

April 16, 2020

The Honorable Dr. Richard Pan
Chair, Senate Health Committee
State Capitol, Room 2191
Sacramento, CA 95814

Re: **SUPPORT SB 803** (Beall): peer, parent, transition-age, and family support specialist certification

Dear Senator Pan:

I am the Policy Director for ACCESS California (ACCESS). ACCESS is a statewide consumer-led stakeholder advocacy program of Cal Voices, the oldest consumer-run organization in California.

ACCESS' mission is to strengthen and expand local and statewide client/consumer and Peer advocacy in California's Public Mental Health System through individual and community empowerment. Our ongoing research, data collection and evaluation, legislative and policy analysis, advocacy, education, training, outreach, and engagement activities implement strategies to elevate the voices, identify the needs, and increase genuine public participation of client/consumer stakeholders to drive truly transformative change.

We are writing to you to express our strong support of SB 803 (Beall): peer, parent, transition-age, and family support specialist certification. While California currently lacks an official statewide peer certification program, Cal Voices, in partnership with its national affiliate Mental Health America (MHA), provides access to MHA's National Certified Peer Specialist (NCPS) program, the only nationally-recognized peer credential in the United States. The NCPS was developed to exceed individual statewide standards used in public behavioral health systems around the country. Cal Voices worked closely with MHA in the development of its NCPS program, providing subject matter expertise and feedback on the NCPS core competencies and exam content.

We support SB 803 and the implementation of peer certification for the following reasons:

1. The current public health crisis and spread of COVID-19 has stressed the capacity of our state's healthcare workforce. This includes increased stress upon the county behavioral health departments across the state that serve the most severely mentally ill. Right now, Peer Support Specialists are providing group and individualized support services to clients throughout California, easing the strain on the system. Peer Certification will bolster this essential behavioral health workforce.
2. Peer support is an evidence-based practice proven to reduce costs by preventing the need for more crisis intervention care and sustaining longer periods of recoveryⁱ. Peer support is a core principle of Recovery-Oriented Services that aims to direct behavioral health clients toward community resources and practices and away from expensive institutions and emergency rooms. Behavioral Health staff with lived-experience establish relationships with clients as equals and share stories of experiences that help recovery.
3. Peers are essential to easing California's homelessness crisis. Currently in Los Angeles and across the state, Peers are effectively used to reach out to homeless populations with serious mental illness to provide them with supportive services and assistance with finding shelter. Peers come from all walks of

life and those who have experienced homelessness can share their own lived-experiences to relate to people, make them feel like equals and demonstrate that their recovery is possible too.

4. Ninety percent of behavioral health clients are unemployed in Californiaⁱⁱ. Peer certification would encourage lived-experience as a valued credential for work rather than a barrier. Peer Certification would also create a means for behavioral health clients to earn a living wage as credible healthcare providers who know how to communicate with the most severely mentally ill.

Although we strongly support SB 803, we have the following recommendations to strengthen the bill:

1. Remove barriers for existing peer support workers. Implementing a new peer certification program can disqualify peer support workers who either cannot afford the certification fees, or who are unable to retroactively complete the training and education requirements. Provisions related to experience in lieu of training for existing peer support workers will ensure continuity of employment for current peer workers deemed sufficiently knowledgeable in the field.
2. Include training for employers and clinicians to encourage an inclusive working environment. Peer support workers often report that their workplace is not sufficiently knowledgeable about the process of recovery to effectively support them in their work.
3. Ensure that California's standards maintain fidelity to the evidence base of peer support and are as rigorous as the national standards.

We value your leadership in the California Senate and will continue to seek opportunities to partner with you to promote the interests of public mental health clients/consumers throughout the state. We stand ready, willing, and able to testify before the legislature and offer our expertise in the crafting of legislation affecting our stakeholder constituency. Please contact me by phone at (916) 296-8444 or by email at kvicari@calvoices.org should you wish to discuss this matter further.

Sincerely,



Karen Vicari, JD, Policy Director, ACCESS California | Cal Voices

Cc: Members and Staff of the Senate Health Committee
Senator Jim Beall, Author and Chair of Mental Health Caucus

ⁱ SAMHSA. (2016, April 19). *Integrating Peer-support Services*. Retrieved from SAMHSA: <https://www.samhsa.gov/homelessness-programs-resources/hpr-resources/integrating-peer-support-services>

ⁱⁱ NAMI. (2014, January 01). *Mental Illness: NAMI Report Deplores 80 Percent Unemployment Rate; State Rates And Ranks Listed—Model Legislation Proposed*. Retrieved from NAMI: <https://www.nami.org/Press-Media/Press-Releases/2014/Mental-Illness-NAMI-Report-Deplores-80-Percent-Une>