

CONSUMER OPERATED SERVICES (COS) FIDELITY REPORT

Date: May 1, 2017

To: Christopher Gonzales, CEO

From: Jeni Serrano, BS
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AHCCCS Fidelity Reviewers

Method

On March 22, 2017, Jeni Serrano and Georgia Harris completed a review of the Hope Lives-Vive La Esperanza, a Consumer Operated Service Program (COSP). This review is intended to provide specific feedback in the development of your agency's services, in an effort to improve the overall quality of behavioral health services in Maricopa County.

Hope Lives –Vive La Esperanza provides outreach and behavioral health support services to people in diverse communities who may be currently receiving or are eligible for Title 19 benefits, and receive Serious Mental Illness (SMI), General Mental Health (GMH) or Substance Abuse (SA) services. Emphasis is on Forensic Peer Support services for individual/group skill building, employment, community re-entry, psycho-education, psycho-social rehabilitation and education/prevention/awareness services for fathers, mothers, veterans, youth in transition and those individuals who have unmet needs. At time of review, Hope Lives-Vive La Esperanza was located at 1016 E. Buckeye Road in Phoenix, but the agency reported that they are planning to move the Phoenix center to a new location within the next few months.

The individuals served through this agency are referred to as members, so that term and “people with lived experience” will be used to reference self-identified people with lived experience of recovery.

During the site visit, reviewers participated in the following activities:

- Tour of the center's facility, including thorough descriptions of each group/class/activity that is offered through this program.
- Interview with the Program Director;
- Group interview with 16 members;
- Group interview with two Supervisory Staff;
- Group interview with five Non-Supervisory Staff;
- Review of the center's key documentation, including: organizational documents, Articles of Incorporation, polices, annual reports, training materials, job descriptions, etc.

The review was conducted using the Substance Abuse and Mental Health Services Administration (SAMHSA) Fidelity Assessment/Common Ingredients Tool (FACIT) of the *Consumer Operated Service (COS) Evidence Based Practice Tool Kit*. Using specific observational criteria, this scale assesses the degree to which an agency's operation aligns with a set of ideal standards established for high-fidelity COS. The 46-item scale considers the agency's operations in 6 domains: Structure, Environment, Belief Systems, Peer Support, Education and Advocacy. Each ingredient is rated on a point scale, ranging from 1 (not implemented) to 5 (fully implemented with little room for improvement).

The FACIT was completed following the visit. A copy of the completed scale with comments is attached as part of this report.

Summary & Key Recommendations

The agency demonstrated strengths in the following program areas:

- The Hope Voices United Committee (HVU) meets weekly to gather member input and displays a significant commitment to implementing changes recommended by members.
- Members report that since participating in the Hope Lives-Vive La Esperanza program, they have made positive changes in their lives, increased their social engagement within and outside of Hope Lives-Vive La Esperanza.
- Hope Lives-Vive La Esperanza continues to offer a variety of pre-employment opportunities including: paid work adjustment training, peer support training with available certificates in Forensic Peer Specialist and computer training.
- Staff receive training in crisis prevention. Avenues exist to provide members with formal, structured groups and programs in crisis prevention. Members reported that involvement in the program helped to prevent or cope with crisis situations stemming from isolation, loss, and traumatic events.

The following are some areas that will benefit from focused quality improvement:

- Hope Lives-Vive La Esperanza, the Regional Behavioral Health Authority (RBHA) and other COSPs should work to strengthen linkages. Opportunities may exist where collaborative advocacy efforts can improve services to all individuals with a lived experience, not only those who receive services from specific COSPs. Hope Lives can enhance their service approach to align with the fidelity model by sharing program strengths with other COSPs, and also seek feedback from other COSPs regarding FACIT items where they have the opportunity to improve.
- Try to fill Board of Directors vacancies with members who have direct lived experience in recovery.
- Seek to improve access by increasing hours of operation to those identified as most beneficial by the members served. Obtain input from members regarding hours of operation, including potential evening, holiday, or weekend hours.
- It is recommended that Hope Lives-Vive La Esperanza explore opportunities to increase space and transportation options in order to offer more services and community outings.

