for substance abuse or dependence. The report also found that alcohol and/or drugs were involved in 78% of violent crimes, and 83% of property crimes.

Substance dependent inmates are more likely:

- to have a history of physical abuse compared to other inmates (17.6% vs. 9.8%).
- to have a history of sexual abuse (9.0% vs. 5.2%).
- to have a history of receiving public assistance (40.8% vs. 33.2%).
- To have grown up in foster care (13.9% vs. 6.6%).
- to have a history parental substance abuse (36.8% vs. 17.4%).
- to have an incarcerated family member (50.3% vs. 37.9%).
- to have previous criminal justice involvement (57.5% vs. 43.7%).
- to have a prior sentence (69.5% vs. 46.0%).
- to have been under the influence at the time of their offense.

Clearly substance dependent inmates have unique histories and needs compared to other inmates, yet very little has been written regarding Substance Use Disorder Forensic Peer Mentors. Most funded and researched Forensic Peer activity has focused on psychiatric populations, including the Sequential Intercept Model. Moreover, United States and European literature is replete with re-entry best practice designs involving the use of volunteer peer mentors who are not in recovery from addiction and/or criminality themselves. This curriculum is designed to address the specific Best Practices associated with Substance Use Disorder Forensic Peer & re-entry programs who are in recovery from addiction, adjudication, and criminogenic thinking/lifestyles.

This curriculum represents best practices derived from a review of the existing literature, supporting research and the experience of 36 Forensic Peer Mentors, Supervisors and Administrators. All the SME participants, including the lead DACUM facilitators are individuals in recovery from addiction who have experienced incarceration.

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☑ Best Practice One: Supporting Positive Engagement in the Criminal Justice System

Forensic Peer Mentors support positive engagement in the criminal justice system, but do not *enforce* compliance. Forensic Peer Mentors provide aid, support, and motivation for meeting required mandates attached to any processes in the entire continuum of criminal justice involvement. Forensic Peer Mentors are involved during first responder crisis, detention, arraignment, jail, court dates, sentencing, and supervision encounters in order to minimize continuing criminal sanctions as individuals progress in recovery and meet criminal justice obligations. Peer mentors are not agents of the criminal justice system, and do not act as "compliance officers," or "junior probation officers."

Ps	elf-Assessment	Checklist
	7.00000	
	entire continuu probation, post	assist, support, advocate, and motivate individuals through the im of criminal justice involvement from arrest and detention, e-prison or parole, and re-entry. In psychiatric peer services, this is erred to as the Sequential Intercept Model (SIM).
	implement pee continuum. Foi collateral conse	are familiar with the entire criminal justice continuum and r activities based on individual needs at varied points within the rensic Peers understand the basics of detention, sentencing, equences, as well as the differences between Federal and State e-prison supervision and parole, military systems, and the Justice Native Nations.
	Continuum of	Forensic Peer Interventions
	Arrest	Forensic Peers offer services in conjunction with first responders in programs like LEAD (Law Enforcement Assisted Diversion) and behavioral health first responders working with police. Services may include motivation, support and transportation to withdrawal management services, or referral to addiction treatment and community recovery support groups.
	Detention Arraignment	Forensic Peers provide in-jail services motivating and supporting inmates in addiction recovery. Forenisc Peers support and advocate for individuals who are experiencing physical and psychological impairments related to intoxication and withdrawal. Forensic Peers provide overdose risk education, especially for those addicted to opioids that experience a decline in tolerance while incarcerated. Forensic Peers support individuals in pre-release planning, goal setting, and maintaining compliance with conditions of release. Forensic Peers assist individuals in locating and engaging with treatment services upon release, which could include

