



Certified Prevention Specialist (CPS)

International Certification and Reciprocity Consortium (IC&RC) Reciprocal Credential

Applicant Name: _____

The Certified Prevention Specialist is an individual who has demonstrated competence related to alcohol, tobacco and drug prevention and who provides services that build capacities of individuals and systems to promote healthy environments, lifestyles, and communities.

Requirements:

- 120 Hours of pre-approved coursework (see Coursework Requirements and Verification pages). Appropriate college credit can be used toward CPS coursework. College courses will be approved at the Board's discretion. All other CPS coursework must have prior approval from The Certification Board.
- A minimum of a Bachelor's degree in a Human Services related field from an accredited institution.
- Copy of Degree and Transcript must be attached to application. Subject to Board Approval.
- Two (2) years of full-time experience (i.e., 4,000 hours) in at least one of the Five Domains of Prevention (see page 6). This requirement also contains a 120 hour Practicum completed within 2 years of the date of the application
- Successful completion of the ICRC (International Certification and Reciprocity Consortium (IC&RC) Prevention Written Exam. See the Certification Boards website for testing dates and details.
- 50 hours of Prevention related education is required every two years to maintain the CPS credential.
- \$250.00 non-refundable review fee (check or money order made payable to The Certification Board)

Applications must be submitted by sending complete to:

The Certification Board of New Jersey, 180A Tices Lane Suite 205, East Brunswick, NJ 08816.

The Board will NOT respond to inquiries regarding receipt of documents. Send all critical documentation to the Certification Board "Return Receipt" (the green post card from the Post Office or via FedEx, UPS or other common carrier with delivery verification).



APPLICANT INFORMATION SHEET

NAME _____
(Please Print Your Name as it should appear on your Certificate)

EMAIL _____

HOME ADDRESS _____

COUNTY _____

HOME PHONE # _____

HIGHEST DEGREE OF EDUCATION _____

AGENCY EMPLOYED AT _____



Verification of Prevention Experience

Applicants must document two (2) years (i.e., 4,000 hours) of prevention experience immediately prior to date of application. Prevention experience must be directly related to one or more of the five domains. Copies of this page may be made if necessary.

Applicants must include a copy of their personal resume.

The following is required for each of the jobs listed:

Applicant Name: _____

Name of Employer: _____

Address of Employer: _____

Immediate Supervisor: _____

Program Director: _____

Applicant's Job Title: _____

Dates of Employment: _____
From (month/year) To(month/year)

Full Time **Part Time** **If part time, # hours per week** _____

How many hours of experience are you documenting?: _____

Hours Completed: _____

Signature of Supervisor: _____ **Date:** _____

Program description, detailing the prevention services provided by your agency (signed by your supervisor). Please attach additional pages if needed.

Signature of Supervisor: _____ **Date:** _____

Job description, detailing your work in one or more of the domains (signed by your supervisor). Please attach additional pages if needed.

Signature of Supervisor: _____ **Date:** _____



CPS course completion

Applicant's name: _____

Original certificates must be submitted with the application, as well as a set of photocopies and a self-addressed, stamped envelope. Once the review has been completed, the originals will be returned. If the SASE is not included, the originals will not be returned. You must include an official transcript with this information and each certificate must include the Course title, Domain approval #, total hours and date and be signed by the Approved Provider Agency.

All courses must be pre-approved and submitted in the following order.

Planning and Evaluation – Domain I

- Domain I - P101: Prevention Program Planning and Assessment (6 Hours)
- Domain I - P102: Prevention Activities and Methods (6 Hours)
- Domain I - P103: Program Design (6 Hours)
- Domain I - P104: Evidence Based Prevention Models (6 Hours)
- Domain I - P105: Prevention Program Evaluation (6 Hours)

Prevention Education and Service Delivery – Domain II

- Domain II - P201: Dynamics and Process of ATOD Dependency and Abuse (6 Hours)
- Domain II - P202: Impact of Substance Use Disorders on Families and Larger Systems (6 Hours)
- Domain II –P203: Prevention Issues with Special Populations (6 Hours)
- Domain II - P204: Prevention of Violent and Compulsive Behaviors (6 Hours)
- Domain II –P205: Presentation Skills (6 Hours)

Communication- Domain III

- Domain III- P301: Public Relation Skills New (3 Hours)
- Domain III- P302: Interpersonal Communication Skills New (3 Hours)

Community Organization – Domain IV

- Domain IV – P401: Community Assessment (6 Hours)
- Domain IV – P402: Coalition Building and Maintenance (6 Hours)
- Domain IV – P403: Coordinating Community Prevention Activities (6 Hours)

Public Policy and Environmental Change – Domain V

- Domain V – P501: Introduction to Methods and the Impact of Environmental Change (6 Hours)
- Domain V – P502: Assessment and Planning of Environmental Strategies (6 Hours)
- Domain V – P503: Implementation & Enforcement of Environmental Change (6 Hours)

