New York State Peer Certification

Technical Assistance Toolkit







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Amida Care Consumer Worker Integration Initiative Peer Certification Technical Assistance Toolkit

Introduction to the Peer Certification Technical Assistance Toolkit

Health care providers stand to benefit from the expertise that comes from those who offer lived experience with HIV, HCV and Harm Reduction, and many health and social service programs have a long history of successfully engaging consumer workers in providing a wide range of service activities. When incorporated into the multidisciplinary team as consumer workers (also known as peer workers), these individuals can be a powerful resource, offering experiential knowledge and insight that can help inform and shape the team's interactions with clients. In addition, through their shared lived experiences, consumer workers become models for clients, showing them what is possible in terms of health and empowerment, and thereby engaging them in treatment and self-care and improving health outcomes.

As such, Consumer Workers can play a key role in meeting New York State's (NYS) goals of increasing linkage and retention in care, improving rates of viral suppression, and preventing new infections. The AIDS Institute (AI) has long recognized the important role that peers play in improving health outcomes. NYS AI Peer Certification, a process that prepares consumer workers to offer a range of services in health and social service agencies, is highlighted in the NYS Blueprint for Ending the AIDS Epidemic.

In addition to their impact on health outcomes, having a path to employment is beneficial to Consumer Workers themselves. Amida Care has adopted the view that simply providing access to medications and services for PLWH is insufficient. While retention in care is critical, successfully living with HIV is about not just surviving, but thriving. One way for agencies to support this is by providing a path to employment, to increase access for PLWH to job opportunities, and help build financial security, succeed professionally, and improve their quality of life. Organizations that serve PLWH should invest in hiring them at a living wage, so that workers earn enough to afford housing, food, and health insurance. The Amida Care Consumer Worker Initiative is intended to support these ideals. The project's goals are to:

- Aid Peers/ Consumer Workers in attain Al Certification:
- Support Certified Consumer Workers in transitioning to living-wage employment;
- Ensure that agencies have structures, systems, and processes in place to integrate, support, and sustain Consumer Workers as part of their workforce; and
- Enable agencies to generate revenue as a result of hiring consumer workers.

Questions? Call Peer Certification Review Board Consultant Stephen Sebor at (631) 444-3209.

New York State Certified Peer Worker Certification Program in HIV, Hepatitis C, Harm Reduction and PrEP Frequently Asked Questions

Who is eligible for certification?

Any person who has a qualifying lived experience with HIV, Hepatitis-C, Harm Reduction, or PrEP is eligible for certification. A "lived experience" is defined as the experience someone has obtained from life; qualifying lived experiences are divided into four "tracks".

What are the Peer Certification tracks?

The NYS Certified Peer Worker Program requires persons obtaining their certification to specialize into tracks of relevant peer experience. Specializing in a track requires you to take specific training courses that will qualify you and build "competencies". A competency is the ability to do a task successfully and efficiently. There are several competencies for each track.

The **four** Peer Certification Tracks and their eligibility requirements are listed below:

- 1. HIV: a person must be living with HIV.
- 2. **Hepatitis C** (Hep-C): a person must be living with Hep-C, currently receiving treatment for Hep-C, or have completed treatment for Hep-C.
- 3. **Harm Reduction**: a person must have lived experience of substance use, and have either:

 1) experience accessing harm reduction services from a syringe services program or opioid overdose prevention program, or 2) completed a practicum working in a syringe services program or opioid overdose prevention program.
- 4. **Pre-Exposure Prophylaxis** (PrEP): a person who has lived experience of taking PrEP. To ensure an applicant for this track has enough lived experience, supervisors will be required to rate specific competencies related to a shared lived experience.

Please note individuals who are "affected" are not eligible for certification. However, a person who is living with HIV who does PrEP work may be certified as an HIV Peer Worker by completing a practicum and carrying out the competencies associated with PrEP.

Will I have to disclose my HIV, Hep-C, substance use history, or PrEP use to others? It is expected that all persons seeking certification would be comfortable *strategically* sharing their relevant health status.

What is required of me to become certified?

- Completion of Foundational Training (optional, but recommended)
- Create a free account on http://www.hivtrainingny.org
- Select at least one of the specialization tracks: HIV, Hep-C, Harm Reduction, or PrEP

- Complete 90 hours total of training, including the 3-day "Pre-Certification" training
- Completion of a supervised 500-hour work practicum carrying out the specific competencies related to your certification track (HIV, Hep-C, Harm Reduction or PrEP)
- Pass the on-line exam with a score of 75% or better.
- Prepare a professional resume, which includes your practicum experience
- Complete the online application, and answer the three Lived Experience Questions
- Complete the Self-Care Worksheet
- Sign and uphold the Code of Ethics. (Please note: Anyone seeking certification is expected to follow the principles listed in the Code of Ethics that will guide peer workers in their roles, relationships, and scope of responsibility.)
- Receive final approval from the NYS Peer Worker Certification Review Board

What if I'm not ready to become certified?

Good news! You can take *Foundational Training*. Foundational Trainings are optional courses designed to help prepare you for Peer Certification. Please check the website for more information on where you can take Foundational Training courses. There are also many peer opportunities throughout our community that may not require certification.

When can I start an application?

You may start your application at any time by visiting http://www.hivtrainingny.org and by clicking on the Peer Certification top tab, and then clicking the box "Applicant Info" located on the right side of the page. You may go back to your application at any time to update information, or work on your Lived Experience questions. A completed application must be submitted before you can become certified.

How can I access Peer Certification related resources?

To access Peer Certification information and other resources visit http://www.hivtrainingny.org and select the "Peer Certification" tab. You will find helpful resources like the Course Tracker Form and the Self Care Worksheet.

How do I know which trainings to take for the 90-hours of training?

On the http://www.hivtrainingny.org website, click on the Peer Certification tab. Once there, you can view the "Course Tracker Forms" at: http://hivtrainingny.org/home/PeerCheckList.

The Course Tracker Forms will let you know which courses to take and help you keep up to date of what you've completed. Each specialized track has its own Course Tracker Form.

We encourage you to print the tracking form, and recommend you use these forms to track your training hours.

When can I start taking training courses?

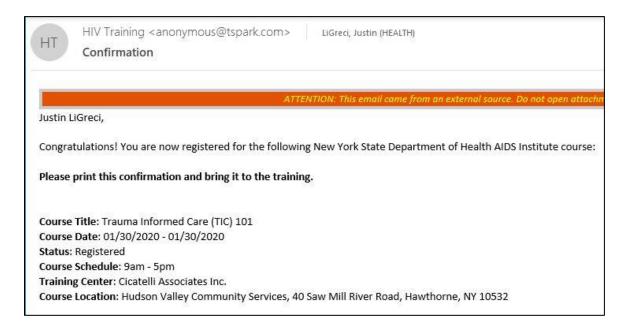
Any person pursuing certification is encouraged to begin taking courses as soon as possible.

How do I take the trainings?

You must first register for a training. To register, go to http://www.hivtraininny.org and login to your account:

- 1. Click on the "Course List" tab (Please make sure it's a course you need for certification!)
- 2. Click the "register" button
- 3. Click the "select" button (you can see details about the training)
- 4. Finally, click the "submit" button

Your screen will show a Confirmation Notification and you will receive a confirmation e-mail from "HIV Training". The confirmation e-mail will look similair to the image below:



Please pay special attention to where the training is being held, as it may not be your local area!

What if I need special accommodations to attend the training?

If you require special accommodations to attend the training, you can let us know by clicking the text at the bottom of the course registration page that asks, "Will you require accommodations under the Americans with Disability Act (ADA) to participate in trainings?"

A box will open asking you to describe the special accommodations. Examples of special accommodations may include, but are not limited to:

- o ASL American Sign Language Interpretation
- Sitting in the front of the training room to see better
- Wheelchair accessible entrance, training space, and restrooms

Are any of the training courses mandatory?

Yes. The "Core Courses", including the 3-day Pre-Certification course, found on page 1 of the Course Tracker Form are mandatory. Only peer workers actively engaged in certification may take the 3-day Pre-Certification course. To sign up for the 3-day Pre-Certification Course you must call the Peer Certification Academic Center at 631-444-3209.

What should I know about the 500-hour supervised practicum?

The practicum is an opportunity to practice the competencies, tasks and job duties of a peer worker. The practicum must be related to the track you select for certification (HIV, Hep- C, Harm Reduction or PrEP). Your 500 hours should be documented.

You must have a supervisor who is overseeing your practicum. The supervisor should give you regular feedback and must complete the **Supervisor Evaluation**. We recommend you complete the evaluation with your supervisor during the middle of your practicum, and once again towards the end of your practicum. This allows you both to see what competencies need improved before submitting the Supervisor Evaluation. For questions about the Supervisor Evaluation, call the Peer Certification Academic Center at 631-444-3209or e-mail stephen.sebor@stonybrook.edu.

What if I've already been working or volunteering as a peer worker? Does that count?

Yes, that counts under certain circumstances. Experience as a peer worker must be **within three calendar years** of submission of your application, in order to count toward the required 500-hour practicum. For example, if you are submitting your application in September of 2020, all practicum experience must be after January 1, 2017. Your supervisor must document that you completed at least 500 hours after such time. If you have questions about your prior experience, please call the Peer Certification Academic Center at 631-444-3209.

What should I expect from the Peer Certification Online Exam?

The 30-question exam is available online, via a desktop computer, or mobile browser. Exam questions mainly focus on the core and specialized competencies learned throughout your training and practicum and the Code of Ethics. You must a receive a score of 75% or better to

pass. You will have one hour to complete the exam. If you do not pass, you may re-take the exam up to three times per day. Comprehensive study guides has been developed for four tracks and are available on http://hivtrainingny.org, under the Peer Certification tab.

Is there anything I must do to keep my certification?

Yes. All Certified Peers must maintain their certification by upholding the Code of Ethics and taking Continuing Education (CE) training courses. Certified Peer Workers are required to take 10 hours of training every year. The Certified Peer is responsible for making sure they meet this requirement. Certified Peer Workers can register to take additional trainings through the http://www.hivtrainingny.org website. The courses do not have to be track specific. It is recommended that Certified Peer Workers take trainings relevant to peer work.

I have lived experience in more than one track (HIV/HCV/Harm Reduction/PrEP). Can I choose to specialize in more than one track?

Yes, you can, with one exception. Individuals certifying for the HIV track **cannot** certify for the PrEP track.

To certify in multiple tracks, you will need a minimum of 22 specialized course hours for each track. Some trainings count for multiple specializations, so it may take less than an additional 22 hours of coursework to complete multiple tracks. Your practicum must include work relevant to all tracks you plan to certify in. You will also need to complete the online exam for all tracks you in which you want to become certified.

Does becoming a Certified Peer Worker mean I will get a job?

No, becoming certified does not guarantee a job.

To assist Certified Peer Workers and persons pursuing certification with finding a job, the AIDS Institute has created a state-wide email list called "Peer Worker Employment Opportunities Mailing List". This "listserv" sends out job announcements where you may find an employment opportunity. If you sign up to be on the listserv you will receive these announcements directly to your e-mail. To add your e-mail to the listserv, type it in the box located at the bottom right of any page on the http://hivtrainingny.org website, and click the button that says "Go".

I need a specific course to complete my certification, but I can't find it anywhere! Help! You can adjust the calendar on the http://www.hivtrainingny.org website. By default, you will see the next upcoming 30 days of training. There are buttons on the right to look at the next 60 or 90 days. You can even search by region. Please check the calendar often, as trainings are added all the time.

I'm on the waitlist for a course I need for peer certification. Help!

Please check with the training agency for wait-list policies. If this course is the last course you need for certification, please call the Peer Certification Academic Center at 631-444-3209 and we will try to get you into that course.

I've already taken some required courses for certification. Do I have to take them again?

Required courses must be taken within three calendar years of submission of your application for approval by the Review Board. For example, if you are submitting your application in May of 2020, all courses must be after January 1, 2017. This applies to all classes, including those taken on the http://www.hivtrainingny.org website as well as outside trainings, such as SafeTALK, the, Positive Self-Management Training or any of the equivalent trainings through the NYC Department of Health T-TAP. There may be some exceptions for online learning or archived webinars. Remember: All certificates for outside trainings need to be uploaded to your online peer certification application.

To check the courses, you have taken through the http://www.hivtrainingny.org website, log-in and click the "My Courses" link located on the right side. If you have questions about your prior coursework, please call the Peer Certification Academic Center at 631-444-3209.

Can I receive college credit for all this?

Yes, those who successfully become a NYS Certified Peer Worker qualify for 26-32 college credits through SUNY Empire State College. For more information you can check https://www.hivtrainingny.org/FAQDocs/escfaq.pdf or contact the Peer Certification Academic Center at 631-444-3209.

I'm an LTI Peer Mentor. Does this experience count towards my practicum? No, LTI Peer Mentorship does not count towards your practicum.

Individuals seeking certification are encouraged to have an agency sponsor their travel to trainings. Typically, this is the agency where the peer worker is doing the practicum. There are very limited resources available from the AIDS Institute to support travel to trainings. Travel assistance is only available to individuals who are 1-2 courses away from completing their certification. Please write to stephen.sebor@stonybrook.edu to inquire.

Additional Questions or Need Assistance?

Call or e-mail:

Stephen Sebor at 631-444-3209 / stephen.sebor@stonybrook.edu Justin LiGreci at 212-417-4533 / justin.ligreci@health.ny.gov

New York State Certified Peer Worker Supervisor's Frequently Asked Questions

What is the NYS Certified Peer Worker Program?

The Certified Peer Worker (CPW) Program is a formal certification program for peers that meet the eligibility requirements. This program is intended to provide employers and the community with high-quality peer-delivered services and improve the health care outcomes of clients through peer-delivered services.

Why have a certification program for peers?

Peer-delivered interventions play a significant role in improving health outcomes, especially for patients living with complex chronic health or behavior health conditions. The effectiveness of Peer Workers is rooted in the fact that these workers share a common "lived experience" with clients. The Certified Peer Worker Program exists to provide training, supervised work experience, and allow for the professional growth of New York State's peer workforce.

Who is eligible to become a NYS Certified Peer Worker?

Any person who has a qualifying lived experience with HIV; Hepatitis-C, Harm Reduction, or PrEP is eligible for certification. A "lived experience" is defined as the experience someone has obtained from life; qualifying lived experiences are divided into four "tracks".

Will all Peers need to become a NYS Certified Peer Worker?

No – pursuing certification is voluntary.

What are the Peer Certification tracks?

The NYS Certified Peer Worker Program requires persons obtaining their certification to specialize into tracks of relevant peer experience. Specializing in a track requires the peer to take specific training courses that will qualify you and build "competencies" – there are several competencies for each track.

The **four** Peer Certification Tracks are listed below:

- 1. HIV: a person must be living with HIV.
- 2. **Hepatitis C** (Hep-C): a person must be living with Hep-C, currently receiving treatment for Hep-C, or have completed treatment for Hep-C.
- 3. **Harm Reduction**: a person must have lived experience of substance use, and either; 1) experience accessing harm reduction services from a syringe services program or opioid overdose prevention program, or 2) complete a practicum working in a syringe services program or opioid overdose prevention program.

4. **Pre-Exposure Prophylaxis** (PrEP) a person who has lived experience of taking PrEP. To ensure an applicant for this track has enough lived experience, supervisors will be required to rate specific competencies related to a shared lived experience. Please note: a person who is living with HIV who does PrEP work may be certified as an HIV Peer Worker by completing a practicum carrying out the competencies associated with PrEP.

Please note individuals who are "affected" are not eligible for certification.

The Peer Workers I supervise say they have already gone to some trainings and received certificates, does this make them a NYS Certified Peer Worker?

No – the peer can only receive certification from the Peer Certification Review Board. The review board reviews applicants that have completed all requirements to become certified, and votes on every peer's certification. Once voted on and approved by the review board the peer will receive a letter and a phone call from the Peer Certification Academic Center. Peers who have an account on http://www.hivtrainingny.org and a Peer Certification Application in progress are not NYS Certified Peer Workers.

What must a Peer do to become a NYS Certified Peer Worker?

- Completion of Foundational Training (optional, but recommended)
- Create a free account on http://www.hivtrainingny.org,
- Select at least one of the specialization tracks: HIV, Hep-C, Harm Reduction, or PrEP
- Complete 90 hours total of training, including the mandatory 3-day "Pre-Certification" training
- Completion of a supervised 500-hour work practicum carrying out the specific competencies related to your certification track (HIV, Hep-C, Harm Reduction or PrEP)
- Submit a Supervisory Evaluation
- Pass the on-line exam with a score of 75% or better
- Prepare a professional resume, which includes the practicum experience
- Complete the online application, and answer the three Lived Experience questions
- Complete the Self-Care Worksheet
- Sign and uphold the Code of Ethics <u>Note:</u> anyone seeking certification is expected to
 follow the code of ethics, including maintaining appropriate behavior during trainings
 and completing the on-line application honestly
- Receive final approval from the NYS Peer Certification Review Board

Can I start the application for my peers?

It is **not** recommended that a supervisor **starts** or **completes** the peer's application. You may **assist** the peer with their application at any time. A peer may start a NYS Certified Peer Worker Application by logging into their account on http://www.hivtrainingny.org, clicking on the Peer Certification tab and clicking the box "Apply for Peer Certification", on the right side of the page. A peer may access their application at any time to update information, documents, or answer the "Lived Experience" questions.

How can I access Peer Certification related resources?

To access Peer Certification information and other resources visit http://www.hivtrainingny.org and select the "Peer Certification" tab. There are many helpful resources like the Course Tracker Form and Supervisory Evaluation Tool.

Can I help my peer workers identify trainings to take?

Of course! It is strongly suggested you work with the peers you supervise to help identify relevant trainings. You and the Peer Worker can use the "Course Tracker Form" to identify what trainings are needed and what trainings are completed. To access the Course Tracker form, go to the http://www.hivtrainingny.org website, and click on the Peer Certification tab – you'll see it listed on the page. You can also click the following link to go directly to the forms: http://hivtrainingny.org/home/PeerCheckList. Please note each specialized track has its own Course Tracker Form.

How does a peer take the trainings?

The peer must log into their account on http://www.hivtraininny.org and should have their own e-mail address. To register, follow these steps:

- 1. Click on the "Course List" tab (make sure it's a course needed for certification!)
- 2. Click the "register" button
- 3. Click the "select" button (you can see details about the training)
- 4. Finally, click the "submit" button.

The peer will see a Completion Notification and will receive a confirmation e-mail from "HIV Training." Please pay special attention to where the training is being held – it may not be local!

What if my peer(s) need special accommodations to attend the training?