	Medication Assisted Treatment (MAT), for those dependent on
	opioids.
Court	Forensic Peers offer support through hearings and sentencing,
	that may include advocacy for alternative sentencing and
	treatment, reminders regarding court appearances,
	transportation, and other supports.
Prison	Forensic Peers offer inmates in-reach services, motivation,
	support, and orientation to outside support systems available
	upon release. Forensic Peers may also participate in transition
	planning with individuals prior to release.
Supervision	Forensic Peers provide support and resources that help
	individuals meet the conditions of probation, post-prison
	release, or parole. These include support for finding and
	maintaining employment, higher education, resources for
	maintaining sobriety, developing pro-social activities, and
	support for avoiding any behaviors that may lead to probation
	and/or parole violation. Forensic Peers help individuals
	develop positive and supportive relationships that do not
	include use of alcohol or drugs and/or participation in criminal
	activity. Forensic Peers are aware of the rights and
	responsibilities of individuals on supervision through State or
	Federal probation, post-prison or parole, and help individuals
	advocate for their own fair treatment. Forensic peers
	understand release/probation/parole restrictions, including
	third party restraining orders.
Forensic Peers	help individuals become empowered to negotiate and minimize
	ons as they progress in recovery.
Forensic Peers	address child welfare issues and processes by advocating and
supporting fam	ily reunification.
Forensic Peers	advocate for peer support and treatment interventions in the
entire continuu	im of criminal justice involvement and educate the system, society,
	es regarding the cost-benefits of these interventions over
traditional crim	inal justice models.

☑ Best Practice Two: Advocate for Individuals while Supporting Compliance

Forensic Peer Mentors act as advocates for clients at the individual and systems levels. Forensic Peer Mentors support clients in being cognizant of their rights and responsibilities. They advocate for their clients within the standards of compliance by being willing to consult with probation/parole and other mandated programs. Forensic Peer Mentors model appropriate advocacy within the system.

Self-Assessment Checklist	
	Forensic Peers advocate for individuals in a variety of settings including
	detention, court, parole/probation, specialty courts, child welfare proceedings, and other justice related programs.
	Forensic Peers understand that advocacy efforts are dynamic in nature and are
	determined on an individual basis by client need.
	Forensic Peers should always use a strengths-based approach when advocating
	on behalf of an individual.
	Forensic Peers understand that they can be advocates regardless of level of
	engagement or compliance, and should not abandon any individual due to non-
	compliance or perceived low motivation for change.
	Forensic Peers facilitate self-empowerment of individuals by encouraging
	participation at the local and legislative levels in efforts to increase the rights of
	persons with criminal histories. Forensic Peers understand the transformative
	power of "finding your voice" and advocating in safe non-threatening ways.
	Forensic Peers educate stakeholders regarding the value of Forensic Peers.

☑ Best Practice Three: Barriers to Housing

Re-entry is a critical point in an individual's recovery process. Research reveals that forensic peer services that support re-entry have a dramatic impact in reducing recidivism. Obtaining housing is a crucial re-entry service and is oftentimes foremost in an individual's thoughts versus building a "relationship" with their peer mentor. Individuals in recovery from substance use disorders despite years of abstinence often have ongoing difficulty renting apartments or homes because of their criminal histories. Forensic Peer Mentors consider multiple issues when assisting individuals with housing options, including: disqualifying criteria, cultural considerations, safety, relapse environment, type of offense, level of risk, stage of change, and history of recidivism. Much like an individual's credit history report, a person's criminal history may sometimes contain inaccurate or misleading information. Forensic Peer Mentors assist individuals in advocating for the correction of inaccurate entries and working with individuals to explain misleading charges or convictions.

PS	Self-Assessment Checklist	
	Forensic Peers understand the imperative of an individual's desire for housing and do not mistake this imperative as entitlement or malingering for resources. Forensic Peers understand that housing weighs heavy on individuals re-entering society and do not attempt to make the "peer relationship" the primary goal of individuals receiving initial services. Forensic Peers are acutely aware of barriers individuals face, such as individuals experiencing homelessness who have difficulty charging their phone and receiving phone calls from potential housing resources regarding openings.	

