

# INTEGRATING PEER RECOVERY SUPPORT IN MAINE'S TREATMENT COURTS

IDENTIFYING A COHESIVE STRUCTURE

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## Acknowledgments

While this manual’s creation involved many individuals across Maine, we recognize the many others advocating and advancing this work who were not part of this process. We are grateful for their contributions to the field and want to acknowledge their valuable work. We especially want to honor the Veterans Treatment Courts, who pioneered lived experience from early on. We do not claim to be the sole experts on this topic and hope this manual contributes to the thoughtful advancement of Peer Recovery Support (PRS) in Maine.

We also believe it is important to provide a detailed explanation of the process we undertook to develop this manual. We decided to use specific people’s names to highlight the people in Maine involved in this process. We want to be clear that the intention is to be transparent and person-centered. We are not seeking to promote any individual or organization.

The first draft of this manual was written by Bruce Noddin, the Executive Director of the Maine Reentry Network. The draft was based on years of advocating for and implementing PRS services in Treatment Courts throughout Maine. Following this initial draft, Mike Freysinger from Maine’s Office of Behavioral Health, among others, provided feedback and edits. Afterward, Bruce reached out to Randy Morrison, a peer support consultant at the Co-Occurring Collaborative Serving Maine, to write the next draft. With support from Bruce, Randy conducted twelve (12) stakeholder interviews with the following people who were working in Maine’s Treatment Courts at the time of the interview:

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The next version of the manual’s content was reviewed by the people listed below:

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<p><b>Amanda Thompson</b>  <i>Peer Crisis Training Manager, Maine Office of Behavioral Health</i></p>	

After incorporating the feedback from those listed above, we developed the final version of the manual you are reading today. We extend our deepest gratitude to all those who spent time reading through the content and offering incredible feedback.

**Cultural Considerations**

We want to acknowledge that the Native/Indigenous communities in Maine may develop their own guidance and have structures that vary from those outlined in this manual. It is important that we not assume that each element outlined in this manual is fully relevant or appropriate to the cultural needs of the tribes in Maine.

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## Glossary of Terms

The following definitions are not intended to be “official” or “legal”. They are meant to be descriptions that give the reader a practical sense of the terms used in this manual.

**Treatment Courts:** This is an umbrella term for a variety of “problem-solving” courts that support people experiencing substance use and/or mental health concerns. These courts strive to work from an evidence base and offer an alternative to traditional criminal case adjudication processing. They were previously called “Drug Courts” and may be referred to as “recovery courts”, “alternative courts”, “co-occurring disorder courts”, etc. Treatment courts offer individuals with criminal cases a phased process from intake to the completion ceremony that focuses on recovery-oriented services and provides a multi-disciplinary team of professionals to support court participants’ recovery.

**Treatment Court Multi-Disciplinary (TCMD) Teams:** This is the team of professionals with varied expertise and credentials that support an individual’s participation in Treatment Courts. The teams most often include case managers, treatment clinicians, probation and law enforcement officers, district attorneys, defense counsel, peer support professionals, and a judge. The Judge is the lead role and decision-maker of the team. They all work together to support individuals through the court process and to achieve long-term recovery. TCMD is not a universal term; we use TCMD as an umbrella term for this manual.

**Court Participants:** These are the individuals with criminal cases who have formally become part of the Treatment Court to address their charge(s), with the goal of achieving long-term recovery. They embark on an intensive process with specific requirements related to their release from incarceration and their participation in the Treatment Court. Some court participants may already be released from incarceration when they start Treatment Court, as they work to resolve their cases.

**Peer Recovery Support (PRS):** The term used to label the peer support work in Treatment Courts. In Maine, these are supports rooted in Intentional Peer Support and Recovery Coaching, described in Section 7: Training & Certification. These supports focus on lived experience and mutual support.

**Peer Recovery Support (PRS) Organizations:** These organizations provide PRS services to Treatment Courts. They have expertise in offering peer support-based recovery services. PRS Organizations hire the PRS Supervisors and PRS Professionals. Typically, they are not clinical mental health or substance use treatment organizations.

**Peer Recovery Support (PRS) Professionals:** These are the individuals with lived experience of recovery and often have experience with criminal cases and/or Treatment Courts. They are working in a professional capacity and complete specific training and certification to deliver PRS to court participants. They are employees of a PRS Organization and are supervised by a PRS Supervisor. PRS Organizations use different titles for these positions. We use PRS Professionals as an umbrella term for this manual.

**Peer Recovery Support (PRS) Supervisors:** These are individuals who are hired to offer supervision to PRS Professionals and have specific responsibilities on the TCMD team, which are outlined throughout this manual. They work as part of a PRS Organization. They have lived experience in recovery and complete specific training and certification to lead PRS services in Treatment Courts. PRS Organizations use different titles for these positions. We use PRS Supervisor as an umbrella term for this manual.

**Language Note: “Recovery”**

The term “recovery” is used throughout this manual as a blanket term for varied, complex, and very personal experiences of people who are navigating substance use challenges and/or mental health concerns. We acknowledge that this term has been co-opted in many forums as simply a “buzzword” rather than the true practice of honoring and supporting people’s complex journeys. We also acknowledge that, for some, the term “recovery” doesn’t “fit” their experience. In this work, it is important to support individuals as they adopt or refute terms that don’t align with the way they see the world or their own experience. That is valid and we respect that.

Peer Support is about honoring the various ways each of us has come to define, describe, and make meaning out of our lives.

You may encounter other terms in this manual that don’t resonate with you, and we hope the larger message of these concepts and approaches is conveyed with care and respect for people who are navigating what often feels like impossible circumstances, in a world that too often discriminates or pushes them out of community.

Peer Support is about building community.

## INTRODUCTION

As a result of Maine’s recovery movement, and with guidance from advocates who have experienced incarceration and their allies, the field of peer support within Treatment Courts is growing. There is also growing recognition by professionals in the carceral system that peer support is not only an evidence-based practice but is a critical element of any service that seeks to support individuals who struggle with substance use, mental health challenges, and/or are involved with the carceral system<sup>1</sup>. However, until recently, peer supporters have not been integrated or recognized in Maine’s Treatment Courts’ standard of care for court participants.

**This manual offers recommendations and guidance to best position peer supporters to effectively engage and support people navigating Maine’s Treatment Courts.**

This manual’s primary audience is those who are interacting with peer support professionals in court settings, including judges, probation officers, case managers, district attorneys, treatment professionals, and others who comprise the Treatment Court team. Each of these roles contributed to the recommendations and priorities in this manual. This manual was also informed by the emerging guidance of Peer Recovery Support in court settings nationally, particularly the work of All Rise’s *Incorporating Peer Recovery Support into Treatment Courts: Practice Guidelines for Treatment Court Professionals*. The layout of this manual reflects the recommendations of those who contributed to it. **We prioritized the tangible, specific, and most relevant elements of Peer Recovery Support in this manual.**

Peer Recovery Support (PRS) Professional is the name given to the positions held in Treatment Courts by individuals with lived experience who live and work as persons in recovery. These professionals often have experience navigating the court system and have completed specific training to engage in this work effectively. PRS roles are specifically and uniquely structured to enhance their ability to connect, support, and build trust with court participants. **This uniqueness requires additional education, training, and awareness from all Treatment Court team members to ensure the appropriate utilization of consistent, effective, and quality peer support.** Even those with the best of intentions, and ample experience, have come to find that peer support roles are structured very differently than other roles in the mental health system. This is further emphasized when peer supporters operate within the complexity and rigor of court-based recovery work.

We acknowledge the variations in how peer support roles have historically been structured in Maine’s Treatment Courts. This manual seeks to offer the most effective operationalization of these roles, based on the expertise of those doing the work. We encourage any Treatment Court Multi-Disciplinary (TCMD) team member, including the PRS staff, to seek support, clarification, and guidance from those in Maine who are spearheading these roles. **Our shared mission is to ensure people navigating Maine’s court systems have the highest quality support and are given the best opportunity to achieve a meaningful life free of further court involvement.**

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<sup>1</sup> All Rise. *Incorporating Peer Recovery Support into Treatment Courts: Practice Guidelines for Treatment Court Professionals* (2023). (This document lists many studies and articles in the Endnotes section)

## SECTION 1: BRIEF OVERVIEW OF PRS ROLES

The two primary peer support roles on the TCMD team are the PRS Supervisor and the PRS Professional (direct support). Each PRS role has distinct responsibilities in the court and is structured for specific reasons; mostly, to ensure the fidelity of peer support to allow for the best outcomes for court participants. An essential piece of this fidelity is that **all peer support relationships are voluntary**.

The most important role of the TCMD team is to support PRS Professional role fidelity AND ensure PRS Professionals can maintain a trusting, effective relationship with court participants.

The PRS Professionals may have their own history of court involvement, potentially with the TCMD team they are now working with. They may feel nervous or intimidated by being on the court team with judges, lawyers, probation officers, etc. A welcoming spirit can be essential to establishing an effective working relationship with PRS Professionals – with special consideration given to these unique power dynamics. Past court participants may be the most effective PRS Professionals; therefore, appreciation for their commitment to Treatment Courts is important to recognize, along with offering adequate pay.

If at any point the TCMD team member(s) have concerns or questions, they reach out to the PRS Supervisor. Direct, open, honest communication is critical to the effectiveness and sustainability of the peer recovery support roles.