If a peer requires special accommodations to attend the training, they can let us know by clicking the text at the bottom of the course registration page that asks, "Will you require accommodations under the Americans with Disability Act (ADA) to participate in trainings?"

A box will open asking for a description the special accommodations. Examples of special accommodations may include, but are not limited to:

- ASL American Sign Language Interpretation
- Sitting in the front of the training room to see better
- Wheelchair accessible entrance, training space, and restrooms

Are any of the training courses mandatory?

Yes. The "Core Courses", including the 3-day Pre-Certification course, found on page 1 of the Course Tracker Form are mandatory. Only peer workers actively engaged in certification may take the 3-day Pre-Certification course. It is recommended that the peer has completed a few training courses before taking the Pre-Certification course. To sign up for the 3-day Pre-Certification Course a peer must call the Peer Certification Academic Center at 631-444-3209.

What should I know about the 500-hour supervised practicum?

The practicum is an opportunity for peers to practice the "core competencies"; tasks and job duties associated with the peer worker role. One way to think about it is: "practicum=work experience." A supervisor must oversee the peer workers practicum, and the practicum must be related to the peer's certification track (HIV, Hep- C, Harm Reduction or PrEP related work). The supervisor and peer should keep track of the 500-hours.

The supervisor should give the peer regular feedback and complete the online **Supervisor Evaluation.** This evaluation rates the peer on their work performance. We recommend you do the evaluation with your peer during the middle of the practicum and once more towards the end of the peer's practicum. This allows you both to see what competencies, tasks and job duties may need improvement before submitting the Supervisor Evaluation. Supervisor and Peer will review the evaluation, sign, scan and upload the completed evaluation. For questions about the Supervisor Evaluation the Peer Certification Academic Center at 631-444-3209.

Peers I supervise have been working at the agency for years, does that time count?

Yes, it counts under certain circumstances. Experience as a peer worker must be **within three calendar years** of submission of the application for approval by the Review Board in order to count toward the required 500-hour practicum. For example, if a peer submits their application in September of 2020, all practicum experience must be after January 1, 2017 (the supervisor must document the 500 hours). For any questions about prior experience, please call the Peer Certification Academic Center at 631-444-3209.

What should my peers expect from the Peer Certification Online Exam?

The 30-question exam is taken online, accessible via a desktop computer or mobile browser. A peer must receive a score of 75% or better to pass. They have one hour to complete the exam. If they do not pass, they may re-take the exam up to three times per day. Comprehensive study guides have been developed for four tracks and are available on http://hivtrainingny.org, under the Peer Certification tab.

Is there a "re-certification" process?

Yes. All NYS Certified Peers must maintain their certification by taking Continuing Education (CE) training courses. CPW's are required to take 10 hours of training every year. The Certified Peer is responsible for making sure they meet this requirement. CPW's can register to take additional trainings through the http://www.hivtrainingny.org website. It is recommended that the CPW take trainings relevant to their peer work.

I have lived experience in more than one track (HIV/HCV/Harm Reduction/PrEP). Can I choose to specialize in more than one track?

Yes, you can, with one exception. To certify in multiple tracks, you will need 22 specialized course hours for each track. For example, if you want to certify in both HIV and Hep-C tracks, you will need a total of 44 specialized course hours; 22-hours for HIV courses and 22-hours for Hep-C courses. Your 500-hour practicum must also include work relevant to all tracks you plan to certify in, but you do **not** need to complete additional practicum hours. You will also need to complete the online exam for all tracks you want to certify in. Some trainings count for multiple specializations, so it may take less than an additional 22 hours of coursework to complete multiple tracks.

Individuals certifying for the HIV track **cannot** certify for the PrEP track.

Does becoming a NYS Certified Peer Worker guarantee the peer employment?

No, becoming certified does not guarantee a job. To assist Certified Peer Workers and peers pursuing certification with finding employment, the AIDS Institute has created a state-wide email list called "Peer Worker Employment Opportunities Mailing List". This "listserv" sends out job announcements listing employment opportunities. A peer or supervisor can add their e-mail to the listserv, by typing it in the box located at the bottom right of any page on the http://hivtrainingny.org website and clicking the button that says "Go".

One of my peers was waitlisted for a training, what does that mean?

When a training is at capacity, anyone trying to register will be "wait-listed." Someone who is wait-listed is **not** guaranteed a seat in the training. Please have the peer check with the training

agency for wait-list policies. If this course is the last course a peer needs for certification, please call the Peer Certification Academic Center at 631-444-3209.

What if Peers have already taken some of the required courses for certification?

Required courses must be taken within three calendar years of submission of the Peer Certification Application to the Review Board. For example, if a peer is submitting their application in May 2020, all courses must be after January 1, 2017. This applies to all classes, including those taken on the http://www.hivtrainingny.org website as well as outside trainings, such as SafeTALK, the, Positive Self-Management Training or any of the equivalent trainings through the NYC Department of Health T-TAP. There may be some exceptions for online learning or archived webinars. Remember: All certificates for outside trainings need to be uploaded to your online peer certification application.

To check the courses, a peer must go to the http://www.hivtrainingny.org website, log-in and click the "My Courses" link located on the right side. If you have questions about your prior coursework, please call the Peer Certification Academic Center at 631-444-3209.

Can a peer receive college credit for receiving their NYS Peer Certification?

Yes, those who successfully become a NYS Certified Peer Worker qualify for a minimum of 26 college credits through SUNY Empire State College. For more information please see the information located at https://www.hivtrainingny.org/FAQDocs/escfaq.pdf.

Is there funding to support travel, hotels, meals, etc. for peer workers seeking certification? Peers seeking certification are encouraged to have an agency sponsor travel to trainings. Typically, this is the agency where the peer worker is doing their practicum. Limited resources are available from the AIDS Institute to support travel to trainings, but this is only available to individuals who are 1-2 courses away from completing their certification. Please e-mail to stephen.sebor@stonybrook.edu to inquire.

Additional Questions?

Call the Peer Certification Academic Center at 631-444-3209 or e-mail Stephen Sebor at stephen.sebor@stonybrook.edu.

Peer Certification Course Tracker Form – HIV Peer Workers

Note: You should only use this checklist if you are seeking <u>HIV Peer Certification</u>
This form can be found online at: https://www.hivtrainingny.org/FAQDocs/HIVCourseCheckList.pdf

<u>Directions:</u> Use this document to keep track of your progress completing trainings toward your HIV Peer Worker Certification. Either print a copy of this document or save it to your computer. To track your progress online, log on to your account on www.hivtrainingny.org. Select **Course List** at the top of the screen. On the right, select **"My Courses."**

Core Training Requirements for all Certified Peer Workers

All applicants must complete a minimum of 68 hours of the Core Required Trainings below.

	1			
Required General Courses: (in-person or online)	In Person Training Hours	Online/ Webinar Hours	Date of Training	Course Completed
NYS AIDS Institute Pre-Certification Peer Worker Training	19.5	19.5		
Building Bridges to Cultural Competency	6.5	4.0 (2 sessions)		
LGBT Cultural Competency	6.5	4.0 (2 sessions)		
Health Equity Online Training	n/a	1.0		
Health Literacy in HIV, STI, and Viral Hepatitis Care	3.0	1.5-2.0		
Trauma Informed Care 101	6.5	6.5 (4 sessions)		
Sex, Gender and HIV/STDs	13.0	n/a		
SafeTALK Suicide Alertness Training*	3.0	n/a		
Required Medical Information Courses: You must take the in-person "Intro to HIV, STIs & Viral H	lep" course (or take all 3 highlig	thted courses	, in-person or online
Introduction to HIV, STIs and Viral Hepatitis	6.5	1.5		
Overview of HIV Online Training	n/a	2.0		
Hepatitis C Basics for Peer Workers	6.5	1.5-2.0		
Introduction to Sexually Transmitted Infections	3.0	1.5-2.0		
Counseling Skills: (choose at least two counseling appr	oaches tota	ling 6.0 hours)		
Harm Reduction Approach Overview	6.5	1.5-2.0		
Motivational Interviewing	3.5-6.5	n/a		
Motivational Interviewing Overview	n/a	0.5		
Motivational Interviewing Practice	3.5-6.5	1.5		
Overview of Stage-based Behavioral Counseling	6.5	1.5-2.0		
Add your in-person hours:				
Add your online hours:				
Add your in-person and online hours together: (must have at least 68 hours)				

The box below is a list of <u>HIV specialized training topics</u>. Not all courses on this page need to be completed and checked off. A minimum of 22 hours are required before applying for certification. When you complete a course, check the box under "Course Completed".

Training Title	Training Hours	Date Of Training	Date Taken	Course Completed		
All HIV Peer Worker Specialists <u>must take one</u> of the following:						
HIV Peer Worker Role in Patient Navigation	13.0					
Peer Workers: Promoting Primary Care and Treatment Adherence for HIV	13.0					
Choose a	any of the Special	lized Courses bel	ow:			
Active Drug Users and HIV/HCV Retention in Care and Treatment Adherence	6.5					
Addressing Sexual Risk with Drug Users and their Partners	6.5					
Crystal Meth, MSM & HIV: An Update	13.0					
Engagement in Care Series: Newly Diagnosed Trans Client Living with HIV	1.0					
Engagement in Care Series: Working with Older Adults Living with HIV or Webinar	1.0					
Group Facilitation Skills for STD/HIV Prevention Interventions	13.0					
Healthy Sex! Linking Gay Men and MSM to Sexual Health Services	6.5					
HIV and Hepatitis C Co-infection	3.0					
HIV Testing in NYS	2.0-3.0					
HIV Testing Skills Practice Session	3.0-6.5					
Improving Health Outcomes for HIV- Positive Individuals Transitioning from Correctional Settings to the Community	6.5					
Intro to Co-Occurring Disorders for Clients with HIV/AIDS	6.5					
Role of Non-Clinicians in Promoting PrEP	3.5					
Safer Injecting and Wound Care	6.5					

Supporting Sexual Health Among Young MSM of Color	6.5			
Surviving and Thriving: Older Gay Men and MSM Living with HIV	6.5			
Transgender Health 102: Addressing Barriers to Care for Transgender People*	6.5			
Webinar: Health Promotion for Older Adults Living with HIV	2.0			
Webinar: MSM and Sexual Health Parts 1 & 2	4.0			
Webinar: Sexual Health of Older Adults	2.0			
Total Specialized Hours (add training hours)				
*This symbol denotes a course has a prerequisite. Please see the course description for details.				

The following courses are not offered through Education and Training but, may be counted toward <u>HIV specialized training requirements</u> as follows:

Training Title	Training Hours	Date Traini		Date Taken		Course Completed		
NYC DOHMH BHIV Comprehensive Care Coordination Training	30.0							
NQC Training of Consumers for Quality	20.0							
Stanford University Positive Self-Management Program (PSMP) or Chronic Disease Self-Management Training (CDSMP) (Offered by Stony Brook University)	15.0							
Motivational Interviewing		3.5-6.5	r	n/a				
Motivational Interviewing Overview		n/a	(0.5				
Motivational Interviewing Practice		3.5-6.5	1	1.5				
Overview of Stage-based Behavioral C	ounseling	6.5	2	2.0				
Add your in-person hours:								
Add your online hours:								
Add your in-person and online how together: (must have at least 68 h								

Core Competencies for HIV Peer Workers

New York State Department of Health AIDS Institute

Background Regarding These Competencies

The effectiveness of HIV peer workers is rooted in the fact that these workers share a common "lived experience" with clients. As a result, peer workers have a unique capacity to provide targeted services that can inspire, empower and support clients living with, or at risk for, HIV. Peer workers provide a unique category of service delivery through the lens of "shared lived experience" which is distinct from the roles and services delivered by other members of a multi-disciplinary care or prevention team. The following is a list of core competencies that comprise the full potential scope of activities that a NYS AIDS Institute certified peer worker might be asked to carry out. Organizations employing peers should consider the concept of "shared lived experience" and this list of competencies when defining the specific job description and recruiting HIV peer workers. While this entire list of competencies is required to achieve certification, it is anticipated that an individual peer worker's job description would not encompass all of these competencies, but rather, would focus on one or more of these key areas of work.

General Competencies:

All HIV peer workers are responsible for carrying out the specific competencies outlined below, regardless of the work setting and job description.

- Shares their personal experience in a strategic, compassionate and responsive manner and comfortably discloses status
- Demonstrates a commitment to personal self-management of health conditions and treatment regimens
- Addresses health literacy needs of clients to ensure client understanding of messages delivered
- Communicates using a person-centered approach such as active listening, stages of change, motivational interviewing and/or harm reduction counseling
- Upholds agency confidentiality policies and procedures
- Recognizes own vulnerabilities and emotional responses to work-related matters and identifies strategies for managing the situation, including asking for help from supervisor(s) and/or other supports
- Recognizes the limits of their knowledge and seeks assistance from supervisor, other staff, or other available supports when needed
- Seeks opportunities to increase knowledge and skills for peer support
- Employs self-care strategies to promote wellness and prevent burnout
- Demonstrates effective oral, written and non-verbal communication skills appropriate for the specific work setting
- Develops awareness of and manages own personal biases and triggers when dealing with participant, as required for their specific worksite

 Relates to clients via his/her shared lived experience, despite the differences that may exist between them

Specialized Competencies:

HIV Testing:

HIV peer workers may serve as part of a multi-disciplinary team delivering HIV testing services, including peer-delivered pre-test messages, conducting CLIA-waived rapid HIV tests and providing follow-up sessions with clients who test HIV positive, indeterminate or negative. Based on the specific work setting and job description, HIV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Works as part of a multi-disciplinary team to conduct HIV testing following NYS HIV testing laws, including obtaining informed consent before the HIV test is conducted
- Explains key points of information about HIV testing
- Shares personal experiences in a strategic manner to demonstrate to the client the importance of knowing one's HIV status

For clients with a preliminary positive rapid HIV test result:

- Works as part of a multi-disciplinary team to explain the meaning of the test result and that additional testing is needed to know for sure
- Works as part of a multi-disciplinary team to arrange for blood draw for additional testing
- Offer accompaniment and support to access confirmatory testing in accordance with job responsibilities
- Makes a follow-up appointment to provide the client the final test result

For clients with a confirmed positive HIV test result:

- Works as part of a multi-disciplinary team to review all NYS required follow-up actions for clients with a confirmed positive HIV test result
- Works as part of a multi-disciplinary team to arrange and link client to an appointment for HIV care, following best practices outlined below
- Explains the importance of partner services and makes an effective referral to the appropriate partner services program
- When applicable, uses his or her personal experience with partner notification to assist the client in understanding the range of options for notifying an at-risk partner
- When applicable, uses his or her experience with engagement and linkage to care and HIV treatment options to help the client understand that he or she can live a healthy life with HIV

For clients with a negative or indeterminate test result:

- Explains that the window period is the length of time after infection but before an HIV test is able to detect the presence of infection
- Explains the need for follow-up testing
- Explains options for HIV/STD/hepatitis prevention including: abstinence, male and female condom use, PEP, PrEP, safer sex, safer injection practices and other harm reduction strategies

- Refer and link clients to a range of prevention services
- Uses a harm reduction approach to help the client choose options that are acceptable to the client which reduce his or her risk of HIV/STD/viral hepatitis infection
- Explains the location and functioning of syringe exchange program and ESAP to all clients who use drugs

Engagement, Linkage and Retention to Care:

HIV peer works can play a very important role in engaging, linking and retaining people with confirmed HIV infection to care. HIV peer workers may be involved in outreach into the community, participate in appointment procedures, and receive referrals for follow-up from testing programs or through agency in-reach to clients in need of linkage to care. Based on the specific work setting and job description, HIV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Uses his or her personal experience of HIV treatment to explain the importance of participating in HIV health care
- Conducts outreach to people at risk for or living with HIV/HCV in the community
- Initiates contact with clients who have missed appointments, discontinued care or who have yet to engage in health care services
- Meets and greets clients who are new to the organization
- Provides a tour of the health care facility, introducing the client to appropriate staff, the location of reception, waiting room and exam rooms
- When engaging and linking a client to an initial health care appointment, accurately communicates verbally and in writing, the following information: the date, time, location, provider name, information about what to bring to the appoint and any other facility-specific information needed to have a successful appointment
- Based on knowledge of the facility practices, explains to the client what to expect during
 his or her first HIV medical appointment, including physical exam, lab work and
 interactions with staff
- Based on knowledge of the facility practices, explains the procedures to follow when arriving for a health care appointment, including checking in with the receptionist, taking a seat in the waiting room, what to expect as the length of waiting time and shares ideas about what to do while the client is waiting
- Accompanies clients to health care appointments in accordance with job description and agency policies
- Makes follow-up calls regarding attendance at health care appointments including: reminding clients of an appointment; exploring reasons for missing an appointment; assisting clients with re-scheduling an appointment
- Explains the concept of viral suppression and how achieving viral suppression will promote the client's health and reduce the chance of transmission to partners.
- Reaches out to engage clients across the whole continuum of the treatment process

Anti-retroviral Therapy (ART) Initiation and Treatment Adherence:

HIV peer workers can play an important role working with clients to support ART initiation and treatment adherence. HIV peer workers reinforce information provided by the health care

provider, listen to client concerns about treatment adherence and works as part of the overall team to provide the client with the knowledge, tools and support needed to achieve a high level of treatment adherence. Based on the specific work setting and job description, HIV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Uses his or her experience of HIV treatment options and adherence to motivate the client and demonstrate that a high level of adherence is achievable
- Explains that not taking ART medication regularly can result in: 1) poorer health, 2) the medications not working as well, 3) reduced options for future treatment, and 4) increased likelihood of transmitting the virus to partners
- Reinforces the client's understanding of HIV-related lab results, including the meaning of viral load and CD4 count
- Collaborates with clients to overcome behavioral, structural, and psychosocial barriers to taking their medications
- Works at part of the multi-disciplinary clinical team to provide tools and strategies using a client-centered approach to support clients in taking their medications every day as prescribed
- Refers clients back to health care providers to discuss any issues (i.e., side effects) that may be affecting his or her ability to adhere to a treatment regimen

Patient Navigation:

HIV peer workers can play an important role in helping clients navigate and learn about the health care system as well as the broader service delivery system. Based on his or her specific job description, HIV peers may be responsible for carrying out some or all of the specific competencies outlined below:

- Provides a tour of the facility
- Provides educational and organizational materials
- Accompanies clients to community activities and appointments and participates in community activities with peers as assigned and approved by supervisor
- Informs new clients about available services and processes
- Engages providers from HIV treatment and other services to meet the needs of clients
- Shares information about how to get to the facility via public transportation, car or walking
- Explores any concerns the client may have regarding personal safety while getting to, or navigating around, the health care facility

Client Self-Management:

Based on the specific work setting and job description, HIV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Relates their own and/or others' life experiences (while respecting privacy) to clients to inspire hope and empowerment
- Models positive self-management behaviors
- Works as part of the care team to help the client develop self-management goals, provide coaching and track progress meeting these goals

- Assists clients in voicing concerns or questions to members of the care team
- Educates clients about health, wellness, treatment adherence, viral suppression, and available support services
- Recognizes treatment adherence and viral suppression accomplishments
- Validates client's life experiences and feelings and celebrates client's efforts and accomplishments
- Recognizes and responds to the complexities and uniqueness of each client's process of treatment adherence and viral suppression, and tailors services and support to meet the preferences and unique needs of clients
- Recognizes and responds to competing priorities and life events that may impact selfmanagement, such as: co-morbid conditions; child care; employment; legal issues, substance use
- Implements peer-run, evidence based self-management interventions as determined by the agency

Harm Reduction, Syringe Access and Health Promotion:

Based on the specific work setting and job description, HIV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Promotes and provides referrals to a wide range of harm reduction, health promotion and social services including syringe exchange, safer injection practices, opioid overdose prevention, counseling about alcohol use, safer sex practices, condom availability, smoking cessation, STD screening and treatment and others as needed by the client
- Distributes or refers clients to HIV/STD/viral hepatitis educational resources, evidence based prevention interventions and other prevention services/ resources
- Researches, develops and maintains up-to-date information about community, health and other resources and services, both informal and formal
- Recognizes signs of harm, crisis or distress that may interfere with treatment adherence and takes action to alert or engage other members of the care team and address the situation by using knowledge of local resources, services or client support

Support Groups:

Based on the specific work setting and job description, HIV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Markets support group to recruit clients to join the group
- Serves as facilitator or co-facilitator of a support group, along with another staff person
- Acts as a liaison between peers and co-facilitator, to bridge gaps and ensure groups are meeting the needs of the participants
- Leads by example by strategically sharing personal experience/stories
- Encourages active participation and client sharing of information
- Establishes and enforces support group rules to ensure confidentiality and that the group is a "safe space"
- Makes statements that show understanding, compassion, sympathy, and concern
- Encourages clients to listen and provide supportive feedback

Supportive Services:

HIV peer workers can play an important role supporting the client in accessing a wide range of social services and supports. HIV peer workers should not be expected to complete needs assessments, develop service plans or make decisions about referrals to specific psycho-social services. Rather, peer workers work as part of the care team to gather information about client needs, support an established service plan and support the client in accessing services to which he or she has been referred. Based on the specific work setting and job description, HIV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Works as part of multi-disciplinary team to identify supportive services that meets the needs of the clients
- Work as part of a team a multi-disciplinary team to provide targeted referrals and linkages to essential services outside of agency
- Educate clients about the range of behavioral health services and works to destigmatize these services
- Assists clients with making appointments for supportive services or arranges appointments for them
- Accompanies clients to supportive services appointments

Case Conferencing:

HIV peer workers participate in case conferences to discuss the needs of individual clients and to report out on their work with the client. Based on the specific work setting and job description, HIV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Works as member of multi-disciplinary team to retain clients in care by addressing barriers to the provision of service delivery and needed supportive services for client
- Provides a brief summary of their work with the client, including reporting on psychosocial issues, barriers or facilitators to care
- Conveys their point of view in a respectful way when working with colleagues
- Recognizes the limits of their knowledge and seeks assistance from others when needed

Facilitating Client Involvement in Continuous Quality Improvement Efforts:

Peer workers engage and encourage clients to play a role in facility-level QI activities, and participates in QI activities as part of their role as members of the care team. Based on the specific work setting and job description, HIV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Engages and encourages clients to participate in facility-level QI activities
- Participates in QI activities as part of their role as members of the care team
- Represent the voices and perspectives of clients in the QI process
- Participates in agency efforts to reduce and eliminate prejudice, stigma and discrimination against people who have HIV
- Actively participates in efforts to improve the organization

Health Coverage:

Understanding health insurance coverage and benefits, and how employment and other circumstances can effect one's eligibility can be difficult. Based on the specific work setting and job description, HIV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Explains that the New York's Health Exchange website (https://nystateofhealth.ny.gov/) is the place to visit to assess eligibility for health insurance coverage.
- Understands and identifies local resources that can assist clients with enrollment in a range of health coverage options
- Explains what ADAP is and provide information about how to contact ADAP
- Works as part of the team to inform clients about relevant patient assistance programs to ensure health coverage and medication access needs are met
- Understands how employment effects his or her own benefits and coverage

<u>Documentation and Record-Keeping:</u>

HIV peer workers are expected to provide documentation of the services they deliver to clients. Based on the specific work setting and job description, HIV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Respects confidentiality of client records and follows all agency policies for handling client records
- Works with other members of the care team to interpret data and patient information to make appropriate decisions regarding the care of the patient
- Documents services provided to the client in the client record, in accordance with agency policies
- Documents time and effort as needed for billing/ reimbursement practices, in accordance with agency policies

Core Competencies for HCV Peer Workers

New York State Department of Health AIDS Institute

Background Regarding These Competencies

The effectiveness of Hepatitis C (HCV) peer workers is rooted in the fact that these workers share a common "lived experience" with clients. As a result, peer workers have a unique capacity to provide targeted services that can inspire, empower and support clients living with, or at risk for, HCV. HCV peer workers, are individuals with the "shared lived experience" of HCV, including individuals with or without treatment experience. Peer workers provide a distinct category of service delivery through the lens of "shared lived experience", which is different from the roles and services delivered by other members of a multi-disciplinary care or prevention team. The following is a list of core competencies that comprise the full potential scope of activities that a NYS AIDS Institute certified peer worker might be asked to carry out. Organizations employing peers should consider the concept of "shared lived experience" and this list of competencies when creating a specific job description and recruiting HCV peer workers. While this entire list of competencies is required to achieve certification, it is anticipated that an individual peer worker's job description would not encompass all of these competencies, but rather, would focus on one or more of these key areas of work.

General Competencies:

All HCV peer workers are responsible for carrying out the specific competencies outlined below, regardless of the work setting and job description.

- Shares their personal experience in a strategic, compassionate and responsive manner and comfortably discloses status
- Demonstrates a commitment to personal self-management of health conditions and treatment regimens
- Addresses health literacy needs of clients to ensure client understanding of messages delivered
- Communicates using a person-centered approach such as active listening, stages of change, motivational interviewing and/or harm reduction counseling
- Upholds agency confidentiality policies and procedures
- Recognizes own vulnerabilities and emotional responses to work-related matters and identifies strategies for managing the situation, including asking for help from supervisor(s) and/or other available supports
- Recognizes the limits of their knowledge and seeks assistance from staff when needed
- Seeks opportunities to increase knowledge and skills for peer support
- Employs self-care strategies to wellness and prevent "burn-out"
- Demonstrates effective oral, written and non-verbal communication skills appropriate for the work setting
- Develops awareness of and manages own personal biases and triggers when dealing with participant, as required for their specific worksite

 Relates to clients via their shared lived experience, despite the differences that may exist between them

Specialized Competencies:

HCV Testing:

HCV peer workers may serve as part of a multi-disciplinary team delivering HCV testing services, including peer-delivered pre- and post-test counseling messages, conducting CLIA-waived rapid HCV screening tests and providing follow-up sessions with clients who test HCV positive or negative. Based on the specific work setting and job description, HCV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Works as part of a multi-disciplinary team to conduct HCV testing
- Explains key points of information about HCV testing, including the differences between the two HCV tests (i.e., HCV antibody screening test and HCV RNA test)
- Reinforces the need for the second HCV test (HCV RNA) to diagnose HCV if the HCV antibody screening test is positive
- Shares personal experiences in a strategic manner to demonstrate to the client the importance of knowing one's HCV status
- Refers clients to testing sites and accompanies as needed

For clients with a positive/reactive HCV test result:

- Explains that client has HCV antibodies, was exposed to HCV at some time, and is probably infected, but additional testing is needed to know for sure
- Explains that the presence of HCV antibodies does not protect from reinfection or super-infection
- Emphasizes the need for getting the second HCV RNA test to confirm (or rule out) active infection
- Works as part of a multi-disciplinary team to arrange and link client to an appointment for follow-up HCV testing and care, following best practices outlined below
- When applicable, uses his or her experience with HCV testing, linkage to care and treatment to help the client understand the importance of attending the follow-up appointment and that HCV is a curable condition for most people

For clients with a negative/nonreactive HCV test result:

- Explains that it can take up to six months for antibodies to become detectable after an HCV exposure
- Explains the need for follow-up testing, if a recent exposure occurred
- Explains that a negative test result does not protect from getting infected in the future
- Explains options for HCV prevention, including safer injection practices and other relevant harm reduction strategies
- Uses a harm reduction approach to help the client choose options that are acceptable to the client and which reduce their risk of HCV infection
- Refers clients who use drugs to syringe exchange program and ESAP

Engagement, Linkage and Retention to Care:

HCV peer workers can play a very important role in engaging, linking and retaining people with confirmed HCV infection to care. HCV peer workers may be involved in outreach into the community, participate in appointment procedures and receive referrals for follow-up from testing programs or through agency in-reach to clients in need of linkage to care. Based on the specific work setting and job description, HCV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Uses their personal experience of HCV treatment to explain the importance of participating in HCV health care
- Conducts outreach to people at risk for or living with HCV in the community
- Initiates contact with clients who have missed appointments, discontinued care or who have yet to engage in health care services
- Meets and greets clients who are new to the organization
- Provides a tour of the health care facility, introducing the client to appropriate staff, the location of reception, waiting room and exam rooms
- When engaging and linking a client to an initial health care appointment, accurately communicates, verbally and in writing, the following information: the date, time, location, provider name, information about what to bring to the appointment and any other facility-specific information needed to have a successful appointment
- Based on knowledge of the facility practices, explains to the client what to expect during their first HCV medical appointment, including physical exam, lab work and interactions with staff
- Based on knowledge of the facility practices, explains the procedures to follow when arriving for a health care appointment, including checking in with the receptionist, taking a seat in the waiting room, what to expect as the length of waiting time and shares ideas about what to do while the client is waiting
- Accompanies clients to health care appointments in accordance with job description and agency policies
- Makes follow-up calls regarding attendance at health care appointments including: reminding clients of an appointment; exploring reasons for missing an appointment; assisting clients with re-scheduling an appointment
- Explains the concept of sustained virologic response (SVR) and how achieving SVR will promote the client's health and reduce the chance of transmission to partners
- Informs client about newer therapies that are available, which are interferon-free, have fewer side effects and shorter treatment duration. Explain that cure is possible, and many of these therapies have high cure rates
- Reaches out to engage clients across the whole continuum of the treatment process
- Distributes or refers clients to appropriate hepatitis C educational resources

Hepatitis C Treatment:

HCV peer workers can play an important role working with clients to support HCV treatment initiation and adherence. HCV peer workers reinforce information provided by the health care

provider, and listen to client concerns about treatment, potential side effects and adherence. They work as part of the overall team to provide the client with the knowledge, tools and support needed to achieve a high level of treatment adherence and a sustained virologic response (SVR)/cure. Based on the specific work setting and job description, HCV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Uses their experience of HCV treatment options and adherence to motivate the client and demonstrate that a high level of treatment completion is achievable
- Clarifies HCV treatment misconceptions
- Explains that HCV is a curable condition
- Reinforces medical provider's explanation about newer therapies that are available, which are interferon-free, have fewer side effects and shorter treatment duration.
 Explains that cure is possible, and many of these therapies have high cure rates
- Reinforces the client's understanding that if the client is cured that does not mean that
 the client cannot be reinfected. For clients who achieve a cure, provides various
 interventions and resources to prevent HCV reinfection
- Explains that not taking HCV medication as prescribed can result in: 1) poorer health, 2) the medications not working, 3) medication resistance: reduced options for future treatment, and 4) increased likelihood of transmitting the virus to others
- Collaborates with clients to overcome behavioral, structural, and psychosocial barriers to taking their medications
- Works at part of the multi-disciplinary clinical team to provide tools and strategies using a client-centered approach to support clients in taking their medications every day as prescribed
- Refers clients back to health care providers to discuss any issues (i.e. side effects, discontinuation of medication without doctor's knowledge) that may be affecting their ability to adhere to a treatment regimen
- Works as part of a multi-disciplinary team to assess the readiness of the client to begin treatment (other health issues present, mental health, trauma, commitment to treatment, safe place to live while on treatment or keep medications, access to healthy food, time off work, social support, insurance coverage or financial assistance)
- Conveys appropriate expectations for time and other administrative issues it may take to initiate HCV treatment

Patient Navigation:

HCV peer workers can play an important role in helping clients navigate and learn about the health care system as well as the broader service delivery system. Based on their specific job description, HCV peers may be responsible for carrying out some or all of the specific competencies outlined below:

- Provides information about available programs and services when engaging or enrolling clients in the community
- Provides a tour of the facility where the patient will receive services
- Provides educational and organizational materials

- Accompanies clients to community activities and appointments and participates in community activities with clients as assigned and approved by supervisor
- Informs new clients about available services and processes
- Assesses barriers and obstacles that may prevent a client from being linked to care.
 Assists client in taking appropriate action to overcome identified barriers
- Engages providers from HCV care and treatment program and other services, to meet the needs of clients
- Connects and introduces clients to providers, providers to clients and to other HCV clients, as needed while always remembering to ask permission to disclose any of a client's personal health information to others
- Shares information about how to get to the facility via public transportation, car or walking
- Explores any concerns the client may have regarding personal safety while getting to, or navigating around, the health care facility

Client Self-Management:

Based on the specific work setting and job description, HCV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Relates their own and/or others' life experiences (while respecting privacy) to clients to inspire hope and empowerment
- Models positive self-management behaviors
- Works as part of the care team to help the client develop self-management goals, provide coaching and track progress meeting these goals
- Assists clients in voicing concerns or questions to members of the care team
- Educates clients about health, wellness, treatment adherence, sustained virologic response (SVR), and available support services
- Recognizes treatment adherence and completion
- Validates client's life experiences and feelings and celebrates client's efforts and accomplishments
- Recognizes and responds to the complexities and uniqueness of each peer's process of treatment adherence, including stage of disease and treatment outcomes, and tailors services and support to meet the preferences and unique needs of clients
- Recognizes and responds to competing priorities and life events that may impact selfmanagement, such as: co-morbid conditions; child care; employment; legal issues, substance use
- Implements peer-run, evidence based self-management interventions as determined by the agency

Harm Reduction, Syringe Access and Health Promotion:

Based on the specific work setting and job description, HCV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Promotes and provides referrals to a wide range of harm reduction and health
 promotion resources including those related to syringe exchange, safer injection
 practices, opioid overdose prevention, counseling about alcohol use, safer sex practices,
 condom availability, smoking cessation, educational information, social services, and
 others as needed by the client
- Provides information on risk of relapse and re-infection. Provides education and reinforces harm reduction messaging
- Researches, develops and maintains up-to-date information about community, health and other resources and services, both informal and formal
- Recognizes signs of harm, crisis or distress that may interfere with medical care or treatment adherence. Takes action to alert or engage other members of the care team to address the situation by using local resources, services or client support
- Provides information on opioid overdose prevention and opioid substitution and supporting others
- Works with a multi-disciplinary team to address difficulties a client may experience due to active substance use, such as appointment keeping and treatment adherence

Support Groups:

Based on the specific work setting and job description, HCV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Markets support group to recruit clients
- Serves as facilitator or co-facilitator of a support group, along with another staff person
- Acts as a liaison between peers and co-facilitator, to bridge gaps and ensure groups are meeting the needs of the participants
- Leads by example by strategically sharing personal experience/stories
- Encourages active participation and client sharing of information
- Establishes and enforces support group rules to ensure confidentiality and that the group is a "safe space"
- Meets needs of participants, offering information about additional supportive services or groups that may be beneficial
- Makes statements that show understanding, compassion, sympathy, and concern
- Encourages peer members to listen and provide supportive feedback

Supportive Services:

HCV peer workers can play an important role supporting the client in accessing a wide range of social services and supports. HCV peer workers should not be expected to complete needs assessments, develop service plans or make decisions about referrals to specific psycho-social services. Rather, peer workers work as part of the care team to gather information about client needs, support an established service plan and support the client in accessing services to which they have been referred. Based on the specific work setting and job description, HCV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Works as part of a multi-disciplinary team to identify supportive services that meet the needs of the client. Acts as a liaison between the client and multi-disciplinary team
- Educates clients about the range of behavioral health services available and works to destignatize use of these services
- Works as part of a multi-disciplinary team to provide targeted referrals and linkages to essential services outside of agency
- Assists clients with making appointments for supportive services or arranges appointments for them
- Accompanies clients to supportive services appointments

Case Conferencing:

HCV peer workers participate in case conferences to discuss the needs of individual clients and to report out on their work with the client. Based on the specific work setting and job description, HCV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Works as member of multi-disciplinary team to retain clients in care by addressing barriers to the provision of service delivery and needed supportive services
- Provides a brief summary of their work with the client, including reporting on psychosocial issues, and barriers or facilitators to care
- Conveys their point of view in a respectful way when working with colleagues
- Recognizes the limits of their knowledge and seeks assistance from others when needed

Facilitating client involvement in continuous quality improvement (QI) efforts:

Peer workers engage and encourage clients to play a role in facility-level QI activities, and participates in QI activities as part of their role as members of the care team. Based on the specific work setting and job description, HCV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Engages and encourages clients to participate in facility-level QI activities
- Participates in QI activities as part of their role as members of the care team
- Represent the voices and perspectives of clients in the QI process
- Participates in agency efforts to reduce and eliminate stigma, prejudice and discrimination of people who have HCV and persons who use drugs
- Actively participates in efforts to improve the organization

Health Coverage:

Basic understanding of health insurance coverage and benefits, and how employment and other circumstances can affect one's eligibility. Based on the specific work setting and job description, HCV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

• Explains that the New York's Health Exchange website (https://nystateofhealth.ny.gov/), is the place to visit to assess eligibility for health insurance coverage

- Understands and identifies local resources that can assist clients with enrollment in a range of health coverage options
- Reinforces the need to work with staff such as a health benefits specialist, case manager or social worker to ensure health coverage needs are met
- In conjunction with the multi-disciplinary team, provides information about the prior authorization process, requirements and documentation needed to obtain approval.
 Provides information about appeal process, if needed and links client to appropriate staff and services in the event of a denial
- Works as part of the multi-disciplinary team to ensure health coverage and medication access needs are met and informs clients about relevant patient assistance programs (for high co-pays and HCV medications)
- Advocates for client and facilitates referrals for additional assistance
- Understands how employment effects his or her own benefits and coverage

Documentation and Record-Keeping:

HCV peer workers are expected to provide documentation of the services they deliver to clients. Based on the specific work setting and job description, HCV peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Respects confidentiality of client records and follows all agency policies for handling client records
- Interprets data and patient information regarding the care of the patient, in consultation with care team as needed
- Documents services provided to the client in the client record, in accordance with agency policies
- Documents time and effort as needed for billing/ reimbursement practices, in accordance with agency policies

Peer Certification Course Tracker Form – HCV Peer Workers

Note: You should only use this checklist if you are seeking <u>HCV Peer Certification</u>
This form can be found online at: https://www.hivtrainingny.org/FAQDocs/HCVCourseCheckList.pdf

<u>Directions:</u> Use this document to keep track of your progress completing trainings toward your HCV Peer Worker Certification. Either print a copy of this document or save it to your computer. To track your progress online, log on to your account on www.hivtrainingny.org. Select **Course List** at the top of the screen. On the right, select **"My Courses."**

Core Training Requirements for all Certified Peer Workers

All applicants must complete a minimum of 68 hours of the Core Required Trainings below.

