NATI NAL COUNCIL

ORGANIZATIONAL SELF-ASSESSMENT (OSA)

Integrating Peer-delivered Services in Certified Community Behavioral Health Clinics (CCBHCs)

Tool Purpose: The OSA is a performance improvement resource to help engage CCBHCs in a self-reflective process to enhance partnerships to integrate peer-delivered services in CCBHCs.

Tool Structure: The OSA consists of four change concepts that are characteristic of an integrated peer-delivered services approach and a set of goals for each change concept.

Tool Completion: CCBHC leadership, administrative, clinical members and providers and other stakeholders should complete the OSA. The organization should then aggregate the responses for the team to discuss and develop a workplan for integrating peer-delivered services into CCBHCs.

Using the five-point scale, please indicate the degree to which you agree that your organization meets the standards:

- 1 = Strongly Disagree
- 2 = Disagree
- 3 = Neutral
- 4 = Agree
- 5 = Strongly Agree

D/K = I am not sure I understand the goal or I do not know if we meet this goal

N/A = This goal does not apply to our organization/ department/work area



Essential Ingredients : CCBHCs and Peer-run/Recovery Community Organization Partnerships

- Establish team approach for successful partnerships.
- Understand the organizational shifts necessary to support the integration of peerdelivered services and encourage a recoveryoriented organizational culture.
- Maintain fidelity to the principles of peer support.
- Address disparities in funding of peer services.

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CHANGE CONCEPT 1: Creating Healthy Partnerships with Peer-run/Recovery Community Organizations

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Don't Know	N/A
Our CCBHC has explored partnership models with peer-run/recovery community organizations.							
Our CCBHC contracts with a local peer-run/recovery community organization to provide ongoing technical assistance including an initial and ongoing assessment of the CCBHC's recovery culture, organizational readiness, recommendations on change, implementation strategies and leadership development and buy-in.							
Our CCBHC contracts with a local peer- run/recovery community organization to hire, train and directly supervise peer specialists via a designated collaborating organization arrangement to provide high-quality and successful engagement and outcomes while ensuring fidelity to the core principles of peer support.							
We strive to increase synergy with peer- led organizations without compromising each organization's values.							
Our CCBHC partners with a peer-run organization to help establish peer specialist roles and responsibilities, job descriptions, scope of practice and performance metrics.							

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CHANGE CONCEPT 2: Shifting Organizational Culture

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Don't Know	N/A
Our CCBHC has revised its mission, vision and values to support the integration of peer-delivered services and with a strong commitment to recovery-oriented care.							
Our CCBHC has established a clear understanding of peer services and peer provider roles and expectations at every level of the organization.							
Our team has a plan in place to address and eliminate internal bias and discrimination in every facet of the organization.							
Our CCBHC continuously addresses the power differential between clinical and peer staff.							
Our CCBHC provides system-wide training on recovery, peer culture, peer support, peer-delivered services, and peer leadership to all staff including top level management, administration, environmental and support staff.							
Our team has established processes to elevate the value of peer support specialists as trained and experienced professionals.							
We ensure representation of people with lived experience at every level of the organization including CCBHC governing boards.							
We include peer specialists as equal and valued partners of the health care team.							
We measure outcomes that demonstrate recovery and community inclusion.							
Our team has identified ways to incentivize working collaboratively with peer specialists.							

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CHANGE CONCEPT 3: Maintaining Fidelity to Peer Support

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Don't Know	N/A
Our CCBHC has a mechanism in place to maintain the integrity and fidelity of peer support.							
Our CCBHC has established role definitions, job descriptions and scope of practice for peer specialist to ensure everyone on the team and throughout the organization is trained and knowledgeable about this role.							
Our CCBHC has established core competencies for peer support specialists and builds awareness across the organization of these competencies.							
Our CCBHC understands the state certifications including required skills and knowledge for peer support specialists and has cross-walked with internal organizational policies and procedures.							
Our CCBHC has a plan in place to credential peer support specialists.							
Our CCBHC provides ongoing training for peer support specialists.							
Our CCBHC has established a career ladder for peer support specialists.							
We have established policies and procedures to ensure adequate and appropriate supervision and training for peer specialists.							
Our CCBHC communicates and educates all staff including management, direct staff and service recipients about the fidelity of peer- delivered services.							
We have developed policies and procedures that reinforce peer specialist scope of practice within the CCBHC.							

CHANGE CONCEPT 4: Integrating Peer Services into Mainstream Funding

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Don't Know	N/A
Our CCBHC has developed standard recovery-based outcome measures for peer-delivered services.							
We have established a value proposition and routinely engage with payers about the value of peer delivered services.							
Our team regularly engages with payers to share recovery outcomes and to demonstrate medical necessity for peer services.							
We advocate for value-based conversations to include recovery-based outcomes that demonstrate quality of life and community inclusion.							
We advocate for appropriate compensation for peer specialists regardless of where they are employed.							

ASSESSMENT SCORING

Use the five-point scoring guidance to calculate total score for each change concept. Divide your total score by possible points provided below to assess proportion of total possible points.

CHANGE CONCEPT	TOTAL SCORE	% COMPLETE
1. Creating Healthy Partnerships with Peer-Run/Recovery Community Organizations	of 25	
2. Shifting Organizational Culture	of 50	
3. Maintaining Fidelity to Peer Support	of 50	
4. Integrating Peer Services into Mainstream Funding	of 25	