Brief Summary of Peer Recovery Support (PRS) Roles	
PRS Supervisor	PRS Professional (Direct Support)
<p>DOES:</p> <ul style="list-style-type: none"> <li>• Provides consistent, high-quality, regular supervision to PRS Professionals</li> <li>• <b>Attends Court &amp; TCMD meeting to offer recovery perspective &amp; strategies</b></li> <li>• Determines when peer support is introduced to new court participants</li> <li>• Meets &amp; assigns court participants to PRS Professionals</li> <li>• Provides education on the value of peer support, offers clarity around ethics and role activities, and recovery concepts</li> <li>• Receives and addresses concerns related to PRS Professionals &amp; PRS activities</li> <li>• Shares personal recovery story thoughtfully and intentionally</li> <li>• Provides onboarding and training to new PRS Professionals &amp; TCMD members</li> <li>• Trains the PRS Professionals on Treatment Court purpose, policies, and procedures</li> </ul>	<p>DOES:</p> <ul style="list-style-type: none"> <li>• <b>Attends Court</b> (sits in audience, observes admissions, watches progress, and joins completion ceremonies)</li> <li>• Meets 1:1 with court participants before and after court, and in the community</li> <li>• Offers Texts, Calls, &amp; In-person meetings</li> <li>• Shares personal recovery story thoughtfully and intentionally</li> <li>• Supports court participants with thoughtful decisions-making</li> <li>• Actively listens and allows court participants to define their own pathway</li> <li>• Shares approved resources</li> <li>• Set clear boundaries around availability and nature of relationship</li> <li>• Focus on self-determination, choice, and mutual support relationships</li> <li>• Articulates personal responsibility, clear communication, and self-advocacy</li> </ul>

<ul style="list-style-type: none"> <li>• Informs TCMD team on who the PRS Professionals are, any changes to the team, and any events/circumstances impacting the services, especially the Judge (who needs to be aware of who the PRS Professionals are and of changes)</li> <li>• Responsible for maintaining collaborative, positive working relationship with TCMD team and PRS Professionals</li> </ul> <p><b>DOES NOT:</b></p> <ul style="list-style-type: none"> <li>• While the PRS Supervisor can provide perspectives to aid in determination of incentives and sanctions, at no time do they make a direct recommendation and they accept the decision of the Judge without conflict</li> <li>• <b>PRS Supervisors do not monitor court compliance.</b> They do not perform Urinalysis, monitor curfews, conduct home or employment checks, or perform any other duty that verifies compliance with court requirements</li> </ul>	<ul style="list-style-type: none"> <li>• Conveys an understanding of confidentiality and professional ethics</li> <li>• Seeks regular supervision, especially with any challenging situations</li> </ul> <p><b>DOES NOT:</b></p> <ul style="list-style-type: none"> <li>• <b>Does NOT attend TCMD team meetings</b></li> <li>• <b>PRS Professionals do not monitor court compliance.</b> They do not perform Urinalysis, monitor curfews, conduct home or employment checks, or perform any other duty that verifies compliance with court requirements</li> <li>• Does not share conversations had with court participants, except with supervisor</li> <li>• Does not provide recommendations on sanctions or punishments</li> <li>• Does not try to influence TCMD team or speak on behalf of court participants</li> <li>• Does not contact family members, attorneys, friends or others on behalf of court participants (unless approved by PRS Supervisor)</li> <li>• Does not tell participants what decisions to make, only supports exploring possibilities and potential outcomes</li> </ul>
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**Qualifications & Training:**

While each PRS Organization may outline different qualifications and training requirements for each role, the TCMD team is always informed of them. Generally, these are the most common:

PRS Supervisor	PRS Professional (Direct Support)
<ul style="list-style-type: none"> <li>• Lived experience of substance use recovery, and potentially co-occurring mental health challenges</li> <li>• Experience practicing peer support (minimum 2 years recommended)</li> <li>• Coachervision© Training</li> <li>• Trained in Recovery Coaching &amp; Intentional Peer Support (certification requirements are defined by the PRS Organization and Maine Office of Behavioral Health)</li> </ul>	<ul style="list-style-type: none"> <li>• Has lived experience of recovery, many have experience of being incarcerated</li> <li>• <b>Past court participants are eligible and may be best for these roles</b> (when they support and contribute to the mission of Treatment Court)</li> <li>• Trained in Recovery Coaching &amp; Intentional Peer Support (certification requirements are defined by the PRS Organization and Maine Office of Behavioral Health)</li> </ul>

## SECTION 2: THE VALUE OF PEER SUPPORT

The very existence of the Treatment Courts is an acknowledgment that an alternative to traditional court processes was needed to effectively support the recovery of those with mental health and/or substance use challenges, and more effectively reduce recidivism. The central priority of the Treatment Court is to foster the recovery of every court participant, therefore, the PRS staff roles cannot be overstated. **If our goal is recovery, then let's put the people in recovery at the forefront.**

The PRS Professional and PRS Supervisor roles are the people on the TCMD team who are open about their recovery, are the most connected to the recovery community, and who personally understand the journey the court participants will be navigating. It is often best for the PRS Professional or PRS Supervisor to be the first person(s) the potential court participants meet when beginning to explore the court program. This allows the court participant to start with people in recovery in a recovery-oriented court program and establishes support at the start of a complex and often overwhelming process.

During the first phase of the court program, many court participants are leaving the rigid structure of incarceration. They must balance numerous court requirements, court and treatment appointments, and their own process of re-entering the community. This can be a very challenging shift where PRS Professionals can offer a safe space to discuss those challenges and offer guidance and strategies to navigate the transition.

When considering the “value” and “evidence” of these roles, there are many resources, journal articles, research articles, and materials to explore. Many have been authored and/or distributed by the Substance Abuse & Mental Health Administration and others come from across the academic community. They have demonstrated peer support as an evidence-based practice. This manual will not attempt to compile a full list of resources, as others have done this beautifully. Most notably, the All Rise practice guidelines, *“Incorporating Peer Recovery Support into Treatment Courts: Practice Guidelines for Treatment Court Professionals.”* published in November 2023. The All Rise document is a great resource for court professionals in Maine to familiarize themselves with.

**In this Maine manual, we decided to share the “value” of PRS roles from the people in Maine working in Treatment Court settings.** As mentioned, the creation of this manual involved over a dozen interviews and meetings with Maine court professionals, treatment professionals, PRS Professionals, PRS Supervisors, and PRS Organizations. These are some of the benefits they described:

- Supported the creation of a community/support network for when Treatment Court and probation are no longer in the picture
- Provided a bridge across barriers to recovery that has supported court participants in achieving the future they desire

- Provided a connection to the recovery community and strategies to navigate any problematic messages from individuals that could interfere with a self-directed recovery
- Supported trust-building and open communication in the carceral system, as an often uniquely challenging, fearful, and power-laden setting for court participants
- Contributed to a reduction in interactions (sanctions) with court lawyers and judges
- Improved interactions with lawyers and judges, including helping court participants think through important questions to ask their lawyer(s)
- Improved understanding of the court process
- Improved communication with the TCMD team, including supporting court participants with how to share challenges and concerns with team members
- Supported shifts in decision-making that reduced the amount of additional criminal charges and sanctions, and, in turn, improved participation in Treatment Court (decision-making that is often referred to as “criminal thinking” in carceral systems)
- Supported shifts around court participants “running their own program” instead of focusing on their obligations and commitments to the court process
- For court professionals, PRS staff have offered clarity about the challenges court participants face, from personal experience, and increased the understanding and empathy among all team members

“Passionate peer support is beneficial across the spectrum of recovery in many aspects, especially in court settings. Navigating early recovery, in general, is a difficult task, let alone while trying to adhere to court guidelines. Having a peer supporter helps keep your feelings, thoughts, and emotions stable so you can achieve your goals and complete the court program.”

- Former Treatment Court Participant

## 2.1 - Resources: Efficacy of Peer Support

*Incorporating Peer Recovery Support into Treatment Courts: Practice Guidelines for Treatment Court Professionals. All Rise (2023)*

<https://allrise.org/publications/incorporating-peer-recovery-support-into-treatment-courts/>

*Value of Peer Support (2017):*

[https://www.samhsa.gov/sites/default/files/programs\\_campaigns/brss\\_tacs/value-of-peers-2017.pdf](https://www.samhsa.gov/sites/default/files/programs_campaigns/brss_tacs/value-of-peers-2017.pdf)

*Peers Supporting Recovery from Mental Health Conditions (2017):*

[https://www.samhsa.gov/sites/default/files/programs\\_campaigns/brss\\_tacs/peers-supporting-recovery-mental-health-conditions-2017.pdf](https://www.samhsa.gov/sites/default/files/programs_campaigns/brss_tacs/peers-supporting-recovery-mental-health-conditions-2017.pdf)

*Peers Supporting Recovery from Substance Use Disorders (2017):*

[https://www.samhsa.gov/sites/default/files/programs\\_campaigns/brss\\_tacs/peers-supporting-recovery-substance-use-disorders-2017.pdf](https://www.samhsa.gov/sites/default/files/programs_campaigns/brss_tacs/peers-supporting-recovery-substance-use-disorders-2017.pdf)

*Substance Abuse and Mental Health Services Administration, Core Competencies for Peer Workers in Behavioral Health Services (2015):*

[https://www.samhsa.gov/sites/default/files/programs\\_campaigns/brss\\_tacs/core-competencies\\_508\\_12\\_13\\_18.pdf](https://www.samhsa.gov/sites/default/files/programs_campaigns/brss_tacs/core-competencies_508_12_13_18.pdf)

*National Association of Peer Supporters, National Practice Guidelines for Peer Specialists and Supervisors (2019):* <https://www.peersupportworks.org/resources/national-practice-guidelines/>

### **History of Peer Support:**

While Peer Support is relatively new in the Treatment Courts, it has existed for decades across the United States and the rest of the world. Its roots are tied to advocacy for improved treatment and access, self-determination, choice, and reducing discrimination. A foundational philosophy of peer support is “Nothing About Us Without Us.” This term means that all peer support relationships center each person’s right to privacy and choice around the disclosure of personal information. Each person consents to what information is shared outside the relationship, which is only under rare circumstances. This element of the peer support model is why the positions are structured the way they are and why communication is stricter for peer support roles. Communication considerations are described in Section 5: Communication.

To learn more about the history of peer support, please watch this video about human rights advocate Judi Chamberlin: <https://www.youtube.com/watch?v=FGT4xJXgmoE>

### SECTION 3: THE ROLE OF PRS PROFESSIONALS

The peer support relationship is built on trust and all team members are responsible for supporting the PRS Professionals in building and maintaining a trusting relationship with the court participant. This means being mindful of how the team shares information, when and how the PRS Professional meets with court participants, and how power imbalances are navigated.

The PRS Professional meets with participants one-on-one, facilitates introductions to recovery or healing communities of choice, and effectively communicates about the boundaries and shared expectations of the role. There is no cost to court participants. The PRS will utilize their training and lived experience to best support the individual's self-defined recovery pathway and to collaborate effectively with the TCMD team. ***The PRS Professional walks alongside court participants through a journey of self-directed recovery and life-changing self-discovery.***

PRS Professionals attend court, sit in the audience, and meet with court participants outside of court. They do not attend TCMD team meetings to avoid disrupting the trust in the relationship. PRS Professionals do not monitor or participate in activities related to ensuring court or treatment compliance. This relationship is guided by the principles and expectations of their training, which are Intentional Peer Support and Recovery Coaching (*described in Section 7*). The PRS Professional and PRS Supervisor roles are fully integrated into the TCMD teams, even though they operate differently. The PRS Supervisor role is defined in Section 6.

