



Mississippi Department of Mental Health

Bureau of Behavioral Health Services
Division of Peer Support and Recovery

**Certified Peer Support Specialist Training Development and
Program Maintenance**

Notice of Funding Opportunity FY 2027

Request for Proposals

Please note that all grants are contingent on the funding by the Mississippi State Legislature and/or the Federal Government. The submission of this application to the Department of Mental Health is not a guarantee of funding.

The Department of Mental Health, Bureau of Behavioral Health Services/ Division of Peer Recovery and Support is now accepting funding proposals for the state fiscal year 2027. This proposal application is eligible to all Mississippi Department of Mental Health (DMH) certified providers in good standing. The selected organization will need to be aligned with national best practices and standards and approved by the MS Department of Mental Health. However, DMH certification is not a guarantee of funding. All submitted proposals will be evaluated by a panel of reviewers using the posted competitive grant scoring rubric. Not all submitted proposals may be funded, but comprehensive feedback will be provided to all providers, particularly if their application was not funded for the current fiscal year.

The funding associated with this grant opportunity is meant to defray a proportion of operational costs for the service.

Cash requests will only be signed and processed for payment after the Department of Mental Health has received required data outcomes and/or metrics specific to the respective grant.

Certified Peer Support Specialist Training Development and Program Maintenance

A Certified Peer Support Specialist – Mental Health/Substance Use (CPSS-MH/SU) is an adult with lived experience involving mental health and/or substance use conditions who demonstrate his/her own success in self-directed recovery. The purpose of this grant is to support the development, implementation, and ongoing maintenance of a statewide peer support services program that strengthens the behavioral health workforce, expands access to peer-delivered services, and promotes recovery-oriented systems of care. The selected provider will develop standardized training curriculum, deliver education and outreach activities, and provide operational support to sustain high-quality peer support services throughout the state.

A. Application Guideline Requirements: Please submit the following required forms which can be found in the MS Department of Mental Health’s Service Provider Manual.

- i** Proposed Budget Summary Form: 100-1
- ii** Proposed Budget Personnel Form: 100-2
- iii** Proposed Budget Line Item Form: 100-3
- iv** Budget Narrative/Justification.
- v** Program Narrative (not to exceed 6 pages) which addresses B – E.

B. Program Evaluation

1. Objectives:

- a. Develop and maintain a comprehensive peer support training curriculum aligned with state standards, recovery principles, and evidence-based practices.
- b. Increase awareness and understanding of peer support services among providers, stakeholders, and community members.
- c. Support workforce development and capacity-building for peer support specialists.
- d. Promote consistency, quality improvement, and sustainability of peer support services statewide.
- e. Provide technical assistance and program maintenance support to organizations implementing peer support services.

C. Specific Requirements

1. Programmatic Requirements

- a. Update the CPSSP Curriculum and training based on evidence-based practices, CPSSP Evaluations, and SAMHSA's Peer Support Specialist National Standards. The Bureau of Behavioral Health Services/Division of Peer Recovery and Support will maintain authority and oversight of all peer support models and trainings.
- b. Coordinate all CPSS MH/SU trainings for CPSS program, including all tasks related to preparation, execution, and follow-up as directed by DMH Peer Recovery and Support Division. The selected organization will be tasked with development and maintenance of the Certified Peer Support Specialist training program; however, the DMH Division of Certification will have oversight over credentialing/certification standards and related matters. Additionally, DMH Division of Peer Recovery and Support will provide administrative oversight and guidance of the CPSS training program of the Peer Support Specialist Professional Program as needed and/or requested.
- c. Maintain training modules aligned with current national best practices and standards as indicated by SAMHSA and relevant empirical research.
- d. Provide trainers and materials for all trainings.
- e. If the training is virtual, must provide the training platform.
- f. All training materials and/or module revisions must be sent to the Peer Support Services Project Coordinator and Division Director of Peer Recovery and Support for approval of implementation and to maintain up to date files.
- g. Plan and coordinate the facilitation of a train-the-trainer training as needed.
- h. Responsible for maintaining a current copy of all records submitted on behalf of all trained individuals. Updated documentation must be sent monthly to the Division of Peer Recovery and Support.
- i. Develop and implement a statewide marketing, recruitment, and retention strategy for the CPSS MH/SU designation.

