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MISSION

The Iowa Board of Certification credentials prevention and treatment professionals in addictions and other behavioral health fields by promoting adherence to competency and ethical standards.

For the Client: To assure competent, professional services to persons with mental illness.

For the Public: To assure professional competency that will meet standards required for licensing, accreditation or third-party payers.

For the Peer Support Specialist: To provide a respected, marketable credential of professional competency.

For the Profession: To provide a method whereby the highest professional standards can be established, maintained and updated.

RESIDENCY REQUIREMENT

The applicant must live and/or work in Iowa at least 51% of the time at the time of application for initial certification, recertification, and reactivation.

APPLICATION HANDBOOK

This Application Handbook contains information you will not only need to become certified, but also will be very useful after the certification process. Please keep this handbook to use as a referral source. You can also find continually updated versions of this handbook on our web site, free for printing yourself.

CERTIFICATION CRITERIA

Note: New applications are no longer being taken for the Mental Health Peer Support Specialist (MHPSS); rather, new mental health peer applicants need to apply for the Peer Recovery Specialist (PRS) credential which is reciprocal through IC&RC. The PRS Handbook and application can be found on the IBC website at www.iowabc.org.

Family Peer Support Specialists (FPSS) have the opportunity to positively impact families through support and education. Family Peer Support Specialists draw on their own experience as a parent or primary caregiver of a child with an emotional, behavioral or mental health need. They work to empower families by teaching skills that assist them in finding their own voice. A FPSS has current knowledge of the mental health system and most importantly, recognizes the life experience of raising a child with a mental health diagnosis.

Family Peer Support Specialists (FPSS) provide a variety of services to families. These include sharing expertise by providing information, teaching coping skills, providing emotional support and helping
parents become advocates. Family Peer Support Specialists often help families navigate the child servicing services and help them understand available options for their child. FPSS’s may accompany parents to meetings to ensure the parents’ voices are heard. They are able to assist families by modeling good communication skills and sharing their own experiences in a positive manner.

**REQUIREMENTS**

**Certified Family Peer Support Specialist (FPSS)**

Complete the application for FPSS and satisfy all requirements for education, experience and supervision.

**Education Requirement**

- High School Diploma or GED.
- A certificate of completion must be submitted for either the Family Navigator training or the Family Peer Support Specialist training provided by the University of Iowa. The training must be at least 40 hours in length to include a minimum of 10 hours in each domain as follows:
  1. Practice with Professionalism and Ethics
  2. Engage Families
  3. Teach and Support Families
  4. Advocate and Find Resources for Families
- A certificate of completion verifying 8 hours in either Mental Health First Aid training or Youth Mental Health First Aid training.

**Experience/Practicum Requirement**

A minimum of 500 hours of work/practicum experience within the past 6 years is required.

Documentation of these hours are included in the application and verified by the supervisor.

**Supervision Requirement**

Applicant is required to have a minimum of 25 hours of direct face-to-face supervision by a member of the organization’s documented and qualified supervisory staff as per their job description. As per Form 06 of the application for FPSS, the applicant will need to send a letter from their agency stating that their supervisor is in good standing with the agency and that it is part of the supervisor’s job description to provide supervision to Family Peer Support Specialists within that agency.

Documentation of these hours are included in the application and verified by the supervisor.

**Exam**

The applicant will need to send verification of passing the proctored online exam. To get scheduled for this exam, or to obtain verification of passing the exam, contact the Iowa Peer Support Training Program at iowapeersupporttraining@healthcare.uiowa.edu.
APPLICATION PROCESS

Note: The application and its forms will expire one (1) year from the date IBC receives any portion of the application.

To complete the application, follow these steps:
1. The application for FPSS can be found on the IBC website at www.iowabc.org. The application may be completed online and then printed for signatures, or may be printed and completed by hand. The application needs to be mailed to the IBC office along with a copy of the certificate of completion for trainings and the non-refundable fee which includes the application review fee and the first two years of certification.

2. The applicant will be notified once the application is received and reviewed in the IBC office. If the application is not complete, the IBC office will notify the applicant with what is still needed. If the application is complete, the IBC office will issue a certificate for 2 years of certification.

How to Apply

1. Go to the IBC website at www.iowabc.org, click on “Certifications” and then on “Family Peer Support Specialist” to find the application. Applications should be completed online, saved to the applicant’s computer, then mailed back to the IBC office with the non-refundable fee (covers application review and the first two years of certification) along with a copies of training certificates.

2. Be sure to have your supervisor sign the application where indicated once you have printed it.

3. Mail the completed application and fee to:
   Iowa Board of Certification
   225 NW School St.
   Ankeny, IA  50023

D. Questions? Contact the IBC office at 515-965-5509 or email at info@iowabc.org.

CERTIFICATION PERIOD

The Iowa certification period encompasses two calendar years, commencing from the first day of the month that follows approval by the Iowa Board of Certification. Dates of validation are printed on the FPSS’s certificate.

FEES

Refer to the “Fee Schedule” attached to the Certification Application or on the IBC web site.
CERTIFICATION APPEAL PROCEDURES

**Appeal of the Denial for Certification.** Every applicant shall be provided the opportunity to appeal the decision of the Board regarding the applicant’s certification to the Ethics and Appeals Committee. If the applicant desires to appeal the decision of the Board regarding certification, the applicant shall send a written request for an appeal review meeting within thirty (30) days of receipt of the certified notice of denial of certification. The response shall be addressed to:

Executive Director  
Iowa Board of Certification  
225 NW School St.  
Ankeny, Iowa 50023

**Appeal Review Meeting.** An appeal review meeting shall be held at a time and place fixed by the chairperson of the Ethics and Appeals Committee.

