



Alcohol & Drug Abuse Certification Board of Georgia

P.O. BOX 250449

Atlanta, GA 30325

770.825.0481

Fax: 770.790.0018

ADACBGA.org

info@adacbga.org

Dear Applicant:

Enclosed is your informational and application packet for CADC T. You may duplicate forms as necessary. Please consult your informational packet for details on the requirements for documentation and have transcripts from colleges and universities sent directly to the board. You may duplicate this entire packet for distribution to colleagues or other prospective applicants. Please be sure you have the most current version of the application.

Note that supervisors' and colleagues' recommendations are to be sent directly to the board. Evaluations may be returned to the applicant *only if* they have been placed in a *sealed envelope with a signature across the back seal*. Please duplicate the respective forms and give them to the appropriate persons.

When you have completed your part of the packet, send it to the above address with your application fee of \$150. Acceptable payment methods are check/ money order made out to ADACBGA or online payment with a credit card under the "Contact Us" page of our website.

Certified Alcohol and Drug Abuse Trainee (CADC T) status is a statewide credential that has been developed by the Alcohol and Drug Abuse Certification Board of Georgia to establish credibility and accountability to those who work in the field of alcohol and drug abuse counseling who have not yet completed the experience required to earn their reciprocal certification (CADC II or CAADC). While not licensed or reciprocal, this status serves as an entry level to the profession of alcohol and drug counseling. The CADC T is held accountable to the professional field while gaining work experience, thereby completing the requirements necessary to achieve their reciprocal certification. The CADC T serves as a transitional certification, expiring and *non-renewable* after three years.

CADC T certification is renewable annually for a period of 3 years. You must submit an annual supervision report, documentation of a minimum twenty hours of education with three hours in professional ethics and one and a half hours in telemental health, while achieving the requirements of 100 hours of education per year so that at the when the candidate has the required experience hours, they will have accumulated a minimum of 300 hours of education.

IMPORTANT NOTICE ABOUT EDUCATION HOURS

First Year/Application: Candidate must have minimum of 100 hours

Second Year/ First Recertification: Candidate must have completed a cumulative minimum of 200 hours

Third Year/Second Recertification: Candidates must have completed a cumulative minimum of 300 hours

The candidate may submit more hours in a particular year, but note that a candidate still must do 20 hours of education for each recertification even if they have exceeded the total hours required. For example, if the candidate turns in 300 hours in year one, the candidate will still need to complete 20 hours of education to recertify. If the candidate submits 100 education hours in the first year, they must submit a minimum of 100 education hours to recertify in the second year.

When the CADC T has completed the required experience hours, the candidate may sit for the computer based written exam. Upon successful completion of the exam, the candidate will receive the appropriate level certification. Should you have any questions, please feel free to contact the office.

FEE SCHEDULE

APPLICATION FEE	\$150.00
RECERTIFICATION FEE	
CADC T (every year)	
Online Recertification	\$75.00
Mail in Recertification	\$100.00

CHECKLIST FOR APPLICATION

1. Send completed pages 3-7 to ADACBGA.
2. Include check or money order for \$150 payable to ADACBGA or pay online with a credit card. **Application fees are non-refundable.**
3. Attach certificates of attendance, inservice reports, and/or other verification of education hours to page 6, numbering the certificates and listing them on the page. A minimum of 100 hours required.
4. Arrange for official college/university transcripts if applicable to be sent to ADACBGA.
5. Have colleagues send forms on pages 8 & 9 to ADACBGA. Two are required.
6. Have supervisor(s) send clinical supervision forms for the 300 hour practicum on pages 10-14, supervisor's evaluation on pages 15 & 16 plus the supervisor(s) statement on page 17 to ADACBGA. 300 hours of Supervised Work and 40 hours of Face-to-Face Supervision is required.
7. **SEND MATERIALS REGULAR MAIL ONLY! Staff may not be available to sign, and your material may be returned. Regular mail is most reliable.**

EDUCATION HOURS

Education hours are defined as 50 continuous minutes spent in a formal classroom type of setting (college/university, workshop, seminar).

COLLEGE/UNIVERSITY EDUCATION: Semester Hours x 15 = Contact hours; Quarter Hours x 10 = Contact Hours

OTHER EDUCATION: CEU's x 10 = contact hours Actual hours spent in workshop or seminar = contact hours Inservices, etc. at the workplace will count if related to the core functions of addiction counseling

NOTE: 6 CONTACT HOURS OF ETHICS EDUCATION MUST BE DOCUMENTED!