Forensic Peers are knowledgeable regarding civil rights, fair housing laws, and legal protections for individuals with criminal histories and empower individuals to advocate for themselves. Forensic Peers are able to provide individuals with State and Federal Housing Rights, including rights of individuals participating in MAT, federally assisted housing eligibility, and the procedures for filing
discrimination and other housing complaints within your state. Forensic Peers do not offer legal opinions, rather they collect information and make appropriate referrals and assist individuals in self-advocacy.
Forensic Peers working within recovery housing organizations inform individuals of their rights and help them maintain legal compliance, including but not limited to housing protections for those participating in MAT.
Forensic Peers seek to be informed about housing availability, programs that assist with deposits and move-in fees, property-specific restrictions, rental guidelines, and requirements. Forensic Peers seek to be informed about city, county, and state re-entry programs that provide transitional housing.
Forensic Peers are informed about available programs such as Rent Well for addressing negative rental and credit histories and other barriers that may prevent individuals from securing stable housing. Forensic Peers assist individuals in correcting inaccuracies in their criminal history and credit history reports, understand how to find reliable sources to run credit reports, and can direct individuals to methods for challenging and/or removing unfavorable entries.
Forensic Peers assist individuals in their application for a Certificate of Rehabilitation, if available in your state.
Forensic Peers understand that private home owners are more likely to accept a weighted application, letters of recommendation, certificates of rehabilitation, and explanations of prior history or current status than property management companies.
Forensic Peers assist individuals in developing a narrative to explain their history to help overcome charges and convictions that are sometimes misleading regarding an individual's history.
Forensic Peers also support individuals in assessing the safety of various housing options and discuss the relapse potential associated with various environments.
Forensic Peers advocate for housing for those with disqualifying crimes, and educate systems and communities regarding the cost-benefits of clean and sober housing as well as Forensic Peer services. Forensic Peers are also aware of predatory background check scams that exploit offenders seeking housing.

oxdot Best Practice Four: Barriers to Employment

Research shows that employment is another critical factor in reducing both recidivism and substance use. Forensic Peer Mentors consider multiple barriers and challenges when helping an individual prepare for employment.

Ps	Self-Assessment Checklist		
	Forensic Peers understand the imperative of an individual's desire for		
	employment. Forensic Peers understand the importance of employment for		
	those re-entering society.		
	Forensic Peers address employment challenges that include the development of		
	job readiness skills and access to professional interview attire.		
	Forensic Peers are knowledgeable about locating re-entry friendly employers and		
	job opportunities.		
	Forensic Peers instruct individuals on how to gather supportive documents such		
	as letters of recommendation (including recommendations from previous		
	employers, judges or probation/parole officers, volunteer supervisors),		
	certificates of rehabilitation, and lost/misplaced vocational education records, to		
	help reinforce their reported job skills and commitment to work.		
	Forensic Peers facilitate the job application process by assisting with: filling out		
	job applications, writing resumes, and creating cover letters that present the		
	individual's current situation in a positive and comprehensible format.		
	Forensic Peers know how to research opportunities for restoring warrants to the		
	court calendar, vacating warrants, correcting erroneous criminal history records,		
	and applying for expungement or felony reduction at the state and county level.		
	Forensic Peers have a basic knowledge of BOLI protections, MAT and addiction		
	treatment rights, reasonable accommodations, local minimum wage, workers'		
	rights, and the difference between 1099 and W-2 employment contracts.		

oxdot Best Practice Five: Eliciting Individual Needs & Goals

Forensic Peer Mentors help individuals assess their own needs and provide them with referrals to appropriate community resources. While Forensic Peer Mentors support individuals in finding their own pathways to recovery, they are also sensitive to the directive nature of the criminal justice system, the child welfare system, including the Adoptions and Safe Family's Act (ASFA), family court.

PS	∂ Self-Assessment Checklist	
	Forensic Peers create an environment where individuals feel safe acknowledging	
	areas where they may need improvement. Forensic Peers explain the limits of	
	confidentiality and create trust and safety through adherence to confidentiality.	
	Forensic Peers assist individuals to identify their experience, personal	
	characteristics, strengths, and skills necessary to develop success in their personal	
	lives and in the workplace.	
	Forensic Peers help individuals clarify goals and develop strategies to avoid	
	recidivism.	
	Forensic Peers encourage broad and ambitious thinking about future goals and	
	achievements.	