A. All appeal review meetings of the Ethics and Appeals Committee shall be closed to the public. Only committee members, those invited by the committee to testify, and staff members shall be in attendance.

B. There shall be no contact prior to the appeal review meeting between the applicant and any member of the Ethics and Appeals Committee for the purpose of discussing the appeal.

C. The Ethics and Appeals Committee shall review with the applicant the reasons for denial of certification and the applicant may present any information he/she feels is relevant.

D. The Ethics and Appeals Committee may not consider additional materials presented by the applicant for the purposes of correcting deficiencies in the written test.

E. The Ethics and Appeals Committee shall make a determination to:
   1. Recommend that the Board uphold the decision regarding certification.
   2. Recommend that the Board overturn the decision regarding certification.
   3. Recommend that the Board remand the application to the Professional Development and Credentialing Committee for re-review.

F. If an applicant who has requested an appeal review meeting, and upon whom proper notice of the meeting has been served, fails to appear for the meeting, the Committee shall proceed with the conduct of the review and the applicant shall be bound by the results to the same extent as if the applicant had been present.

G. The Board shall, at its next regular scheduled meeting, vote to accept or reject the recommendations of the Ethics and Appeals Committee.

H. The applicant shall be notified by certified mail within two weeks of the decision of the Board concerning the appeal.
RECERTIFICATION

HOW TO RENEW CERTIFICATION for FPSS and MHPSS

Certification must be renewed every two years. Dates of validation are printed on the FPSS’s and MHPSS’s certificate. Recertification is a continuous process which involves earning continuing education credit on an ongoing basis, as well as submission of the actual recertification application.

Recertification applications can be found on IBC’s web site at www.iowabc.org. In addition, FPSS’s and MHPSS’s may check their recertification expiration date on the website. **Please note: It is the responsibility of all certified professionals to keep track of recertification dates and to make timely application for recertification.** Recertification applications need to be printed from the web site **just prior to recertifying** to ensure that the most up-to-date version is being used.

Recertification materials will not be sent to you, nor are reminders sent.

An application for recertification shall include the following:

1. Completion of the "FPSS Application for Recertification" or “MHPSS Application for Recertification.” This can be found on the IBC website and needs to be completed online, saved to the applicant’s computer, then emailed (or mailed) to the IBC office.
2. All continuing education hours must be completed within the validation dates shown on the certificate. While certificates of completion do NOT need to be included with the recertification application, it is advised that these be retained by the applicant in case the applicant’s recertification is audited and the applicant is required to then send these to the IBC office.
3. Submission of the recertification fee, as well as applicable CEU processing fees and the late penalty fee, if applicable. Fees may be paid by check, money order, cash at the IBC office or may be paid on the IBC website.
4. The recertification application and fee need to be postmarked (or emailed) on or before the expiration date indicated on the FPSS’s or MHPSS’s certificate; if it is not, the late fee will be due.

CONTINUING EDUCATION REQUIREMENTS

Family Peer Support Specialists

Certified Family Peer Support Specialists must obtain twenty (20) clock hours of continuing education during the two-year certification period to qualify for recertification.

- Six (6) of the clock hours must be in ethics.
- The remaining hours must be in relevant topics

No more than 10 clock hours may be earned through online/distance learning for each certification period.
Mental Health Support Specialists

Certified Mental Health Peer Support Specialists must obtain twenty-four (24) clock hours of continuing education during the two-year certification period to qualify for recertification.

- Two (2) of the clock hours must be in ethics.
- The remaining hours must be in relevant topics

No more than 12 clock hours may be earned through online/distance learning for each certification period.

GENERAL GUIDELINES

The following general guidelines apply to Continuing Education:

A. The content of all courses on continuing education must be relevant the FPSS’s or MHPSS’s job.
B. Continuing education hours exclude non-program time such as coffee breaks, social hours, and time allocated for meals.
C. The recertification hours must be obtained within each certification period; that is, between the validation dates of certification shown on the certificate. Therefore, hours earned before the last application was submitted will not be accepted.
D. Continuing education hours are not cumulative. Therefore, additional hours earned during one certification period and before the recertification application was submitted will not be accepted for the next period.
E. One approved college or university semester hour credit is the equivalent of fifteen (15) clock hours and one approved college or university quarter hour credit is the equivalent of ten clock hours. In order to give IBC credit for college coursework, an original transcript will need to be sent to the IBC office by the college/university. To receive college credit for clock hours a minimum grade of “C” is required.
F. FPSS’s and MHPSS’s cannot repeat an identical training within his or her recertification period.
G. The minimum acceptable unit of credit for any single experience is one clock hour.
H. It is the responsibility of each FPSS to maintain records of continuing education credit for submission with the Application for Recertification.

LATE PENALTIES

1. The application for recertification must be postmarked/emailed on or before the certification expiration date, or the late penalty of $10.00 will be imposed beginning on the day following the certification expiration date.
2. A forty-five (45) day penalty period following the certification expiration date shall be allowed.
3. During the penalty period of the certification, the professional may choose to do one of the following:
a. Renew the certification by submitting the required documentation of Professional Development, the recertification fee, and the penalty fee; or
b. Allow the certification to lapse. Certification will lapse on the 46th day. If certification is lapses, the professional may again apply for certification whenever he/she believes that the criteria can be met. At that time, the professional may purchase a new application packet and begin the application process anew.

**CODE OF ETHICS**

*For Certified FPSS & MHPSS*

**INTRODUCTION**

All MHPSS’s and FPSS’s must subscribe to the IBC Code of Ethics upon application for certification. This Code of Ethics is adopted to aid in the delivery of the highest quality of professional care to persons seeking peer services. It is hoped that these standards will assist the FPSS and MHPSS to determine the propriety of his or her conduct in relationships with clients, colleagues, members of allied professions, and the public.