Please list all applicable education on the education page. You may duplicate the page if you need more space. You must document at least 100 hours of classroom/workshop style education related to the 12 core functions of addiction counseling.

Transcripts: Documentation in the form of official college/university transcripts for all courses claimed must be sent directly from the college/university to:

Alcohol and Drug Abuse Certification Board of Georgia, Inc.
P.O BOX 250449
Atlanta, GA 30325



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CADC-T APPLICATION & BIOGRAPHICAL DATA

Please type or print legibly:

Name: _____

*A valid state or federally issued photo ID must be submitted with this application

Any other or previous name(s) used: _____

Address: _____

City State Zip County

Work Name and address: _____

City State Zip County

e-mail: _____ Gender: _____

To keep you better informed about ADACBGA, we automatically include you in our electronic mailing list. If you do not wish to receive news and updates you will be asked to opt out. If you would like to unsubscribe, please check here. Unsubscribe

Preferred Phone: (____)-____-____ Work (____)-____-____

*As a courtesy to certified counselors we will list your county of employment, work phone number and email in a searchable database on our website. Would you like this information listed for public viewing? Yes No

Date of Birth: _____ Social Security no. XXX-XX-_____

Ethnic Affiliation: _____ (For statistical purposes only)

Highest Education level completed: High School or GED Some College

Associate Bachelors Masters Doctorate

List any other boards by which you are certified or licensed:

Has certification or license been denied or revoked by any other board: No Yes

If yes, please explain on a separate sheet.

**ASSURANCE AND RELEASE
ETHICS STATEMENT**

(Please Initial Where Requested as Indication You Have Read and Understand Each Section)

_____(Initial) I hereby attest that all the information given herein is true and complete to the best of my knowledge and belief. I understand that falsification of any portion of this application will result in my being denied certification, or revocation of same, upon discovery

_____(Initial) I have read, understand, and agree to act in accordance with the code of ethics recognized by my profession and in compliance with any and all codes of professional conduct in effect in the State of Georgia.

_____(Initial) I acknowledge the right of ADACBGA to verify the information in this application or to seek further information from employers, schools or persons mentioned herein.

_____(Initial) I further understand that that it is my responsibility to maintain my certification by renewing prior to my expiration date. I understand that it is an ethical violation to provide services if my certification has expired.

_____(Initial) I agree to have my current valid certificate from ADACBGA on display or easily accessible if I am treating clients.

_____(Initial) I will hold ADACBGA, its Board members, officers, agents, and staff free from any civil liability for damages or complaints by reason of any action that is within the scope and arising out of the performance of their duties which they, or any of them, may take in connection with this application, the attendant examination, the grades with respect to any examination, and/or failure of the Board to bestow upon me certification as an Alcohol and Drug Abuse Counselor Trainee.

_____(Initial) I further understand that ADACBGA will post on our website and provide to IC&RC my contact information for their data base, along with my certification number, level, expiration date and original certification date.

Signature

Date

Printed name

*Remember to include your fee of \$150 or make an online payment with a credit card under the "Payment" page of our website.

Applicant Name: _____

**SUPERVISED DIRECT WORK EXPERIENCE
PAID OR VOLUNTEER**

List in order, with last location first. Listing must demonstrate 300 hours for those candidates with a bachelor or above degree in a human service area.

Agency: _____

Address: _____

City, state, zip: _____

Supervisor: _____

Dates and hours of service: _____

Agency: _____

Address: _____

City, state, zip: _____

Supervisor: _____

Dates and hours of service: _____

Agency: _____

Address: _____

City, state, zip: _____

Supervisor: _____

Dates and hours of service: _____

EVALUATIONS

Please list the names, addresses and phone numbers of the **supervisor(s)** to whom you have given evaluation forms. You must have an evaluation for all hours counted toward supervised work experience. If this is not possible due to external circumstances (e.g. death, supervisor moved and unavailable), please explain.

NAME_____

ADDRESS_____

PHONE_____

NAME_____

ADDRESS_____

PHONE_____

NAME_____

ADDRESS_____

PHONE_____

Please list the names of two individuals to whom you have given **colleague** evaluation forms. These should be people, other than supervisors, who know you professionally and can attest to your professional skills.

NAME_____

ADDRESS_____

PHONE_____

NAME_____

ADDRESS_____

PHONE_____

COLLEAGUE EVALUATION FORM

Applicant name_____

Name, title of evaluator_____

Address_____

Telephone_____

How long have you known applicant?_____

Relationship to applicant?_____

I HEREBY CERTIFY THAT THIS RATING IS, TO THE BEST OF MY KNOWLEDGE, TRUTHFUL, AND REFLECTS AS ACCURATELY AS POSSIBLE MY KNOWLEDGE OF THE APPLICANT.