Required General Courses: (in-person or online)	In Person Training Hours	Online/ Webinar Hours	Date of Training	Course Completed
NYS AIDS Institute Pre-Certification Peer Worker Training	19.5	19.5		
Building Bridges to Cultural Humility	6.5	4.0 (2 sessions)		
LGBTQ+ Cultural Competency	6.5	4.0 (2 sessions)		
Health Equity Online Training	n/a	1.0		
Health Literacy in HIV, STI, and Viral Hepatitis Care	3.0	1.5-2.0		
Trauma Informed Care 101	6.5	6.5 (4 sessions)		
Sex, Gender and HIV/STDs	13.0	n/a		
SafeTALK Suicide Alertness Training	3.0	n/a		
Required Medical Information Courses: You must take the in-person "Intro to HIV, STIs & Viral H	ep" course (or take all 3 highlig	hted courses	, in-person or online
Introduction to HIV, STIs and Viral Hepatitis	6.5	1.5		
Overview of HIV Online Training	n/a	2.0		
Hepatitis C Basics for Peer Workers	6.5	1.5-2.0		
Introduction to Sexually Transmitted Infections	3.0	1.5-2.0		
Counseling Skills: (choose at least two counseling appr	oaches tota	ling 6.0 hours)		
Harm Reduction Approach Overview	6.5	1.5-2.0		
Motivational Interviewing	3.5-6.5	n/a		
Motivational Interviewing Overview	n/a	0.5		
Motivational Interviewing Practice	3.5-6.5	1.5		
Overview of Stage-based Behavioral Counseling	6.5	1.5-2.0		
Add your in-person hours:				
Add your online hours:				
Add your in-person and online hours together: (must have at least 68 hours)				

The box below is a list of <u>HCV specialized training topics</u>. Not all courses on this page need to be completed and checked off. A minimum of 22 hours are required before applying for certification. When you complete a course, check the box under "Course Completed".

Training Title	Training Hours	Date Scheduled	Date Taken	Course Completed			
All HCV Peer Worker Specialists <u>must take one</u> of the following:							
Hepatitis C Peer Worker Role in Patient Navigation	13.0						
Hepatitis C: Screening, Diagnosis and Linkage to Care	6.5						
Choose a	Choose any of the Specialized Courses below:						
Active Drug Users and HIV/HCV Retention in Care and Treatment Adherence	6.5						
Addressing Sexual Risk with Drug Users and their Partners	6.5						
Ensuring Competencies for Hepatitis C Testing	6.5						
Group Facilitation Skills for STD/HIV Prevention Interventions	13.0						
Hepatitis C Basics for Peer Workers	6.5						
Hepatitis C Medical Care and Treatment Update for Peer Workers	6.5						
Hepatitis C: Prevention with Young People with Inject Drugs (PWID)	6.5						
HIV and Hepatitis C Co-infection	3.0						
Safer Injecting and Wound Care	6.5						
Transgender Health 102: Addressing Barriers to Care for Transgender People*	6.5						
Webinar: Hepatitis C Basics	2.0						
Webinar: MSM and Sexual Health Parts 1 & 2	4.0						
Total Specialized Hours: (add training hours) *This symbol denotes a course has a prerequisite. Please see the course description for details.							

Core Competencies for Harm Reduction Peer Workers New York State Department of Health AIDS Institute

Background Regarding These Competencies

The effectiveness of Harm Reduction (HR) Peer Workers is rooted in the fact that these workers share a common "lived experience" with participants. As a result, HR Peer Workers have a unique capacity to provide targeted services that can inspire, empower and support drug users and sex workers. Peer workers provide a unique category of service delivery through the lens of "shared lived experience" which is distinct from the roles and services delivered by other members of a multi-disciplinary care or prevention team. The following is a list of key competencies that a NYS AIDS Institute certified Harm Reduction Peer Worker might need to demonstrate, depending on their work setting. Organizations employing peers should consider the concept of "shared lived experience" and review this list of competencies when defining the specific job description, recruiting, hiring, and supervising HR Peer Workers. For HR peer workers, "shared lived experience" includes those individuals who have a shared life experience of drug use and/or engagement in high risk sexual behaviors/sex work. These experiences enable peers to empathize appropriately with target populations and effectively engage them into services. While this entire list of competencies is required to achieve certification, it is anticipated that an individual peer worker's job description would not encompass all of these competencies, but rather, would focus on one or more of these key areas of work.

General Competencies

All Harm Reduction peer workers are responsible for demonstrating the specific competencies outlined below, regardless of the work setting and job description.

- Shares their personal experience in a strategic, compassionate and responsive manner and comfortably discloses status
- Demonstrates a commitment to personal self-management of health conditions
- Addresses health literacy needs of clients to ensure client understanding of messages delivered
- Communicates using a person-centered approach such as active listening, stages of change, motivational interviewing and/or harm reduction counseling
- Understands and upholds agency confidentiality policies and procedures
- Recognizes own vulnerabilities and emotional responses to work-related matters and identifies strategies for managing the situation, including asking for help from supervisor(s) and/or other available supports
- Recognizes the limits of their knowledge and seeks assistance from supervisor, other staff, or other available supports when needed
- Seeks opportunities to increase knowledge and skills for peer support
- Employs self-care strategies to promote wellness and prevent "burn-out"
- Demonstrates appropriate oral, written and non-verbal communication skills

- Develops awareness of and manages own personal biases and triggers when dealing with participant, as required for their specific worksite
- Relates to participants via his/her shared lived experience in a respectful, non-judgmental way
- Has a basic understanding of HIV, HCV, and sexually transmitted diseases

Harm Reduction Competencies

Based on the specific work setting and job description, HR peer workers may be responsible for demonstrating some or all of the specific competencies outlined below.

- Effectively conveys the principles of harm reduction and how it applies to different areas of risk (i.e., drug use, sex work, health behavior change, etc.)
- Has a basic understanding of the various classes of drugs and how to employ harm reduction strategies that are drug-specific
- Has a basic understanding of sexual risk and associated harm reduction strategies
- Promotes and provides referrals to a wide range of harm reduction and health
 promotion resources including those related to syringe exchange, safer injection
 practices, opioid overdose prevention, alcohol use, safer sex practices, condom
 availability, PrEP/PEP, smoking cessation, prevention information, social services, and
 others as needed by the participant
- Provides education and reinforces harm reduction messaging
- Researches, develops and maintains up-to-date information about community, health and other resources and services, both informal and formal
- Recognizes signs of harm, crisis or distress that may interfere with medical care or treatment adherence. Takes action to alert or engage other members of the service delivery team to address the situation by using local resources, services or participant support
- Provides information on opioid overdose prevention and response, Opioid Agonist Therapies and other supportive services
- Is a Trained Responder in the Opioid Overdose Prevention Program
- Works with a multi-disciplinary team to address issues that impact participants' ability to engage in services due to drug use and/or high risk sexual behaviors/sex work (i.e. HIV/STD/HCV co-infection, stigma and other social inequalities, etc.)

Specialized Competencies

Based on the specific work setting and job description, HR peer workers may be responsible for demonstrating some or all of the specific competencies outlined below.

Promoting access to sterile injection equipment and supplies

Syringe Exchange Programs (SEPs)

 Has the ability to provide an overview of policies, procedures, and essential elements of SEP operations

- Has a clear understanding of the SEPs policies and procedures including different threshold criteria/legal requirements for enrolling individuals into SEP based on age (under 18 vs. over 18)
- Explains to drug users and others the general services available at an SEP and describes who is eligible for these services
- Exhibits a basic understanding of penal and public health laws & NYS regulations that allow for syringe access in NYS, and conducts peer delivered syringe exchange (PDSE) accordingly.
- Conducts outreach to active drug users in the community
- Works as part of the SEP team or individually conducts initial assessment/screening to determine an individual's needs and eligibility for services through the SEP
- Works as part of the SEP team or individually issues Participant Identification Cards and explains how to use the ID card in the event of an interaction with Law Enforcement
- Has the ability to engage and educate community members and communicate the services of their program and their duties as a peer
- Has the ability to respond to Law Enforcement questions, concerns and challenges

Expanded Syringe Access Program (ESAP)

- Explains how NYS ESAP works, including:
 - educating individuals on minimum age eligibility for ESAP
 - educating individuals about how to locate and identify a participating pharmacy
 - educating individuals about how to purchase syringes at participating pharmacies
 - educating individuals about how to obtain syringes from health care or other sites that may participate in ESAP
 - educating individuals how to use ESAP voucher programs
 - educating individuals about how to address issues with Law Enforcement or problems with a pharmacy

Safer injecting practices

- Remains informed and aware of current trends in drug use as they related to the needs of participants in their program
- Educates participants on safer injecting practices including, but not limited to:
 - The importance of using new sterile injection equipment and works and the health risks of reusing dull or overused syringes
 - How to select an injection site, taking into consideration vein health and previous injections
 - The importance of cleaning the injection site
 - The importance of injecting on a clean surface, free of exposure to blood, other toxins or germs

- The importance of avoiding sharing needles or works including cotton, water, etc.
- How to avoid exposure to another person's blood products during the injection process
- How to clean works as a last resort.
- How to avoid or address some of health risks of injecting including abscesses, endocarditis, MRSA, etc.
- Strategies for alternatives to injecting and/or frequency of injecting
- Alternative types of injecting, including intramuscular (IM) and skin-popping

Promoting safe syringe disposal

- Explains the importance of safe disposal of used syringes
- Describes ways to dispose of syringes safely, including:
 - Returning used syringes to a syringe exchange program or other site (i.e. hospitals, nursing homes, residential sharps program)
 - Informing participants of any disposal kiosks available in the community
 - Educate participants about disposing of syringes in hard plastic bottles, for example bleach or detergent bottles
 - Provides alternative strategies for safer disposal in the absence of the above options

Safe Handling of syringes

- Handles new and used syringes in a safe manner in accordance with agency policies and procedures
- Follows agency policy and procedure in the case of an accidental needle stick
- Educates participants about how to safely handle syringes to avoid accidental needle sticks for themselves and others in the environment

Preventing Opioid Overdose

- Describes the symptoms of an opioid overdose
- Educates participants about how to avoid overdose, sharing information including, but not limited to, the following:
 - Changes in purity/potency of drugs being used
 - Changes in individual tolerance, including after periods of abstinence
 - Risks of using alone
 - Dangers of mixing drugs
 - Reports of increased toxicity or tainted drugs in the local community
- Explains that there is a medication that can reverse an opioid overdose
- Refers participants to Opioid Overdose Prevention Programs for training and/or provides this training when appropriate.

- Explains the importance of calling 911 in cases of a suspected overdose
- Explains that the Good Samaritan Law provides protection from charges and prosecution for certain drug related charges, for the person who calls and the person who ODs

Making Service Referrals

- Follows agency policies for referring participants to a wide range of needed services including, but not limited to:
 - HIV/HCV/STD testing, care and treatment
 - Detox, in-patient rehab, out-patient rehab, Opioid Agonist Therapy (Buprenorphine, methadone)
 - Supportive services such as harm reduction counseling, evidence based interventions, support groups, AA/NA, mental health counseling, etc.
 - Social services including housing, shelters, domestic violence services, food pantry, free meals, clothing, entitlements and other services as needed
- Follows-up with participants regarding their referral experiences and outcomes, including addressing situations where an appointment was not kept
- Provides escort for participants for referrals when appropriate or needed
- Understands and identifies local resources that can assist participants with enrollment in a range of health coverage options

Participant Self-Management

- Relates their own and/or others' life experiences (while respecting privacy) to participants to inspire hope and empowerment
- Models positive self-management behaviors
- Recognizes and responds to competing priorities and life events that may impact selfmanagement, such as: co-morbid conditions; child care; employment; legal issues, substance use
- Recognizes and responds to the complexities and uniqueness of each participant and tailors services and support to meet the preferences and unique needs of participants
- Works as part of the service delivery team to help the participant develop selfmanagement goals, provide coaching and track progress meeting these goals
- Educates participants about health, wellness, and available support services
- Validates participant's life experiences and feelings and celebrates participant's efforts and accomplishments
- Assists participants in voicing concerns and questions to members of the service delivery team.

Facilitating involvement in continuous quality improvement (QI) efforts:

HR Peer workers engage and encourage participants to play a role in facility-level QI activities, and participate in QI activities as part of their role as members of the service delivery team. Based on the specific work setting and job description, HR peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Actively participates in efforts to improve the organization
- Engages and encourages participants to contribute to facility-level QI activities
- Participates in QI activities as part of their role as members of the service delivery team
- Represent the voices and perspectives of participants in the QI process
- Participates in agency efforts to provide services in ways that reduce stigma, prejudice and discrimination of persons who use drugs and/or engage in high risk sexual behaviors/sex work

Documentation and Record-Keeping:

HR peer workers are expected to provide documentation of the services they deliver to participants. Based on the specific work setting and job description, HR peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Respects confidentiality of participant records and follows all agency policies for handling participant records
- Documents services provided to the participant in the participant record, in accordance with agency policies, including documenting referrals and follow-up activities
- Documents time and effort as needed for billing/ reimbursement practices, in accordance with agency policies

Peer Certification Course Tracker Form – Harm Reduction Peer Workers

Note: You should only use this checklist if you are seeking <u>HR Peer Certification</u>
This form can be found online at: https://www.hivtrainingny.org/FAQDocs/HRCourseCheckList.pdf

<u>Directions:</u> Use this document to keep track of your progress completing trainings toward your HR Peer Worker Certification. Either print a copy of this document or save it to your computer. To track your progress online, log on to your account on www.hivtrainingny.org. Select **Course List** at the top of the screen. On the right, select **"My Courses."**

Core Training Requirements for all Certified Peer Workers

All applicants must complete a minimum of 68 hours of the Core Required Trainings below.

Required General Courses: (in-person or online)	In Person Training Hours	Online/ Webinar Hours	Date of Training	Course Completed
NYS AIDS Institute Pre-Certification Peer Worker Training	19.5	19.5		
Building Bridges to Cultural Humility	6.5	4.0 (2 sessions)		
LGBTQ+ Cultural Competency	6.5	4.0 (2 sessions)		
Health Equity Online Training	n/a	1.0		
Health Literacy in HIV, STI, and Viral Hepatitis Care	3.0	1.5-2.0		
Trauma Informed Care 101	6.5	6.5 (4 sessions)		
Sex, Gender and HIV/STDs	13.0	n/a		
SafeTALK Suicide Alertness Training	3.0	n/a		
Required Medical Information Courses: You must take the in-person "Intro to HIV, STIs & Viral H	lep" course (or take all 3 highlig	thted courses	, in-person or online
Introduction to HIV, STIs and Viral Hepatitis	6.5	1.5		
Overview of HIV Online Training	n/a	2.0		
Hepatitis C Basics for Peer Workers	6.5	1.5-2.0		
Introduction to Sexually Transmitted Infections	3.0	1.5-2.0		
Counseling Skills: (choose at least two counseling appr	oaches tota	ling 6.0 hours)		
Harm Reduction Approach Overview	6.5	1.5-2.0		
Motivational Interviewing	3.5-6.5	n/a		
Motivational Interviewing Overview	n/a	0.5		
Motivational Interviewing Practice	3.5-6.5	1.5		
Overview of Stage-based Behavioral Counseling	6.5	1.5-2.0		
Add your in-person hours:				
Add your online hours:				
Add your in-person and online hours together: (must have at least 68 hours)				

The box below is a list of <u>HR specialized training topics</u>. Not all courses on this page need to be completed and checked off. A minimum of 22 hours are required before applying for certification.

Training Title	Training Hours	Date of Training	Date Taken	Course Completed
All HR Peer Worker	Specialists must to	ake one of the	following:	
Active Drug Users and HIV/HCV Retention in Care and Treatment Adherence	6.5			
Safer Injecting and Wound Care	6.5			
Choose any	of the Specialized	d Courses belo	ow:	
Addressing Sexual Risk with Drug Users and their Partners	6.5			
Crystal Meth, MSM & HIV: An Update	13.0			
Group Facilitation Skills for STD/HIV Prevention Interventions	13.0			
Healthy Sex! Linkage Gay Men and MSM to Sexual Health Services	6.5			
Hepatitis C: Prevention with Young People Who Inject Drugs (PWID)	6.5			
Intro to Co-Occurring Disorders for Clients with HIV/AIDS	6.5			
Role of Non-Clinicians in Promoting PrEP	3.5			
Safer Injecting and Wound Care	6.5			
Supporting Sexual Health Among Young MSM of Color	6.5			
The Intersection of Sex & Substance Use	3.0			
Transgender Health 102: Addressing Barriers to Care for Transgender People*	6.5			
Webinar: MSM and Sexual Health Parts 1 & 2	4.0			
Webinar: Sexual Health of Older Adults	2.0			
Total Specialized Hours (add training hours)				
*This symbol denotes a course has a	prerequisite. Ple	ase see the co	urse description	n for details.

The following course is not offered through Education and Training but, may be counted toward <u>HR</u> <u>specialized training requirements</u> as follows:

Training Title	Training Hours	Date of Training	Date Taken	Course Completed
Opioid Overdose Prevention	3.0			

Peer Certification Course Tracker Form – Pre-Exposure Prophylaxis (PrEP) Peer Workers

Note: You should only use this checklist if you are seeking <u>PrEP Peer Certification</u>
This form can be found online at: https://www.hivtrainingny.org/FAQDocs/PrePCourseChecklist.pdf

<u>Directions:</u> Use this document to keep track of your progress completing trainings toward your PrEP Peer Worker Certification. Either print a copy of this document or save it to your computer. To track your progress online, log on to your account on www.hivtrainingny.org. Select **Course List** at the top of the screen. On the right, select **"My Courses."**

Core Training Requirements for all Certified Peer Workers

All applicants must complete a minimum of 68 hours of the Core Required Trainings below.