The Board is committed to investigate and sanction those who breach this Code of Ethics. FPSS’s and MHPSS’s, therefore, are encouraged to thoroughly familiarize themselves with the Code of Ethics and to guide their behavior according to the principles set forth below.

Violation of the IBC Code of Ethics shall be deemed as grounds for discipline. Engaging in unethical conduct includes, in addition to violation of the Principles enumerated herein, any other violation that is harmful or detrimental to the profession or to the public.

**SUBSCRIPTION TO CODE OF ETHICS**

Persons applying for certification must subscribe to the Iowa Board of Certification’s Code of Ethics for FPSS’s and MHPSS’s and so indicate by signing their application. This subscription will be in effect until their certification is no longer valid. In the event the applicant did not successfully complete the certification process, the subscription shall be in effect until the application period expires. IBC can provide specific information regarding these time-frames.

**SPECIFIC PRINCIPLES**

**PRINCIPLE I. Responsibility to clients.** IBC certified professionals respect the rights of those persons seeking their assistance and make reasonable efforts to ensure that their services are used appropriately.

A. IBC certified professionals do not discriminate against or refuse professional service to anyone on the basis of race, gender, religion, national origin or sexual orientation.
1. IBC certified professionals will not enter into relationships or commitments which conflict with the interest of those they serve. Through an awareness of the impact of stereotyping and discrimination, the certified professional guards the individual rights and personal dignity of clients.

2. IBC certified professionals are knowledgeable about disabling conditions, demonstrate empathy and personal emotional comfort in interactions with clients with disabilities, and make available physical, sensory, and cognitive accommodations that allow clients with disabilities to receive services.

B. IBC certified professionals do not use their professional relationships with clients to further their own interests.

C. IBC certified professionals respect the right of clients to make decisions and help them to understand the consequences of these decisions.

D. IBC certified professionals continue professional relationships only as long as it is reasonably clear that clients are benefiting from the relationship.

E. IBC certified professionals assist persons in obtaining other professional services if the counselor is unable or unwilling to provide professional help.

F. IBC certified professionals will advocate for those they serve in order to allow clients to make their own decisions in all matters when dealing with other professionals and service providers, and will assist in making reasonable arrangements for the client.

G. IBC certified professionals obtain written, informed consent from clients before videotaping, audio recording, or permitting third-party observation.

H. IBC certified professionals respect the integrity and protect the welfare of the client. The certified professional, in the presence of professional conflict, is concerned primarily with the welfare of the client.

I. IBC certified professionals will ensure the appropriate and private recovery setting is provided to encourage the client to exercise their right to speak freely and make their own decisions.

J. IBC certified professionals do not continue to practice while having a physical or mental disability which renders the certified professional unable to practice the occupation or profession with reasonable skill or which may endanger the health and safety of the persons under the certified professional's care.

K. IBC certified professionals do not engage in the conduct of one's practice while suffering from a contagious disease involving risk to the client's or public's health without taking adequate precautions including, but not limited to, informed consent, protective gear or cessation of practice.
PRINCIPLE II. Dual relationships.

A. IBC certified professionals are aware of their influential position with respect to clients, and they avoid exploiting the trust and dependency of such persons. IBC certified professionals, therefore, make every effort to avoid dual relationships with clients that could impair professional judgment or increase the risk of exploitation. When a dual relationship cannot be avoided, IBC certified professionals take appropriate professional precautions to ensure judgment is not impaired and no exploitation occurs. Examples of such dual relationships include, but are not limited to, business or close personal relationships with clients and/or their family members.

1. Soliciting and/or engaging in sexual conduct with clients is prohibited; this includes the five years following the termination of services.
2. IBC certified professionals do not accept as clients anyone with whom they have engaged in sexual conduct.
3. IBC certified professionals are aware of their professionalism and healthy boundaries with clients when it comes to social networking for at least a period of one year following the termination of services.
   a. IBC certified professionals do not “friend” their own clients, past or present, or clients of an agency for which they work, on Facebook or other social media sites.
   b. IBC certified professionals use professional and ethical judgment when including photos and/or comments on social media sites.
   c. IBC certified professionals do not provide their personal contact information to clients, i.e. home/personal cell phone number, personal email, Skype, Twitter, etc. nor engage in communication with clients through these mediums except in cases of agency/professional business.

B. IBC certified professionals are aware of their influential position with respect to students, employees, and supervisees, and they avoid exploiting the trust and dependency of such persons. IBC certified professionals, therefore, make every effort to avoid dual relationships that could impair professional judgment or increase the risk of exploitation. When a dual relationship cannot be avoided, IBC certified professionals take appropriate professional precautions to ensure judgment is not impaired and no exploitation occurs. Examples of such dual relationships include, but are not limited to, business or close personal relationships with students, employees or supervisees.

1. Provision of therapy to students, employees, or supervisees is prohibited.
2. Sexual conduct with students or supervisees is prohibited.

PRINCIPLE III. Confidentiality. IBC certified professionals embrace, as primary obligation, the duty of protecting the privacy of clients and do not disclose confidential information acquired in teaching, practice or investigation without appropriately executed consent.

A. IBC certified professionals make appropriate provisions for the maintenance of confidentiality and the ultimate disposition of confidential records. IBC certified professionals ensure that data obtained, including any form of electronic communication, are secured by the available security
methodology. Data shall be limited to information that is necessary to and appropriate to the services being provided and be accessible only to appropriate personnel.