- PRS Professionals “walk with” court participants, not “do for!”

Role clarity is fundamental to the effectiveness of any team, and this is especially true in court-based recovery work. Creating opportunities for each team member to learn about each other's role is a critical first step, including the PRS Professionals learning about the TCMD team roles. It is also important that PRS Professionals understand the TCMD team members' training and approach to supporting recovery, just as much as the TCMD team needs to understand and respect the PRS Professional role. This work has notable challenges and complexities and, as other members of the TCMD team are recognized as paid professionals, so are the PRS roles.

To best support role integrity, the entire TCMD team participates in training to ensure a shared understanding of each member's role. Ongoing, this creates the foundation for the TCMD team to share any concerns and questions regarding the PRS Professional role, especially related to boundaries, with the PRS Supervisor.

“Recovery does not happen in a courtroom; it happens in a community. Treatment courts play a critical role in being the bridge to a community that many participants have never experienced. Peer support professionals are the lights that illuminate that bridge, making the connection meaningful and instilling hope that change is possible. Through the intersection of experience and expertise, peer support professionals play a valuable role in educating and bringing a unique perspective to the multidisciplinary team.”

- Abby Frutchey, *Substance Use Response Coordinator*

### 3.1 - What PRS Professionals do with court participants

It varies. Like other relationships in our lives, PRS Professionals do what makes sense in the relationship. Just as treatment is individualized, so is the peer support relationship. However, the court program is highly process-oriented, outcome-driven, and appointment-based, whereas peer support relationships are often more organic, flexible, and “on-the-fly” support.

PRS Professionals understand the importance of “honesty” within the court program and support court participants in advocating and communicating directly with the TCMD team about any challenges, such as returning to use. (see *Honesty in Treatment Courts* on page 14 for more).

Foundationally, what the PRS Professional and court participant “do” together originates in their relationship, not from outside influences or pressure. This reinforces trust, consent, self-determination, and shared decision-making. Some important grey areas:

- We can give rides, but we are not taxi drivers (see *Transportation Considerations* on page 16 for more).
- We can support someone in an appointment, but we are not appointment companions.
- We can introduce people to recovery community and treatment providers, but we are not case managers, sponsors, or clinicians. ***A core intention of the peer support relationship is to support court participants in building their own social/recovery support network.***

#### Common PRS Professional Activities

- Creating a safe space to process challenging thoughts, emotions, and experiences
- Sharing and building bridges to recovery and wellness strategies and activities
- Sharing about and accompanying court participants to recovery meetings
- Sharing about and fostering self-advocacy
- Sharing strategies around problem-solving and goal setting (when invited)
- Exploring the concept of recovery capital
- Exploring social and community support networks
- Exploring all wellness activities (nature, nutrition, harm reduction, etc.)
- Exploring education and employment opportunities (and support around any fear)

“PRS Professionals share that they know what it’s like to sit where the court participants are or, at the very least, know what it feels like to change your life entirely – changing who you are as a person and how you move through the world. That’s a daunting task and it’s better to do it with someone who understands and wants to see those positive changes for you too.”

– Mackenzie Kelley, Recovery Coach Coordinator, Healthy Acadia

### 3.2 - Honesty In Treatment Courts

Honesty from court participants is a central expectation in Treatment Courts. However, it is often fraught with fear and concern for court participants – after all, they are used to punishment for substance use and other behaviors that they now need to be upfront about.

PRS Professionals support people in navigating the “honesty” expectation more effectively and transparently when they support court participants in having direct conversations with the TCMD team about substance use, life challenges, and fear – rather than doing it for them. Court participants may be fearful to share what happened with TCMD teams, but they can tell the PRS Professional because of the confidentiality and safe space structured into that relationship. This creates an opportunity for the court participant to practice or “try on” a different response. In doing so, the court participant can choose to change course and address the issue directly with the TCMD team, instead of keeping it a secret or hiding it which ultimately makes things worse when the court finds out.

As described throughout this manual, the PRS Professionals are not in a position of power like other TCMD team members – PRS Professionals do not monitor or report on treatment and court compliance, and they do not participate in discussions about whether court participants are sanctioned or removed from Treatment Court. This offers a space where court participants don’t have to think “I can’t tell them this because they are going to report it to the court”. Instead, they can communicate openly about it with the PRS Professionals and receive support around sharing the situation directly with the TCMD team.

### 3.3 - What PRS Professionals do not do with court participants

**PRS Professionals focus on their lived experience and peer support role.** They are not a substitute for case managers, van drivers/transportation assistants, clinicians, 12-step sponsors, or community supervision officers. Drifting out of their role will significantly diminish the effectiveness of peer recovery support – contributing to role ambiguity and confusion. Below are some additional requirements:

- **PRS Professionals do not monitor treatment & court compliance.** They do not perform Urinalysis, monitor curfews, conduct home or employment checks, or perform any other duty that verifies compliance with treatment & court requirements.
- Do not share details of the conversations they have with court participants.
- Do not contact TCMD team members without first communicating with their PRS Supervisor (unless outlined by the PRS Supervisor, most often with the case manager).
- Do not contact family members, attorneys, friends, or anyone else for court participants (may be approved case-by-case by the PRS Supervisor).
- Do not join or stay in TCMD team meetings where court participants are discussed.

- PRS Professionals do not share resources without prior approval from the PRS Supervisor. (see *Community Resource Navigation* on pages 22 & 23 for more).
- Do not engage in any activities that could be deemed exploitative, coercive, or unethical (see the code of ethics links in Section 7: Training & Certification).
- Do not engage in romantic or sexual relationships with court participants within a formal peer support role or program.
- Do not lend money or provide gifts.
- Do not put money on the participant's commissary, pay for phone minutes, etc.
- PRS Professionals are not reactive to situations or discomfort during court - they act with integrity and professionalism - even when they disagree with the court or a TCMD team member. PRS Professionals are curious about others' perspectives and do not come into conversations with pre-conceived judgments or assumptions.
  - Do not contact the Judge or other TCMD team members to push for specific outcomes related to sanctions, discharges, or benefits
  - Do not openly contradict the TCMD team or undermine their process
  - Do not tell court participants to ignore the court's decisions
  - Do not lie or mislead on behalf of court participants
- **Documentation:** PRS Professionals do not provide detailed documentation. They document contact hours (time spent). (see *Section 5: Communication for more*)

### **Advocacy**

PRS Professionals rely on supervision for guidance on all matters of advocacy.

While advocacy is a foundational element of all peer support roles, in all models, the PRS Professional and PRS Supervisor understand the unique, and highly structured, setting of Treatment Courts. Therefore, their role in advocacy focuses on the court participants advocating for themselves rather than either peer support role advocating for them. The PRS Professional can provide mindful coaching to court participants about how to share their concerns or needs directly with the TCMD team.

### **Variation Among PRS Organizations**

Different PRS Organizations may require or restrict certain activities for PRS Professionals. PRS Organizations directly communicate any such restrictions and their context with the TCMD team. It is the central responsibility of the PRS Organization and PRS Supervisor to offer role clarity to the TCMD team, particularly on what activities are authorized, how those decisions are made, and how to communicate with the PRS Supervisor if concerns arise. The TCMD team receives a list of activities and role responsibilities for PRS Professionals.

### 3.4 - Transportation Considerations

PRS Professionals may provide transportation to court participants under specific and limited circumstances, not as a general activity with all court participants. The PRS Supervisor educates PRS Professionals and the TCMD team about the approach to transportation.

The first rule is that any transportation activity originates in the peer support relationship, not directed by a member of the TCMD team (i.e., the Case Manager does not call the PRS Professional and say, “Can you take X court participant to X place?”). This is between the two people in the peer support relationship. TCMD team members direct the court participant to the PRS Professional in these cases, rather than any TCMD team member instructing the PRS Professional to provide transportation or promising transportation to court participants. The PRS Professional is responsible for having a thoughtful conversation with the court participant, particularly to convey that transportation is not a guarantee or central role function.

The PRS Professional is very clear about the limitations and approaches to boundaries related to transportation with each court participant at the beginning of the peer support relationship. If a court participant hardly knows the PRS Professional (i.e., they only met once or saw each other in court), transportation will not likely occur unless there is an opportunity to build a connection in the process. The limits of transportation are negotiated, and all alternative ride possibilities are first explored. The PRS Professional will not be in the court participant’s life forever, so more sustainable options are considered, such as public transportation (if it exists), family/friends, etc.

*Maine is a rural state*, so more flexibility is given. The PRS Supervisor approves transportation before the activity unless they have defined parameters in place (most often for recovery meetings). The most commonly approved reasons are:

- A recovery meeting or event
- A coffee shop or park for a peer support meeting
- A family reunification meeting (not as a rule or pattern)
- A court or treatment appointment (not as a rule or pattern)
- Food banks, housing appointments, or other resource (not as a rule or pattern)
- Bringing court participants to their intake meeting with Maine Pretrial Services (not participating in the intake, but available before and after)

Transportation is not provided to:

- Pick up or drop off someone’s belongings
- Visit friends
- Regularly go shopping (groceries or otherwise)

PRS Organizations may have specific requirements and expectations around transportation, which are communicated with the TCMD team and PRS Roles. The TCMD team members can contact the PRS Supervisor if emergent needs arise regarding transportation, which can be explored collaboratively.

### 3.5 - PRS Professional Role in TCMD Team Meetings

PRS Professionals do not attend TCMD team meetings where court participants are discussed and are not present. This can create tension between the PRS Professional and the court participant around what the PRS Professional is hearing, what they are sharing, what they will or won't share with the court participant after the meetings, etc. Attending TCMD team meetings can also create a power differential between the court participant and the PRS Professional. This can damage the relationship and go against the core principles of peer support work.

The central role of the PRS Professional is to build a **trusting** relationship with the court participant and ensure that their conversations are private/confidential. This is always threatened if the PRS Professional joins conversations about court participants when they aren't present.

We have received significant feedback from court participants that they do not like when the PRS Professional is in TCMD team meetings. This is a core element of the role structure and is a springboard for the critical role of the PRS Supervisor. The PRS Supervisor can attend the team meetings to offer a recovery perspective without the same impact on confidentiality and trust since they are not working with court participants directly. The role of the PRS Supervisor is to support a recovery voice in team meetings, while the PRS Professional's role is to support court participants directly.