- j. Create, execute, and maintain a newsletter and website for CPSSs. Create, execute, and maintain an employment placement plan for all CPSSs.
- k. Develop an outreach plan to focus on understaffed locations and build a network to place trained CPSSs in employment vacancies at state mental health agencies within first six months of training.
- l. Provide follow-up support, mentorship, and additional training for trained CPSS MH/SUs via webinars, monthly phone calls, and/or other activities in order to enhance workforce development, support and retention.
- m. Maintain a regularly updated database of CPSSs/PSSs to provide a list of updated names, email addresses, and places of employment of active CPSS MH/SUs to DMH staff on a monthly basis.
- n. Work closely with the Behavioral Health Planning and Advisory Council to ensure peer support has consistent representation.
- o. Participate in compliance and fidelity checks scheduled by Division of Peer Recovery and Support as requested.
- p. Participate in training as requested and provide technical assistance to CPSSs, supervisors of CPSS MH/SUs upon request from DMH and DMH certified providers/agencies.
- q. Coordinate, plan, and facilitate Train-the-Trainer to support CPSS program sustainability and workforce development.
- r. Plan, coordinate, and host regional CPSS/PSS summits to provide continuing education and promote statewide collaboration among peer support providers.

D. Reporting Requirements

DMH grant recipients must review the performance data they submit to DMH, assess their progress, and use this information to improve the management of their grant. Recipients are also required to report on their progress addressing the goals and objectives identified in the grant. The assessment should be designed to help you determine whether you are achieving the goals, objectives, and outcomes you intend to achieve and whether adjustments need to be made. Grantees are required to submit required data to DMH to continue funding and use data to assess progress and improve services. Additional reports may be required as specified by DMH.

- Submit data by 10th of each month with your cash request

Failure to meet reporting requirements or established metrics, unless required otherwise by federal law, shall result in:

- Immediate suspension of grant payments pending corrective action
- Agency review for potential grant termination; and

- Termination of grant award if metrics remain unmet in 120 days following the due date of annual report.
1. The organization must provide training logs which include the following information for each entry:
 - a. Date
 - b. Start and end time
 - c. Topic
 - d. Presenter(s)
 - e. Location
 - f. Number of attendees
 2. The organization must report monthly the number of individuals:
 - a. CPSSs employed by a DMH Provider and employment location/names
 - b. PSSs employed with a non DMH-certified provider and their places of employment if available
 - c. Housed at a Mississippi Department of Corrections facility
 - d. Trained but not employed in the CPSS/PSS Profession
 3. Please provide the most up to date list of names of all active CPSSs and PSS monthly.
 4. The organization must indicate the number and location of proposed trainings anticipated for the fiscal year 2027.
 5. The organization must indicate the number of proposed individuals who will be trained and employed for the fiscal year 2027.
 6. The organization will be required to complete other reporting forms highlighting outreach, trainings, presentations, and events conducted on behalf of the Certified Peer Support Specialist MH/SU Program.

E. Other Guidelines

- i** Any travel reimbursement listed in the budget cannot exceed the current State of Mississippi reimbursement rate (currently \$0.725 per mile.)
- ii** Indirect/administrative costs listed in the budget cannot exceed 8% of the budget total.
- iii** Data reports required by this funding must be submitted monthly by the 10th of the following month.
- iv** Agencies that are not able to meet the required goals/objectives of this service funding and are not able to submit timely and accurate data as required by DMH may not be eligible for future funding for this service.
- v** Comply with all provisions of HB1171 as passed in the 2026 legislative session.