Forensic Peers understand how to access legal means of expunging criminal and
traffic convictions, lowering or removing court fines, and reducing felony
convictions that may be barriers to re-entry. In addition, they can direct an
individual to programs that support these processes.
Forensic Peers assist individuals with acquiring medical Insurance, dental
insurance, or care.
Forensic Peers utilize needs assessment tools or basic needs questionnaires to
discover an individuals area of need and direct individuals to the appropriate
services and community resources.
Forensic Peers are familiar with local child welfare procedures to assist and
support the family reunification process. Forensic Peers understand the
Adoptions and Safe Family's Act (ASFA) time limitations, and family court
mandates.

☑ Best Practice Six: Inspiring Hope and Change

Forensic Peer Mentors act as credible role models to individuals transitioning from criminal activity to pro-social behaviors. Forensic Peer Mentors inspire hope and the possibility of positive change through appropriate self-disclosure of their own histories, by consistently modeling recovery behaviors, and being a continual role model in recovery from addiction and crime.

Øs	Self-Assessment Checklist	
	Forensic Peers treat all participants equally and strive to connect consistently with individuals.	
	Forensic Peers inspire hope through shared life experiences. Forensic Peer	
	Mentors understand the meaning of the statement "I am the evidence that recovery is possible".	
	Forensic Peers understand the fears associated with re-integration and help resolve those fears through shared lived experience.	
	Forensic Peers act as role models of recovery including the sharing of changed beliefs. Forensic Peers do not implement cognitive therapies. Rather, they share their own changed beliefs, "I used to think the world owed me a living and that if people left their windows and doors unlocked they deserved to be ripped off. Today, I don't think that way." Forensic peers do not confront criminogenic thinking, rather they act as a testament to changes in thinking.	
	Forensic Peers are responsible for fulfilling the role of a trusted and supportive guide for each participating individual.	
	Forensic Peers participate in ongoing training and supervision to assure that sharing is appropriate and will benefit the individual. Forensic peers instill hope, and do not use their stories to instill fear in individuals or to express "preachy cautionary tales". Likewise, Forensic Peers are mindful of the possibility of retraumatization from stories containing violence and/or abuse. Forensic Peers exercise discernment on a case by case basis when deciding which stories to share and which may be triggering.	

☑ Best Practice Seven: Person-Centered Trauma-Informed

Forensic Peer Mentors have sufficient knowledge of the relationship between incarceration and trauma to offer trauma-informed Peer Mentor Services. Additionally, Forensic Peer Mentors are aware of trauma arising from individuals' criminal justice experiences, including but not limited to: disparate sentencing, incarceration, threats, intimidation, and stigmatizing labels within incarceration and criminal justice environments. Forensic Peer Mentors understand the historical and contemporary trauma, marginalization, and oppression of diverse populations, including: cultural and ethnic minorities, LGBTQ individuals, those with mental health challenges and addictions, those with physical and developmental disabilities, and veterans.

$\mathscr{O}S$	Self-Assessment Checklist	
	Forensic Peers understand that a trauma-informed model can decrease re-	
	traumatization and may help individuals reduce personal risk and recidivism.	
	Forensic Peers are aware of disparity issues and subsequent inequities within the	
	criminal justice system. They utilize local data regarding disparity in sentencing,	
	length of incarceration, and access to diversion programs. Forensic Peers validate	
	the individual's trauma related to incarceration, supervision, and re-entry that	
	may include separation from family and loved ones, lack of access to mental	
	health, addictions, and physical health care and acts of violence against inmates	
	by both staff and other inmates.	
	Forensic Peers understand the stigma, discrimination, and exploitation individuals	
	face within the criminal justice system, including cultural/ethnic minorities,	
	LGBTQ individuals, those with mental health challenges, those with substance use	
	disorders and/or gambling disorders, and those with physical disabilities.	
	Forensic Peers understand the stigma, discrimination, and exploitation individuals	
	face within society as a result of their criminal justice involvement.	
	Forensic Peers address inequity within the agency and the broader criminal	
	justice system through participation in professional meetings and forums.	
	Forensic Peers have an attitude of cultural humility, being mindful of different	
	cultural norms as they are revealed by individuals.	
	Forensic Peer Mentors practice self-care, to benefit themselves and provide a	
	model for balanced approaches to progress in recovery. Forensic Peer Mentors	
	conduct an ongoing assessment of their own needs and seek the supervision and	
	guidance of other experienced mentors to avoid vicarious trauma and burnout.	
	Forensic Peers can communicate in language and lingo common within	
	correctional institutions, while simultaneously avoiding slang/lingo that is	
	derogatory towards criminal justice staff or others, including other	
	races/ethnicities, those with mental health challenges, addictions, criminal	
	histories, and/or alternative sexual identities/orientations.	
	Forensic Peers address the issue of stigmatizing language by using respectful	
	language to identify individuals, organizations, and the greater public safety	