### 3.6 - Training for TCMD Teams

The TCMD team periodically hosts internal peer support training for all TCMD team members to support effective, high-quality peer support and collaboration. This could happen at the regular team meeting or a special date/time that works for each team member.

This allows the team to:

1. Build a relationship with the PRS Professional
2. Understand the basics of peer support
3. **Clarify the role and expectations (especially around communication)**
4. Enhance understanding of recovery models and pathways
5. Ask questions

The TCMD team acknowledges that the PRS Professionals may have their own stories of incarceration and be intimidated by being on the "team" with judges, district attorneys, etc. The TCMD team demonstrates awareness of the following:

- Power dynamics (never asserting power over the PRS Professionals)
- The complex stories of PRS Professionals
- How to be welcoming to the vulnerability that PRS Professionals come in with as the "person with lived experience" (other members of the team aren't expected to share their lived experience, even when it informs their work)

Training opportunities also allow the PRS Professional to learn about each TCMD member's role and clarify any questions about the Court process, requirements, and/or expectations.

### 3.7 - Key Points: PRS Professional & TCMD Team Interactions

- All parties are open to feedback and will endeavor to compassionately navigate missteps/mistakes/misunderstandings in the learning process. This is natural for any new role on a team. **Mutual respect and open dialogue are critical.**
- The TCMD team, including the PRS Supervisor and PRS Professional, meet periodically to review communication, address questions and concerns, and ensure optimal collaboration. These meetings do not discuss court participants; but rather, focus on collaboration (communication amongst team members, referral process, opportunities for improvement, etc.), education about each other's role, and sharing resources.
- The court participant, case manager, and PRS Professional may meet to discuss challenges or other needs more regularly than other team members – at the direction of the court participant, and with the awareness of the PRS Supervisor.
- Since PRS Professionals focus on developing trust with the court participant, they don't interact significantly (day-to-day) with the TCMD team but are part of the team.
- PRS Professionals understand and respect that the other TCMD team members share information regarding substance use, court compliance, etc. with each other. There is a court-supported expectation that team members do not filter information. TCMD team members want the best outcomes for court participants and are committed to recovery. PRS Professionals will seek supervision if there are questions or concerns.
- TCMD team members avoid disrupting the PRS Professional and court participant relationship (e.g., avoid using the PRS Professional as a source of information about court participants, and avoid anything that compromises the relationship as a safe space to have hard, scary, and important conversations).
- **“Recovery Voice & Perspectives”** - TCMD team members can ask the PRS Professional general questions about recovery approaches and concepts. These conversations are not about individual court participants to maintain confidentiality.
  - PRS Professionals are not expected to give “testimony” about their lived experience or share details of their recovery story with the TCMD team, nor in any meeting.
  - PRS Professionals are not expected to be the educators who address and explain stigma and discrimination; rather, they focus on supporting court participants. This role is often best for the PRS Supervisor, when appropriate.
  - Most of the time, the PRS Supervisor is the role that offers a “recovery voice” to TCMD team members, especially during TCMD team meetings.

### 3.8 - PRS Professional Well-being

The PRS Professional prioritizes their wellness and recovery to conduct this role sustainably. At times, PRS Professionals may care so deeply about the outcomes of court participants that they lose sight of their own needs and boundaries and begin doing “for” court participants. They may start making calls, filling out paperwork, contacting family members, and becoming overwhelmed by the barriers court participants face. They may lose sight of their own boundaries, give unlimited rides, start trying to rescue court participants from situations, and begin feeling guilty about not “doing enough”. These are signs that the care for court participants has impacted the PRS Professional role and well-being. These things are acknowledged as a challenge for many PRS Professionals and are not to be shamed when they occur, instead support and compassion are offered to realign their work practices with peer support values.

- PRS Professionals are responsible for discussing well-being challenges with their supervisor (with choice related to details) and must be willing to address them.
- PRS Supervisors are responsible for fostering a culture that promotes self-care, community-care, and education/conversations around compassion fatigue, vicarious trauma, grief, etc. The PRS Supervisor is responsible for providing high-quality and consistent supervision to help mitigate and address this without shame or guilt.
- TCMD teams are responsible for honoring the unique role of the PRS Professionals and promoting wellness while avoiding treating PRS Professionals as fragile.

#### **“Recovery Role Model” Label Concerns**

Recovery is a challenging, non-linear process for most people. It can touch on issues of shame, guilt, self-worth, self-confidence, and belonging. Many people may find themselves looking for external validation to combat issues related to self-esteem and to internalize a sense of acceptance. Recovery allies often want to celebrate and “lift up” people in recovery to convey value and appreciation. However, more conversations have emerged about the negative, unintended impact that labels like “recovery rockstars” and “recovery role models” place on people in recovery and people in treatment programs. There are concerns these labels do not leave space for people in recovery to share when they are struggling and may reduce the likelihood of asking for help for fear of “disappointing” or “failing” recovery allies and/or the recovery community.

For court participants, Treatment Courts that label the PRS Professional this way may create a false idea of what recovery needs to look like or what the Treatment Court “wants”. Court participants may internalize that they need to “do recovery” like the person being celebrated by the court. This can lead to overwhelm, discouragement, disengagement, and self-shame.

With this in mind, TCMD teams are mindful not to call PRS Professionals “recovery role models” and mindful not to call court participants the “star of the court”, or the like. These labels can put extra pressure on people and reduce transparency about emerging challenges. It is OK to celebrate with people if they are excited about an achievement while being mindful not to become the arbiter of or limit what is “good” or what “success” looks like. PRS Professionals are mindful of this in their interactions with court participants as well.

### **3.9 - Crisis: PRS Professional Considerations**

Court participants can experience a variety of challenges that may rise to the level of a “crisis”. PRS Professionals are not crisis workers but provide a valuable perspective in navigating some of the most significant challenges in recovery. They can create a safe space for court participants to share about what’s going on and share their own experiences around that topic, event, or feeling. PRS Professionals prioritize supervision when navigating intense challenges and prioritize their own wellness in these conversations.

Situations when peer support may be helpful:

- Friends and family who are using or unsupportive
- Navigating emotions related to housing insecurity
- Interpersonal conflict and violence
- Cravings to use substances or a return to use
- Anger, frustration, despair, thoughts of self-harm/suicide/harm to others, etc.
- Lack of a recovery community
- Lack of purpose and meaning in life

***Limits of Confidentiality:*** PRS Organizations may have different approaches to conversations around suicide, self-harm, and threats of harming others. The PRS Supervisor is responsible for training the PRS Professional and TCMD team on their approach.

PRS Professionals are not available 24 hours a day, 7 days a week. The PRS Professional will explain, in detail, their availability to receive texts/calls from the court participant. The frequency and type(s) of contact are mutually agreed upon by both parties. Court participants are provided alternative resources for when the PRS Professional is not available. These can include:

- Maine’s Recovery Centers:  
(<https://www.maine.gov/future/initiatives/opioids/recoverycenters>)
- Maine’s Peer Support line (formerly “Warmline”) - (1.866.771.9276)
- The Crisis line (dial 988)
- Call List: Sponsors, family members, clergy, recovery community members

#### **Mandated Reporting**

PRS Professionals are mandated reporters under Maine State law for child and elder abuse. Maine’s mandated reporting law does not discuss suicide, self-harm, or harm to others. PRS Professionals inform court participants about their mandated reporting practices. Reports are done openly and transparently, with the involvement of the court participant whenever possible. PRS Organizations requiring agency reporting for suicide, self-harm, or threats towards others are clear with the TCMD team regarding these practices and provide training to the PRS Professionals. PRS Organizations train PRS Professionals on Mandated reporting practices that focus on informed consent and participant involvement.

### **3.10 - Number of people PRS work with, frequency & when support ends**

This varies. A full-time, 40 hour a week, PRS Professional often works with 15-20 people. A typical relationship may last 3-6 months up to 2 years, but this is determined case-by-case.

Once matched, it is recommended that the PRS Professional spends an average of 1 hour per week with the court participant in the first 30 days. This allows them time to focus on building a connection and trust, sharing expectations, offering role clarity, and sharing about the boundaries in the relationship. The PRS Professional shares with each court participant that their conversations are confidential and describes the PRS Organization's approach to mandated reporting. They also describe any limitations related to suicide, self-harm, and threats of harm to others (see *Crisis: PRS Professional Considerations* on page 20 for more).

PRS Professionals know that the first 30-60 days can be the most challenging time for court participants. This period can include reoccurrence of substance use, big emotions and mood swings, relationship changes, and more. When conversations become difficult, PRS Professionals seek support and supervision. This includes addressing situations perceived as a "crisis" with supervisory support and in alignment with organizational policy.

**The first meetings with Court Participants** are critical to establishing an effective peer support relationship. PRS Professionals and court participants are encouraged to establish mutual values, boundaries, and shared expectations based on the individual relationship. All forms of communication (phone, text, in-person, virtual) are acceptable and are mutually agreed upon by both people. They discuss and explore:

- Sharing about themselves and what they are each hoping for in the PRS relationship
- Any immediate recovery and wellness needs, including existing barriers to recovery
- When, how often, and where they'll meet moving forward
  - e.g., phone, text, in-person, and days of the week each are available or unavailable, preferred communication methods/times, etc.
- The role of the PRS Professional – what it is and what is not (boundaries/needs/norms)
  - Answering questions from court participant
- What will and will not be communicated with the TCMD team
- Resources for support and recovery, including for when the PRS Professional is not available

The PRS Professional makes clear to the court participant that they will not act as a liaison to the TCMD team and the PRS Professional will not seek to change the team's decision on behalf of any court participant.

**The end of the peer support relationship** is most often when the court participant feels ready for it to end. This is typically when they have built up natural social and familial support and have a solid recovery community. This is negotiated between the court participant and the PRS Professional.

### **Note about “Outcomes”**

In Peer Support, there are no typical external indicators like there are in case management and clinical services (related to housing, employment, length of recovery/abstinence, reduction of “symptoms,” etc.). PRS services focus on the quality of the relationship and many factors contribute to traditional outcomes, such as those listed above. In the quest for credibility and to demonstrate efficacy, much has been compromised in terms of fidelity to peer support values. TCMD teams and PRS Organizations are mindful of what is measured and who holds the burden of those measurements.