FIDELITY ASSESSMENT/ COMMON INGREDIENTS TOOL (FACIT)

Ingredient #	Ingredient	Rating	Rating Rationale	Recommendations
Domain 1 Structure				
1.1 Consumer Operated				
1.1.1	Board Participation	1-5 4	The Program Director reported there are eight individuals on the Board of Directors; five self-identify as persons with lived experience. The Program Director reported that there are currently two vacancies. The agency is actively seeking to fill these vacancies with individuals who self-identify as a person with lived experience, preferably members who attends the Hope Lives-Vive La Esperanza program.	<ul style="list-style-type: none"> • Agency should fill current Board of Director vacancies with persons with lived experience. • The Board of Directors should be identified and acknowledged on the agency website, as well as in the center (e.g., displayed on the wall).
1.1.2	Consumer Staff	1-5 5	Per Program Director interview, the program has 26 staff and all but 4 staff self identify as a person with lived experience. The Chief Financial Officer, Billing Director, Billing Specialist and Receptionist do not self identify.	
1.1.3	Hiring Decisions	1-4 4	Per the Program Director, people with lived experience are responsible for all hiring decisions. Staff report that the ultimate decision for hiring and firing is made by the CEO.	
1.1.4	Budget Control	1-4 4	The Program Director, staff and members interviewed all confirmed that the Hope Lives-Vive La Esperanza’s budget is monitored by the Chief Financial Officer (CFO) who does not self-identify as a person with lived experience, as well as the Chief Executive Officer (CEO) who does self-identify as a person with lived experience. The staff and members report that the process is more transparent than in the past years, stating that	

			this process includes obtaining input from agency program staff, as well as the members through the HVU committee. The CEO is responsible for signing the company checks, and most planned expenses are approved by the Board of Directors.	
1.1.5	Volunteer Opportunities	1-5 5	Hope Lives-Vive La Esperanza continues to offer a variety of volunteer opportunities within their organization as well as out in the community (i.e. in the kitchen, co facilitating groups, serving on the Board of Directors, and through Stardust Volunteer Program). Events are all posted on the activity calendar.	
1.2 Participant Responsiveness				
1.2.1	Planning Input	1-5 5	Hope Lives-Vive La Esperanza continues to offer multiple opportunities for members to provide input, such as going directly to the staff, attending the weekly HVU counsel meetings, filling out the quarterly surveys, or utilizing the suggestion box in the center. Members reported during interviews that they feel their suggestions and input are heard by the agency's administration.	
1.2.2	Member Dissatisfaction/ Grievance Response	1-5 5	Staff and members report that they are familiar with the formal, written grievance policy and the steps in the grievance process. All members receive the grievance policy during the intake process, and it is included in the new member orientation packet.	<ul style="list-style-type: none"> It is recommended that the program post their grievance policy on the agency website.
1.3 Linkage to Other Supports				
1.3.1	Linkage with Traditional Mental Health Services	1-5 4	Staff report that they reach out to clinical case managers when there is a need to report specific member concerns or when progress occurs. Staff reported that they continue to have challenges contacting case managers, obtaining documents in a timely manner, or being invited to offer input with treatment planning for individuals who are active in the program (except for a few teams with established relationships, such as the CBI	<ul style="list-style-type: none"> Hope Lives-Vive La Esperanza needs to continue efforts to partnership with clinical staff to better serve their mutual members. Program staff should continue to offer education to case managers and request to provide input on treatment planning, as well as to attend member staffing's, in order to ensure services are unified and uninterrupted.