system (e.g.; criminal/offender is a defendant/client, treatment failure is an opportunity for growth, difficult clients are struggling individuals, etc.).

☑ Best Practice Eight: Adhere to Professional, Ethical and Legal Guidelines

Forensic Peer Mentors adhere to professional, ethical and legal guidelines. Forensic Peer Mentors maintain boundaries and resist the temptation to collude with individuals against the system, especially in the face of perceived or actual injustice. Similarly, Forensic Peer Mentors do not collude with the system against the individual, or act as an agent of the system ("Junior probation officer").

Øs	elf-Assessment Checklist
	Forensic Peers have a responsibility to know the guidelines and limitations to both HIPAA and 42-CFR Part 2 and other potential privacy laws. Forensic Peers understand the necessity of obtaining signed Releases of Information for every supporting family member, stakeholder, agency and/or organization before attempting to contact anyone. Forensic Peers have a clear understanding of the exceptions to confidentiality that include speaking with program staff, conversations with fellow mentors during staff meetings and when receiving permission from the mentee to contact others about a specific problem. Forensic Peers share limits of confidentiality concerning coordination of care with other mentors, counselors, and supervisors.
	Forensic Peers understand that they are Mandatory Reporters of abuse and neglect of at-risk populations – infants and children, people who are elderly or dependent, individuals with mental illness or developmental disabilities, and residents of nursing homes and other health care facilities. Forensic Peers understand that they are subject to penalties for failing to report abuse and neglect.
	Forensic Peers may need to report the following: drug use, violations of the terms of parole or probation, intention of self-harm, and intention to hurt others. Forensic Peers understand their obligations to report to the court/probation/parole and do not offer any more information than that which is required contractually or occupationally. Forensic Peers do not collude with the criminal justice system against the client by gossiping with probation or parole officers regarding individuals with whom they work. Forensic peers share only information which is legally mandated.
	Forensic Peer understand the limits of their scope of practice and do not attempt to diagnose or label individuals.
	Forensic Peers comply with standardized chart notes in form and content, understanding that they are not "junior clinicians" or "junior probation officers". They understand that clinical and/or legal conclusions should not be included in documentation. Forensic Peers understand that their documentation routinely

becomes a part of court records and in some cases, is open to public inspection in
the case of a trial or legal audit.
Forensic Peers adhere to their certification ethics, standards of behavior, and
scope of practice.

☑ Best Practice Nine: Assist Individuals in Discovery of Healthy Lifestyle Choices

Forensic Peer Mentors promote healthy lifestyles. (SAMHSA 8 Dimensions of Wellness).

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Self-Assessment Checklist						
	Forensic Peers are able to address the importance of self-care that includes the					
	need to meet medical, dental, hygienic, social, and emotional needs.					
	Forensic Peers facilitate self-assessment of medical, dental, hygienic, social, and					
	emotional needs					
	Forensic Peers facilitate the creation of a wellness plan based on the self-					
	assessment of the individual.					
	Forensic Peers model positive mental health, physical health, hygiene, and					
	nutritional practices.					
	Forensic Peers help clients explore solutions for avoiding possible risky situations					
	that they may have previously encountered and assist individuals in developing					
	relapse prevention plans and coping strategies.					
	Forensic Peers introduce individuals to pro-social events and outings.					
	Forensic Peers help individuals relinquish non-beneficial attitudes, beliefs, and					
	behaviors learned as survival mechanisms in criminal justice settings by being					
	constructive role models.					