We’ve seen organizations put pressure on PRS Professionals to “get” participants to achieve traditional outcomes, which has eroded the peer support relationship. We have also seen PRS Professionals start to define the quality of their peer support work by whether people achieve those traditional outcomes, which has eroded both their self-confidence and the peer support relationship – burning many people out of this work. We have seen organizations and the State of Maine push the burden of outcome measures on the very people who have come to us for support – through endless, frequent, and very personal surveys, questionnaires, crisis and recovery plans. TCMD teams are mindful not to push traditional outcomes onto PRS Professionals or begin to assess the quality of peer support work by whether those engaged in it meet traditional outcomes. TCMD teams work with PRS Organizations to determine what, if any, measures are needed and both groups identify strategies to combat any potential unintended consequences of those identified measures.

PRS Organizations may use PRS-focused measures, such as a Recovery Capital Scale, to contribute to decision-making for the end of the peer support relationship and/or to consider the effectiveness of the peer support work in the Treatment Court – while continuing to be mindful of the frequency of completing those measures as well as the messaging related to them. Any “recovery” measure or tool will convey that “this” is what recovery looks like or “this” is what is most important in recovery – which can be discouraging to court participants with complex situations. The PRS Supervisor is responsible for educating the TCMD team on procedures related to ending a peer support relationship and/or demonstrating efficacy, along with education related to any recovery measure used. The PRS staff do not share specific court participant results with the TCMD team. They may share themes, trends, and aggregate data when appropriate.

### **3.11 - Community Resource Navigation**

A core feature of peer support involves connecting court participants to the recovery community, including recovery centers, 12-step or recovery meetings, healing communities (such as churches and spiritual practices), and recovery-aligned events and activities. With a constantly changing resource landscape, the PRS staff identifies strategies to stay informed about current and diverse recovery resources. Given this, it hasn’t typically been effective for PRS Professionals to spend time creating a resource guide since it is usually out of date the next week or month. Having a general sense of where to go for the most up-to-date information has been the best strategy. Ideally, the PRS Professional and court participant identify and explore resources together.

The PRS Professional may provide tips on navigating pre-approved housing and employment resources, educational opportunities, recovery resources, etc. when invited by the court participant. However, this is not done to “guide” the court participant to a specific area or pathway. PRS Professionals are not case managers, so they do not fill out paperwork, make calls for court participants, or provide other case management services.

The PRS Supervisor is informed about all resources shared with court participants and provides role-specific training to PRS Professionals about how to approach resource navigation. PRS Professionals may distribute a standard list of TCMD/supervisor-approved resources to court participants at the beginning of the peer support relationship or at another more appropriate time.

The TCMD teams can receive a list of PRS Organizations available to connect court participants with when their local PRS Professional(s) are not available or appropriate (see *Potential Conflicts of Interest* on page 25 for examples). The PRS Supervisor, if present, is likely the best person to make those referrals in these cases.

### **Resource Sharing – Why Pre-Approved?**

PRS Professionals in other settings more freely share resources with participants engaged in peer support. The Treatment Court has additional considerations around resource sharing. The TCMD team, often led by the case manager and treatment clinician, actively works with court participants to identify resources related to treatment, housing, employment, etc. that best balance the individual’s needs and the court’s requirements. Without pre-approval, PRS Professionals may inadvertently contradict the TCMD’s recommendation and create confusion for the court participant, which carries a more significant impact or risk in court programs. Therefore, PRS Professionals receive supervisor approval before sharing resources with a court participant to avoid conflict or confusion. PRS Professionals may have a standard recovery resource list, such as recovery meetings, activities, and events, that are pre-approved.

### **3.12 - Peer Support Groups**

Most often, PRS Professionals introduce court participants to existing groups in the community and spend most of their time meeting one-on-one with court participants. PRS Professionals can distribute a resource list of local recovery groups/meetings.

PRS Professionals may facilitate recovery-oriented groups in the Treatment Court if there is interest and it aligns with the program’s needs. The PRS Supervisor supports PRS Professionals in group facilitation skills/training and can help develop marketing materials. We recommend that PRS Professionals offer generalized peer support groups and/or “all recovery” meetings to avoid appearing to favor one pathway over another. If PRS Professionals offer single pathway recovery groups, such as 12-step groups or SMART Recovery, they may convey that only one pathway is “preferred” or “acceptable” within the Treatment Court or by the PRS Professional. Court participants may also have had negative experiences with 12-step programs and may be less likely to engage with PRS Professionals if they perceive a bias for that specific pathway.

In their personal lives, PRS Professionals are never discouraged from facilitating or participating in 12-step or other recovery pathways as part of their personal recovery journey in the community – even if court participants see them offering those and even if the court participants have concerns. Every single PRS Professional is entitled to follow and actively participate in their own recovery pathway. The PRS Professional can address misconceptions by openly discussing with court participants that they may see them leading recovery groups or attending specific pathway meetings in the community. The PRS Professional would emphasize that they support all pathways to recovery and welcome conversations, questions, and concerns about any pathway the court participant is exploring. This openness can set the stage for more transparent, honest, and direct conversations with court participants while dispelling any misconceptions or misunderstandings about the PRS Professional’s capacity to welcome all pathways to recovery.

### **3.13 - The Differences: Community Recovery Coaches, 12-Step Sponsors, & PRS Professionals**

The key part is knowing that there is a difference, and we would not assume any consistency between these different roles, other than each role cares about people in recovery. Their approach, boundaries, and activities will be different. The All Rise practice guidance covers this topic as well. Here is a little about each of them:

*A Community Recovery Coach* may or may not be affiliated with an organization or recovery community center. They are often trained as a Recovery Coach and may or may not be someone with personal lived experience (they may be a family member or ally). While we would expect them to be trained, if they are unaffiliated, there is no oversight or guarantee training has been completed nor could we expect that they have supervision. The TCMD team determines if the community recovery coach is affiliated, what supervision/oversight/accountability they receive (if any), and what policies/guidelines they abide by (if any). The TCMD team would not assume the community recovery coach would operate the same as the Treatment Court PRS Professional. There is variation in the recovery coach community and among organizations.

*A 12-Step Sponsor* is a person who follows a specific pathway of recovery and mentors/guides individuals on how to follow the principles and practices of that particular pathway. This can include walking them through the 12 steps. Their availability varies and there is no formal supervision in place; therefore, there is more limited accountability and oversight than in traditional employment. The most common 12-step groups are Alcoholics Anonymous, Narcotics Anonymous, and Cocaine Anonymous. Someone can have a PRS Professional and Sponsor at the same – the more support, the better. However, the PRS Professional cannot also be the Sponsor for a court participant.

*A Treatment Court PRS Professional* is someone in recovery from substance use and/or mental health concerns who has specific training and supervision requirements. They are paid through an established PRS Organization and meet certain ethical and practice requirements, including documentation, boundaries, supervision, training, certification, and oversight. This manual focuses on this role.

### **3.14 - Potential Conflicts of Interest**

A conflict of interest might occur when a court participant is a family member, or friend, had a romantic or sexual relationship in the past, or has some other past or current relationship (particularly a problematic one) with the PRS Professional. The PRS Professional would notify the PRS Supervisor of any potential conflict of interest related to a specific court participant. A history of using substances together, a friendship, or being known to each other is not automatically ineligible from working together. There is an open and honest conversation with the PRS Supervisor and court participant, in which they collectively decide what's best. A referral to another PRS Professional or an affiliated community recovery coach would be appropriate when there is a confirmed conflict of interest. For instance, PRS Professionals do not work with family members. If a TCMD team member becomes aware of a potential conflict, they notify the PRS Supervisor immediately to ensure it is promptly and properly addressed.

**Dual Relationships** (like those mentioned above) are disclosed to the PRS Supervisor, who decides how best to navigate the dual relationship with integrity and transparency, and what, if anything, would need to be communicated to the TCMD team. Particularly in rural areas and within the Native/Indigenous communities in Maine, dual relationships may be more common and the PRS Supervisor is responsible for a thoughtful review of each situation to determine the most appropriate outcome for the court participant – where the court participant's perspective holds equal weight in the decision-making. TCMD team members may also share concerns and questions related to dual relationships and conflicts of interest with the PRS Supervisor.

### **3.15 - Court Participants Interested in Peer Support Training**

First, we want to acknowledge that Intentional Peer Support (IPS), Recovery Coaching, and other peer support training have been incredibly meaningful in people's lives and have helped them improve relationships in and outside of peer support employment. There are additional considerations, however, related to Treatment Courts. Our recommendations are based on numerous experiences and conversations with court participants and TCMD teams. Time and time again, we have seen court participants, particularly in Phases 1 & 2, complete the peer support training and become more focused on supporting others than on their own court requirements (which are abundant). This has negatively impacted their participation in the court program and, at times, led to a return to substance use and/or return to jail.

While uncomfortable, we believe PRS Professionals need to be mindful not to actively encourage court participants to take the Recovery Coach or IPS training during the early phases of the court program. PRS Professionals are supportive yet focus on the reality that court programs can be overwhelming and complex in the initial stages. PRS Professionals seek supervision regarding any challenges with this.

**TCMD team members** can encourage the court participant to contact the PRS Supervisor to explore participation in peer support training. The PRS Supervisor, as a person in recovery and personally knowledgeable of the training that the court participant is interested in, can offer context to court participants on how important it is to focus on the early phases of the court process and consider training later. The PRS Supervisor can also offer a more extensive explanation of the various peer support models, roles, benefits, and training expectations.

## SECTION 4: CONNECTING COURT PARTICIPANTS TO PEER RECOVERY SUPPORT

Since the goal of Treatment Courts is long-term recovery, the TCMD team introduces the court participants to peer recovery support as soon as possible. Every court participant has access to peer support.

### **All peer support relationships must be voluntary**

The purpose of a Treatment Court is to support people with substance use and/or mental health challenges to achieve long-term recovery and avoid further involvement with the carceral system. This purpose means that the TCMD team would structure the PRS position to best support engagement with court participants. Each TCMD team assesses its workflow and processes to determine the best (and multiple) touchpoints for introducing the PRS Professional.

An introductory meeting with the PRS Professional may be required to ensure every court participant is fully informed about the PRS roles. **This is most effective when in person.** The PRS orientation process is developed by the PRS Organization and performed by the PRS Supervisor. The Orientation process openly and honestly represents the PRS roles within the Treatment Court. It provides a clear picture of what court participants can expect from the PRS relationship during and after the completion of the Treatment Court. Orientation typically takes 45 minutes and is the best opportunity to convey the benefits of peer support. The PRS Supervisor uses the information from the orientation process to match court participants to the most appropriate PRS Professional. The PRS Organization develops and shares the court participant orientation process with the PRS Professionals and TCMD team.