Professional Growth and Responsibility – Domain VI

- Domain VI – P601: Professional Growth (3 Hours)
- Domain VI – P602: Ethics and Legal Issues for Prevention Specialist (6 Hours)
- Domain VI – P603: Cultural Competency (6 Hours)
- Domain VI – P604: Self Care for the Prevention Specialist (3 Hours)

120 hours total

Applicant Signature: _____ **Date** _____



120 hour Supervised Practical Training (Practicum)

Domains

- Education & Skill Development: 10 hours**

Supervisor signature: _____ date: _____

- Community Organization: 10 hours**

Supervisor signature: _____ date: _____

- Public Policy & Environmental Change: 10 hours**

Supervisor signature: _____ date: _____

- Professional Growth and Responsibility: 10 hours**

Supervisor signature: _____ date: _____

- Planning and Evaluation: 20 hours**

Supervisor signature: _____ date: _____

- Communication: 10 hours**

Supervisor signature: _____ date: _____

SUPERVISOR: Please verify that the remaining 50 hours were completed in any of the above areas.

Supervisor signature: _____ date: _____



AUTHORIZATION AND RELEASE FORM

I hereby authorize the Addiction Professionals Certification Board, Inc. to make any inquiry of any agency, facility, organization or individual for any and all additional information which might be necessary to fully and properly evaluate my application for the Certified Clinical Supervisor).

I hereby release and hold harmless the Addiction Professionals Certification Board, Inc., its Board of Directors, its Officers, its employees, servants, and agents from any and all manner of suits, actions, claims, and judgments which might arise from such efforts to further document the statements and claims I have made in this application or in the processing or consideration of same.

I further acknowledge, understand, and agree that any falsification or misrepresentation of information by myself or others regarding experience and/or qualifications will be sufficient reason for disapproval of my application or for withdrawal of the credential at a later date.

I understand that evaluations on me which are submitted by supervisors and/or colleagues are confidential. I hereby relinquish my right to review these evaluations.

I also affirm that I conform to the Ethical Standards as described in the requirements for credentialing (on following pages).

APPLICANT SIGNATURE _____

DATE _____ WITNESS _____

STATEMENT OF UNDERSTANDING

I hereby apply for certification to the Addiction Professionals Certification Board, Inc. I understand that approval of my application depends upon my successfully completing the assessment of competency as established by the Board, including submission of all required references and successful completion of a 300 hour practicum in an approved treatment facility. I also understand that for research and statistical purposes only, the data from this application may be used in a non-identifying manner.

I also understand this credential is designed to recognize individuals working with chemically dependent clients and is not restricted to primary alcohol/drug counselors.

APPLICANT SIGNATURE _____

DATE _____ WITNESS _____

I have read and agree to abide by the ETHICAL STANDARDS FOR CERTIFIED PROFESIONALS (CPs) standards on the following pages:

APPLICANT SIGNATURE _____

DATE _____ WITNESS _____

ETHICAL STANDARDS FOR CERTIFIED PROFESSIONALS (CPs)

The Addiction Professionals Certification Board, Inc. (APCB, Inc.) wishes to thank the National Association of Alcoholism and Drug Abuse Counselors (NAADAC) for the development of these Ethical Standards and for permission to use this amended version.

Specific Principles:

Principle 1: Non-Discrimination: The Certified Professional (CP) shall not discriminate against clients or professionals based on race, religion, age, gender, disability, national ancestry, sexual orientation, or economic condition.

- A. The Credentialed Professional shall avoid bringing personal or professional issues into the counseling relationship. Through an awareness of the impact of stereotyping and discrimination, the CP guards the individual rights and personal dignity of clients.
- B. The CP shall be 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.

Principle 2: Responsibility: The Certified Professional (CP) shall espouse objectivity and integrity, and maintain the highest standards in the services the member offers.

- A. The CP shall maintain respect for institutional policies and management functions of the agencies and institutions within which the services are being performed, but will take initiative toward improving such policies when it will better serve the interest of the client.
- B. The CP, as educator, has primary obligation to help others acquire knowledge and skills in dealing with the disease of alcoholism and drug abuse.
- C. The CP who supervises others accepts the obligation to facilitate further professional development of these individuals by providing accurate and current information, timely evaluations, and constructive consultation.
- D. The CP who is aware of unethical conduct or of unprofessional modes of practice shall report such inappropriate behavior to the appropriate authority.

Principle 3: Competency: The Certified Professional (CP) shall recognize that the profession is founded on national standards of competency which promote the best interests of society, of the client, of the member and of the professional as a whole. The CP shall recognize the need for ongoing education as a component of professional competency.

- A. The CP shall recognize boundaries and limitations of their competencies and not offer services or use techniques outside of these professional competencies.
- B. The CP shall recognize the effect of impairment on professional performance and shall be willing to seek appropriate treatment for oneself or for a colleague. The CP shall support peer assistance programs in this respect.