☑ Best Practice Ten: SUD Forensic Peer Mentor Qualifications

Forensic Peer Mentors have lived experience in all or most of the continuum of the criminal justice system including: arrests, detention, arraignment, court proceedings, sentencing, diversion, incarceration, probation, and/or parole. Forensic Peer Mentors have specialized training in the delivery of forensic peer delivered services.

Self-Assessment Checklist						
	Forensic Peers have experience in all or most of the continuum of the criminal justice system from arrest, detention, arraignment, release with conditions, hearings, conviction, sentencing, diversion, incarceration, parole and/or probation.					
	Forensic Peers self-identify as a person in recovery from substance use.					
	Forensic Peers have participated in Forensic Peer Core Training and continuing education.					

Bibliography

- 1. Allen, J. *The Importance of Peer Support*. New York State Office of Mental Health. [PowerPoint Slides].
- 2. Bagnall, A. M., South, J., Hulme, C., Woodall, J., Vinall-Collier, K., Raine, G., Kinsella, K., Dixey, R., Harris, L., & Wright, N. (2015). *A Systematic Review of the Effectiveness and Cost-Effectiveness of Peer Education and Peer Support in Prisons*. BMC Public Health. DOI 10.1184/s12889-015. 15:290.
- 3. Baron, R. (2011). *Forensic Peer Specialists: An Emerging Workforce.* New Brunswick, NJ. Center for Behavioral Health Services Criminal Justice Research.
- 4. Cobbs, R., Sherk, J., & Jucovy, L. (2009). *Mentoring Former Prisoners: A Guide for Reentry Programs*. Public/Private Ventures.
- 5. Davidson, L., & Rowe, M. (2008). *Peer Support with Criminal Justice Settings: The role of forensic peer specialists.* Delmar, NY: CMHS National Gains Center.
- 6. Fletcher, D. R., & Batty, E. (2012). *Offender Peer Interventions: What do we know?* Centre for Regional Economic and Social Research.
- 7. Fletcher, R. (2007). *Mentoring Ex-Prisoners: A Guide for Prisoner Reentry Programs.* U.S. Department of Labor.
- 8. Jaffe, M. (2012). Peer Support and Seeking Help in Prison: A Study of the Listener Scheme in Four Prisons in England. (Doctoral Dissertation).
- 9. Jaffe, M. (2012). *The Listener Scheme in Prisons: Final Report on the Research Findings.* (Doctoral Dissertation).
- 10. James, N. (2015). Offender Reentry: Correctional Statistics, Reintegration into the Community and Recidivism. Congressional Research Service.
- 11. Logan, A., Dunning, R., Finkle, M., & Benet, J. (2014). Forensic Peer Support through Trauma Informed Care in a Mental Health Court. [PowerPoint Slides].
- 12. Mentoring Befriending Foundation, (2011). Reducing Offending. [PowerPoint Slides].
- 13. Miller, L. D., & Massaro, J. (2008). *Overcoming Legal Impediments to Hiring Forensic Peer Specialists*. Delmar, NY: CMHS National GAINS Center.
- 14. Ministry of Justice, (2013). *Transforming Rehabilitation: A Summary of Evidence on Reducing Reoffending*. Ministry of Justice Analytical Series. http://www.justice.gov.uk/publications/research-and-analysis/moj
- 15. Munetz, M., & Griffin, P. (2006). Use of the Sequential Intercept Model as an Approach to Decriminalization of People with Serious Mental Illness. Psychiatric Services, vol 57, No. 4, p. 544-547.
- 16. National Alliance on Mental Illness, (2012). *Promising Practices Guide: Supporting The Recovery of Justice-Involved Consumers*. Arlington, VA.
- 17. Newman, M., (2014). *Peer Support in the Criminal Justice System*. Salt Lake City, UT. Utah State Division of Substance Abuse & Mental Health. [PowerPoint Slides].