Some individuals may **decline** peer support, which is their right and is respected. The PRS Supervisor will formally check in with the court participant 30 days after the initial orientation to renew the peer support engagement opportunity. There are no requirements or practices that compel or coerce court participants to engage with peer support after the PRS orientation. Engagement with peer support cannot be part of any sanction or benefit for court participants, even when peer support appears to be the best solution to the challenges they face.

### **When a Court participant could benefit but doesn't want peer support**

The TCMD team discusses their concerns openly with court participants - encouraging them to meet with the PRS Professional or PRS Supervisor to learn more about the role. However, the TCMD team is mindful not to use sanctions or benefits to push for engagement. The TCMD team can talk with the PRS Supervisor about how to navigate these conversations. Treatment Courts can be overwhelming and adding another support may feel like too much.

**SAMPLE SCRIPT:** "Given what you've shared (or what's happened), I think talking with the peer supporter could be beneficial. I'm wondering if you are willing to explore that a little more? I know you haven't wanted to, but from what I know about their role, they might really help with X, Y, Z that you have struggled with. Remember, what you share with them is confidential, so they are not reporting to me or anyone else. It's not required to work with them either and there's no consequences if you don't, but I think it might help."

## **4.1 – Sample Script: Introducing Peer Support**

Introducing peer support to court participants is an important function of TCMD teams. For some court participants, this will be their first introduction to PRS. The script below provides some key talking points. Operationally, the PRS Supervisor or PRS Professional introduces peer support whenever possible. This a script for when it is not possible:

“In our Treatment Court, we offer peer support. These roles are different from other team members because PRS Professionals are open about their recovery and what you share with them is confidential. They do not report to the court or join our team meetings when participants are discussed, and they do not monitor court compliance. We hope this allows you to focus on your needs without worrying that something will be reported. We do ask that you meet with them to learn about their role directly from them, but you decide whether you want to continue. It’s entirely voluntary. You can start or stop at any time. You two decide when, how often, and what you will work on together. You focus on what makes sense for you. Participants have said it’s been helpful to have someone to talk with about recovery challenges and being in Treatment Court who understands personally.”

### **Some possible example activities:**

- Talking on the phone, texting when needed – checking in
- Meeting in-person for coffee or walks to talk about life and recovery
- Going to recovery meetings or other events/groups that interest you

### **Some examples of its value:**

- Connection to someone who understands what it’s like to navigate recovery/courts
- A person who is “friend-like” but not connected to your life, family, or friend group
- Trust to express challenges with recovery and/or recovery community
- Trust to express challenges with & overwhelm of court process
- Introduction to various recovery and healing communities
- Someone “outside” the system but who “gets it”

### **Documentation:**

- PRS Professionals only document who they had contact with, and for how long. No details. (This can be reassuring to court participants)

Each court participant is provided with the contact information for the PRS Professional and their supervisor. Court participants are encouraged to contact the PRS Supervisor if they have questions or concerns about peer support.

### **Materials:**

- PRS Organizations provide court participants with info sheets about the PRS staff roles and any other materials that are requested. Creating materials can be a collaborative effort with the TCMD team. However, these materials do not include the personal recovery information of PRS staff, due to privacy considerations.

## 4.2 - Peer Support Opportunities in the Treatment Court Process

This section explores various opportunities for court participants to engage with peer support, **ideally in person and at the earliest possible moment**. PRS staff can, and this is often best, meet the potential court participant before entering the court program, even if they are currently incarcerated (to ensure peer support is in place upon release).

Whenever the court participant expresses interest in engaging with peer support, the TCMD team, PRS Supervisor, and PRS Professional prioritize the connection, as this is a critical choice point of recovery. This is done quickly and thoughtfully.

Below is the process court participants will navigate to enter the Treatment Court. Each TCMD and PRS Supervisor decides the most effective opportunity to introduce peer support into their process while avoiding the most overwhelming portions of the process whenever possible.

### ***Pre-Treatment Court Referrals:***

At times, a PRS Organization may receive a referral to peer support directly from the correctional facility or through the organization's activities inside the correctional facility. As a result, the PRS Organization may already have a relationship with the individual before they become a court participant – and this would be a favorable situation for continued access and collaboration.

***Referral:*** Treatment Court referrals are made to the clerk of courts in the county where the Treatment Court is located, which is forwarded to Maine Pretrial Services and the TCMD team. Referrals often come from an individual's lawyer (related to an existing criminal charge). While referrals can be made by anyone, including a PRS Organization, the PRS Supervisor directs potential court participants to their attorneys to make the referral – this avoids any potential conscious or unconscious pitfall or pressure on the peer support relationship by having made the referral. Referrals are best made by the individual's attorney.

1. ***PEER SUPPORT OPPORTUNITY:*** Once the referral is received, Maine Pretrial Services shares the contact information with the PRS Supervisor for outreach. The PRS Organization may already have a relationship with the individual and, in this case, their role would be to introduce them to the PRS Professional, ready the individual for entry into the Treatment Court, and begin building the relationship (sharing that the PRS staff are available as they navigate this very complex and overwhelming process).

***Pending List:*** Referred individuals are placed on a “Pending List” for review by the TCMD team, facilitated by Maine Pretrial Services. Referrals are reviewed weekly.

2. ***PEER SUPPORT OPPORTUNITY:*** When Maine Pretrial Services places pending court participants on the list, they can share their contact information with the PRS Supervisor for outreach to explain peer support and begin engagement (if not yet engaged).

***Screening:*** Maine Pretrial Services conducts a screening to review the Treatment Court requirements and rules, review documents, discuss peer support, and ensure the individual understands the court process.

3. **PEER SUPPORT OPPORTUNITY:** The “Screener” contacts the PRS staff to invite them to the screening meeting. The screening can cover very personal information, therefore, the PRS Professional will not sit in the room during the screening. PRS principles seek to support the court participant in choosing when and what to disclose to the PRS Professional. The PRS staff introduce themselves before the meeting and share their contact info. If a PRS staff cannot attend, the “Screener” can share about peer support (see *Sample Script* on page 27) and request permission to share contact information with the PRS staff for outreach.

**Determination:** The TCMD team discusses whether the candidate is eligible under Treatment Court criteria. If yes, the presiding judge schedules an admission hearing, where parties present and the judge makes the final decision on whether to admit the candidate.

4. **PEER SUPPORT OPPORTUNITY:** The determination process can include the entire TCMD team, including the PRS Supervisor, but not the PRS Professional. The PRS Supervisor’s role in this meeting depends on whether they know the candidate – if so, they share whether they’ve been engaged in peer support, but not whether the court participant would be a good fit or a bad fit.

**Intake Meeting:** The court participant meets with the TCMD case manager to review paperwork (bail paperwork, release paperwork, court requirements, program expectations, participant handbook, and other documents are reviewed and signed. This process is one of the most overwhelming and information-filled; therefore, this is navigated in a way that best supports the court participant.

1. **PEER SUPPORT OPPORTUNITY:** The case manager may invite the PRS staff to the intake meeting to share about peer support before the meeting (due to the overwhelm). The PRS Professional acknowledges the overwhelming nature of the intake process and reminds the court participant that they can partner throughout the process and support them in the community.

**Admission:** This is a hearing, during which the court decides whether to accept the individual’s case and plea agreement into the court docket. The individual should be aware of the details of their plea agreement (their exposure to conviction, jail, or prison if unsuccessful in Treatment Court). This can be stressful and may not be the best time to introduce peer support.

2. **PEER SUPPORT OPPORTUNITY:** The PRS staff may be present for the admission and introduce themselves (if it is their first time meeting). The Judge may announce the PRS Professional in the courtroom and encourage the connection. There is a post-admission meeting with Maine Pretrial Services, where the PRS staff are invited.

**Release:** The individual is no longer in jail. Some individuals are released before admission.

3. **PEER SUPPORT OPPORTUNITY:** The PRS staff attempt to arrange a meeting post-release in the community. This could begin the process of connecting the court participant with the recovery community or other activities they choose.

***Ongoing Meetings/Visits to Office:***

Court participants may arrive at an office (e.g., Maine Pretrial Services office) for Urinalysis or other compliance activities. It is important to carefully consider whether that can be a point of connection with a PRS Professional. Experience has suggested that this has not worked and not felt good to court participants, given the nature of Urinalysis (e.g., fear, shame, embarrassment, anxiety). Ideally, the PRS Professional meets court participants outside these types of appointments, on their own and at a mutually agreed upon/coordinated place.

***Referrals Outside the Treatment Court PRS:***

There may be times when the TCMD team, most often the case manager, needs to make a referral to an outside PRS Professional. This may be due to a conflict of interest, which the PRS Supervisor would handle (see *Potential Conflicts of Interest* on page 25 for examples). If there are no PRS staff associated with the TCMD team, then the team may contact a local Recovery Center or the main organizers of recovery coach training, Portland Recovery Community Center and Healthy Acadia, to request guidance on accessing affiliated Community Recovery Coaches.

***Court Participants Who Become Incarcerated:***

PRS staff can visit and connect with incarcerated court participants. This is an opportunity to support the court participant in processing what has happened and build possibilities/connections for what comes next (e.g., improves readiness when released). The PRS Professional, via the PRS Supervisor or Case Manager, is notified whenever a court participant is incarcerated.

**NOTE:** Maine Pretrial Services has been the only Treatment Court case management provider up until the time of this publication. Maine Pretrial Services and Treatment Court case management can be viewed interchangeably if other providers emerge in the future.

**Not a Good Fit?**

At any time, the court participant and/or the PRS Professional can end the peer support relationship, for whatever reason. Each has the option to request a new match. All changes in PRS matches are coordinated by the PRS Supervisor.

**Establishing a Memorandum of Understanding (MOU)**

At the date of this publication, MOUs have not been standard practice for Treatment Court PRS services. However, creating clear expectations through an MOU can help strengthen PRS services in Treatment Courts. The PRS Supervisor is responsible for establishing an MOU between the PRS Organization and the TCMD team. The MOU outlines the responsibilities of the PRS Professional, PRS Supervisor, and TCMD team, particularly related to communication. The MOU describes the nature and scope of the relationship and offers guidance on team interactions, including frequency of meetings, who will be present, and what may be discussed. The MOU highlights that PRS Professionals are not involved in discussions about court participants.