Required General Courses: (in-person or online)	In Person Training Hours	Online/ Webinar Hours	Date of Training	Course Completed
NYS AIDS Institute Pre-Certification Peer Worker Training	19.5	19.5		
Building Bridges to Cultural Humility	6.5	4.0 (2 sessions)		
LGBTQ+ Cultural Competency	6.5	4.0 (2 sessions)		
Health Equity Online Training	n/a	1.0		
Health Literacy in HIV, STI, and Viral Hepatitis Care	3.0	1.5-2.0		
Trauma Informed Care 101	6.5	6.5 (4 sessions)		
Sex, Gender and HIV/STDs	13.0	n/a		
SafeTALK Suicide Alertness Training*	3.0	n/a		
Required Medical Information Courses: You must take the in-person "Intro to HIV, STIs & Viral H	<i>ep"</i> course (or take all 3 highlig	hted courses	, in-person or online
Introduction to HIV, STIs and Viral Hepatitis	6.5	1.5		
Overview of HIV Online Training	n/a	2.0		
Hepatitis C Basics for Peer Workers	6.5	1.5-2.0		
Introduction to Sexually Transmitted Infections	3.0	1.5-2.0		
Counseling Skills: (choose at least two counseling appr	oaches tota	ling 6.0 hours)		
Harm Reduction Approach Overview	6.5	1.5-2.0		
Motivational Interviewing	3.5-6.5	n/a		
Motivational Interviewing Overview	n/a	0.5		
Motivational Interviewing Practice	3.5-6.5	1.5		
Overview of Stage-based Behavioral Counseling	6.5	2.0		
Add your in-person hours:				
Add your online hours:				
Add your in-person and online hours together: (must have at least 68 hours)				

The box below is a list of PrEP specialized training topics. Not all courses on this page need

to be completed and checked off. A minimum of 22 hours are required before applying for certification.

Training Title	Training Hours	Date Scheduled	Date Taken	Course Completed
All PrEP Peer Worker	Specialists <u>must</u>	take one of the	e following:	
Role of the PrEP Peer Worker in Patient Navigation*	13.0			
Choose any o	of the Specialized	d Courses belo	w:	
Addressing Sexual Risk with Drug Users and their Partners	6.5			
Crystal Meth, MSM & HIV: An Update	13.0			
Group Facilitation Skills for STD/HIV Prevention Interventions	13.0			
Healthy Sex! Linking Gay Men and MSM to Sexual Health Services	6.5			
HIV Testing in NYS	2.0 - 3.0			
HIV Testing Skills Practice Session	6.5			
Implementing A Sex Positive Approach	1.5 / 13.0			
The Intersection of Sex & Substance Use	3.0			
Overview of PrEP Payment Options	0.5			
PrEP / PEP, Trauma and Sexual Health	6.5			
Role of Non-Clinicians in Promoting PrEP	3.5			
Supporting Sexual Health Among Young MSM of Color	6.5			
Webinar: MSM and Sexual Health Parts 1 & 2	1.5			
Webinar: Sexual Health of Older Adults	1.5			
Total Specialized Hours (add training hours) *This symbol denotes a course has a	nrerequisite Dle	ase see the co	urse description	n for details

^{*}This course will be scheduled in September 2021

Core Competencies for PrEP Peer Workers

New York State Peer Worker Certification Program in HIV, HCV, Harm Reduction and PrEP

Background Regarding These Competencies

The effectiveness of PrEP peer workers is rooted in the fact that they share a common "lived experience" with their clients. As a result, PrEP peer workers have a unique capacity to provide targeted services that can inspire, empower and support individuals in need of PrEP and related HIV prevention services. Peer workers provide a unique category of service delivery through the lens of "shared lived experience" which is distinct from the roles and services of other members of a multi-disciplinary care or prevention team. The following is a list of key competencies that a certified PrEP peer worker will demonstrate, depending on their work setting. Organizations employing PrEP peer workers should consider the concept of "shared lived experience" and review this list of competencies when defining the specific job description as well as when recruiting, hiring, and supervising PrEP peer workers. To become certified, an individual must have the "lived experience" of taking PrEP. **Note:** a person who is living with HIV who does PrEP work may be certified as an HIV Peer Worker to perform PrEP competencies by completing a practicum and carrying out the PrEP competencies.

This experience enables PrEP peer workers to empathize appropriately with priority populations and effectively assist them with PrEP. While this entire list of competencies is required to achieve certification, it is anticipated that an individual peer worker's job description would not encompass all of these competencies, but rather, would focus on one or more of these key areas of work.

General Competencies

All certified PrEP peer workers are responsible for demonstrating the specific competencies outlined below, regardless of work setting or job description.

- Shares their personal experience in a strategic, compassionate and responsive manner and comfortably discloses status
- Demonstrates a commitment to personal self-management of health conditions.
- Addresses health literacy needs of clients to ensure client understanding of messages delivered.
- Communicates using a person-centered approach such as active listening, stages of change, motivational interviewing and/or harm reduction counseling.
- Understands and upholds agency confidentiality policies and procedures.
- Recognizes own vulnerabilities and emotional responses to work-related matters and identifies strategies for managing the situation, including asking for help from supervisor(s) and/or other available supports.
- Recognizes the limits of their knowledge and seeks assistance from supervisor, other staff, or other available supports when needed.
- Seeks opportunities to increase knowledge and skills for peer support.
- Employs self-care strategies to promote wellness and prevent "burn-out".
- Demonstrates appropriate oral, written and non-verbal communication skills.
- Develops awareness of and manages own personal biases and triggers when dealing with participant, as required for their specific worksite.

- Relates to participants via his/her shared lived experience in a respectful, non-judgmental way.
- Has a basic understanding of HIV, HCV, and sexually transmitted infections (STis).

Specialized Competencies

Based on the specific work setting and job description, PrEP peer workers may be responsible for some or all of the specific competencies outlined below.

Employs a non-judgmental, sex positive approach

PrEP peer workers possess the knowledge, attitudes and skills needed to employ a non-judgmental, sex positive approach during all interactions with clients. All certified PrEP peer workers are responsible for demonstrating the specific knowledge, attitudes and skills outlined below, regardless of their work setting or job description.

Knowledge

- Is knowledgeable about the different dimensions of sexuality, including: sex for procreation; sex for pleasure; sex for intimacy; sex for spirituality; sex as a form of social exchange (for example, transactional sex or sex in exchange for money, food, housing, etc.).
- Is knowledgeable about the American Sexual Health Association's definition of sexual health, including the domains of: sexual pleasure; sexual rights/consent; communication with partners and health care providers; access to sexual health information; avoiding STIs and unintended pregnancies; accessing prevention, care and treatment services.
- Is knowledgeable about the human sexual response cycle often described as attraction, excitement, plateau, orgasm, resolution.
- Is aware of client-centered, culturally sensitive language to refer to the different parts of human genitalia for the clients they serve and their sex partners.
- Is knowledgeable about medical and slang terms for different body parts.
- Is able to describe the female reproductive cycle.
- Can describe biological changes impacting sex and sexuality across the lifespan, including childhood, puberty, adulthood, menopause and older adults.
- Is knowledgeable about the different domains of gender identity and sexual orientation and can clearly distinguish them.
- Is knowledgeable about a wide range of different sexual activities, sexual identities and communities.
- Is knowledgeable about different sex toys that may be used by the population being served.
- Can accurately identify the likelihood of HIV and STI transmission for different sexual behaviors.
- Is knowledgeable about the general history of HIV.
- Is knowledgeable about the signs and symptoms of seroconversion and early HIV.
- Is aware of the symptoms of STIs.
- Is knowledgeable about the power of language around gender, sexuality and sexual orientation and can distinguish between stigmatizing language and affirming language.

Attitudes

- Views consensual human touch and sexuality as important factors for health and happiness.
- Views sexuality as a potentially positive force in a person's life.

- Recognizes the value of skin to skin contact and exchange of body fluids as elements of a pleasurable sexual experience.
- Demonstrates a non-judgmental attitude toward the full range of sexual behaviors.
- Demonstrates a positive attitude about use of biomedical interventions to promote sexual health.
- Open to learning about every client's unique experience of gender, sex and sexuality.
- Accepts that the experience of gender and sexual orientation may be fluid for some individuals.
- Avoids use of scare tactics or fear of HIV/STIs to promote PrEP or any other harm reduction technique.
- Describes HIV as a chronic, manageable health condition and doesn't use fear of death from HIV as a strategy to promote PrEP or other forms of HIV prevention.

Skills

- Able to use personal experience in a strategic manner to explain PrEP as a sex positive option for HIV prevention. (Supervisor must rate this competency)
- Demonstrates comfort talking about the full range of possible sexual behaviors.
- Affirms a client's desire for positive sexual experiences.
- Demonstrates acceptance and non-judgmental attitudes regarding all the different reasons a person engages in sexual behavior.
- Able to ask a client open-ended questions about their sexual desires, experiences and actively listens to responses.
- Able to gather information about a client's sexual behaviors and accurately convey the potential for HIV transmission and acquisition.
- Able to gather information about a client's sexual behaviors and openly discuss the interplay of pleasure and harm reduction options.
- Able to discuss birth control/ contraceptive options with clients in a culturally responsive manner.
- Can describe to clients the symptoms of STIs.
- Demonstrates comfort using either medical terms or slang terms for different parts of human genitalia.
- Demonstrates comfort using either medical terms or slang terms for different sexual behaviors.
- Able to tailor conversations about sexual desire, sexual behavior, pleasure and sexual health to individuals of different ages across the life span.
- Able to explain PrEP as a biomedical intervention that empowers individuals to take charge of their sexual health.
- Able to explain how PrEP can enhance sexual health and pleasure by removing concern about acquiring HIV.
- Describes STIs as episodic, treatable conditions and embraces PrEP as an effective tool for promoting routine comprehensive sexual health care.
- Can explain the history of HIV and why PrEP represents such an important advance.
- Employs affirming language around gender identify, sexuality and sexual orientation.

Explaining PrEP

A central set of competencies required of every PrEP peer worker is the ability to explain PrEP as an individualized intervention in a clear, straight forward way, always applying universal precautions around health literacy. All certified PrEP peer workers, regardless of setting or job description, will demonstrate all of the competencies outlined below:

- Shares their personal experience of taking antiretroviral medication in a strategic manner to explain what PrEP is and to address client questions and concerns about PrEP. (Supervisor must rate this competency)
- Explains that PrEP is an individualized and effective option for HIV prevention and sexual health promotion.
- Explains that PrEP includes: 1) taking medication as prescribed by the health care provider, 2) periodic HIV and STI testing, 3) education about harm reduction options, including condoms to avoid STIs, 4) periodic medical appointments as agreed upon by the provider and the individual, and 5) adherence support, as needed.
- Works as part of the multi-disciplinary team to provide tools and strategies using a client-centered approach to support clients in decision-making around PrEP and PrEP adherence.
- Explains the importance of taking PrEP as prescribed, including explaining decreased efficacy when doses are missed.
- Remains up to date on changing dosing options for PrEP, including daily PrEP, PrEP on demand/ intermittent PrEP, injectable PrEP as well as other emerging medication regimens, dosing schedules, etc.
- Encourages individuals who are using or considering alternative dosing schedules to discuss it with the prescriber.
- Explains that PrEP does not protect against STIs.
- Able to discuss the role of condom use for STI prevention and the importance of regular STI screening.
- Demonstrates respect for each client's attitudes and prior experiences with condom use.
- Uses a non-judgmental approach to supporting individuals in making informed decisions regarding condom use.
- Explains the length of time a person has to take PrEP to achieve protection for different dosing schedules and different sexual activities, such as anal intercourse and vaginal intercourse.
- Reinforces the need for periodic follow-up appointments with the prescribing health care provider.
- Refers individuals/ couples interested in PrEP for conception to a health care provider.
- Can interpret the results of an HIV test.
- Able to describe the potential side effects of PrEP and strategies for addressing them.
- Able to discuss with a client the benefits and challenges of PrEP.
- Able to support a client in deciding whether PrEP is right for them.
- Able to connect individuals interested in PrEP to a medical provider that prescribes PrEP.
- Helps clients to explore their thoughts, feelings or concerns around PrEP and stigma.
- Stays current regarding community trends and perceptions regarding the use of PrEP as a biomedical intervention.

- Helps clients explore their thoughts, feeling and concerns around disclosing or not disclosing to partners that they are taking PrEP.
- Assists clients with making informed choices regarding disclosure to others that they are taking PrEP, taking into consideration the individual's concern about stigma.
- Assists clients with disclosing to their sexual or needle sharing partners that they are taking PrEP.
- Provides emotional support and reassurance to people who are taking PrEP but continue to have high levels of anxiety or fear of acquiring HIV.
- Discusses "seasons of risk" and provides accurate information about how to discontinue PrEP.
- Directs an individual to different sources of support or information about PrEP, including on-line resources, DOH materials, clinic resources and other local resources.
- Strategically shares personal experience of using PrEP for HIV prevention to assist client with decision making, adherence, disclosure issues or discontinuing PrEP.

Navigating PrEP Financial Assistance Programs

Understanding and addressing the different costs associated with PrEP may be a significant obstacle to starting PrEP. In some cases, certified PrEP peer workers are involved in this work and, in some cases, this is the responsibility of other members of the care team. Based on the specific work setting and job description, certified PrEP peer workers may be responsible for carrying out some or all of the competencies outlined below:

- Can explain that all insurers, except for certain grandfathered health plans, must provide coverage for PrEP for the prevention of HIV infection at no cost sharing and also cover screening for HIV infection at no cost-sharing.
- Describes the different costs associated with PrEP, including the cost of medication, medical appointments and lab work.
- Can refer clients to the AIDS Institute's up to date <u>Payment Options for Adults and Adolescents</u> for PrEP, explaining that PrEP can be an affordable option for anyone.
- Explains that <u>Fee-for-Service Medicaid</u> covers PrEP and that the Initial prescription does not require pre-authorization but for refills the patient must have an HIV negative test documented within the last 90 days. Explains that <u>Medicaid Managed Care Plans (MMCPs)</u> cover PrEP for adults and adolescents and that prior authorization requirements may vary among plans.
- Explains that PrEP-AP covers the cost of health care appointment and lab work for financially eligible individuals.
- Describes the Patient Assistance Programs that help pay for medication or medication co-pays.
- Able to refer an individual to someone who can assist with navigating the cost of PrEP, if the peer worker's responsibilities do not include this.

Client Self-Management and Adherence:

Based on the specific work setting and job description, certified PrEP peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

• Shares their personal experience of taking PrEP or ART in a strategic manner to support client self-management and adherence. (Supervisor must rate this competency)

- Relates their own and/or others' life experiences (while respecting privacy) to clients to inspire hope and empowerment.
- Models positive self-management behaviors.
- Works as part of the care team to help the client develop self-management goals, provide coaching and track progress meeting these goals.
- Assists clients in voicing concerns or questions to members of the care team.
- Educates clients about health, wellness, treatment adherence and available support services.
- Validates client's life experiences and feelings and celebrates client's efforts and accomplishments.
- Recognizes and responds to the complexities and uniqueness of each client's process of treatment adherence and tailor services and support to meet the preferences and unique needs of each client.
- Recognizes and responds to competing priorities and life events that may impact selfmanagement, such as: co-morbid conditions; child care; employment; legal issues, substance use.

Explaining PEP

Certified PrEP peer workers may be called on to address PEP in at least two different circumstances: 1) when a person is seeking PrEP has had a recent high-risk exposure requiring PEP; and, 2) in cases where a person has completed one or more courses of PEP and can benefit from the more proactive approach of PrEP. Based on the specific work setting and job description, certified PrEP peer workers may be responsible for carrying out some or all of the competencies outlined below:

- Explains the role of PEP in preventing HIV after a possible exposure to HIV.
- Conveys the specific behaviors/ exposures that meet the criteria for starting PEP.
- Explains that PEP should be started as soon as possible after the exposure, but not later than 72 hours after the exposure.
- Refers an individual who can benefit from PEP to the emergency department, NYS Sexual Health Clinic or call the appropriate hotline based on their location: NYC PEP hotline at 844-373-7692; Outside NYC: 844-737-4669.
- Explains that when a person calls the PEP hotline, a health care provider will assess the risk exposure to determine if PEP is appropriate and, if so, will explain how to take PEP, call the prescription in to a pharmacy near the caller, and set up an appointment for follow-up care in the person's community.
- Describes the potential side effects of PEP and strategies for addressing them.
- Reinforces the importance of completing the 28-day course of PEP medication.
- Provides emotional support and referrals to mental health counseling in cases where a person starting PEP is experiencing trauma or a high level of anxiety as a result of the exposure.
- Explains to individuals who are currently taking PEP, that PrEP is an important prevention option to consider after completing the PEP regimen, if they remain HIV negative.
- Helps individuals who have completed PEP and have a negative HIV test at four weeks postexposure, to make a seamless transition to PrEP if they determine it is right for them.
- Directs an individual to different sources of support or information about PrEP, including on-line resources, DOH materials, clinic resources and other local resources.

Sharing Harm Reduction Strategies

Education about harm reduction options is a standard component of PrEP. Certified PrEP peer workers discuss HIV/STI/HCV harm reduction options for sexual behaviors and substance use behaviors. Certified PrEP peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Gathers information about the details of a client's sexual behaviors and offer harm reduction options tailored to the individual.
- Describes sexual harm reduction options for analintercourse or anal play including: comfort, pleasure and pain considerations; liberal use of lubrication; use of male or female condoms; and strategic positioning.
- Describes sexual harm reduction options for vaginal intercourse or vaginal play including: comfort, pleasure and pain considerations; liberal use of lubrication; use of male or female condoms; and strategic positioning.
- Shares strategies to help clients communicate with sexual partners about what they are willing to, or not willing to, participate in.
- Shares harm reduction options in the context of sex parties or clubs, including the importance of good nutrition and hydration.
- Shares harm reduction strategies in the context of sex work.
- Shares harm reduction strategies in the context of substance use
- Shares harm reduction strategies in the context of exchanging sex for drugs, a place to stay, or other basic life needs.
- Able to discuss safety considerations when meeting partners online.
- Promotes and provides referrals to a wide range of harm reduction, health promotion and social services including syringe exchange, safer injection practices, opioid overdose prevention, counseling about alcohol use, safer sex practices, condom availability, smoking cessation, STI screening and treatment and others as needed by the client
- Distributes or refers clients to HIV/STI/viral hepatitis educational resources, evidence-based prevention interventions and other prevention services/resources

Addressing Trauma, Sexual Assault and Intimate partner violence

Given the high prevalence of sexual violence and Intimate Partner Violence (IPV), it is likely that PrEP peer workers will interact with clients who are dealing with past, current, or possible future sexual assault or IPV. Unless otherwise trained or certified, PrEP peer workers are not rape crisis counselors, domestic violence services providers or mental health counselors. Certified PrEP peer workers focus on staying within their scope of practice when addressing sexual assault or IPV with clients. All certified PrEP peer workers demonstrate the competencies outlined below:

- Maintain a supportive, compassionate attitude when a client reports past, current or concern about possible future sexual assault or IPV.
- In any situation where a client is in imminent danger, the PrEP peer worker consults with a supervisor or other senior member of the care team about how to proceed.
- Identify resources for sexual assault and IPV and refer clients to these services when needed.
- Explain to a client that PrEP may be an effective HIV prevention option in cases where an individual is afraid of a partner or not able to otherwise negotiate safer sex.