			Forensic team). The Program Director reported that the staff strives to send monthly progress reports for all members to clinical staff; however, they are not currently meeting this goal.	<ul style="list-style-type: none"> The Hope Lives-Vive La Esperanza team should work toward meeting their internal reporting deadlines for delivering monthly progress notes to clinical providers.
1.3.2	Linkage with Other COSPs	1-5 4	Staff and members report that this year Hope Lives-Vive La Esperanza participated in the kickball tournament and other community activities such as the NAMI walk, and other advocacy events. Staff reported that due to their limited center space, they occasionally utilize other COSP's space to hold larger activities. The staff did not report any regularly scheduled collaboration/planning meetings between COSPs.	<ul style="list-style-type: none"> It is recommended that agency leadership enhance outreach efforts to encourage more collaboration between COSPs.
1.3.3	Linkage with Other Service Agencies	1-5 5	Hope Lives-Vive La Esperanza utilizes partnerships with community-based organizations, health care providers, social/human service providers, faith-based organizations and a variety of neighboring institutions. The Program Director reports high intense linkage with other service agencies such as: the jail system, Valley Metro, mental health courts, a health center near the agency, an agency to facilitate the Hope Lab (i.e., computer repair classes), and food banks. Staff report they continue intense involvement with other organizations to identify and resolve issues associated with transitioning individuals from the Arizona Department of Corrections into the community.	
Domain 2 Environment				
2.1 Accessibility				
2.1.1	Local Proximity	1-4 3	Hope Lives-Vive La Esperanza is located within a population cluster; however, minor improvements are possible such as advocating for increased and improved bus access. Also, there is no cross walk in the immediate area, and no sidewalk on the center building side. As a result, the agency staff	<ul style="list-style-type: none"> It is recommended that the program staff continue to transport members via vehicle across a multiple lane street for lunch and program activities at the partner community health center until the move to the agency's new location.

			<p>transports members across a multiple lane street, so they can eat lunch and participate in program activities at a partner community health center. Leadership reported that the program will be moving within the upcoming year and that the local proximity and access to public transportation were taken into account for the new location</p>	
2.1.2	Access	1-5 4	<p>Hope Lives-Vive La Esperanza is conveniently located in Phoenix and close to the Valley Metro bus routes. However, the program does not usually arrange for or provide members with transportation to the program. Most members attend the program via cabs which are arranged by the clinical teams.</p>	<ul style="list-style-type: none"> • It is recommended that Hope Lives-Vive La Esperanza staff explore opportunities to directly assist members with transportation.
2.1.3	Hours	1-5 3	<p>Hope Lives-Vive La Esperanza is open six days a week, Monday through Friday from 8:00 am to 5:00 pm and Saturdays from 9:00 am to 1:00 pm. Hope Lives-Vive La Esperanza is not open evenings; however, staff report they are available by appointment on evenings and weekends. Members expressed they can call staff after hours, but they will be redirected to a warm or crisis line.</p>	<ul style="list-style-type: none"> • It is recommended that the leadership establish operating hours that accommodate the expressed needs of the members, (i.e. evenings/weekends and holiday hours). Expanding program hours will provide flexibility for those members whose access to the program is limited by other daily activities (i.e. employment).
2.1.4	Cost	1-5 5	<p>All services at Hope Lives-Vive La Esperanza are free of charge to members. There is no cost for meals or activities.</p>	
2.1.5	Accessibility	1-4 3	<p>Hope Lives-Vive La Esperanza's facility continues to offer a space for members to gather together to attend groups, computer classes/training, and an area to work on their art projects. The program has additional space upstairs on the second floor where they offer Peer Support Training (PST) in the large conference room and have additional office space for administrative staff. The Program Director reported during interview that the program has outgrown this space and that space is crowded at times and that the program is</p>	<ul style="list-style-type: none"> • It is recommended that the program evaluate accessibility regarding narrow doorways and the distance of the elevator to program front doors. • Provide TTD equipment for members who may be deaf or hard of hearing. • It is essential that the program provide access to a wheelchair-accessible vehicle for transportation to activities and events.

