

Connect Nevada: Strengthening Youth, Empowering Families

Youth Peer Support

Youth Peer Support Specialists are young adults who have lived experience with mental and/or behavioral health challenges and have the skills and abilities to navigate and work collaboratively with youth-serving systems in their communities. Youth peer support services have demonstrated promise in increasing social support, developing self-advocacy skills, promoting self-care and wellness efforts, and enhancing a sense of personal empowerment.

As one component of a successful children's System of Care approach within a continuum of care, trained and certified Youth Peer Support Specialists deliver peer support in person, by phone, or via telehealth to individuals and/or groups. Service may include emotional, informational, and educational support and advocacy, strategies to help navigate community resources, care services, and assistance and linking to social activities and informal supports.

All youth referred to the CME shall be offered youth peer support services and, with consent, will be referred for an introductory call from a youth peer support specialist, independent of whether they become recipients of Targeted Case Management, Intensive Care Coordination, or High-Fidelity Wraparound services.

Admission Criteria

Must meet (A):

- A. All youth referred to the CME shall be provided access to Youth Peer Support. Service limit is 12 hours per month for no more than 6 months.
- B. Service needs to be recommended on the plan of care.

Continued Service Criteria:

Must meet all of the following:

- A. Individual is at least the age of 12 years with complex behavioral health challenges.
- B. The youth demonstrate a moderate to severe functional impairment in at least one of the following domains: Risk (i.e., Suicide Risk/Danger to Self, Delinquency); Emotional/Behavioral (i.e., Substance use, Anxiety, Mood) Child/Youth Functioning (i.e., Family/Home, School).
- C. The youth is actively participating in youth peer support.
- D. There is reasonable evidence to support that additional peer support may help alleviate the risk out of home placement, such as acute or residential treatment.