• Utilize a strengths-based approach to protect the client's independence, resilience, wellbeing, and ability to make choices, that allow the client to lead and be in control.

Addressing the Interplay of Sexuality and Substance Use

It is well established that many people at highest risk for HIV intentionally combine sex and substance use to enhance sexual desire, pleasure or performance. PrEP peer workers are likely to encounter clients who use alcohol, marijuana, cocaine, methamphetamine, ecstasy, erectile dysfunction drugs and other designer/club drugs during sex. PrEP peer workers are able to assist clients who combine substance use and sexual behavior and, based on their work setting and job description, may be responsible for carrying out some or all of the specific competencies outlined below:

- Recall the impact of different substances on sexual desire, pleasure and performance.
- Maintain a nonjudgmental attitude regarding the use of substances to engage in sex or enhance the sexual experience.
- Provide harm reduction options and referrals to individuals seeking help for methamphetamine use or abuse.
- Offer sexual harm reduction strategies for individuals engaged in prolonged sex during periods
 of substance use, including: liberal use of lube to reduce the possibility of tearing or abrasions;
 explaining the importance of good hydration and nutrition; and describing self-care strategies to
 promote health after periods of prolonged partying.

Explaining a Status Neutral Approach to HIV including, HIV Treatment as Prevention (TasP) and Undetectable = Untransmitable (U=U)

PrEP peer workers promote a status neutral approach to HIV. They are aware of TasP and U=U and actively promote each to reduce HIV stigma, help clients understand HIV transmission and non-transmission, and promote client empowerment. Based on their work setting or job description, PrEP peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Promote a status neutral approach to HIV, emphasizing that regardless of a person's status, there are options for every person's situation.
- Explain that when a person living with HIV is virally suppressed for six months or longer that there is effectively no risk of passing HIV to partner through sex.
- Assist people living with HIV and their sex partners in understanding and getting comfortable with the facts regarding U=U.
- Explain that U=U applies to sexual behavior but does not apply to sharing injection equipment or breastfeeding.
- Support couples with developing an HIV prevention plan that includes U=U, PrEP or both, based on the comfort of both partners.

Case Conferencing:

Certified PrEP peer workers participate in case conferences to discuss the needs of individual clients and to report out on their work with the client. Based on the specific work setting and job description, PrEP peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

 Works as member of multi-disciplinary team to retain clients in care by addressing barriers to PrEP and needed supportive services.

- Provides a brief summary of their work with the client, including reporting on psycho-social issues, barriers or facilitators to care.
- Conveys their point of view in a respectful way when working with colleagues.
- Recognizes the limits of their knowledge and seeks assistance from others when needed.

Documentation and Record-Keeping:

Certified PrEP peer workers document the services they deliver to clients. Based on the specific work setting and job description, certified PrEP peer workers may be responsible for carrying out some or all of the specific competencies outlined below:

- Respects confidentiality of client records and follows all agency policies for handling client records.
- Works with other members of the care team to interpret data and patient information to make appropriate decisions regarding the care of the patient.
- Documents services provided to the client in the client record, in accordance with agency policies.
- Documents time and effort as needed for billing/ reimbursement practices, in accordance with agency policies.

Links to Peer Certification Online Exam Study Guides

- Study Guide for Certified HIV Peer Worker Online Exam
- Study Guide for Certified HCV Peer Worker Online Exam
- Study Guide for Certified Harm Reduction Peer Worker Online Exam

Note that these materials, like all other materials and tools for the Peer Certification Process, are available at https://www.hivtrainingny.org/Home/PeerCertification. As of this writing, there is no study guide available for the PReP track.





New York State Peer Worker Certification Program in HIV, HCV or Harm Reduction Code of Ethics

Certified HIV, HCV or Harm Reduction Peer Workers are professionals who use their lived experience of HIV or HCV or accessing Harm Reduction services to assist others. Peer workers assist others with the goal of maximizing the health of people living with HIV, HCV, substance users and/or preventing new HIV/STD/Viral Hepatitis infections.

The principles that follow will guide Certified Peer Workers in their roles, relationships, and scope of responsibility.

- Certified Peer Workers view themselves as professionals, demonstrate respect for the important work they do and maintain a commitment to continued learning and professional development.
- 2. Certified Peer Workers learn about the roles of other members of the care team and colleagues as appropriate. They work to maintain positive relationships with team members and colleagues and treat them with professional courtesy and respect.
- Certified Peer Workers have a commitment to their own HIV, HCV or behavioral health care and are actively engaged in maintaining their physical, mental and emotional wellbeing.
- 4. Certified Peer Workers respect the rights and dignity of the people they serve. They never engage in any form of physical or psychological abuse or exploitation.
- 5. Certified Peer Workers abide by Mandatory Reporting standards established by regulatory and/or agency policy.
- 6. Certified Peer Workers respect the right of the people they serve to make their own decisions and refrain from passing judgement on behaviors or decisions that are different from their own. Certified Peer Workers respect the autonomy of the people they serve and demonstrate respect regardless of the decisions the people they serve make.
- 7. Certified Peer Workers appreciate and respect the cultural and spiritual beliefs and practices of the people they serve. Certified Peer Workers do not practice, condone, facilitate or collaborate in any form of discrimination on the basis of ethnicity, race, gender, gender identity or expression, sexual orientation, age, religion, national origin, marital status, political belief, disability, other preference or personal characteristic, condition or state.
- 8. Certified Peer Workers utilize supervision and abide by the standards for supervision established by the NYS DOH AIDS Institute, regulatory body, and/or their employer.
- 9. Certified Peer Workers never engage in romantic, sexual or intimate activities with the clients in their caseload and follow all relevant agency policies. Peer workers do not enter into business or any other inappropriate relationship with a client in their caseload. Certified Peer Workers will report any incidents that may be considered unprofessional to appropriate supervision.
- 10. Certified Peer Workers do not accept gifts of money or items of significant value, as defined by the employer or agency, from the people they serve. Certified Peer Workers

- do not personally loan, give money or give items of significant value, as defined by the employer or agency, to the people they serve.
- 11. Certified Peer Workers only provide services and support within the hours, days and locations that are authorized by their employer/agency.
- 12. Certified Peer Workers will follow hiring agency policies on workplace conduct, including use of substances.
- 13. Certified Peer Workers do not offer services outside the boundaries of the Certified Peer Worker Competencies unless explicitly included in their job description and are otherwise trained, licensed or certified to do so.
- 14. Certified Peer Workers are not licensed practitioners of the healing arts. They do not offer advice to the people they serve to change prescribed medications or therapies in any way. Certified Peer Workers actively encourage and assist the people they serve to direct concerns about their prescribed medications or therapies to the prescribing provider or other healthcare professional.
- 15. Certified Peer Workers should refrain from communicating to the people they serve any personal opinions or assessments of the quality of services offered at their facility or any other facility. If someone they serve expresses concern regarding another staff member or service provider, the Certified Peer Worker: a) shares strategies for improving the relationship, b) encourages the individual to discuss the concern with the provider, and c) if needed, informs the individual that he or she may bring the concern to the appropriate staff member or appropriate regulatory body.
- 16. Certified Peer Workers are knowledgeable about their legal requirements for maintaining confidentiality of protected health information and other records. At all times and in all settings, Certified Peer Workers protect the confidentiality of persons served by the agency where they are employed, both during and after their period of employment.
- 17. Certified Peer Workers have a duty to inform the people they serve that information they share with the peer worker may become part of their record and may be shared with other members of the individual's care team or others as required by law, safety or agency policy.
- 18. Certified Peer Workers accurately document the services they provide in accordance with agency policy.
- 19. Certified Peer Workers follow the standard requirements for continuing education training as established by the certification body and/or their employer.
- 20. Certified peer workers are continually aware of the profession's mission, values and ethical principles and consistently act in a manner that is honest and responsible.

I attest that I will follow this Code of Ethics at all times. I understand that if complaints about my
ethical behavior are filed, they will be fully investigated by the certifying body and if found valid,
disciplinary action may occur up to and including loss of designation as a Certified Peer Worker.

Signature	Date

New York State Certified Peer Worker Supervisor Practicum/Work Experience Evaluation Form

Directions for supervisors completing this evaluation:

This form should be completed by the direct supervisor of an individual seeking Certification as NYS Peer Worker. Please review all directions carefully.

Applicant Practicum Inf	formation
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Name of Peer Work	ker Seeking Certification:	
	Name of Supervisor:	
	Name of Agency:	
Ti	tle Held by Peer Worker:	
Resp	oonsibilities Carried Out:	
	L	
Please indicate the d completed under yo		rovided services under your supervision and the numbers of hours of work he/she
Start Date:		
End Date:		
Hours Completed:		
-	•	No hours of work? Yes No No work under your supervision?
of hours of his/her p	oracticum(If he/she received	rmer agency, and number of hours for where the peer worker completed the first portion additional hours of work experience to complete the 500 hours with a different supervisor at a e former supervisor/agency that the peer worker completed the additional hours prior to working
Name:		
Agency:		
Hours Completed:		
Please select the Tra	ck(s) you are evaluating th	e peer worker on: HIV HCV HR * (you must select at least one)
Practicum Evaluation	on	
	outlined in items 1-8, please substantiate your rating.	provide a rating by checking the box that best corresponds with your assessment and provide
	nd openness to supervisor's Needs Improvement	
Comments:		

2. Quality of work
Unacceptable Needs Improvement Satisfactory Exemplary
Comments:
3. Level of productivity/ work habits
Unacceptable Needs Improvement Satisfactory Exemplary
Comments:
4. Ability to establish positive rapport with clients Unacceptable Needs Improvement Satisfactory Exemplary
Comments:
5. Ability to work well with other professionals
☐ Unacceptable ☐ Needs Improvement ☐ Satisfactory ☐ Exemplary
Comments:
6. Attendance and punctuality
☐ Unacceptable ☐ Needs Improvement ☐ Satisfactory ☐ Exemplary
Comments:

7. Ability to follow all agency policies and procedures Unacceptable Needs Improvement Satisfactory Exemplary	
Comments:	
8. Overall Rating Unacceptable Needs Improvement Satisfactory Exemplary	
Comments:	
Evaluation of Competencies	
Prior to beginning this online evaluation form, we suggest that you review the list of Core Competencies for the track the peer worker you evaluating is applying (HIV/HCV/HR), available here: http://hivtrainingny.org/Home/PeerCertification	ou are
Please Note: If the peer worker is applying for certification in more than one track, you will need to provide feedback for 25 composition each track for which you have supervised them, in addition to the General Competencies. Only evaluate the competencies you have observed. If you have not supervised the peer in a role that has duties related to a certain track (i.e., you supervise them in an HIV Peer Note, but they also have work experience as a Harm Reduction Educator Capacity, for which they are seeking their dual certification), planet provide an evaluation for those competencies	e Navigator
General Competencies: Click here to expand	
Please provide evaluation on all of the Core Competencies. Click the statement you are evaluating the peer worker on, and then "making progress", or "does not meet".	"meets",
1. Shares their personal experience in a strategic, compassionate and responsive manner and comfortably discloses status meets making progress does not meet	
2. Demonstrates a commitment to personal self-management of health conditions and treatment regimens ☐ meets ☐ making progress ☐ does not meet	
3. Addresses health literacy needs of clients to ensure client understanding of messages delivered ☐ meets ☐ making progress ☐ does not meet	
 4. Communicates using a person-centered approach such as active listening, stages of change, motivational interviewing and/or har reduction counseling	rm

5. Upholds agency confidentiality policies and procedures meets making progress does not meet
6. Recognizes own vulnerabilities and emotional responses to work-related matters and identifies strategies for managing the situation, including asking for help from supervisor(s) and/or other available supports meets making progress does not meet
7. Recognizes the limits of their knowledge and seeks assistance from staff when needed ☐ meets ☐ making progress ☐ does not meet
8. Seeks opportunities to increase knowledge and skills for peer support meets making progress does not meet
9. Employs self-care strategies to wellness and prevent "burn-out" ☐ meets ☐ making progress ☐ does not meet
0. Demonstrates effective oral, written and non-verbal communication skills appropriate for the work setting ☐ meets ☐ making progress ☐ does not meet
1. Develops awareness of and manages own personal biases and triggers when dealing with participant, as required for their specific worksite
meets making progress does not meet
2. Relates to clients via their shared lived experience, despite the differences that may exist between them meets making progress does not meet
Please select at least 3 subcategories from the list below, and rate a minimum of 25 competencies per track you are evaluating.
Click the statement you wish to evaluate the peer worker on, and "meets", "making progress", or "does not meet". Please only
Click the statement you wish to evaluate the peer worker on, and "meets", "making progress", or "does not meet". Please only fill out items that are relevant to the services you have observed your peer providing
fill out items that are relevant to the services you have observed your peer providing
fill out items that are relevant to the services you have observed your peer providing HCV Testing
fill out items that are relevant to the services you have observed your peer providing HCV Testing Works as part of a multi-disciplinary team to conduct HCV testing
HCV Testing Works as part of a multi-disciplinary team to conduct HCV testing meets making progress does not meet Explains key points of information about HCV testing, including the differences between the two HCV tests (i.e., HCV antibody screening test and HCV RNA test)
HCV Testing Works as part of a multi-disciplinary team to conduct HCV testing meets making progress does not meet Explains key points of information about HCV testing, including the differences between the two HCV tests (i.e., HCV antibody screening test and HCV RNA test) meets making progress does not meet
HCV Testing Works as part of a multi-disciplinary team to conduct HCV testing meets making progress does not meet Explains key points of information about HCV testing, including the differences between the two HCV tests (i.e., HCV antibody screening test and HCV RNA test) meets making progress does not meet Reinforces the need for the second HCV test (HCV RNA) to diagnose HCV if the HCV antibody screening test is positive meets making progress does not meet Shares personal experiences in a strategic manner to demonstrate to the client the importance of knowing one's HCV status meets making progress does not meet
HCV Testing Works as part of a multi-disciplinary team to conduct HCV testing meets making progress does not meet Explains key points of information about HCV testing, including the differences between the two HCV tests (i.e., HCV antibody screening test and HCV RNA test) meets making progress does not meet Reinforces the need for the second HCV test (HCV RNA) to diagnose HCV if the HCV antibody screening test is positive meets making progress does not meet Shares personal experiences in a strategic manner to demonstrate to the client the importance of knowing one's HCV status
HCV Testing Works as part of a multi-disciplinary team to conduct HCV testing meets making progress does not meet Explains key points of information about HCV testing, including the differences between the two HCV tests (i.e., HCV antibody screening test and HCV RNA test) meets making progress does not meet Reinforces the need for the second HCV test (HCV RNA) to diagnose HCV if the HCV antibody screening test is positive meets making progress does not meet Shares personal experiences in a strategic manner to demonstrate to the client the importance of knowing one's HCV status meets making progress does not meet Refers clients to testing sites and accompanies as needed

 Explains that the presence of HCV antibodies does not protect from reinfection or super-infection meets making progress does not meet
 ■ Emphasizes the need for getting the second HCV RNA test to confirm (or rule out) active infection ■ meets ■ making progress ■ does not meet
 Works as part of a multi-disciplinary team to arrange and link client to an appointment for follow-up HCV testing and care, following best practices outlined below meets making progress does not meet
 ■ When applicable, uses his or her experience with HCV testing, linkage to care and treatment to help the client understand the importance of attending the follow-up appointment and that HCV is a curable condition for most people ■ meets ■ making progress ■ does not meet
For clients with a negative/nonreactive HCV test result
 Explains that it can take up to six months for antibodies to become detectable after an HCV exposure meets making progress does not meet
Explains the need for follow-up testing, if a recent exposure occurredmeets making progress does not meet
 Explains that a negative test result does not protect from getting infected in the future meets making progress does not meet
 Explains options for HCV prevention, including safer injection practices and other relevant harm reduction strategies meets making progress does not meet
 Uses a harm reduction approach to help the client choose options that are acceptable to the client and which reduce their risk of HCV infection meets making progress does not meet
Refers clients who use drugs to syringe exchange program and ESAP meets making progress does not meet
Engagement, Linkage and Retention to Care
 Uses their personal experience of HCV treatment to explain the importance of participating in HCV health care meets making progress does not meet
 ☐ Conducts outreach to people at risk for or living with HCV in the community ☐ meets ☐ making progress ☐ does not meet
 ■ Initiates contact with clients who have missed appointments, discontinued care or who have yet to engage in health care services ■ meets ■ making progress ■ does not meet
 ■ Meets and greets clients who are new to the organization ■ meets ■ making progress ■ does not meet

Provides a tour of the health care facility, introducing the client to appropriate staff, the location of	ooms
reception, waiting room and exam meets making progress does not meet	
C meets C making progress C does not meet	
When engaging and linking a client to an initial health care appointment, accurately communicates, verbally and in writing, the following information: the date, time, location, provider name, information about what to bring to the appointment and any other facility-specific information needed to have a successful appointment	
meets making progress does not meet	
 ■ Based on knowledge of the facility practices, explains to the client what to expect during their first HCV medical appointment, including physical exam, lab work and interactions with staff ■ meets ■ making progress ■ does not meet 	
 ■ Based on knowledge of the facility practices, explains the procedures to follow when arriving for a health care appointment, including checking in with the receptionist, taking a seat in the waiting room, what to expect as the length of waiting time and shares ideas about what to do while the client is waiting ■ meets ■ making progress ■ does not meet 	
Accompanies clients to health care appointments in accordance with job description and agency	
policies meets making progress does not meet	
Makes follow-up calls regarding attendance at health care appointments including: reminding clients of an appointment; exploring reasons for missing an appointment; assisting clients with re-scheduling an appointment	
meets making progress does not meet	
 Explains the concept of sustained virologic response (SVR) and how achieving SVR will promote the client's health and reduce the chance of transmission to partners meets making progress does not meet 	
 Informs client about newer therapies that are available, which are interferon-free, have fewer side effects and shorter treatment duration. Explain that cure is possible, and many of these therapies have high cure rates meets making progress does not meet 	
Reaches out to engage clients across the whole continuum of the treatment process	
meets making progress does not meet	
Distributes or refers clients to appropriate hepatitis C educational resources	
☐ meets ☐ making progress ☐ does not meet	
Hepatitis C Treatment	
Uses their experience of HCV treatment options and adherence to motivate the client and demonstrate	
that a high level of treatment completion is achievable meets making progress does not meet	
☐ Clarifies HCV treatment misconceptions ☐ meets ☐ making progress ☐ does not meet	
Explains that HCV is a curable condition	
meets making progress does not meet	
— ···· — ·· or ·o·· — ********************************	

