

CRSP Application Guide: 110-Hour Supervised Practical Experience

This guide is designed to assist in navigating the often-confusing 110-Hour Supervised Practical Experience requirement, a critical subset of the overall 500-hour work experience needed for the Certified Recovery Support Practitioner (CRSP) credential. The certifying body mandates completion of this experience within licensed or state-funded programs providing Mental Health Services. The emphasis is on exposing employees to specific topics, totaling 110 hours, within the Core Training curriculum. It is important to note that this step involves exposure only, and the certification board entrusts supervisors with the discretion to confirm this exposure without the need for verification or documentation. This guide aims to bring clarity to both supervisors and employees engaged in this process.

Overview

- A **subset** of the 500-hour work experience requirement, **not** in addition to the 500-hour work experience requirement
- Only **exposure** is needed, not direct performance or supervision of tasks or topic areas. Observation, discussion, training, and supervision all will meet this criteria
- The direct supervisor makes this determination based on their professional judgement

Topics and Exposure

There are 11 topics, with 10 hours of exposure per topic required (totaling 110 hours). These topics closely align with the Core Training curriculum. It is the supervisor's responsibility to confirm that the employee has been adequately exposed to these topics, not necessarily performed them. It is crucial to emphasize that the supervisor is not affirming direct supervision of the employee for 10 hours on each topic. Instead, the supervisor is attesting to the exposure of the employee to the topic for a total of 10 hours during the period when they have been a direct report (under the supervision of) the completing supervisor.

Topics and Descriptions

1. **Assessment:** Assessment in peer support is nuanced since peers typically avoid formal assessments, respecting the non-hierarchical nature of the role. However, it's reasonable to assume that peers engage in general, day-to-day assessments, such as evaluating strengths and resources. Exposure to this topic may involve hearing colleagues discuss assessments during staff meetings, reading assessments in individual charts, or supporting participants undergoing assessments by other providers, like accompanying them to intake appointments or debriefing after a crisis screening.
2. **Helping Skills:** Helping Skills encompass all communication skills used in peer work. In practical terms, anyone in a peer position is constantly utilizing helping skills in their interactions with people. These skills include active listening, expressing empathy, providing support, problem-solving, and sharing lived experiences.
3. **Crisis Intervention and Trauma:** The topic of Crisis Intervention and Trauma can manifest in various ways. Peers working in certain settings may directly encounter individuals in crisis, fulfilling this requirement. Additionally, given the assumption that all mental health settings in the state of NJ operate from a trauma-informed lens, exposure to this topic is expected. Peers can meet this requirement through various exposure activities, such as discussing trauma or crisis experiences with participants, reading relevant chart documentation, participating in staffing meetings where these topics are discussed, or engaging in training or education on these subjects.
4. **Basic Principles of Care Management:** Care management, often used interchangeably with case management, involves four key functions: finding resources, teaching skills, problem-solving, and advocating. Any observation or direct support related to these functions satisfies the exposure criteria for this category.
5. **Health and Human Services - NJ Systems:** Exposure to Health and Human Services - NJ Systems pertains to navigating the NJ behavioral health adult system of care. This could involve direct contact with different programs, learning about various services, or assisting participants in navigating additional services they are engaged with.
6. **Basics of Service Planning:** Exposure to Basics of Service Planning includes any interaction with the service planning process. Most programs providing mental health services follow a service planning process. Peers may get exposure to this topic by directly engaging in service plans with persons served, sitting in on planning meetings, being part of the service delivery team outlined in the plan, or hearing about service

planning during staff meetings. Less formal interactions may also count, such as providing goal-setting assistance or supporting individuals in pursuing new endeavors.

7. **Ethics and Legal Issues:** Ethical considerations are crucial in all professional roles, including peer support. The National Practice Guidelines for Peer Supporters and agency-specific ethical policies guide workers in day-to-day service delivery. Exposure to this topic may involve dealing with ethical decision-making, participating in discussions on ethical issues during staff meetings, receiving supervision on this topic, or engaging in continuing education on ethics.
8. **Advocacy:** Advocacy is a central role of the peer supporter, involving both "Little a" advocacy in daily lives and "Big A" advocacy in the broader peer movement. This encompasses activities such as speaking on behalf of persons served, attending appointments with them, writing letters, advocating within the team or program, teaching participants how to advocate for themselves, participating in advocacy events, getting involved in government affairs, being a champion for recovery and peer support at the agency, challenging bias and stigma, and sharing lived experiences to normalize mental health and wellness.
9. **How to Utilize Supervision and Professional Development:** This category refers to having access to and participating in supervision, participating in opportunities to further professional growth (trainings, networking, events, etc.), and developing professional goals with a supervisor.
10. **Cultural Competency:** Cultural Competency pertains to actions and behaviors aligned with DEIA efforts. This may include specific interactions with participants that exemplify an awareness and respect for diversity, equity, and inclusion, participating in related committees or events, taking relevant trainings, and discussing these topics with colleagues and/or participants.
11. **SSA and Entitlements:** Exposure to SSA and Entitlements involves any interaction related to Social Security benefits or public entitlements. This could include helping someone on disability or SSI navigate those benefits, providing assistance with services offered by the board of social services (such as Medicaid, food stamps, housing subsidies, prescription assistance, energy assistance, utility assistance programs, etc.), or simply discussing these programs with a participant. Remember, these interactions are based on exposure to the topics, so even talking about these programs with a participant counts as exposure.

Final Notes

- Almost all peer jobs can fulfill all 11 topics
- The peer can use multiple jobs to meet this criteria if necessary
- In rare cases where exposure to a particular topic is limited, briefly volunteering in another setting can fulfill this requirement
- Please contact us with any questions at Consumerconnections@mhanj.org