B. IBC certified professionals adhere to all federal, state, and local laws regarding confidentiality and the certified professional’s responsibility to report clinical information in specific circumstances to the appropriate authorities.

C. IBC certified professionals discuss the information obtained in clinical, consulting, or observational relationships only in the appropriate settings for professional purposes that are in the client’s best interest. Written and oral reports present only data germane and pursuant to the purpose of evaluation, diagnosis, progress, and compliance. Every effort is made to avoid undue invasion of privacy.

D. IBC certified professionals reveal information received in confidence only when there is a clear and imminent danger to the client or other persons, and then only to appropriate workers, public authorities, and threatened parties.

**PRINCIPLE IV. Professional competence and integrity.** IBC certified professionals maintain high standards of professional competence and integrity.

A. IBC certified professionals seek appropriate professional assistance for their personal problems or conflicts that may impair work performance or clinical judgment.

B. IBC certified professionals, as teachers, supervisors, and researchers, are dedicated to high standards of scholarship and present accurate information.

C. IBC certified professionals do not engage in sexual or other harassment or exploitation of clients, students, trainees, supervisees, employees, colleagues, research subjects, or actual or potential witnesses or complainants in investigations and ethical proceedings.

D. IBC certified professionals do not diagnose, treat, or advise on problems outside the recognized boundaries of their competence.

E. IBC certified professionals do not engage in conduct which does not meet the generally accepted standards of practice for their profession including, but not limited to, incompetence, negligence or malpractice.

   1. Falsifying, amending or making incorrect essential entries or failing to make essential entries of client record.
   2. A substantial lack of knowledge or ability to discharge professional obligations within the scope of their profession.
   3. A substantial deviation from the standards of skill ordinarily possessed and applied by professional peers in the state of Iowa acting in the same or similar circumstances.
   4. Acting in such a manner as to present a danger to public health or safety, or to any client including, but not limited to, impaired behavior, incompetence, negligence or malpractice.
   5. Failing to comply with a term, condition or limitation on a certification or license.
6. Failing to obtain an appropriate consultation or make an appropriate referral when the problem of the client is beyond the certified professional's training, experience or competence.

7. Suspension, revocation, probation or other restrictions on any professional certification or licensure imposed by any state or jurisdiction, unless such action has been satisfied and/or reversed.

8. Administering to oneself any controlled substance, or aiding and abetting the use of any controlled substance by another person.

9. Using any drug or alcoholic beverage to the extent or in such manner as to be dangerous or injurious to self or others, or to the extent that such use impairs the ability of such person to safely provide professional services.

10. Using alcohol or any dangerous drug or controlled substance while providing professional services.

11. Refusing to seek evaluation and follow through with the recommended treatment for chemical dependency or a mental health problem which impairs professional performance.

F. IBC certified professionals who provide services via electronic media shall inform the client/patient of the limitations and risks associated with such services and shall document in the client/patient case record that such notice has been provided.

PRINCIPLE V. Responsibility to students, employees, and supervisees. IBC certified professionals do not exploit the trust and dependency of students, employees, and supervisees.

A. IBC certified professionals do not permit students, employees, or supervisees to perform or to hold themselves out as competent to perform professional services beyond their training, level of experience and competence.

B. IBC certified professionals who supervise others accept the obligation to facilitate further professional development of these individuals by providing accurate and current information, timely evaluations, and constructive consultation.

PRINCIPLE VI. Responsibility to the profession. IBC certified professionals respect the rights and responsibilities of professional colleagues.

A. IBC certified professionals treat colleagues with respect, courtesy, and fairness and afford the same professional courtesy to other professionals.

1. IBC certified professionals will provide resources which will help clients make informed decisions regarding their care.

2. IBC certified professionals cooperate with duly constituted professional ethics committees and promptly supply necessary information unless constrained by the demands of confidentiality.

3. IBC certified professionals report the unethical conduct or practice of others in the profession to the appropriate certifying authority.

4. IBC certified professionals do not knowingly file a false report against another professional concerning an ethics violation.
B. As employees or members of organizations, IBC certified professionals refuse to participate in an employer’s practices which are inconsistent with the ethical standards enumerated in this Code.

C. IBC certified professionals assign publication credit to those who have contributed to a publication in proportion to their contributions and in accordance with customary professional publication practices.

D. IBC certified professionals who are the authors of books or other materials that are published or distributed cite persons to whom credit for original ideas is due.

PRINCIPLE VII. Financial arrangements. IBC certified professionals make financial arrangements for services with clients and third-party payers that are reasonably understandable and conform to accepted professional practices.

A. IBC certified professionals do not offer, give or receive commissions, rebates or other forms of remuneration for the referral of clients.

B. IBC certified professionals do not charge excessive fees for services.

C. IBC certified professionals disclose their fees to clients at the beginning of services.

D. IBC certified professionals do not enter into personal financial arrangements.

E. IBC certified professionals represent facts truthfully to clients and third-party payers, regarding services rendered.

F. IBC certified professionals do not accept a private fee or any other gift or gratuity for professional work.

PRINCIPLE VIII. Advertising. IBC certified professionals engage in appropriate informational activities, including those that enable lay persons to choose professional services on an informed basis.

A. IBC certified professionals accurately represent their competence, education, training, and experience.

B. IBC certified professionals do not use a firm name, letterhead, publication, term, title designation or document which states or implies an ability, relationship or qualification which the certified professional does not have.

C. IBC certified professionals do not use any professional identification (such as a business card, office sign, letterhead, or telephone or association directory listing) if it includes a statement or claim that is false, fraudulent, misleading, or deceptive. A statement is false, fraudulent, misleading, or deceptive if it:
1. contains a material misrepresentation of fact;
2. fails to state any material fact necessary to make the statement, in light of all circumstances, not misleading; or
3. is intended to or is likely to create an unjustified expectation.