- 18. New York Department of Community Justice, (2014). *Intercept 5: Probation, Mental Health, and Peer Specialist Supervision Groups.* NYS SCJS JMHCP Technical Assistance Bulletin.
- 19. Prisoners Education Trust, (2010). *Peer Support for Learning: Adding Value.* Learning Matters Briefing 2. Surrey, UK.
- 20. *Prisoner Reentry Toolkit for Faith-Based and Community Organizations.* United States Department of Labor Center for Faith-Based and Community Initiatives.
- 21. Randall, M., & Ligon, K. (2014). From Recidivism to Recovery: The Case for Peer Support in Texas Correctional Facilities. Austin TX. Center for Public Policy Priorities.
- 22. Randall, M., & Ligon, K. (2014). *Integrating Peer Support Into the Re-Entry Process:*Maintaining Continuity of Care and Reducing Recidivism at the Local Level Austin, TX.

 Center for Public Policy Priorities.
- 23. Rees, D. J. (2011). *Developing a Solid and Effective Peer Driven Forensic Peer Support Program.* Towanda, PN. Pennsylvania Office of Mental Health and Substance Abuse Services.
- 24. Short, R., Woods-Nyce, K., Cross, S. L., Hurst, M., Gordish, L., & Raia, J. (2012). The Impact of Forensic Specialists on Risk Reduction and Discharge Readiness in a Psychiatric Facility a Five-Year Perspective. *International Journal of Psychosocial Rehabilitation*. Vol 16(2) 3-10
- 25. South, J., Bagnall, A. M., Hulme, C., Woodall, J., Longo, R., Dixey, R., Kinsella, K., Raine, G., Rooke, S., Vinall-Collier, K., & Wright, J. (2015). *Peers in Prison Settings*. [PowerPoint Slides].
- 26. Taylor, C., & Becker, P. (2015). Are your Friends Crucial or Trivial? Peer Support's Effect on Recidivism. Justice Policy Journal 12(1)
- 27. Vandeplasschen, W., Colpaert, K., Autrique, M., Rapp, C., Pearce, S., Broekaert, E., & Vandevelde, S. (2013). *Therapeutic Communities for Addictions: A Review of Their Effectiveness from a Recovery Oriented Perspective*. The Scientific World Journal: Volume 2013, Article ID 427817. Retrieved from: http://dx.doi.org/10.1155/2013/427817
- 28. Woodley, E., & Filone, S. Forensic Peer Support In Your Organization. [PowerPoint Slides]. Elizabeth Woodley (PMHCA Project Specialist) Liz@pmhca.org

Appendix 1

Validation Survey of Substance Use Disorder Forensic Peers

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Methodology: Survey "best practice statements" were authored by the DACUM subject matter expert group. Survey "best practice statements" were designed with a Likert scale of four. Averages 1-4 were calculated for ranking of forensic peer best practices. Results were then analyzed by the DACUM workgroup and assimilated into their occupational analysis.

Validation Survey

Introduction: A 4-scale Likert Validation Survey ranging from "very important for Forensic Peers to demonstrate or perform" to "not important for Forensic Peers to perform this task," was statistically ranked by Forensic Peer Mentors. Mean, median, variance, confidence intervals, margins of error, and standard deviations were evaluated to refer unreliable "competency statements" to the DACUM workgroup for re-evaluation and editing. Twenty-six participants responded to competency statements through a Turning Point Response system.