## SECTION 5: COMMUNICATION

As mentioned, the fundamental role of the TCMD teams is to support the PRS Professional in building and maintaining trust with court participants, and ***communication is a core part of that process***. TCMD teams are trained in PRS communication practices by the PRS Supervisor. Effective communication is central to high-functioning TCMD teams with PRS Professionals. The most important communication element is ensuring the PRS Professional has the logistical information to connect with the court participants.

TCMD teams are aware of their power, particularly lawyers and judges, and do not pressure PRS Professionals to share information about court participants. PRS Professionals contact their supervisor if they are unsure if they can answer a question. TCMD teams contact the PRS Supervisor when they are unsure if they can ask the PRS Professional a question.

The court participants are made aware of what information will and will not be shared between the TCMD team and PRS Professional, which is communicated at the beginning of the peer support relationship and is reinforced throughout their engagement in peer support. (see *Crisis – PRS Professional Considerations* on page 20 to learn about potential limits to confidentiality)

### 5.1 - What is shared with and from the PRS Professional:

- ***Logistics*** (primarily communicated to/from PRS Supervisor with TCMD team)
  - Participants coming into or leaving the court program
  - Who the PRS Professional is seeing, for how long and how often
  - Who the PRS Professional has not met or has struggled to connect with
  - Strategies and plans to make connections with court participants
  - Participants who have moved or changed locations or contact information
  - Participants with travel restrictions (county or state-level), protection orders, custody orders, or other legal issues (to avoid unknowingly contributing to a sanction)
- ***Physical Safety Concern:*** Everyone is made aware of any physical safety concerns. The PRS Supervisor can outline the parameters of “physical safety” as needed.
- ***Sharing Care Concern:*** Everyone can share that a court participant might benefit from outreach for support, but they refrain from sharing the details of “why” with the PRS Professional – to allow the court participant to communicate those details directly.

### 5.2 - What is NOT shared with and from the PRS Professional:

- Treatment plans
- Test results
- Sanction determinations or discussions of sanctions
- Details of conversations had with the PRS Professional or the TCMD team
- Legal information
- Private health information
- PRS Professionals do not participate in assessments, recommendations, or decisions about the court participants’ involvement with the Treatment Court
  - PRS Professionals do not share their assessment of a person’s recovery or their perception regarding their commitment to recovery, even if it’s positive (as it is an assessment and may violate the trust of the court participant)

**Being the messenger:** If the court participant asks any TCMD team member to share information with the PRS Professional or vice versa, team members decline unless unique circumstances require it. Instead, the court participant is supported to share information directly – via a shared phone call, text message, or even co-authored email. Becoming the messenger between TCMD team members can be a slippery slope. We focus on court participants sharing information directly to support skill-building and to strengthen communication with all TCMD team members.

**PRS Supervisor:** TCMD team members can communicate directly, openly, and consistently with the PRS Supervisor. Since the PRS Supervisor isn't providing direct support to court participants, there are fewer considerations to navigate around confidentiality.

### **Communication about Substance Use**

The PRS Professional does not share court participant substance use disclosures with the TCMD team. The PRS Professional focuses on supporting the court participant in sharing that information directly with the team, rather than doing it for them. This allows them to maintain trust and open disclosure even when fearful. The PRS Supervisor can provide education on this communication feature if the TCMD team has questions.

Other TCMD team members openly share with one another if a court participant has disclosed substance use or had a substance show on a Urinalysis. The PRS Supervisor is most likely to hear from the team that a court participant used substances. They may share this information with the PRS Professional when needed. However, PRS Professionals do not make assumptions or judgments and would let the court participant know they were made aware of the return to use and offer support. PRS Professionals are mindful to avoid the trap of “Why didn't they tell me!” resentments, as this can interfere with the peer support relationship. PRS Professionals seek supervision if this emerges.

Ideally, the court participant and PRS Professional communicate directly about substance use challenges. The PRS Supervisor and TCMD team members are mindful to not set up a frequent pattern of sharing non-logistical, especially sensitive, information with the PRS Professional, as this can erode trust with court participants.

**Thematic Recovery Perspectives:** The TCMD team may ask the PRS staff general recovery questions. This would not describe or name a specific individual but can be a helpful discussion around themes the TCMD team sees in the court program. Some examples:

- How do you approach the concept of “honesty” with court participants?
- What do we do when someone has a bad experience at a recovery center or meeting?
- Why would someone stash medication?
- How can we best support people after a return to use?
- What are effective approaches to harm reduction?
- What kind of messages might be harmful when discussing recovery?
- What's the best language to use around X, Y, and Z?
- How do we encourage peer support engagement? What should we avoid?

## **SECTION 6: DEFINING THE ROLE OF PRS SUPERVISOR**

The PRS Supervisor is critical to the quality and success of court-centered, peer recovery support programming<sup>2</sup>. The PRS Organization is responsible for hiring the PRS Supervisor and the PRS Supervisor is responsible for hiring the PRS Professionals. The supervisor is knowledgeable and effectively communicates about their role with supervisees and the TCMD team. They are aware of the specific TCMD team practices and norms in the Treatment Court, as variation exists.

The PRS Supervisor has two major roles; professionally represent PRS services in the Treatment Court and supervise, coordinate, and lead a team of PRS Professionals in maintaining fidelity to the peer support models and values. The supervisor is critical to establishing a culture of trust and collaboration with the TCMD team and PRS Professionals. The supervisor also supports the professional development of the PRS Professional team and provides critical guidance to all members of the TCMD team on recovery principles, ethics, and best practices.

The PRS Supervisor introduces the PRS Professionals to the TCMD team and informs them of personnel changes. Each TCMD team member has the contact information for the PRS Supervisor and knows to reach them if any concerns or questions emerge. The supervisor also informs the TCMD team about their organization, its operations, and its scope of work.

### **6.1 - Qualifications of a PRS Supervisor**

PRS Organizations may set various qualifications for a PRS Supervisor, and the TCMD team is informed of those qualifications. Generally, the following are common:

- The lived experience of substance use and/or mental health challenges
- Completed training in Intentional Peer Support and Recovery Coaching
- Experience practicing peer support (minimum of 2 years is strongly recommended)
- Coachervision© Training (this is the supervision model of CCAR Recovery Coaching)

### **6.2 - PRS Supervisor's Functions with Court Participants**

The PRS Supervisor's primary responsibility is placing court participants with the most appropriate PRS Professional. This also creates an open line of communication between the supervisor and court participant if concerns or questions emerge. The supervisor checks in with the court participant at a future date to see how things are going with peer support or to see if they are interested in beginning a peer support relationship if they have not yet.

The PRS Supervisor develops materials and a process to conduct the initial placement meetings in a way that fosters consistency and ensures each court participant receives the same information to effectively engage in peer support from the start – with special attention paid to sharing about PRS Professional boundaries, availability, and normal activities of peer support.

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<sup>2</sup> BRSS TACS – Supervision of Peer Works: <https://www.samhsa.gov/sites/default/files/brss-tacs-peer-worker-supervision.pdf>

### 6.3 - PRS Supervisor's Functions with PRS Professionals

Consistent, regular, supportive, and effective supervision is the highest priority of a PRS Supervisor. In addition to traditional IPS and Recovery Coach supervision, like Co-Reflections and Coachervision©, supportive supervision within the Peer Recovery Support team is essential to team building, maintaining fidelity to peer recovery standards, and establishing a culture of growth, connection, and learning. Supervision must be delivered consistently by a well-seasoned, well-trained, and well-supported Peer Support Leader.

#### **Hiring PRS Professionals**

TCMD teams partner with a PRS Organization to provide PRS services to ensure role fidelity and to contribute to the best outcomes for court participants by leveraging PRS Organizational expertise. TCMD teams are provided the job description\* and an outline of the hiring process. TCMD team members may join the interview.

The interview process recognizes the unique setting of Treatment Courts and acknowledges that some applicants have had a challenging history with law enforcement and courts. PRS Organizations have policies that allow for hiring candidates with past criminal charges, while ensuring the candidates do not have a bias against Treatment Courts, harm reduction, or multiple recovery pathways, among other biases. These types of biases will undermine the court participant's self-directed recovery.

If the applicant is a prior court participant, their information, records (treatment or legal), and any associated documentation is highly confidential and must not be reviewed or discussed by any member of the TCMD team or PRS Organization at any point, especially during the interview process. This is off-limits. Requiring the detailed disclosure of their recovery story, personal pathway, court history, etc. is not an expectation of interviews.

TCMD team members, especially the Judge, are given information about the vetting process and qualifications of the PRS Professionals. The Judge vouches for the safety and integrity of the PRS program; therefore, must have confidence and clarity about the process.

#### **Onboarding PRS Professionals\***

The PRS Supervisor ensures each new PRS Professional is introduced during Treatment Court and introduced in the TCMD team meeting.

The *Training for PRS Professionals* section on page 35 provides a detailed outline of key onboarding and training expectations. Importantly, this involves a discussion about how to prioritize PRS Professional wellness and role sustainability – addressing burnout, overwhelm, and boundary crossing through consistent, ongoing, and accessible support.

\*All Rise practice guidelines contain a sample job description, interview questions, and a list of onboarding elements.

**Onboarding & Initial Training for PRS Professionals:** To support effective and high-quality peer support, the PRS Supervisor provides onboarding and training to PRS Professionals to orient them to the unique and highly structured role on the TCMD team.