			scheduled to move within the next few months to a larger space that will be more accessible for their members. There is no provided TTD for members who may be deaf or hard of hearing.	
2.2 Safety				
2.2.1	Lack of Coerciveness	1-5 4	Program participation is based on individual preferences. Each member is assigned a primary staff to work with. The staff build rapport, review goals identified on their Individual Service Plans (ISPs), and encourage participation in groups and activities. Members make their own schedules and participation is encouraged for recovery but not mandatory. Some members with legal issues are mandated to attend the program, but the requirement to participate is enforced through the legal system, with no evidence Hope Lives-Vive La Esperanza staff impose the requirement for those members.	
2.2.2	Program Rules	1-5 4	The program continues to develop “community agreements”; which are rules to protect the physical safety of members and are developed by and for the members. Members interviewed reported that they are aware of the community agreements and feel they have had a voice in developing these agreements. Reviewers did not observe these rules displayed anywhere in the center; however, staff reported that they were recently removed from the wall for a routine update. The Program Director reported that the community agreements are in the new member intake packet and are reviewed and signed during intake.	<ul style="list-style-type: none"> It is recommended that the community agreements be displayed in the center for all members and staff to refer to as needed.
2.3 Informal Setting				
2.3.1	Physical Environment	1-4 2	The Program Director reported during interview that the program continues to have limited group rooms and is crowded at times; however, she reported that Hope Lives-Vive La Esperanza is	<ul style="list-style-type: none"> The Program Director reported the program is scheduled to move locations to increase classes, group rooms and one-on-one meeting rooms.

			scheduled to move to a new building within the next few months. She reported that the new building offers more space which will allow for more center groups and classes. Although space is limited and crowded at times, members report that they continue to feel a sense of safety, belonging and support.	
2.3.2	Social Environment	1-5 5	The reviewers observed no obvious distinctions between staff and members. Interactions appeared comfortable and genuine. Members reported that all staff and members share their lived experience as appropriate and that staff lead by example to provide hope and inspiration.	
2.3.3	Sense of Community	1-4 4	Hope Lives-Vive La Esperanza offers several opportunities throughout the day for members to engage with each other and to create a sense of community. Members reported they have created friendships that they view as their primary source of support.	
2.4 Reasonable Accommodation				
2.4.1	Timeframes	1-4 4	Participation is based on individual need; there are no timeframes by which individuals must participate, or by which they must terminate or graduate services, even for members with external requirements through probation or parole. There was no evidence that members are closed unless the member requests closure, or the clinical team requests the member to be closed.	
Domain 3 Belief Systems				
3.1 Peer Principle				
3.1	Peer Principle	1-4 4	Staff and members reported that staff self-discloses their lived experience when pertinent to the member's situation. Staff reported that self-disclosure is important for building rapport and important in recovery. Staff report that members learn how to share their story with others through	

			Peer Support Training and through marketing the program in the community, often sharing their lived experience and how the Hope Lives program has helped them learn the tools to assist with their recovery.	
3.2 Helper Principle				
3.2	Helper Principle	1-4 4	Staff and members shared examples of mutual support and learning experiences. Staff cited stories of when they helped or were helped, and where helping others also helped them on their own recovery journey. Members gave examples of helping others; offering comfort; and working with others to identify strengths, interests, and external supports. These interactions can occur during groups or outside structured activities.	
3.3 Empowerment				
3.3.1	Personal Empowerment	1-5 5	All members interviewed agreed that being involved with the consumer-operated service program has helped them make positive changes in their lives. Staff and members shared personal stories with the reviewers during group interviews, expressing how much participating in the Hope Lives-Vive La Esperanza program and their peers have provided them with tools and coping skills to reach their goals and recovery.	
3.3.2	Personal Accountability	1-5 5	Staff and membership interviewed all spoke of accountability in creating a safe environment. Members reported they hold each other accountable, were able to cite the community agreements, demonstrated use of recovery language, and expressed mutual respect. Members also reported they keep each other accounted for, which includes contacting other members whom they do not see at the center for a few days.	
3.3.3	Group Empowerment	1-4 4	There are numerous opportunities for group empowerment. Members reported that they	