**PRINCIPLE IX. Legal and Moral Standards.** IBC certified professionals uphold the law and have high morals in both professional and personal conduct.

**Grounds for discipline** under this principle include, but are not limited to, the following:

1. Conviction of any felony or misdemeanor, excluding minor traffic offenses, whether or not the case is pending an appeal. A plea or verdict of guilty or a conviction following an Alford Plea, or any other plea which is treated by the court as a plea of guilty and all the proceedings in which the sentence was deferred or suspended, or the conviction expunged shall be deemed a conviction within the meaning of this section.

2. Permitting, aiding, abetting, assisting, hiring or conspiring with an individual to violate or circumvent any of the laws relating to licensure or certification under any licensing or certification act.

3. Fraud-related conduct under this principle includes, but is not limited to, the following:
   a. Publishing or causing to be published any advertisement that is false, fraudulent, deceptive or misleading.
   b. Engaging in fraud, misrepresentation, deception or concealment of material fact in:
      1. Applying for or assisting in securing certification or certification renewal.
      2. Taking any examination provided for #1 above including fraudulently procured credentials.
   c. Making misleading, deceptive, untrue or fraudulent representation in the practice or the conduct of the profession or practicing fraud or deceit, either alone or as a conspirator.
   d. Failing to cooperate with an investigation by interfering with an investigation or disciplinary proceeding by willful misrepresentation of facts before the disciplining authority or its authorized representatives; by use of threats or harassment against, or inducement to any patient, client or witness to prevent them from providing evidence in a disciplinary proceeding or any person to prevent or attempt to prevent a disciplinary proceeding or other legal action from being filed, prosecuted or completed. Failing to cooperate with a board investigation in any material respect.
   e. Committing a fraudulent insurance act.
   f. Signing or issuing, in the certified professional's capacity, a document or statement that the certified professional knows, or ought to know, contains a false or misleading statement.
g. Using a firm name, letterhead, publication, term, title designation or document which states or implies an ability, relationship or qualification which the certified professional does not have.

h. Practicing the profession under a false name or name other than the name under which the certification is held.

i. Impersonating any certified professional or representing oneself as a certified professional for which one has no current certification.

j. Charging a client or a third party payer for a service not performed, or submitting an account or charge for services that is false or misleading. This does not apply to charging for an unkept appointment by a client.

k. Charging a fee that is excessive in relation to the service or product for which it is charged.

l. Offering, giving or promising anything of value or benefit to any federal, state, or local employee or official for the purpose of influencing that employee or official to circumvent federal, state, or local law, regulation or ordinance governing the certified professional or their profession.

4. Engaging in sexual conduct, as defined in the Iowa Code, with a client during a period of time in which a professional relationship exists and for five years after that period of time.

DEFINITIONS

See Glossary of Terms for definitions.

INVESTIGATION

Complaint Procedure. Any individual may file a complaint against a certified professional by submitting a completed “Ethics Violation Allegation Worksheet” (available on IBC’s web site at iowabc.org or by requesting one from the IBC office).

1. The Ethics Violation Allegation Worksheet shall be submitted to:
   Executive Director
   Iowa Board of Certification
   225 NW School St.
   Ankeny, Iowa 50023

2. A copy of the Worksheet is forwarded to the Ethics & Appeals Committee chairperson.

3. The Executive Director shall send a letter to the complainant to acknowledge receipt of the complaint and that it has been forwarded to the Ethics Committee.

4. The Ethics Committee, at their next monthly meeting, determines which principle(s) may have been violated.

5. If a potential violation has been determined, an investigator is assigned and the investigation is started.
6. If, in committee review, the allegation does not warrant assignment of an investigation, the complainant and the person who is alleged to have violated the principle will be notified of that decision. The allegation worksheet will be maintained in a committee file.

7. The Executive Director sends a certified letter to the respondent, notifying him/her that a complaint has been received, that an investigation has begun, and that he/she will be sent correspondence by the investigator. **Note: not cooperating with an investigation can result in a violation of Principle VI-A-2.**

8. The Executive Director shall send a certified letter to the complainant stating that the investigation has begun and that the investigator may be in contact with him/her.

9. When all investigation is completed, the investigator will report to the Ethics Committee. The committee shall review the information and make one of the following recommendations to the hearing panel:
   a. Disciplinary hearing be held, or
   b. Dismiss the complaint

10. Following the hearing, the respondent and complainant are notified in writing of the actions taken by the Board.

Should further violations be uncovered in the course of an investigation, these would comprise an additional complaint by the Committee on Ethics and Appeals.

If a complaint has been filed, the Ethics Committee may, at its discretion, proceed with an investigation even if the complainant subsequently requests that the complaint be withdrawn.

**HEARING PROCEDURES**

**Order for Hearing.** Upon recommendation of the Committee on Ethics and Appeals, the IBC Board shall approve the date, time and place for an ethics hearing and shall appoint a hearing panel for the proceedings. Within ten (10) days of Board action, a written notice will be sent to the complainant, the respondent and the hearing panel members.

   A. The hearing panel shall be comprised of three directors of the Board, excluding any member having a conflict of interest in the matter. At least one of the three members of the hearing panel shall be a certified professional.

   B. Both the respondent and complainant will be provided with a copy of the investigative summary and recommendations including the level of violation severity and the hearing procedures.

   C. The notice of the hearing shall state:
      1. The date, time, and location of the hearing; and
      2. The respondent may, at his or her expense, be represented by legal counsel at the hearing; and
      3. The rules by which the hearing shall be governed.
**Conduct of Hearing.** The hearing shall be conducted in compliance with the following rules:

A. The hearing shall be conducted by the hearing chair as assigned by the Ethics & Appeal Committee Chair or Executive Director, an impartial administrative law judge, attorney, or other person designated by the Board.