The Onboarding & Training may include:

1. Intro to Treatment Courts for PRS Professionals
  - a. What is a Treatment Court & its purpose
  - b. How do court participants qualify for the court program
  - c. What are the requirements & expectations for participants
  - d. What are the roles on the team (Judge, Attorney, Probation, etc.)
    - i. PRS Professional role and expectations with the Case Manager (the person they have the most contact with)
    - ii. Role, expectations, and communication with each TCMD member
  - e. What is the PRS Professional role on the team
    - i. Role of lived experience & sharing personal stories
    - ii. Boundaries & Code of Ethics
    - iii. Wellbeing & Sustainability of Role (self-care & community-care)
    - iv. Power dynamics (nervousness talking to attorneys/judges)
    - v. What meetings do they attend, which they do not – and why
    - vi. Policies and Practices
    - vii. Approach to Advocacy
    - viii. Training schedule & certification
    - ix. Mandated Reporting expectations
    - x. Approach to harm to self and others
    - xi. Documentation expectations
  - f. What is the role of the PRS Supervisor
    - i. How to reach them & when
    - ii. What to expect for challenges
    - iii. How often supervision will be
  - g. What are the recovery resources in the area
2. Integration Process
  - a. First court session - Observes the court
  - b. Second court session – The Judge (or TCMD team) introduces the PRS Professional and explains why they are present in court and their role
    - i. The PRS Professional introduces themselves (doesn't need to overshare details, but court participants get a sense of the role, the PRS Professional's experience, and how to connect with them)
  - c. Meet with the TCMD team and introduce PRS Professional – begin building relationships and awareness of roles, expectations, and approaches
3. Complete an "Intro to Peer Support" training with the TCMD team (if not completed to date) with PRS Professional attending and contributing
  - a. This is an opportunity to build relationships, create a shared understanding of roles, and an opportunity to ask questions

## Ongoing PRS Supervisor Responsibilities with PRS Professionals

- The PRS Supervisor is encouraged to lead weekly or biweekly PRS Team meetings to maintain fidelity to peer recovery standards and programmatic norms.
  - Weekly PRS Team supervisory meetings provide a space for collaboration, team building, shared experiential learning, oversight, guidance, and mutual support.
- The PRS Supervisor matches court participants with appropriate PRS team professionals based on established peer support & recovery standards, and specific program guidance.
  - The PRS Supervisor checks in with the PRS Professional's court participants after 30 days of engagement to ensure needs are met, questions are answered, and concerns are addressed. The PRS Supervisor may check in every 90 days after that. The PRS Supervisor is mindful that this does not disrupt the relationship.
  - PRS Professionals put the PRS Supervisor's contact information on their voicemail to ensure court participants can reach out with questions or concerns.
- The PRS Supervisor records and communicates court participant sanctions to the assigned PRS Professional to allow for outreach and support.
- The PRS Supervisor provides regular one-on-one meetings with each PRS Professional to learn about their personal motivation, strengths, and areas of growth. This also assists in making the best matches with court participants.
  - The PRS Supervisor allows the PRS Professional to first share their ideas around solutions to challenges – rather than jumping in with solutions immediately.
  - The PRS Supervisor supports PRS Professionals in navigating any nervousness related to working in the Treatment Court, particularly if they have had past interactions with it.
  - The PRS Supervisor connects PRS Professionals to the local recovery community (and other recovery coaches and peer supporters).
- The PRS Supervisor is the conduit between PRS Professionals and the TCMD team. All concerns on behalf of court participants are expressed through the PRS Supervisor to avoid PRS Professional role drift.
  - The PRS Supervisor fosters relationship building between PRS Professionals and the TCMD team – in a way that doesn't rely on court participants' information.
  - The PRS Supervisor is responsible for explaining to the PRS Professional why their direct involvement with the TCMD team is limited (e.g., how it supports trust building, reduces the possibility of conflicts of interest, etc.).

## 6.4 - PRS Supervisor's Functions with TCMD Team

The PRS Supervisor is the primary contact for all TCMD Team members and plays a central role in supporting the recovery perspective in the Treatment Court. The PRS Supervisor provides education on stigma, recovery language, and other aspects of advancing a recovery-oriented Treatment Court. Information is provided at the most appropriate time through a collaborative, respectful, and thoughtful approach.

- **The PRS Supervisor provides their contact information to all TCMD team members – to allow team members to contact them with any questions or concerns.**
- The PRS Supervisor provides education on the PRS Professional role to all team members, including sharing the evidence for the efficacy of peer support as needed.
- The PRS Supervisor participates in the TCMD team meetings.
  - To support decision-making through contributions related to a personal recovery lens.
  - To share court participants' concerns and questions when appropriate.
  - Does not share issues discussed during TCMD team meetings with PRS Professionals or court participants. The TCMD team meets to discuss each court participant's progress and the PRS Supervisor must keep that information confidential.
  - Does not push for sanctions for court participants. May share a recovery perspective that positively contributes to the discussion. The PRS Supervisor does not say "Yes, sanction them" or "No, do not sanction them."
- The PRS Supervisor brings a collaborative spirit and fosters a positive working relationship with the TCMD team and PRS Professionals.
- The PRS Supervisor is required to sign a Confidentiality Agreement and have PRS Professionals sign a Confidentiality Agreement.
- The PRS Supervisor receives information about court participants and pending participants in the TCMD team meetings. Special attention is paid to storing this information in locked spaces and cabinets. The PRS Supervisor shreds all confidential files immediately when finished. These files are never left in the open.
- The PRS Supervisor completes the best practice training for Treatment Courts, reads national standards, and participates in continuing education.
- The PRS Supervisor develops "tip sheets", "FAQs", sample scripts, and other resources/documents to support the TCMD team's understanding of the PRS roles.

## **SECTION 7: TRAINING & CERTIFICATION**

The training and certification of PRS Professionals is essential to any well-functioning team. The trainings offer practice guidance on the most critical elements of peer support work: ethics, boundaries, crisis, suicide, self-harm, substance use, harm reduction, and trauma, among other topics. PRS Professionals demonstrate comprehension of these areas of peer support work to effectively navigate the many challenges they encounter, especially in highly structured court programs. The PRS Supervisor provides training overviews to TCMD teams, as needed.

### **7.1 - Intentional Peer Support**

In collaboration with Shery Mead, the Office of Consumer Affairs (a division of the Department of Health and Human Services during that time in 2003) and consumers from throughout Maine developed a trauma-informed curriculum, "Intentional Peer Support: An Alternative Approach." This curriculum is used for the Certified Intentional Peer Support Specialist (CIPSS) Training Program and other training offered through the Office of Behavioral Health (OBH) within Maine's Department of Health & Human Services (DHHS).

Intentional Peer Support (IPS) is a relationship-focused, strengths-based, trauma-responsive approach to building mutually supportive relationships. With administrative support from the Muskie School, the OBH oversees the training and certification in IPS for individuals self-identifying as having lived experience with any mental health challenges, including substance use, and who are employed to support others. The OBH offers Peer Support 101, a 3-hour class open to those interested in learning about IPS; an eight-day Core training required to become a Certified Intentional Peer Support Specialist; monthly co-reflections, a form of peer support co-supervision, and various continuing educations. Expectations to maintain yearly certification after the eight-day training include four co-reflections and two continuing educations a year.

The IPS model focuses on developing mutually supportive relationships between people who have had challenges related to their mental health, including substance use. IPS does not focus on "just" mental health or "just" substance use, rather it focuses on what it takes to create a healthy relationship where both people's needs are considered, valued, and heard. It focuses on communication, experiences, and imagining the future - not diagnosis, symptoms, or disorders.

Below are the three principles and four tasks that guide IPS practice:

#### **The Three Principles of Intentional Peer Support**

- From Helping to Learning Together
- Individual to Relationship
- Fear to Hope and Possibility

#### **The Four Tasks of Intentional Peer Support**

- Building Connection
- Helping each other understand how we've come to know what we know (worldview)
- Re-defining help as a co-learning and growing process (mutuality)
- Moving toward what we want, rather than away from what we don't want

**The IPS eight-day core training covers the following topics:**

- History of the Consumer/Survivor/Ex-patient Movement
- The Three Principles & Four Tasks
- Problem Solving vs. Validation
- Listening Differently, Listening for the Untold Story
- Privilege, Oppression & Marginalization
- Power dynamics & the power of language
- Negotiating Reality (e.g., supporting people who hear voices and/or see visions)
- Impact of trauma on relationships
- Mutual responsibility
- Conflict & Boundaries
- Redefining Risk, Safety, & Crisis
- Self-injury & Suicide
- Substance Use
- Social change

Certified Intentional Peer Support Specialists provide peer support on the Maine Peer Support Line, in Emergency Departments, in Behavioral Health Homes & Assertive Community Treatment teams, at Riverview Psychiatric Center, Dorothea Dix Psychiatric Center, and at Mental Health Peer Support Centers, among other settings. This is a growing field with more roles and settings emerging every year.

**Code of Ethics**

<https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine%20CIPSS%20Code%20of%20Ethics.pdf>

**For more information on the CIPSS Training & Certification:**

<https://www.maine.gov/dhhs/obh/training-certification/intentional-peer-support>

<https://www.intentionalpeersupport.org>

**Nothing about Us without Us:** This is a mantra within peer support work. It shows up in all peer support models and conveys the need to ensure that the people most impacted, those “served” by programs, are at the center of any conversation about them. This mantra is why PRS Professionals are not present in TCMD team meetings where court participants are being discussed. This also informs why PRS Professionals do not openly share information about court participants with TCMD teams or offer detailed documentation. This approach ensures that court participants are always speaking for themselves, rather than the PRS Professionals speaking for them – whether that’s to the TCMD team, recovery resources, housing resources, educational resources, or the like. PRS Professionals support people in lifting up their own voices.

## 7.2 - Recovery Coaching

The CCAR Recovery Coach model has offered people in recovery from substance use, and their allies, an approach to reducing barriers to recovery for those struggling with substance use. The training focuses on balancing mindful self-disclosure with resource linkages, clearly articulating boundaries, and supporting all pathways to recovery. A foundational piece of the Recovery Coach model is walking alongside people rather than doing “for” them. This means that Recovery Coaches do not take responsibility “for” people’s recovery.

**This initial Recovery Coach training is typically five days and covers the following areas:**

- Fundamentals of Coaching
- Sharing your story & self-disclosure
- Motivational interviewing
- Stages of Change & Stages of Recovery
- Supporting All Pathways to Recovery
- Power and privilege
- Stigma and labels
- Recovery Capital
- Resources & referrals
- Boundaries
- Self-care

Recovery Coaches provide support in Emergency Departments, at Recovery Community Centers, as members of Opioid Health Home multidisciplinary teams, and as part of some Medication Assisted Treatment Programs, among others. This is a growing field with more roles and settings emerging every year.

**CCAR Recovery Coach Academy (RCA)** - The recognized standard recovery coach training in Maine and many other states. A person who completes the training and additional requirements is referred to as a trained Recovery Coach. There is a “registered” and “certified” Recovery Coach designation in Maine (learn more at the MRCCB link below).

### Code of Ethics

<https://peerrecoverycoachme.org/wp-content/uploads/MRCCB-Code-of-Ethical-Conduct.pdf>

**For more information on the Recovery Coach Training & Registration/Certification:**

Connecticut Community for Addiction Recovery (CCAR)

<https://addictionrecoverytraining.org/>

Maine Alliance for Recovery Coaching

<https://healthyacadia.org/spr-marc>

Maine Recovery Coach Certification Board (MRCCB)

<https://peerrecoverycoachme.org/>