			contribute to the center and volunteer to attend community events, meetings and clinical presentations to share their stories.	
3.4 Choice				
3.4	Choice	1-5 5	The program offers several groups and activities within the center, as well as community outings. A monthly calendar is displayed in the center and printed copies are available in the center. Members reported they provide input on the groups and activities and are able to participate at their own pace and their own choice.	
3.5 Recovery				
3.5	Recovery	1-4 4	Staff and members stated that recovery is defined differently for each individual. Hope Lives honors individualized recovery as outlined in their mission statement: <i>"Hope Lives – Vive La Esperanza strives to increase access to services by developing community partnerships and mobilizing resources to address barriers that affect the health of culturally and ethnically diverse communities in Maricopa County, Arizona."</i>	
3.6 Spiritual Growth				
3.6	Spiritual Growth	1-4 3	Staff and members report that everyone has their own spiritual beliefs and are aware that spirituality is a significant part of recovery. Although the agency is not allowed to promote any specific work in a religious domain, and cannot facilitate groups on specific faiths (e.g., Christianity or Catholicism), staff report that they do respect members' spiritual beliefs and practices, noting that staff will offer a room or platform for members to go in and talk upon request.	<ul style="list-style-type: none"> • It is recommended that the program leadership consider ways to assure members are able to talk about spiritual growth, be accepted, and not considered to have religious delusions. • The agency should collaborate with contracted entities and the RBHA to clarify limits on agency facilitation of classes or activities that foster member spiritual growth. Seek consultation from others, including other COSPs in the area, on how those agencies facilitate expressions of spirituality, explorations of meaning and purpose, and afford members and agency

				staff opportunities to share their beliefs.
Domain 4 Peer Support				
4.1 Peer Support				
4.1.1	Formal Peer Support	1-5 5	The program offers a wide variety of peer support groups throughout the day. The program offers a peer support specialist training program (PST), and new members are assigned a trained peer support staff member who offers individual support.	
4.1.2	Informal Peer Support	1-4 4	Staff and members report that they receive and provide informal peer support throughout the day. Members reported that majority of them have developed friendships and offer each other support and socialize in the community outside of the program.	
4.2 Telling Our Stories				
4.2	Telling Our Stories	1-5 4	Staff and members mutually agree that one of the most valuable lessons they learned in peer support training and through attending a peer organization is the importance of sharing their life experiences with others. They reported that sharing their personal stories is valuable to one's own recovery as well as to the larger community. Members and staff reported that they are provided the opportunity to share their story in peer support training, but there are limited opportunities to share their stories in the broader community.	<ul style="list-style-type: none"> The program should increase opportunities for members to share their stories with the broader community (e.g., posting stories of recovery on the program's website, in agency materials, or speaking at clinical meetings). Engage members in creative opportunities such as a member-run newsletter, a blog section on the agency website, member contributions to agency social media pages, etc.
4.2.1	Artistic Expression	1-5 4	Members interviewed reported that even with the program's limited space and materials, they feel that the level of skills taught through the jewelry making classes and the new drama group provide opportunities to explore personal meaning and express and expand their talents. Other than the jewelry making class and drama	<ul style="list-style-type: none"> Display of member and staff art on the agency website, social networking sites, or in the community may stimulate interest in artistic expression. If members and staff consent, artwork can be linked with personal shared stories of the artists, potentially reducing stigmatization in the