B. The investigator or chairperson of the Committee on Ethics and Appeals, or a representative designated by the Committee on Ethics and Appeals, shall present evidence in support of the Committee’s recommendation before the hearing panel. The complainant and the respondent shall be allowed the opportunity to participate in the hearing. Witnesses will be called when appropriate, but shall only be present in the hearing during their testimony. The hearing shall be closed to the public.

C. The hearing panel shall not be bound by common law or statutory rules of evidence, and may consider all evidence having probative value.

D. No discovery shall be permitted and no access to Board files shall be allowed by the respondent except as specifically provided for herein. The Board shall keep all files in permanent form and confidential, unless otherwise provided or directed in writing by the President of the Board or the President’s designee, for disciplinary purposes or by a specific rule of the IBC Board.

E. After completion of the investigation and prior to the commencement of the hearing, members of the Board and hearing panel shall not discuss the case with either the complainant or the respondent in order to maintain neutrality and impartiality. The Executive Director may act as a source of general information to all parties.

F. Members of the hearing panel may inquire and/or conduct relevant fact-finding to obtain the information necessary to make an accurate determination of the facts of the case. If additional violations are discovered during the hearing, it may result in additional sanctions.

G. Board members and committee members who are not serving in an official capacity during the hearing shall not be present unless all parties present agree to such circumstances.

H. A member of the IBC staff shall be responsible for record keeping at the hearing.

I. The hearing shall be audio taped.

**Failure by Respondent to Appear.** If a respondent, upon whom proper notice of hearing has been served, fails to appear either in person or represented by counsel at the hearing or otherwise respond to the complaint, the respondent shall be deemed to be at default and bound by the results of the hearing to the same extent as if the respondent had been present.

**Right to Waive Hearing.** At any time during the ethics investigation process, a respondent has the right to waive an ethics hearing by formal notification in written form with an original signature to IBC. In so doing, the respondent stipulates that the allegations of the ethics violation(s) are correct. As soon as practical, but no later than 90 days upon receipt of the waiver or scheduled hearing date, the Board shall determine any disciplinary sanctions. The decision of the Board shall be final.
Deliberation of the Hearing Panel. Once the chairperson of the Committee on Ethics and Appeals or a representative designee has presented the case information, the complainant and the respondent have had an opportunity to speak, and the hearing panel has asked any questions, the hearing panel will meet in closed session to discuss the facts. A member of the IBC staff is permitted to be present during the deliberation. All panel deliberations will be audio taped.

Decision of the Hearing Panel. The hearing panel shall make the determination regarding violation(s) and disciplinary sanctions as founded, substantiated, unsubstantiated or unfounded.

Upon conclusion of the hearing, the hearing panel chair shall submit a written report to the IBC office which shall include:
1. A concise statement of the findings of fact;
2. A conclusion as to whether any specific Principles have been substantiated, undetermined or unsubstantiated; and
3. The sanctions imposed by the Panel.

At its next regularly scheduled Board meeting, the Board shall be notified of the hearing panel’s decision.

The hearing panel’s decision and the official hearing panel report shall be sent by certified mail to both the respondent and the complainant and include information on how an appeal may be requested.

Discretion of the Hearing Panel. The following factors may be considered by the hearing panel in determining the nature and severity of the disciplinary sanction to be recommended:
1. The relative seriousness of the violation as it relates to assuring the citizens of this state a high standard of professional service and care;
2. The facts of the particular violation;
3. Any extenuating circumstances or other counter-vailing considerations;
4. The number of complaints;
5. Prior violations or complaints and/or sanctions;
6. Whether the violation was self-reported;
7. Whether remedial action has previously been taken;
8. The level of cooperation from the respondent; and
9. Other factors which may reflect upon the competency, ethical standards and professional conduct of the individual.

Method of Discipline. The hearing panel may impose the following disciplinary sanctions:
1. Temporary revocation or permanent revocation; or
2. Suspension of certification or application privileges; or
3. Denial of an application for certification;
4. Reprimand; or
5. Other sanctions which may be deemed appropriate, such as additional education, training, supervision, competency demonstration, assessment and completion of any recommendations resulting from the assessment and/or other additional requirements in conjunction with any of the above disciplinary sanctions.
**Announcement of Decision.** At its next scheduled regular meeting, the Board shall be notified of the hearing panel’s decision. The decision and the official hearing panel report shall be sent by certified mail to both the respondent and the complainant and include information on how an appeal may be requested.

**Confidentiality.** At no time prior to the release of the decision by the hearing panel shall any portion or the whole thereof of any action be made public or be distributed to any persons other than the directors of the Board, its Committee on Ethics and Appeals, and its staff.

**Publication of Decisions.** The decision in any disciplinary proceeding shall be published in whatever manner deemed appropriate by the Board. The employer, if any, shall be notified by certified mail of the final decision of the Board if a violation was founded. IBC may report a disciplinary action against certified professionals to the Iowa Department of Public Health-Division of Health Promotion, Prevention and Addictive Behaviors.

**PROCEDURES AND REINSTATEMENT FOLLOWING DISCIPLINARY SANCTION(S)**

**Repossession of Certificate.** If a respondent’s IBC credential has been suspended, denied, or revoked, the respondent must return his or her certificate to IBC no later than twenty-one (21) days after he or she receives notice of the suspension, denial, or revocation. The IBC certificate remains the property of IBC. Failure to return the certificate as required may result in additional sanctions.

