



Idaho Peer Support Specialist Training

Precautions we will be taking to address the health and safety of our trainees

The health and safety of our trainees is of utmost importance, and we have a responsibility as a training entity to take preventative measures regarding the current COVID-19 pandemic. We are asking trainees to take the following precautions during our in-person trainings. We request that trainees who cannot participate in the following precautions attend training online or in the future when precautions are no longer required. We are all in this together and sincerely appreciate your understanding.

Proof of Full COVID-19 Vaccination or Negative COVID-19 Test Required

Upon acceptance into the training, all in person training participants will need to provide proof of full COVID-19 vaccination (and booster depending on the timing of your first vaccination) or proof of a negative COVID-19 test within the 72 hours before training begins. You will receive instructions for providing documentation of vaccination or negative test after you have been accepted into training. Your data will be encrypted, and we will not keep or share any of your information. It will only be used for verification to allow you to attend training in person.

Vaccination & Testing FAQs

When do I need to receive my vaccine and booster to be fully vaccinated by the time training starts?

To be fully vaccinated in time for the training, you will need to receive your second Moderna or Pfizer dose, or single Johnson & Johnson dose, or vaccine booster at least two weeks prior to the start date of the training. Please refer to [these CDC vaccine guidelines](#) if you are vaccinated to determine the timing of your booster. If you are not yet vaccinated but plan to start the process, you will still need to submit proof of a negative COVID test *no earlier* than the Friday before the training begins if you will not be fully vaccinated or boosted by the time training begins.

What if I am not vaccinated, or only partially vaccinated by the time training begins?

You will need to submit proof of a negative COVID test *no earlier* than the Friday before training begins.

Where can I get vaccinated if I want to?

Vaccinations are free and readily available in many areas. You can [search for vaccination locations in your zip code here](#).

If I am not vaccinated, what kind of tests will be accepted?

Any COVID test (PCR or rapid test) will be accepted as long as it is taken *no earlier* than the Friday before training begins.

Where and when do I get a COVID test?

[You can search for COVID testing sites in your zip code here](#). Many sites offer free testing with or without

insurance. You can also [order free at-home tests at this link](#). Please allow enough time for shipping. If you will be providing proof of a negative COVID-19 test, you must take your test *no earlier* than the Friday before your training begins and provide your results using the link above by the Sunday before training starts.

Please Bring a Mask to Training

We will be closely monitoring public health guidelines and county data to determine our mask requirements. We will be in touch at least one week prior to the training to inform individuals who have been accepted about whether masks will be required or optional during the training. Please contact jess@idahopeersupport.com if you have concerns about masks potentially being optional during the training. Regardless of whether masks are optional during the training, we do ask that you bring a mask with you to training and respectfully wear it should any of the fellow trainees you are partnered with request that you wear it while you are practicing. As a certified peer support specialist, you will be working with individuals with whom you will be required to wear a mask and it will be good preparation for real-life situations after your training. We will also provide clear face shields to everyone who would like one.

Physical Distancing

It can be challenging for trainees to remain 6 feet apart when practicing peer support skills. We will do our best to seat trainees 6 feet apart given the training location we have available to us, and we ask that trainees sit at a distance that is comfortable for them.

Hand Washing & Sanitizer

We ask that trainees wash their hands frequently throughout the day. We will have hand sanitizer available on each table and encourage trainees to use it frequently.

Sanitation Protocol

Training facility staff and facilitators will be cleaning and sanitizing the training room each day. We will have sanitizing spray, paper towels, tissues, trash cans, and hand sanitizer available in the training room. Trainees are asked to keep their area clean.

Coffee & Tea Station

Complimentary coffee and tea will be available for trainees, and we ask that trainees use hand sanitizer prior to using the coffee station.

Confirmation of our ability to hold training in person

We will stay updated on any changes that may take place with current public health recommendations and either move training online via Zoom or postpone trainings as needed to maintain the health and safety of trainees. Trainees will be notified immediately in the event a training must be postponed or moved online. Please plan to attend in person unless you hear otherwise from us.