			group, many of the activities at the center appear to be craft based, with access to limited mediums. It was not clear if agency staff facilitate opportunities for members to display their art in a variety of settings, or engage in a variety of forms of artistic expression.	<p>broader community.</p> <ul style="list-style-type: none"> It is recommended that the program enhance resources that will allow for more opportunities for artistic expression using a variety of media and materials.
4.3 Consciousness Raising				
4.3	Consciousness Raising	1-4 4	Members reported they feel they are provided with many opportunities through Hope Lives-Vive La Esperanza to participate in community events that teach them about the Consumer Movement. Staff reported that information is placed in the lobby of the center, hung on center bulletin board, and is discussed in member meetings. Members reported that most of them feel well informed and feel they contribute to the larger community.	
4.4 Crisis Prevention				
4.4.1	Formal Crisis Prevention	1-4 4	Staff report that they do receive formal crisis training through attending the Peer Support Training (PST); however, crises are usually deescalated through peer support. Staff will request further support from other staff, a supervisor, or even an individual's clinical team if needs are outside their scope. The program continues to offer groups (e.g., peer support training), and activities that include talking through challenging issues, and developing coping skills and healthy boundaries, with a focus on proactive aversion rather than reaction to crisis.	
4.4.2	Informal Crisis Prevention	1-4 4	Staff and members reported they feel that due to the rapport they have with one another, they are able to talk about a problem or situation with a staff or a peer before it becomes a crisis. Staff and members provided examples of times that they were able to help others in the program or received help.	

4.5 Peer Mentoring and Teaching				
4.5	Peer Mentoring and Teaching	1-4 4	Staff and members reported that they each have a peer mentor in the program, provided examples of how they have received inspiration and guidance through their teachings, and shared experiences.	
Domain 5 Education				
5.1 Self Management/ Problem Solving Strategies				
5.1.1	Formally Structured Problem-Solving Activities	1-5 5	The program offers a variety of classes and activities to help members develop formal problem solving and self-management skills including; E-Navigate or Hope Lab, Recovery Talks, Thinking for Change, Boundaries Class and Forensic Support/Volunteer Supports , etc. Staff reported that the average group size ranges depending on the day and the group; however, it is estimated that approximately 90% of members participate in formally structured problem solving activities.	
5.1.2	Receiving Informal Problem-Solving Support	1-5 5	Hope Lives-Vive La Esperanza offers many community outings and recovery workshops such as; peer support training, drama workshop, and jewelry workshop, etc. that provide opportunities for staff and members to receive informal problem-solving support as needed.	
5.1.3	Providing Informal Problem Solving Support	1-5 5	Staff and members report that most members offer each other support, helping each other solve problems, encouraging each other to speak in groups or in the community, supporting each other during activities and events, while using skills developed through participation of the program.	
5.2 Education/Skills Training and Practice				
5.2.1	Formal Practice Skills	1-5 5	The program offers many opportunities such as groups, classes and volunteer activities including,	

			stardust volunteer program, budgeting outings, travel training and fitness activities where formal skills practice occurs. Based on member and staff interviews, it appears most members participate in one or more activities with formal skills training elements.	
5.2.2	Job Readiness Activities	1-5 5	The program offers several job readiness opportunities, within the center as well as in the community, including: pre GED classes, resume writing, computer skills, public speaking, computer repair course with A+ certificate, peer support training and food handler card. Staff estimates that at least 90% of members participate in a job readiness activity, whether they are ready to actively seek employment, working towards decreasing “benefits fears”, increasing confidence, furthering education, or in need of additional training or volunteer experience.	
Domain 6 Advocacy				
6.1 Self Advocacy				
6.1.1	Formal Self Advocacy Activities	1-5 5	The program offers peer support training, groups and activities that address self-advocacy. A majority of members reported that they are learning how to voice their suggestions and learning how to interact with their clinical teams and each other through the skills they have learned in the training and groups offered at the program.	
6.2 Peer Advocacy				
6.2	Peer Advocacy	1-5 5	Advocacy elements are present in many programs offered through Hope Lives-Vive La Esperanza. Staff reported that the Peer Support Training has a section on Knowing Others that addresses advocacy, the role of peer advocacy, opportunities to assist others and macro level	