**Reinstatement Following a Suspension.** Upon expiration of the suspension period, the Board shall authorize reinstatement of the professional’s credential for the balance of his or her certification period, unless:
1. The respondent did not submit a letter of application for reinstatement or the letter did not present facts which, if established, would be sufficient to enable the Board to determine that the basis for sanction no longer exists;
2. Another suspension or revocation of the respondent’s certification has occurred;
3. The respondent has committed another violation of the Code of Ethics;
4. The respondent has failed to remit the recertification fees or make an application for recertification in a timely manner; or
5. The respondent has failed to comply fully with the terms of his or her suspension.

**Possible Consideration Following Revocation.** It is recognized that there may be mitigating circumstances which could warrant granting permission to apply for certification following revocation. This does not apply to a permanent revocation sanction.

1. Permission to apply for certification following revocation may be considered only after two years have lapsed from the date of the Board’s final decision.
2. The request for permission to apply for certification shall be initiated by the respondent. The request shall present facts which, if established, would be sufficient to enable the Board to determine that the basis for sanction no longer exists.
3. Permission to seek certification following revocation is granted solely within the discretion of the Board.

**Permanent Revocation.** Permanent revocation of certification or application privileges shall be construed as lasting a lifetime without the possibility for reinstatement.

**APPEALS OF DECISIONS OF HEARING PANEL**

**Notice of Right to Appeal.** The respondent has the right to appeal the hearing panel’s decision. The IBC office shall provide notice to the respondent that he or she may file an appeal of the hearing panel’s decision.

**Filing of Appeal.** Appeals must be postmarked or personally delivered to IBC within thirty (30) days of receiving the certified notice of the hearing panel’s decision. Appeals shall be addressed to:

- Executive Director
- Iowa Board of Certification
- 225 NW School St.
- Ankeny, Iowa 50023

**Administrative Fee for Appeals.** A non-refundable administrative fee must be submitted to IBC with the party’s written appeal.

**Content of Appeal.** The appeal shall contain the following information.

1. Name, address, and telephone number of appealing party;
2. A written statement of the reasons supporting the appealing party’s dissatisfaction with the hearing panel’s decision;
3. A statement of the relief desired by the appealing party;
4. Copies of all relevant documents;
5. Signature of the appealing party.

**Review and Adjudication of Appeal.** The Directors of the Board, excluding any member having a conflict of interest in the matter, will review the case within 75 days of receipt of the request for appeal. The original hearing panel members may participate in the review with at least one member representing the hearing panel’s decision.

Review of the appeal shall include review of the written appeal, any relevant documents submitted for purposes of the appeal, and transcripts of the hearing panel proceedings.

The Board shall make the determination to do one of the following.

1. Uphold the decision of the hearing panel;
2. Overturn or otherwise alter the decision of the hearing panel; or
3. Recommend a new hearing.
**Final Decision.** If no request for an appeal is made within the required time frame stated above, the decision of the hearing panel shall be final. Once the appeal process is completed, the decision of the Board shall be final.

Respondents who waive their right to a hearing also waive their right to appeal the sanctions determined by the board.

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**GLOSSARY OF TERMS**

**Board:** The Iowa Board of Certification.

**CEU:** Literally means a continuing education unit and is synonymous with "clock hour."

**Client:** A person who seeks or is assigned the services of a FPSS/MHPSS, regardless of the setting in which the FPSS/MHPSS works, and for one year after the termination of services which includes aftercare, growth group and/or continuing care.

**Clock Hour:** Sixty minutes of participation in an organized learning experience. The unit of measurement for Professional Development credit for FPSS’s/MHPSS’s.

**Complainant:** A person who has filed an official complaint pursuant to these rules.

**Continuing Education:** The variety of forms of learning experiences including, but not limited to lectures, conferences, academic studies, institutes, workshops, extension studies, and home study programs undertaken by applicants.

**Date of Application:** The date on which the Iowa Board of Certification receives the application request.

**Disciplinary Proceeding:** Any proceeding conducted under the authority of the Board.

**Discipline:** Any sanction the Board may impose upon a counselor for conduct which denies or threatens to deny the citizens of this state a high standard of professional care.

**Distance Learning:** Education that is obtained via Internet, home study programs, or other means in which the certified professional works independently from an instructor and classroom. Live webinar trainings are not considered distance learning.

**Ethics:** Moral and ethical conduct as described in the IBC Code of Ethics.

**Experience:** Actual work in the field of alcohol and drug counseling. This may include practicum, volunteer, or part-time counseling, if provided under direct supervision.

**Hearing Panel:** A panel comprised of directors of the Board, which conducts a disciplinary proceeding pursuant to these rules.

**Home Study Courses:** Continuing education courses offered for individual study.
IBC-Approved: When a sponsor submits workshop materials to IBC demonstrating that a workshop has relevant content and requesting IBC CEU's for all participants.

In-Service Training: The education and training which occurs within the applicant's agency, only for agency staff and conducted only by agency staff.

Permanent Revocation: The permanent loss of certification or application privileges.

Reprimand: A formal written reproof or warning. Two reprimands within a two year period will result in a six month suspension.

Residency Requirement: IBC's policy that the applicant must live and/or work in Iowa at least 51% of the time at the time of application for initial certification and recertification.

Respondent: A person who is seeking or who has obtained certification from the Iowa Board of Certification and against whom a complaint has been filed pursuant to this Code.

Revocation: The loss of certification, including all related test scores.

Sexual Conduct: Includes kissing; touching of the clothed or unclothed inner thigh, breast, groin, buttocks, anus, pubes, or genitals; and sex acts which include intercourse, oral sex, and sexual contact with fingers, hands, objects.

Sponsor: An organization or presenter seeking IBC hours for all participants at a specific workshop.