E	Reinforces medical provider's explanation about newer therapies that are available, which are interferon-free, have fewer side effects and shorter treatment duration. Explains that cure is possible, and many of these therapies have high cure rates meets making progress does not meet
0	Reinforces the client's understanding that if the client is cured that does not mean that the client cannot be reinfected. For clients who achieve a cure, provides various interventions and resources to prevent HCV reinfection meets making progress does not meet
E	Explains that not taking HCV medication as prescribed can result in: 1) poorer health, 2) the medications not working, 3) medication resistance: reduced options for future treatment, and 4) increased likelihood of transmitting the virus to others meets making progress does not meet
E	Collaborates with clients to overcome behavioral, structural, and psychosocial barriers to taking their medications meets making progress does not meet
	Works at part of the multi-disciplinary clinical team to provide tools and strategies using a client-centered approach to support clients in taking their medications every day as prescribed meets making progress does not meet
	Refers clients back to health care providers to discuss any issues (i.e. side effects, discontinuation of medication without doctor's knowledge) that may be affecting their ability to adhere to a treatment regimen
	meets making progress does not meet
	Works as part of a multi-disciplinary team to assess the readiness of the client to begin treatment (other health issues present, mental health, trauma, commitment to treatment, safe place to live while on treatment or keep medications, access to healthy food, time off work, social support, insurance coverage or financial assistance) meets making progress does not meet
	Conveys appropriate expectations for time and other administrative issues it may take to initiate HCV treatment meets making progress does not meet
Patient N	Navigation
	Provides information about available programs and services when engaging or enrolling clients in the community meets making progress does not meet
	☐ Provides a tour of the facility where the patient will receive services ☐ meets ☐ making progress ☐ does not meet
	Provides educational and organizational materials
	meets making progress does not meet
•	Accompanies clients to community activities and appointments and participates in community activities with clients as assigned and approved by supervisor meets making progress does not meet
	Informs new clients about available services and processes
	meets making progress does not meet

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taking appropriate action to overcome identified barriers meets making progress does not meet
Engages providers from HCV care and treatment program and other services, to meet the needs of clients
meets making progress does not meet
Connects and introduces clients to providers, providers to clients and to other HCV clients, as needed while always remembering to ask permission to disclose any of a client's personal health information to others
meets making progress does not meet
Shares information about how to get to the facility via public transportation, car or walking
meets making progress does not meet
 Explores any concerns the client may have regarding personal safety while getting to, or navigating around, the health care facility meets making progress does not meet
Client Self-Management
Relates their own and/or others' life experiences (while respecting privacy) to clients to inspire hope and empowerment
meets making progress does not meet
■ Models positive self-management behaviors
meets making progress does not meet
Works as part of the care team to help the client develop self-management goals, provide coaching and track progress meeting these goals
meets making progress does not meet
Assists clients in voicing concerns or questions to members of the care team
meets making progress does not meet
Educates clients about health, wellness, treatment adherence, sustained virologic response (SVR), and available support services
meets making progress does not meet
Recognizes treatment adherence and completion
meets making progress does not meet
■ Validates client's life experiences and feelings and celebrates client's efforts and accomplishments
meets making progress does not meet
 ■ Recognizes and responds to the complexities and uniqueness of each peer's process of treatment adherence, including stage of disease and treatment outcomes, and tailors services and support to meet the preferences and unique needs of clients ■ meets ■ making progress ■ does not meet
 Recognizes and responds to competing priorities and life events that may impact self-management, such as: co-morbid conditions; child care; employment; legal issues, substance use meets making progress does not meet

Implements peer-run, evidence based self-management interventions as determined by the agency
☐ meets ☐ making progress ☐ does not meet
Harm Reduction, Syringe Access and Health Promotion
 ■ Promotes and provides referrals to a wide range of harm reduction and health promotion resources including those related to syringe exchange, safer injection practices, opioid overdose prevention, counseling about alcohol use, safer sex practices, condom availability, smoking cessation, educational information, social services, and others as needed by the client ■ meets ■ making progress ■ does not meet
 Provides information on risk of relapse and re-infection. Provides education and reinforces harm reduction messaging meets making progress does not meet
 Researches, develops and maintains up-to-date information about community, health and other resources and services, both informal and formal meets making progress does not meet
 ■ Recognizes signs of harm, crisis or distress that may interfere with medical care or treatment adherence. Takes action to alert or engage other members of the care team to address the situation by using local resources, services or client support ■ meets ■ making progress ■ does not meet
Provides information on opioid overdose prevention and opioid substitution and supporting others
meets making progress does not meet
 ■ Works with a multi-disciplinary team to address difficulties a client may experience due to active substance use, such as appointment keeping and treatment adherence ■ meets ■ making progress ■ does not meet
Support Groups
Markets support group to recruit clients
☐ meets ☐ making progress ☐ does not meet
Serves as facilitator or co-facilitator of a support group, along with another staff person
meets making progress does not meet
 Acts as a liaison between peers and co-facilitator, to bridge gaps and ensure groups are meeting the needs of the participants meets making progress does not meet
Leads by example by strategically sharing personal experience/stories
meets making progress does not meet
 ■ Encourages active participation and client sharing of information ■ meets ■ making progress ■ does not meet
Establishes and enforces support group rules to ensure confidentiality and that the group is a "safe
space" ☐ meets ☐ making progress ☐ does not meet

may be beneficial meets \bigcup making progress does not meet
 ■ Makes statements that show understanding, compassion, sympathy, and concern ■ meets ■ making progress ■ does not meet
 ■ Encourages peer members to listen and provide supportive feedback meets ■ meets ■ making progress ■ does not meet
Supportive Services
 ■ Works as part of a multi-disciplinary team to identify supportive services that meet the needs of the client. Acts as a liaison between the client and multi-disciplinary team ■ meets ■ making progress ■ does not meet
 ■ Educates clients about the range of behavioral health services available and works to destigmatize use of these services ■ meets ■ making progress ■ does not meet
 ■ Works as part of a multi-disciplinary team to provide targeted referrals and linkages to essential services outside of agency ■ meets ■ making progress ■ does not meet
 Assists clients with making appointments for supportive services or arranges appointments for them meets making progress does not meet
 ☐ Accompanies clients to supportive services appointments ☐ meets ☐ making progress ☐ does not meet
Case Conferencing
 ■ Works as member of multi-disciplinary team to retain clients in care by addressing barriers to the provision of service delivery and needed supportive services ■ meets ■ making progress ■ does not meet
 ■ Provides a brief summary of their work with the client, including reporting on psycho-social issues, and barriers or facilitators to care ■ meets ■ making progress ■ does not meet
 □ Conveys their point of view in a respectful way when working with colleagues □ meets □ making progress □ does not meet
 Recognizes the limits of their knowledge and seeks assistance from others when needed meets making progress does not meet
Facilitating client involvement in continuous quality improvement (QI) efforts
 ■ Engages and encourages clients to participate in facility-level QI activities ■ meets ■ making progress ■ does not meet
 ■ Participates in QI activities as part of their role as members of the care team ■ meets ■ making progress ■ does not meet

Represent the voices and perspectives of clients in the QI process
meets making progress does not meet
 Participates in agency efforts to reduce and eliminate stigma, prejudice and discrimination of people who have HCV and persons who use drugs meets making progress does not meet
Actively participates in efforts to improve the organization
meets making progress does not meet
Health Coverage
Explains that the New York's Health Exchange website (https://nystateofhealth.ny.gov/), is the place to visit to assess eligibility for health insurance coverage meets making progress does not meet
 Understands and identifies local resources that can assist clients with enrollment in a range of health coverage options meets making progress does not meet
 Reinforces the need to work with staff such as a health benefits specialist, case manager or social worker to ensure health coverage needs are met meets making progress does not meet
 ☐ In conjunction with the multi-disciplinary team, provides information about the prior authorization process, requirements and documentation needed to obtain approval. Provides information about appeal process, if needed and links client to appropriate staff and services in the event of a denial ☐ meets ☐ making progress ☐ does not meet
 Works as part of the multi-disciplinary team to ensure health coverage and medication access needs are met and informs clients about relevant patient assistance programs (for high co-pays and HCV medications) meets making progress does not meet
Advocates for client and facilitates referrals for additional assistance
meets making progress does not meet
Understands how employment effects his or her own benefits and coverage
meets making progress does not meet
Documentation and Record-Keeping
Respects confidentiality of client records and follows all agency policies for handling client records
meets making progress does not meet
 ☐ Interprets data and patient information regarding the care of the patient, in consultation with care team as needed ☐ meets ☐ making progress ☐ does not meet
 □ Documents services provided to the client in the client record, in accordance with agency policies □ meets □ making progress □ does not meet
 Documents time and effort as needed for billing/ reimbursement practices, in accordance with agency policies meets making progress does not meet
Theets Thaking progress Tuoes not meet

Please select at least 3 subcategories from the list below, and rate a minimum of 25 competencies per track you are evaluating.

Click the statement you wish to evaluate the peer worker on, and "meets", "making progress", or "does not meet". Please only fill out items that are relevant to the services you have observed your peer providing

Harm Reduction C	ompetencies
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 Effectively conveys the principles of harm reduction and how it applies to different areas of risk (i.e. drug use, sex work, health behavior change, etc.) meets making progress does not meet 	,
 ☐ Has a basic understanding of sexual risk and associated harm reduction strategies ☐ meets ☐ making progress ☐ does not meet 	
Promotes and provides referrals to a wide range of harm reduction and health promotion resources including those related to syringe exchange, safer injection practices, opioid overdose prevention, alcohol use, safer sex practices, condom availability, PrEP/PEP, smoking cessation, prevention information, social services, and others as needed by the participant meets making progress does not meet	
 □ Provides education and reinforces harm reduction messaging □ meets □ making progress □ does not meet 	
 Researches, develops and maintains up-to-date information about community, health and other resources and services, both informal and formal meets making progress does not meet 	
 ■ Recognizes signs of harm, crisis or distress that may interfere with medical care or treatment adherence. Takes action to alert or engage other members of the service delivery team to address the situation by using local resources, services or participant support ■ meets ■ making progress ■ does not meet 	
 Provides information on opioid overdose prevention and response, Opioid Agonist Therapies and oth supportive services meets making progress does not meet 	er
 ☐ Is a Trained Responder in the Opioid Overdose Prevention Program ☐ meets ☐ making progress ☐ does not meet 	
 ■ Works with a multi-disciplinary team to address issues that impact participants' ability to engage in services due to drug use and/or high risk sexual behaviors/sex work (i.e. HIV/STD/HCV co-infection stigma and other social inequalities, etc.) ■ meets ■ making progress ■ does not meet 	,
Promoting access to sterile injection equipment and supplies Syringe Exchange Programs (SEPs)	
 Has the ability to provide an overview of policies, procedures, and essential elements of SEP operations meets making progress does not meet 	
 ☐ Has a clear understanding of the SEPs policies and procedures including different threshold criteria/legal requirements for enrolling individuals into SEP based on age (under 18 vs. over 18) ☐ meets ☐ making progress ☐ does not meet 	

Explains to drug users and others the general services available at an SEP and describes who is eligible for these services
meets making progress does not meet
 Exhibits a basic understanding of penal and public health laws & NYS regulations that allow for syringe access in NYS, and conducts peer delivered syringe exchange (PDSE) accordingly meets making progress does not meet
☐ Conducts outreach to active drug users in the community
meets making progress does not meet
 ■ Works as part of the SEP team or individually conducts initial assessment/screening to determine an individual's needs and eligibility for services through the SEP ■ meets ■ making progress ■ does not meet
 ■ Works as part of the SEP team or individually issues Participant Identification Cards and explains how to use the ID card in the event of an interaction with Law Enforcement ■ meets ■ making progress ■ does not meet
 ☐ Has the ability to engage and educate community members and communicate the services of their program and their duties as a peer ☐ meets ☐ making progress ☐ does not meet
 ☐ Has the ability to respond to Law Enforcement questions, concerns and challenges ☐ meets ☐ making progress ☐ does not meet
Expanded Syringe Access Program (ESAP)
 Explains how NYS ESAP works, including: educating individuals on minimum age eligibility for ESAP educating individuals about how to locate and identify a participating pharmacy educating individuals about how to purchase syringes at participating pharmacies educating individuals about how to obtain syringes from health care or other sites that may participate in ESAP educating individuals how to use ESAP voucher programs educating individuals about how to address issues with Law Enforcement or problems with a pharmacy
meets making progress does not meet
Safer injecting practices
 Remains informed and aware of current trends in drug use as they related to the needs of participants in their program meets making progress does not meet

 Educates participants on safer injecting practices including, but not limited to: The importance of using new sterile injection equipment and works and the health risks of
reusing dull or overused syringes
• How to select an injection site, taking into consideration vein health and previous injections
 The importance of cleaning the injection site The importance of injecting on a clean surface, free of exposure to blood, other toxins or
germs Ohow to avoid exposure to another person's blood products during the injection process
• How to clean works as a last resort.
 How to avoid or address some of health risks of injecting including abscesses, endocarditis, MRSA, etc.
• Strategies for alternatives to injecting and/or frequency of injecting
 Alternative types of injecting, including intramuscular (IM) and skin-popping
meets making progress does not meet
Promoting safe syringe disposal
Explains the importance of safe disposal of used syringes
meets making progress does not meet
Describes ways to dispose of syringes safely, including:
• Returning used syringes to a syringe exchange program or other site (i.e. hospitals, nursing
homes, residential sharps program)
 Informing participants of any disposal kiosks available in the community
• Educate participants about disposing of syringes in hard plastic bottles, for example bleach or
detergent bottles
 Provides alternative strategies for safer disposal in the absence of the above options
meets making progress does not meet
Safe Handling of syringes
Handles new and used syringes in a safe manner in accordance with agency policies and procedures
meets making progress does not meet
Follows agency policy and procedure in the case of an accidental needle stick
meets making progress does not meet
Educates participants about how to safely handle syringes to avoid accidental needle sticks for
themselves and others in the environment
meets making progress does not meet
Preventing Opioid Overdose
Describes the symptoms of an opioid overdose
meets making progress does not meet
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Educates participants about how to avoid overdose, sharing information including, but not limited to, the following:
 Changes in purity/potency of drugs being used Changes in individual tolerance, including after periods of abstinence
Risks of using aloneDangers of mixing drugs
Reports of increased toxicity or tainted drugs in the local community
meets making progress does not meet
Explains that there is a medication that can reverse an opioid overdose
meets making progress does not meet
 Refers participants to Opioid Overdose Prevention Programs for training and/or provides this training when appropriate. meets making progress does not meet
Explains the importance of calling 911 in cases of a suspected overdose
meets making progress does not meet
 Explains that the Good Samaritan Law provides protection from charges and prosecution for certain drug related charges, for the person who calls and the person who ODs meets making progress does not meet
Making Service Referrals
Follows agency policies for referring participants to a wide range of needed services including, but not limited to:
 HIV/HCV/STD testing, care and treatment Detox, in-patient rehab, out-patient rehab, Opioid Agonist Therapy (Buprenorphine, methodone)
methadone) • Supportive services such as harm reduction counseling, evidence based interventions, support
groups, AA/NA, mental health counseling, etc.
 Social services including housing, shelters, domestic violence services, food pantry, free meals, clothing, entitlements and other services as needed
meets making progress does not meet
Follows-up with participants regarding their referral experiences and outcomes, including addressing
situations where an appointment was not kept meets making progress does not meet
Provides escort for participants for referrals when appropriate or needed
meets making progress does not meet
Understands and identifies local resources that can assist participants with enrollment in a range of health coverage options
meets making progress does not meet
Participant Self-Management
Relates their own and/or others' life experiences (while respecting privacy) to participants to inspire
hope and empowerment meets making progress does not meet

meets making progress does not meet		wioders positive sen-management behaviors
such as: co-morbid conditions: child care: employment; legal issues, substance use meets making progress does not meet Recognizes and responds to the complexities and uniqueness of each participant and tailors services and support to meet the preferences and unique needs of participants meets making progress does not meet Works as part of the service delivery team to help the participant develop self-management goals, provide coaching and track progress meeting these goals meets making progress does not meet Educates participants about health, wellness, and available support services meets making progress does not meet Validates participant's life experiences and feelings and celebrates participant's efforts and accomplishments meets making progress does not meet Assists participants in voicing concerns and questions to members of the service delivery team. meets making progress does not meet Assists participants in voicing concerns and questions to members of the service delivery team. meets making progress does not meet Actively participates in efforts to improve the organization meet making progress does not meet Engages and encourages participants to contribute to facility-level QI activities meets making progress does not meet Participates in QI activities as part of their role as members of the service delivery team meets making progress does not meet Participates in agency efforts to provide services in ways that reduce stigma, prejudice and discrimination of persons who use drugs and/or engage in high risk sexual behaviors/sex work meets making progress does not meet Participates in making progress does not meet Participates in agency efforts to provide services in ways that reduce stigma, prejudice and discrimination of persons who use drugs and/or engage in high risk sexual behaviors/sex work meets making progress does not meet Documentas services provided to the participant in the participa		☐ meets ☐ making progress ☐ does not meet
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policies, including documenting referrals and follow-up activities		records
		policies, including documenting referrals and follow-up activities

	ded for billing/ reimbursement practices, in accordance with agency
policies meets making progress	does not meet
Please select at least 3 subcategories from the	ne list below, and rate a minimum of 25 competencies per track you are evaluating.
Click the statement you wish to evaluate the fill out items that are relevant to the services	e peer worker on, and "meets", "making progress", or "does not meet". Please only s you have observed your peer providing
HIV Testing	
	nary team to conduct HIV testing following NYS HIV testing laws, usent before the HIV test is conducted does not meet
Explains key points of information	n about HIV testing
meets making progress	does not meet
Shares personal experiences in a s knowing one's HIV statusmeets making progress	strategic manner to demonstrate to the client the importance of does not meet
For clients with a preliminary positive	e rapid HIV test result
■ Works as part of a multi-disciplin testing is needed to know for sure■ meets■ making progress	
■ Works as part of a multi-disciplina ■ meets ■ making progress ●	ary team to arrange for blood draw for additional testing does not meet
	t to access confirmatory testing in accordance with job
responsibilities meets making progress	does not meet
■ Makes a follow-up appointment to■ meets ■ making progress ●	provide the client the final test result does not meet
For clients with a confirmed positive	HIV test result
■ Works as part of a multi-disciplin with a confirmed positive HIV tes■ meets■ making progress	
 ■ Works as part of a multi-discipling following best practices outlined best progress ■ meets ■ making progress 	
Explains the importance of partner services programmeets making progress (r services and makes an effective referral to the appropriate partner does not meet
■ When applicable, uses his or her punderstanding the range of options■ meets■ making progress	