			advocacy. The majority of members interviewed reported involvement in advocacy activities (e.g., facilitating a group, serving on the Board of Directors).	
6.2.1	Outreach to Participants	1-5 4	<p>Staff reported that each staff is assigned a primary caseload ranging from 12-15 members. Staff reported that they make sure to engage with these assigned members, set recovery goals and build a rapport with each of them. If staff have not heard or seen a member for more than a day, they report that they outreach and attempt contact. If unable to contact, they call their assigned clinical team to report concern and request assistance for outreach. Staff reported that if necessary they can do a home visit to attempt contact or offer support.</p> <p>Hope Lives-Vive La Esperanza provides a detailed calendar that covers the breadth of sub-programs offered through the agency, but they are not posted on the agency website. Unless members go to the center, are active in the program, have access to computers, etc., it is not clear how they are informed of upcoming events.</p>	<ul style="list-style-type: none"> • Post updated calendars on the agency website. • Engage members to discuss what steps or changes the program can make to keep members informed of current activities and opportunities within and outside the program.

FACIT SCORE SHEET

Domain	Rating Range	Score
Domain 1: Structure		
1.1.1 Board Participation	1-5	4
1.1.2 Consumer Staff	1-5	5
1.1.3 Hiring Decisions	1-4	4
1.1.4 Budget Control	1-4	4
1.1.5 Volunteer Opportunities	1-5	5
1.2.1 Planning Input	1-5	5
1.2.2 Dissatisfaction/Grievance Response	1-5	5
1.3.1 Linkage with Traditional Mental Health Services	1-5	4
1.3.2 Linkage to Other Consumer Operated Services Program (COSPs)	1-5	4
1.3.3 Linkage with Other Services Agencies	1-5	5
Domain 2: Environment		
2.1.1 Local Proximity	1-4	3
2.1.2 Access	1-5	4
2.1.3 Hours	1-5	3
2.1.4 Cost	1-5	5

2.1.5	Accessibility	1-4	3
2.2.1	Lack of Coerciveness	1-5	4
2.2.2	Program Rules	1-5	4
2.3.1	Physical Environment	1-4	2
2.3.2	Social Environment	1-5	5
2.3.3	Sense of Community	1-4	4
2.4.1	Timeframes	1-4	4
Domain 3: Belief Systems		Rating Range	Score
3.1	Peer Principle	1-4	4
3.2	Helper's Principle	1-4	4
3.3.1	Personal Empowerment	1-5	5
3.3.2	Personal Accountability	1-5	5
3.3.3	Group Empowerment	1-4	4
3.4	Choice	1-5	5
3.5	Recovery	1-4	4
3.6	Spiritual Growth	1-4	3
Domain 4: Peer Support		Rating Range	Score
4.1.1	Formal Peer Support	1-5	5
4.1.2	Informal Peer Support	1-4	4

4.2	Telling Our Stories	1-5	4
4.2.1	Artistic Expression	1-5	4
4.3	Consciousness Raising	1-4	4
4.4.1	Formal Crisis Prevention	1-4	4
4.4.2	Informal Crisis Prevention	1-4	4
4.5	Peer Mentoring and Teaching	1-4	4
Domain 5: Education		Rating Range	Score
5.1.1	Formally Structured Activities	1-5	5
5.1.2	Receiving Informal Support	1-5	5
5.1.3	Providing Informal Support	1-5	5
5.2.1	Formal Skills Practice	1-5	5
5.2.2	Job Readiness Activities	1-5	5
Domain 6: Advocacy		Rating Range	Score
6.1.1	Formal Self Advocacy	1-5	5
6.1.2	Peer Advocacy	1-5	5
6.2.1	Outreach to Participants	1-5	4
Total Score		192	
Total Possible Score		208	