Substantiated Ethics Violation: There is proof that the ethics complaint/allegation is true, a sanction will be imposed, and a record of the violation will be kept in the professional's certification file.

Supervisor: A person who meets the criteria to conduct supervision for certification purposes.

Suspension: A time-limited loss of certification or the privilege of making application for certification.

Undetermined Ethics Violation: The hearing panel is unsure of proof of the ethics allegation/complaint, sanctions and recommendations may be made by the hearing panel, and a record of these sanctions/recommendations will be kept in the professionals' certification file.

Unsubstantiated Ethics Violation: There is no proof that the ethics allegation/complaint is true, and no record of the complaint will be kept in the professional’s certification file.

Workshop: A systematic learning experience, at least one hour in length, which deals with and is designed for the acquisition of tasks, knowledge, skills, and information for application in client care.
APPLICATION CHECKLIST
FOR FPSS

Applicants must submit a completed FPSS application, which needs to include:

_____ 1. Completed/signed Forms 01, 02, 03, 04, 05, 06 (forms with signatures must be mailed to the IBC office)

_____ 2. A written job description from your HR Dept.

_____ 3. A certificate of completion showing completion of the Family Navigator or Iowa Family Peer Support Specialist training provided by the University of Iowa.

_____ 4. A certificate of completion showing completion of the 8-hour Mental Health First Aid or Youth Mental Health First Aid training.

_____ 5. A letter from your agency verifying your supervisor is in good standing with the agency and that it is part of his/her job description to supervisor Family Peer Support Specialists in your agency.

_____ 6. Verification of successfully passing the proctored online exam.

_____ 7. The $60.00 fee, which covers the application review and 2 years of certification
Family Peer Support Specialist Scope of Practice

A. Practice with Professionalism and Ethics – 26% weight on exam
   1. Adhere to ethical limits to confidentiality
   2. Comply with mandatory reporting requirements
   3. Recognize limitations of the FPSS scope of practice
   4. Seek the services of nurses, social workers, doctors when needed service is outside the FPSS’s scope
   5. Help families understand right to privacy and confidentiality
   6. Help families understand consent to release documents
   7. Understand the professionalism and culture of employing organizations
   8. Seek and learn from supervision
   9. Model leadership skills
   10. Provide services in a culturally aware manner
   11. Use person-first language
   12. Recognize how personal values, beliefs and biases may affect work
   13. Contribute to initial assessments under supervision of social workers, nurses or other agency staff
   14. Create and maintain timely and accurate documentation
   15. Recognize the warning signs and risks of suicide and be able to access crisis referral sources

B. Engage Families – 22% weight on exam
   1. Focus on the family, their strengths and preferences, and right to self-determination
   2. Demonstrate a willingness to appreciate the values and life experiences of families
   3. Utilize lived experience with one’s own child and family to empathize, support and connect with the family
   4. Strategically share one’s own family resilience story
   5. Collaborate with families to identify strengths and make the most of them
   6. Partner with families to identify and prioritize family needs throughout service
   7. Gauge a family’s readiness for change and adjust services accordingly
      a. Help families prioritize/re-prioritize goals
      b. Help families self-determine and support the choices that they make in an agreed-upon care/case plan
   8. Share self-care techniques that have assisted in one’s own family recovery
   9. Understand physical, cognitive and emotional development of children and youth
   10. Understand the grief process and the family’s emotional response to a diagnosis
   11. Assist families in identifying their own experience and how it has impacted their hopes for the future
   12. Introduce recovery-oriented activities that assist families in building hope
   13. Share personal experiences of the role that hope has played in one’s own family Experience
   14. Practice Trauma-Informed Care
   15. Understand the impact of trauma and mental illness of the child and/or parent on the entire family
C. **Teach and Support Families – 26% weight on exam**
   1. Coach families in skills to advocate for themselves and their family
   2. Teach families how to collaborate with providers in making decisions about their child’s Care
   3. Support the family to implement their goals, assisting in refocusing when necessary
   4. Track progress on goals
   5. Accompany and/or coach family to fully participate in meetings and appointments
      a. IEP and 504 meetings
      b. Medical/mental health/PMIC/family therapy appointments
      c. Juvenile court meetings
      d. Family team meetings/wraparound meeting
      e. Human services appointments
   6. Model and coach parent-child interactions
   7. Model and coach families in problem-solving
   8. Assist families to understand the need and plan for youth transition to adulthood
   9. Help families navigate the behavioral health system of care
   10. Contribute to conflict resolution education
      a. Help families generate options to get what they want when conflict arises
      b. Teach the family about grievance procedure options in institutions/agencies

D. **Advocate and Find Resources for Families – 26% weight on exam**
   1. Assert family’s key role on all child serving teams or systems
   2. Advocate for the family voice within the workplace, with other agencies, providers and Professionals
   3. Help families reduce isolation and expand their natural and formal support networks
   4. Refer families to appropriate information and services
   5. Follow up and monitor outcomes of referrals
   6. Network with other FPSS’s to identify additional resources
   7. Identify barriers within the family that impede family functioning (i.e. alcohol and other drug use, incarceration, domestic violence)
   8. Know how to research qualifications for state and federal pediatric insurance plans
      a. Be aware of special services and qualifications of families to access those services
      b. Provide application assistance as needed
   9. Provide guidance in navigating education, healthcare, juvenile justice and child welfare systems
   10. Identify techniques and resources that promote good self-care

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by Curriculum Workgroup 6/2016 and Incorporating reviews by FPSS Advisory on 7/13/16
Tested by a field of FPSS and their supervisors March 2017
Iowa Peer & Family Peer Support Training Program
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