Principle 4: Legal and Moral Standards: The CP shall uphold the legal and accepted moral codes which pertain to professional conduct.

- A. The CP shall be fully cognizant of all federal and New Jersey laws governing the practice of alcoholism and drug abuse counseling.
- B. The CP shall not claim either directly or by implication, professional qualifications/affiliations that they do not possess.
- C. The CP shall ensure that products or services associated with or provided by the CP or means of teaching, demonstration, publications or other types of media meet the ethical standards of this code.

Principle 5: Public Statements: The CP shall honestly respect the limits of present knowledge in public statements concerning alcoholism and drug abuse.

- A. A. The CP, in making statements to clients, other professionals, and the general public shall state as fact only those matters which have been empirically validated as fact. All other opinions, speculations, and conjecture concerning the nature of alcoholism and drug abuse, its natural history, its treatment or any other matters which touch on the subject of alcoholism and drug abuse shall be represented as less than scientifically validated.
- B. The CP shall acknowledge and accurately report the substantiation and support for statements made concerning the nature of alcoholism and drug abuse, its natural history, and its treatment. Such acknowledgement should extend to the source of the information and reliability of the method by which it was derived.

Principle 6: Publication Credit: The Certified Professional (CP) shall assign the credit to all who have contributed to the published material and for the work upon which the publication is based.

- A. The CP shall recognize joint authorship and major contributions of a professional nature made by one or more persons to a common project. The author who has made the principal contribution to a publication must be identified as first author.
- B. The CP shall acknowledge in footnotes or in an introductory statement minor contributions of a professional nature, extensive clerical or similar assistance and other minor contributions.
- C. The CP shall in no way violate the copyright of anyone by reproducing material in any form whatsoever, except in those ways which are allowed under the copyright laws. This involves direct violation of copyright as well as the passive assent to the violation of copyright by others.

Principle 7: Client Welfare: The CP shall promote the production of the public health, safety, and welfare and the best interest of the client as a primary guide in determining the conduct of all CP's.

- A. The CP shall disclose their code of ethics, professional loyalties, and responsibilities to all clients.
- B. The CP shall terminate counseling or consulting relationship when it is reasonably clear that the client is not benefiting from the relationship.
- C. The CP shall hold the welfare of the client paramount when making any decisions or recommendations concerning referral, treatment procedures, or termination of treatment.
- D. The CP shall not use or encourage a client's participation in any demonstration, research or other non-treatment activities when such participation would have potential harmful consequences for the client or when the client is not fully informed.
- E. The CP shall take care to provide services in an environment which will ensure the privacy and safety of the client at all times and ensures the delivery of safe and private services.

Principle 8: Confidentiality: The CP working in the best interest of the client shall embrace, as a primary obligation, the duty of protecting client's rights under confidentiality and shall not disclose confidential information acquired in teaching, practice or investigation without appropriately executed consent.

- A. The CP shall provide the client his/her rights regarding confidentiality, in writing, as part of informing the client in any areas likely to affect the client's confidentiality. This includes the recording of the clinical interview, the use of material for insurance purposes, the use of material for training or observation by another party.
- B. The CP shall make appropriate provisions for the maintenance of confidentiality and the ultimate disposition of confidential records. The CP shall 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 and appropriate to the services being provided and be accessible only to appropriate personnel.
- C. The CP shall adhere to all federal and New Jersey laws regarding confidentiality and the Cap's responsibility to report clinical information in specific circumstances to the appropriate authorities.

APPLICANT'S RECOGNITION STATEMENT

The applicant identified above acknowledges that the applicant is seeking certification from the Addiction Professionals Certification Board, Inc. (hereinafter "The Board"). The applicant hereby recognizes and agrees as follows:

1. Applicant agrees to observe and abide by the Ethical Standards adopted by The Board as same may be amended from time to time. Applicant acknowledges that the present form of ethical standards attached hereto and that the applicant has read and understood same.
2. Applicant recognizes and agrees that any certification, or renewal thereof, granted by The Board to the applicant constitutes recognition by The Board that the applicant is qualified, based on the information before The Board, for the certification granted. Applicant recognizes and agrees that any certification, or renewal granted by The Board, does not constitute a property right or interest of the applicant. The applicant specifically recognizes and agrees that the certification or renewal is specific to suspension, revocation or other limitation or condition in the discretion of The Board. The applicant specifically recognizes the authority of The Board to suspend, revoke or otherwise impose limitations, restrictions and conditions on any certification granted.
3. Applicant agrees to cooperate in connection with any investigation conducted by The Board with respect to the applicant's certification, and continued qualification to hold same. The applicant further agrees that the applicant's failure to cooperate with any such investigation (a) shall in itself constitute an ethical violation for which discipline may be imposed and (b) may be considered by The Board as an admission of wrongdoing.