DACUM Draft Forensic Peer	Mean	Median	Variance	Confidence	Standard
Best Practices				Interval 95%	Deviation
Best Practice 1 Address Criminal History Barriers to Housing": Forensic Peer Mentors consider multiple issues when assisting individuals with housing options, including cultural considerations, type of offense, level of risk, relapse potential, stage of change, and history of recidivism. Forensic Peer Mentors are knowledgeable regarding civil rights, fair housing, and legal protections for those with a criminal history and their housing rights. Forensic Peer Mentors empower clients to participate in advocacy efforts to afford rights to individuals with criminal histories seeking housing.	2.154	2.000	0.775	(CI95%) 2.154 ± .88	0.880
Best Practice 2 "Address Criminal History Barriers to					
Employment": Forensic Peer Mentors consider multiple barriers and challenges when helping an individual prepare for employment. These challenges include difficulty locating "felony friendly" employers and job opportunities, acquiring professional attire and the need to develop appropriate work-related skills. Forensic Peer Mentors empower clients to participate in advocacy efforts to afford rights to individuals with criminal histories seeking employment (e.g. Ban the Box)	1.423	1.000	0.757	(CI95%) 1.423 ± 0.78	0.758
Best Practice 3 "Support Clients in Meeting					
Correctional Mandates": Forensic Peer Mentors assist individuals in meeting required mandates attached to probation and/or parole. These include helping to access addiction or mental health services, anger management, or domestic violence programs. Forensic Peer Mentors serve as lived-experience system navigators to support clients in completing correctional mandates	1.077	1.000	0.154	(CI95%) 1.077 ± 0.15	0.392
Best Practice 4 "Support Clients in Meeting Conditions of Supervision": Forensic Peer Mentors provide support and resources that help individuals meet the conditions of probation and/or parole. Forensic Peer Mentors do not act as "junior probation officers" monitoring the compliance of clients on behalf of the criminal justice system. Forensic Peer Mentors offer genuine support for maintaining employment, resources for maintaining abstinence, help developing pro-social activities and support for avoiding any behaviors that may lead to probation and/or parole violations.	1.000	1.000	0.000	(CI95%) 1 ± 0	0.000
Best Practice 5 "Support Clients in Assessing Their Own Needs": Forensic Peer Mentors help individuals assess their own needs and provide them with referrals to appropriate community resources.	1.038	1.000	0.038	(CI95%) 1.038 ± 0.08	0.196
Best Practice 6 "Assist Clients in Clarifying Their Own Goals": Forensic Peer Mentors assist in helping clients clarify their own goals and developing strategies to avoid recidivism.	1.115	1.000	0.106	(CI95%) 1.115 ± 0.13	0.326
Best Practice 7 "Inspire Clients Through Their Own Lived Experience": Through a willingness to share personal criminal history experience, Forensic Peer Mentors act as credible role model to instill hope and confidence to individuals transitioning from criminal to pro-social behaviors. Forensic Peer	1.230	1.000	0.265	(CI95%) 1.23 ± 0.2	0.514

Mentors primarily use self-disclosure for the purposes of inspiring hope vs. bonding through					
shared criminal conduct.					
Best Practice 8 "Recognize Trauma Inherent in Both					
Criminal Lifestyle and the Correctional System":	1.230	1.000	0.265	(CI95%)	0.514
Forensic Peer Mentors have sufficient knowledge of				1.23 ± 0.2	
the relationship between incarceration and trauma					
to offer trauma-informed peer mentor services.					
Trauma-informed mentoring decreases					
retraumatization and helps individuals reduce					
personal risk and recidivism. Forensic Peer Mentors					
adhere to professional and ethical guidelines and					
avoid patterns of collusion with clients "against the					
system" while maintaining both empathy and					
validation for traumatic experiences that occur in					
the criminal lifestyle, in courts due to judicial bias					
within correctional institutions.					
Best Practice 9 "Advocate for Clients": Forensic Peer					
Mentors advocate for individuals in a variety of	1.307	1.000	0.621	(CI95%)	0.788
settings including parole/probation and community				1.307 ± 0.3	
justice, specialty courts, child welfare family court					
proceedings, and other programs. Forensic Peer					
Mentors advocate for the rights of clients that are					
equally afforded to all individuals involved in the					
criminal justice system and child welfare.					
Best Practice 10 "Promote Health Pro-Social					
Lifestyles": Forensic Peer Mentors are able to	1.077	1.000	0.073	(CI95%)	0.271
promote healthy lifestyles by educating individuals				1.077 ± 0.1	
regarding addiction recovery and its relationship to					
criminal behaviors and recidivism					

Results

Three competency statements presented the lowest reliability (#1, #2, #9). These competency statements presented standard deviations at .75+, C.I. values at 1.42++/-.3+, and variance scores of .62+. These three competencies were referred to the DACUM Workgroup for re-evaluation, editing, additions/deletions to increase clarity.