F. Evaluation Criteria

Applications will be evaluated based on:

- Program design, feasibility, and alignment with goals

- Capacity to deliver services
- Budget and cost effectiveness
- Impact on target population

A review panel will score applications using standardized rubric.

**Certified Peer Support Specialist
 Training Program Goals and Objectives
 July 1, 2026 – June 30, 2027**

**GOAL 1:
 OBJECTIVE:**

ACTIVITIES	TIMELINES	DATA EVALUATION (EVIDENCE OF MOVEMENT TOWARDS GOALS OR ACCOMPLISHMENT OF GOALS)	STAFF RESPONSIBLE

**GOAL 2:
 OBJECTIVE:**

ACTIVITIES	TIMELINES	DATA EVALUATION (EVIDENCE OF MOVEMENT TOWARDS GOALS OR ACCOMPLISHMENT OF GOALS)	STAFF RESPONSIBLE

**GOAL 3:
 OBJECTIVE:**

ACTIVITIES	TIMELINES	DATA EVALUATION (EVIDENCE OF MOVEMENT TOWARDS GOALS OR ACCOMPLISHMENT OF GOALS)	STAFF RESPONSIBLE



Monthly Reporting Forms

Date Completed: __
Organization Name: _____

Contact Staff: _____

Reporting Month/Year:

1. Training/Employment

Date	Start Time	End Time	Topic	Presenter(s)	Location	Training Log
						# Attendees

Metric	Target	#This Month	#This Fiscal year
Enrollment Rate	≥ 85% filled		
Completion Rate	≥ 90%		
Competency Rate	≥ 85% passing		
# Trainings Conducted	≥ 4 annually		

Metric	Target	#This Month	#This Fiscal Year
% Employed	≥ 70% within 6 months		
% Retained	≥ 75% at 6 months		

Category	#This Month	#This Fiscal Year
CPSSs employed by DMH Provider (include location/provider name)		
PSSs employed by non-DMH-certified provider (include employer if available)		
Individuals housed in MDOC facilities		
Trained but not employed (CPSS/PSS)		

2. Outreach & Recruitment

Metric	Target	#This Month	#This Fiscal Year
Outreach Activities	≥ 12 annually		
In-Person Visits	≥ 1 monthly		
Engagement Efforts	≥ 2-4 monthly		
Individuals Recruited	40-60 annually		

3. Program Quality & Compliance

Metric	Target	#This Month	#This Fiscal Year
Technical Assistance	≥ 1/month		

Name of Organization Requesting TA	Location of Organization	Reason for TA	TA Offered
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CPSS Training Program

End/Mid-Year Report

Date Completed:

Organization Name:

Contact Staff: _____

Fiscal

Year: _____

1. Training Outcomes

Metric	Target	#This Year	Met (y/n)
Enrollment Rate	≥ 85%		
Completion Rate	≥ 90%		
Competency Rate	≥ 85%		
Trainings Conducted	≥ 4		

2. Employment & Retention Outcomes

Metric	Target	#This Year	Met (y/n)
Employment Rate	≥ 70%		
Retention Rate	≥ 75%		

Category	#This Year	Details
CPSSs employed by DMH Provider (include location/provider name)		
PSSs employed by non-DMH-certified provider (include employer if available)		
Individuals housed in MDOC facilities		
Trained but not employed (CPSS/PSS)		

3. Outreach & Recruitment Outcomes

Metric	Target	#This Year	Met (y/n)
Outreach Activities	≥ 12		
Engagement Efforts	≥ 2-4/month		
Individuals Recruited	40-60		

4. Program Quality & Compliance

Metric	Target	#This Year	Met (y/n)
Technical Assistance	≥ 1/month		

5. Program Evaluation

Area	Response
Effectiveness of training program	
Effectiveness of outreach efforts	
Barriers and improvements	