Stay home if you are sick

Please self-monitor for [symptoms of COVID-19](#) and refrain from entering the training room if there is any concern about possible infection. In the event you become sick during the training, please notify a training facilitator immediately. A refund will be available to you, and we will talk with you about options for attending training at a later time. If you answer 'yes' to any of the following questions before or at any time during the training, we ask that you inform a training facilitator immediately and refrain from attending training at this time.

1. Within 14 days before attending the training, have you tested positive for COVID-19?
2. Within 14 days before attending the training, have you come within 6 feet of someone who has tested positive for COVID-19?
3. Within 48 hours prior to attending the training, have you experienced [symptoms of COVID-19](#) (e.g. fever, chills, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, sore throat, loss of taste or smell, congestion, runny nose, nausea or vomiting, diarrhea)?

You will be attending the training at your own risk

COVID-19 is an extremely contagious disease that can lead to severe illness and death. There is an inherent and elevated risk of exposure to COVID-19 in any public place where people are gathering and there is no guarantee, express or implied, that individuals attending the training will not be exposed to COVID-19. By attending the training, you voluntarily assume all risks related to exposure to COVID-19. It is your responsibility to determine your comfort level spending a week with a large group of people. We encourage each trainee to decide whether an in-person training is a good fit for them. Path to Prime, LLC is not liable in the event you are exposed to COVID-19 during the training.

In person trainees will be asked to sign a waiver to acknowledge they are attending an in-person training at their own risk. Please be prepared to follow the precautions outlined in this document and reach out to Jess at jess@idahopeersupport.com if you have questions or concerns. Please note you will not be able to attend an in-person training if you are not able to participate in the precautions listed above. We appreciate your understanding in this matter.

Refunds

Refunds will be granted in full to any trainee who cannot complete the training due to illness, or who decides they prefer to wait to attend the training at a later date. Please contact a training facilitator immediately if you have symptoms during the training, or if you decide you would like to attend the training at a later time. We will talk with you about your options for attending training online.

Please be kind

We will begin the training by creating a comfort agreement that will give all trainees the opportunity to offer their input, and we will be working together to sustain a safe and welcoming environment for everyone in attendance. We welcome trainee feedback at any time. Being understanding, flexible, and adaptable is great practice for your upcoming work as a certified peer support specialist.

Thank you!

We are all in this together and we sincerely appreciate your understanding and commitment to the precautions outlined above. Training facilitators will be available for any questions or concerns you may have, and we encourage you to speak with a facilitator at any time. We look forward to meeting you and sharing the training with you!

Jess Wojcik, CPSS
Path to Prime, LLC
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COVID-19 SAFETY ACKNOWLEDGEMENT - RELEASE OF LIABILITY & ASSUMPTION OF RISK

You will be asked to sign this waiver if you are accepted into an in-person training

COVID-19 SAFETY INFORMATION:

While participating in Peer Support Specialist Training provided by Path to Prime, LLC, participants may be asked to wear a face covering over their nose and mouth regardless of vaccination status. Participants are encouraged to practice hand hygiene, physical distancing, and cover coughs or sneezes with their sleeve or elbow, not hands. Because COVID-19 is extremely contagious and is spread mainly from person-to-person contact, Path to Prime, LLC is following preventative measures to reduce the spread of COVID-19 in the training environment. However, we cannot guarantee that participants will not become infected with COVID-19. In light of the ongoing spread of COVID-19, individuals who fall within any of the categories below should not engage in training at this time. By attending Peer Support Specialist Training provided by Path to Prime, LLC, you certify that you do not fall into any of the following categories:

1. Individuals who currently or within the past fourteen (14) days have experienced any symptoms associated with COVID-19, which include fever, cough, and shortness of breath among others;
2. Individuals who believe that they may have been exposed to a confirmed or suspected case of COVID-19 or have been diagnosed with COVID-19 and are not yet cleared as non-contagious by state or local public health authorities or the health care team responsible for their treatment.