 ■ When applicable, uses his or her experience with engagement and linkage to care and HIV treatment options to help the client understand that he or she can live a healthy life with HIV ■ meets ■ making progress ■ does not meet
For clients with a negative or indeterminate test result
 Explains that the window period is the length of time after infection but before an HIV test is able to detect the presence of infection meets making progress does not meet
■ Explains the need for follow-up testing■ meets □ making progress □ does not meet
 Explains options for HIV/STD/hepatitis prevention including: abstinence, male and female condom use, PEP, PrEP, safer sex, safer injection practices and other harm reduction strategies meets making progress does not meet
Refer and link clients to a range of prevention services
meets making progress does not meet
 ■ Uses a harm reduction approach to help the client choose options that are acceptable to the client which reduce his or her risk of HIV/STD/viral hepatitis infection ■ meets ■ making progress ■ does not meet
 Explains the location and functioning of syringe exchange program and ESAP to all clients who use drugs meets making progress does not meet
Engagement, Linkage and Retention to Care
 Uses his or her personal experience of HIV treatment to explain the importance of participating in HIV health care meets making progress does not meet
Conducts outreach to people at risk for or living with HIV/HCV in the community
meets making progress does not meet
 ☐ Initiates contact with clients who have missed appointments, discontinued care or who have yet to engage in health care services ☐ meets ☐ making progress ☐ does not meet
■ Meets and greets clients who are new to the organization
meets making progress does not meet
 Provides a tour of the health care facility, introducing the client to appropriate staff, the location of reception, waiting room and exam rooms meets making progress does not meet
 ■ When engaging and linking a client to an initial health care appointment, accurately communicates verbally and in writing, the following information: the date, time, location, provider name, information about what to bring to the appoint and any other facility-specific information needed to have a successful appointment ■ meets ■ making progress ■ does not meet

Based on knowledge of the facility practices, explains to the client what to expect during his or her first HIV medical appointment, including physical exam, lab work and interactions with staff meets making progress does not meet
 ■ Based on knowledge of the facility practices, explains the procedures to follow when arriving for a health care appointment, including checking in with the receptionist, taking a seat in the waiting roor what to expect as the length of waiting time and shares ideas about what to do while the client is waiting ■ meets ■ making progress ■ does not meet
 Accompanies clients to health care appointments in accordance with job description and agency policies meets making progress does not meet
 Makes follow-up calls regarding attendance at health care appointments including: reminding clients of an appointment; exploring reasons for missing an appointment; assisting clients with re-scheduling an appointment meets making progress does not meet
 Explains the concept of viral suppression and how achieving viral suppression will promote the client's health and reduce the chance of transmission to partners. meets making progress does not meet
 ■ Reaches out to engage clients across the whole continuum of the treatment process ■ meets ■ making progress ■ does not meet
Anti-retroviral Therapy (ART) Initiation and Treatment Adherence
 Uses his or her experience of HIV treatment options and adherence to motivate the client and demonstrate that a high level of adherence is achievable meets making progress does not meet
 Explains that not taking ART medication regularly can result in: 1) poorer health, 2) the medications not working as well, 3) reduced options for future treatment, and 4) increased likelihood of transmitting the virus to partners meets making progress does not meet
 Reinforces the client's understanding of HIV-related lab results, including the meaning of viral load and CD4 count meets making progress does not meet
 Collaborates with clients to overcome behavioral, structural, and psychosocial barriers to taking their medications meets making progress does not meet
 ■ Works at part of the multi-disciplinary clinical team to provide tools and strategies using a client-centered approach to support clients in taking their medications every day as prescribed ■ meets ■ making progress ■ does not meet
 ■ Refers clients back to health care providers to discuss any issues (i.e., side effects) that may be affecting his or her ability to adhere to a treatment regimen ■ meets ■ making progress ■ does not meet
Patient Navigation
Provides a tour of the facility
☐ meets ☐ making progress ☐ does not meet

FIOV	ides educational and organizational materials
O 1	meets making progress does not meet
activ	ompanies clients to community activities and appointments and participates in community ities with peers as assigned and approved by supervisor meets making progress does not meet
Information	rms new clients about available services and processes
O 1	meets making progress does not meet
Enga	ages providers from HIV treatment and other services to meet the needs of clients
O 1	meets making progress does not meet
Share	es information about how to get to the facility via public transportation, car or walking
O 1	meets making progress does not meet
arou	ores any concerns the client may have regarding personal safety while getting to, or navigating nd, the health care facility meets making progress does not meet
Client Self-Ma	anagement
and	ates their own and/or others' life experiences (while respecting privacy) to clients to inspire hope empowerment meets making progress does not meet
■ Mod	els positive self-management behaviors
O 1	meets making progress does not meet
track	as as part of the care team to help the client develop self-management goals, provide coaching and progress meeting these goals meets making progress does not meet
Assis	sts clients in voicing concerns or questions to members of the care team
O 1	meets making progress does not meet
servi	
O 1	meets making progress does not meet
	ognizes treatment adherence and viral suppression accomplishments
O 1	meets making progress does not meet
	lates client's life experiences and feelings and celebrates client's efforts and accomplishments
O 1	meets making progress does not meet
adhe need	ognizes and responds to the complexities and uniqueness of each client's process of treatment rence and viral suppression, and tailors services and support to meet the preferences and unique s of clients meets making progress does not meet
such	egnizes and responds to competing priorities and life events that may impact self-management, as: co-morbid conditions; child care; employment; legal issues, substance use meets aking progress does not meet

mplements peer-run, evidence based sen-management interventions as dete	erinned by the agency
meets making progress does not meet	
Harm Reduction, Syringe Access and Health Promotion	
 Promotes and provides referrals to a wide range of harm reduction, health provides including syringe exchange, safer injection practices, opioid overdabout alcohol use, safer sex practices, condom availability, smoking cessative treatment and others as needed by the client meets making progress does not meet 	lose prevention, counseling
 Distributes or refers clients to HIV/STD/viral hepatitis educational resource prevention interventions and other prevention services/ resources meets making progress does not meet 	es, evidence based
 Researches, develops and maintains up-to-date information about communi resources and services, both informal and formal meets making progress does not meet 	ty, health and other
 ■ Recognizes signs of harm, crisis or distress that may interfere with treatmer action to alert or engage other members of the care team and address the sit of local resources, services or client support ■ meets ■ making progress ■ does not meet 	
Support Groups	
 ■ Markets support group to recruit clients to join the group ■ meets ■ making progress ■ does not meet 	
 ☐ Serves as facilitator or co-facilitator of a support group, along with another ☐ meets ☐ making progress ☐ does not meet 	staff person
 Acts as a liaison between peers and co-facilitator, to bridge gaps and ensure needs of the participants meets making progress does not meet 	groups are meeting the
 ■ Leads by example by strategically sharing personal experience/stories ■ meets ■ making progress ■ does not meet 	
 ■ Encourages active participation and client sharing of information ■ meets ■ making progress ■ does not meet 	
 Establishes and enforces support group rules to ensure confidentiality and the space" meets making progress does not meet 	hat the group is a "safe
 ■ Makes statements that show understanding, compassion, sympathy, and compassion meets ■ making progress ■ does not meet 	ncern
 ■ Encourages clients to listen and provide supportive feedback ■ meets ■ making progress ■ does not meet 	

Supportive Services

clients
Work as part of a team a multi-disciplinary team to provide targeted referrals and linkages to essential services outside of agency
meets making progress does not meet
Educate clients about the range of behavioral health services and works to destigmatize these services
meets making progress does not meet
Assists clients with making appointments for supportive services or arranges appointments for them
meets making progress does not meet
Accompanies clients to supportive services appointments
meets making progress does not meet
Case Conferencing
 Works as member of multi-disciplinary team to retain clients in care by addressing barriers to the provision of service delivery and needed supportive services for client meets making progress does not meet
Provides a brief summary of their work with the client, including reporting on psycho-social issues,
barriers or facilitators to care meets making progress does not meet
Conveys their point of view in a respectful way when working with colleagues
meets making progress does not meet
Recognizes the limits of their knowledge and seeks assistance from others when needed
meets making progress does not meet
Facilitating Client Involvement in Continuous Quality Improvement Efforts
Engages and encourages clients to participate in facility-level QI activities
meets making progress does not meet
 ■ Participates in QI activities as part of their role as members of the care team ■ meets ■ making progress ■ does not meet
Represent the voices and perspectives of clients in the QI process
meets making progress does not meet
 Participates in agency efforts to reduce and eliminate prejudice, stigma and discrimination against people who have HIV meets making progress does not meet
Actively participates in efforts to improve the organization
meets making progress does not meet

Health Coverage

Health Coverage

	Explains that the New York's Health Exchange website (https://nystateofhealth.ny.gov/) is the place to visit to assess eligibility for health insurance coverage.						
			meets		making progress		does not meet
	ran		derstands and f health covera			can a	assist clients with enrollment in a
			meets		making progress		does not meet
		Exp	plains what AI	OAP	is and provide informatio	n ab	out how to contact ADAP
			meets		making progress		does not meet
	pro				eam to inform clients about coverage and medication		
			meets		making progress		does not meet
		Un	derstands how	emp	ployment effects his or her	r ow	n benefits and coverage
			meets		making progress		does not meet
Docui	mei	ntat	ion and Rec	ord-	-Keeping		
	□ clie		spects confider ecords	ntial	ity of client records and fo	llov	vs all agency policies for handling
			meets		making progress		does not meet
	to i				mbers of the care team to ions regarding the care of		pret data and patient information patient
			meets		making progress		does not meet

	Documents services provided to the client in the client record, in accordance with agency policies					
	[1 meets		making progress		does not meet
		ocuments tin			lling/ rei	imbursement practices, in
] meets		making progress		does not meet
to a pr	int-frie	-	(Be adv	ised, the screen's app	-	elete" to convert the online form will change, but the data you
receiv you bo	ed. Plea oth sign	ase review the it. The peer	e printed worker	I form with the peer will need to scan and	worker a	ack on the evaluation they have and allow them to comment before his/her completed evaluation to me/PeerCertification
the ev	aluatio	n.		re, and then right cl	ick to p	rint a printer-friendly version of
• 0	LICK TO	COMPLETE FO	ORM 🔾			
Appli	cant A	cknowledger	nent of	Receipt of Evaluation	on	
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Supervisor Signature:	Date:
Peer Worker Signature:	Date:

Using your NYS Peer Worker Certification to Access College Credits When you Matriculate at SUNY Empire State College (ESC)

The New York State Department of Health AIDS Institute has partnered with the State University of New York (SUNY) Empire State College (ESC) to enable Certified Peer Workers in HIV, HCV or Harm Reduction to access 26-32 undergraduate college credits as a result of training and practicum experience from the peer certification process. This FAQ provides information about how to access these free credits.

How can I apply my peer certification training and practicum toward earning a college degree at Empire State College?

In order to access these credits, you must apply to SUNY ESC and be admitted as a degree-seeking student (this is called matriculating.) Requirements for admission include:

- 1. Completion of the ESC online application
- 2. Payment of \$50 orientation fee
- 3. Submit proof of high school or GED completion
- 4. Complete admission essay
- 5. Submit official transcripts from all institutions previously attended to, if applicable: https://www.esc.edu/admissions/associate-bachelors/

The Admissions Office will review your application and you will be invited to attend an orientation, which you can complete in person or online. You should also apply for financial aid: https://www.esc.edu/financial-aid/.

Where are ESC locations near me?

SUNY Empire has over 30 onsite locations across New York State. You can search for a location near you here: https://www.esc.edu/locations/. Additionally, SUNY ESC offers online coursework, and allows you to study part-time or full-time, onsite or online. You can even combine onsite and online learning and experience the best of both worlds.

How about cost? Are these credits really free? Is financial aid available?

All students must pay a \$50 orientation fee and a \$315 one-time Portfolio Fee. However, once you establish a degree plan the credits received through completion of your NYS HIV, HCV, HR Peer Certification are free of cost. ESC students are eligible for a number of state and federal grants as well as college foundation scholarships. More than 50% of ESC students receive financial assistance.

Is it possible that I could apply for admission and not be accepted as a student?

As long as you have a high school diploma or GED, ESC's admissions and financial aid staff is ready to work with you to make earning your degree possible and affordable. For questions call **800-847-3000**

How many credits am I eligible for?

Students who have a degree plan at ESC are eligible for 23 credits for their core Peer Certification coursework, and 3 additional credits per certification track (HIV, HCV or Harm Reduction), for up to 32 credits total. If you are certified in one track, you can access 26 credits. If you are certified in 2 tracks,

you would be eligible for 29 credits and if you were certified in 3 tracks, the maximum total credits you could access would be 32 credits. An Associate's Degree is 64 credits, so it's possible to obtain up to half of a 2-year degree free via credits earned through Peer Certification.

What if I don't have a copy of my high school diploma or GED. How can I obtain one?

To obtain a copy of your High School diploma or transcript, contact the school district where you graduated. To obtain a copy of your New York State High School Equivalency Diploma or transcript, visit here: http://www.acces.nysed.gov/hse/duplicate-diplomas-andor-transcripts. If you attended high school or received your GED from someplace outside of New York, you should contact the location Education Department for instructions and assistance.

Can I see an example of a degree plan?

Yes, a sample Associate's degree plan in Community and Human Services can be found here (LINK), and a sample Bachelor's degree plan in Community and Human Services can be found here. (LINK)

How do ESC mentors support students? What is that relationship like?

After you have attended orientation, you will be assigned a primary mentor who will work with you to create your degree program. PhD level mentors are assigned to all students once you matriculate.

Can I enroll into Empire State College prior to completing my certification?

Yes, a student could enroll prior to completion of the peer certification process. However, a student would not be able to get his/her degree approved until the peer certification is completed. The student could apply the credits to the degree plan pending completion, but unless the college receives official notice that the program has been completed, the credits would not officially count. Degree program approval can take place at any point during a student's time at ESC, but it is important the student make it clear that the peer certification is pending.

Can I obtain a degree in something unrelated to peer work or social services, for example, a music degree?

Your peer certification credits can be applied to basic educational requirements for any undergraduate degree you choose. However, if your degree plan is not related to social services, you may or may not be able to apply ALL of the credits from peer certification. You would work with your mentor to customize a focus of study to best meet your educational goals and maximize access to the free credits. ESC has 5 undergraduate divisions you can choose to study under: Arts and Humanities, Business, Human Services, Science, Math and Technology, Social Science.

Can I matriculate with ESC and then transfer to another school? Will my credits count elsewhere? Once your degree plan has been approved by the college, the credit becomes transferrable. Each college accepts transfer credit at its discretion – transfer credit, whether it is a course or evaluated learning, is made by the college to which the student transfers and depends upon many factors.

I already have a bachelor's degree. Can I use my credits towards a graduate degree?

Unfortunately, not. The coursework from your NYS Peer Worker Certification in HIV, HCV and HR is considered undergraduate work and can only be applied towards an associate's or bachelor's degree.

How do semesters run at ESC? What are the deadlines for applications?

ESC has three semesters each year- fall (begins in September), spring (begins in January) and summer (begins in May). Please check the website for current application deadlines: https://www.esc.edu/admissions/associate-bachelors/terms-priority-dates/

Can I work and go to ESC at the same time? Can I take classes online?

ESC offers a number of ways to study and obtain credit, with flexible options for working adults with busy lives.

- through guided independent study, working one-to-one with a faculty mentor at times convenient for the two of you
- through online learning
- through small seminars, study groups, residencies or cross registration at other colleges whatever suits your interests and lifestyle
- through a combination of all these ways.

I am considering enrolling and have questions about the process. Who can I speak with?

Prospective students will be assigned to recruiters in the area that they live once they live. Until then, they may reach out to:

Nicholas Mendez

Recruitment and Outreach Coordinator
Office of Enrollment Management
Call: 718-907-5743 internal ext. 1748 | Fax:

718-858-0943

Email: nicholas.mendez@esc.edu www.esc.edu

New York State Certified Peer Worker Program Continuing Education Units (CEUs):

Guidance for Certified Peer Workers

To maintain Certification, NYS Certified Peer Workers must complete a minimum of **10 hours** of training, or "Continuing Education Credits" (CEUs) **per year**. You may hear this referred to as "Recertification" or "Certification Renewal." CEUs are verified every **two years**.

This means Certified Peer Workers **must** complete a total of **20 hours** of training every **2 years** to remain a CPW.

As stated in the Code of Ethics, "Certified Peer Workers [must] follow the standard requirements for continuing education training as established by the certification body..."

Certified Peer Workers who are obtaining CEUs are encouraged to attend training related to HIV, HCV, HR, and/or PrEP, and improve and strengthen the Certified Peer Worker's ability to provide services. Courses can be found at www.hivtrainingny.org. CPWs may take any related courses for CEUs, and/or other training programs such as AETC, CEI or T-TAP.

The CEUs must be submitted prior to their date of expiration. Typically, the certificate is valid for two years. If you are not sure when your renewal date is, please check your current certificate, which lists when it is valid through/when it expires. NYS Certified Peer Workers should strive to complete and submit proof of their CEUs at least 30 days prior to their certification date. CEUs not submitted by the deadline will result in the CPW's certification to be reported as inactive.

The Center for Public Health Education (CPHE) Program at Stony Brook University, which serves as the Peer Certification Academic Center is charged with verifying CEU hours, issuing renewals, and tracking if CPWs remain in compliance with this requirement. Non-compliance may result in loss of Certification.

Please Note: All classes <u>not</u> taken through <u>hivtrainingny.org</u> must have proof of hours uploaded to the website to count for CEUs.

For further information, or if you have any questions regarding CEUs, please contact:

Stephen Sebor
Stony Brook University
Center for Public Health Education

Phone: 631-444-3209

Email: stonybrookpeercertification@gmail.com

HIV Education and Training Programs

Empire State Plaza, Corning Tower,

Room 244

Albany, NY 12237 Phone: 518-474-3045 Fax: 518-473-8815

Email: hivet@health.ny.gov