DUTY TO SELF-MONITOR:

Participants agree to self-monitor for signs and symptoms of COVID-19 (symptoms typically include fever, cough, and shortness of breath) and contact a training facilitator immediately if you experience symptoms of COVID-19 at any time during the training.

LIABILITY WAIVER AND RELEASE OF CLAIMS:

I acknowledge that I am voluntarily and willingly participating in Peer Support Specialist Training provided by Path to Prime, LLC at my own risk. I acknowledge I am assuming risk of exposure to, directly or indirectly arising out of, contributed to, by, or resulting from any and all communicable disease, including but not limited to, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof.

RELEASE AND WAIVER:

I HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE ANY AND ALL LIABILITY, CLAIMS, AND DEMANDS OF WHATEVER KIND OR NATURE AGAINST PATH TO PRIME, LLC AND ITS AFFILIATED PARTNERS, INCLUDING IN EACH CASE, WITHOUT LIMITATION, THEIR DIRECTOR AND STAFF (THE "RELEASED PARTIES"), EITHER IN LAW OR IN EQUITY, TO THE FULLEST EXTENT PERMISSIBLE BY LAW, INCLUDING BUT NOT LIMITED TO DAMAGES OR LOSSES CAUSED BY THE NEGLIGENCE, FAULT OR CONDUCT OF ANY KIND ON THE PART OF THE RELEASED PARTIES, INCLUDING BUT NOT LIMITED TO DEATH, BODILY INJURY, ILLNESS, ECONOMIC LOSS OR OUT OF POCKET EXPENSES, OR LOSS OR DAMAGE TO PROPERTY, WHICH I, MY HEIRS, ASSIGNEES, NEXT OF KIN AND/OR LEGALLY APPOINTED OR DESIGNATED REPRESENTATIVES, MAY HAVE OR WHICH MAY HEREINAFTER ACCRUE ON MY BEHALF, WHICH ARISE OR MAY HEREAFTER ARISE FROM MY PARTICIPATION IN PEER SUPPORT SPECIALIST TRAINING.

ASSUMPTION OF RISK:

I acknowledge and understand the following:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist;
2. I knowingly and freely assume all such risks related to illness and infectious diseases, such as COVID19, even if arising from the negligence or fault of the Released Parties; and
3. I hereby knowingly assume the risk of injury, illness, harm and loss associated with training participation, including any injury, illness, harm and loss caused by the negligence, fault or conduct of any kind on the part of the Released Parties.

MEDICAL ACKNOWLEDGMENT AND RELEASE:

I acknowledge the health risks associated with training participation (the Activity). I agree that if I experience any symptoms of illness during training participation, I will discontinue my participation immediately, notify a training facilitator, and seek appropriate medical attention. I DO HEREBY RELEASE AND FOREVER DISCHARGE THE RELEASED PARTIES FROM ANY CLAIM WHATSOEVER WHICH ARISES OR MAY HEREAFTER ARISE ON ACCOUNT OF ANY FIRST AID, TREATMENT, OR SERVICE RENDERED IN CONNECTION WITH MY PARTICIPATION IN THE ACTIVITY.

As a participant, you recognize that your participation is voluntary and may result in personal injury and/or illness. By participating, you acknowledge and assume all risks and dangers associated with your participation, and you agree that: (a) Path to Prime, LLC (b) the property or site owner of the training facility, and (c) all past, present and future affiliates, successors, staff, employees, partners, directors, and officers of such entities (subsections (a) through (c), collectively, the "Released Parties"), will not be responsible for any personal injury (including death), illness, property damage, or other loss suffered as a result of your participation in Peer Support Specialist Training, regardless if any such injuries, illness, or losses are caused by the negligence of any of the Released Parties (collectively, the "Released Claims").

BY ATTENDING AND PARTICIPATING IN TRAINING, I AM DEEMED TO HAVE GIVEN A FULL RELEASE OF LIABILITY TO THE RELEASED PARTIES TO THE FULLEST EXTENT PERMITTED BY LAW.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.