Signature_____

Date_____

The Alcohol and Drug Abuse Certification Board of Georgia reserves the right to request further information from you concerning this applicant.

PLEASE RETURN THIS FORM DIRECTLY TO:

ALCOHOL AND DRUG ABUSE CERTIFICATION BOARD OF GEORGIA
P.O BOX 250449
Atlanta, GA 30325

Do not return this form to the applicant unless it has been placed in a sealed envelope with your signature across the back seal!

COLLEAGUE EVALUATION FORM

APPLICANT'S NAME _____

EVALUATOR'S NAME _____

Following are the skills and knowledge needed by Alcohol and Drug Abuse Counselors. Please evaluate the above named applicant based on the abilities you have seen him/her demonstrate. Use the following scale to evaluate the applicant:

NA = NOT APPLICABLE

1 = POOR

2 = FAIR

3 = AVERAGE

4 = ABOVE AVERAGE

5 = EXCELLENT

Acceptable scores are fair (2) or above.

No	Skills and Knowledge	Rating
1	Common sense in dealing with client	
2	Respect for client	
3	Care and concern for client	
4	Empathy with client	
5	Flexibility with client	
6	Spontaneity with client	
7	Capacity for confrontation with client	
8	Capacity for appropriate self-disclosure	
9	Concreteness	
10	Ability to communicate effectively with client and co-workers	
11	Ability to treat client information in accordance with state and federal regulations	
12	Knowledge of addictions field	
13	Capacity for acting in an ethical manner	
14	Ability to set limits with client	
15	Ability to facilitate appropriate change in client regarding chemical use	
16	Ability to apply knowledge of physical, behavioral, attitudinal, and effective manifestations of addictions to determine its existence and degree of progression	

GENERAL REMARKS: _____

ALCOHOL AND DRUG ABUSE CERTIFICATION
BOARD OF GEORGIA, INC.

MISSION:

The Alcohol and Drug Abuse Certification Board of Georgia, Inc., is an independent, non-governmental, non-profit body.

This Board was formed in 1992 to offer certification to Alcohol and Drug Abuse Counselors and to supervisors in alcohol and drug counseling and is based on the standards and methods offered by the International Certification and Reciprocity Consortium/Alcohol and Other Drug Abuse, a multi-state and nation body organized to promote uniform professional standards and quality for the substance abuse counseling profession and to give the profession greater visibility in the U.S. and abroad. As a result of membership in IC&RC/AODA, our certified counselors may relocate to other states, the military services and other countries, and transfer their certification with a minimum of effort and expense.

Our goal is to provide competency-based certification that will assure quality care for those affected by substance abuse. Certification is a voluntary process whereby professionals with a special interest in providing treatment to substance abusers and their families may receive recognition for their competency. The purpose is to establish professional standards which enable counselors, allied health professionals, health service providers, third party payors, employers, and the general public to recognize qualified professionals in this field. Certification offers evidence that standards of knowledge, skill, experience, and demonstration of competency have been met.

INFORMATION FOR EACH CANDIDATE

This manual describes and outlines the requirements for certification for professionals desiring certification as alcohol and drug abuse counselors from the Alcohol and Drug Abuse Certification Board of Georgia, Inc. It also describes and outlines the requirements for certification as a Certified Alcohol and Drug Counselor Trainee from the Alcohol and Drug Abuse Certification Board of Georgia, Inc. This credential is offered at the State level only. The CADC T was designed as an entry level certification for applicants who had not yet completed the experience hours necessary to earn their reciprocal certifications (CADC I AND IIs or CAADCs). The CADC T status acknowledges the competency of work experience, drug and alcohol abuse counseling education and supervised training, while encouraging the CADC T to continue progressing toward a reciprocal certification.

An Alcohol and Drug Counselor is a person who, by virtue of special knowledge, training and experience, is uniquely able to inform, motivate, guide and assist persons affected by problems related to the use, abuse and/or addiction to alcohol and other drugs. For the purpose of certification, a counselor is defined as a person who has primary responsibility for client care with clients having a primary diagnosis of alcohol and/or drug abuse or dependence, prepares and reviews treatment plans, and documents client progress. A CADC T is defined as a person who, under the supervision of a CADC II level counselor or higher, has primary responsibility for client care with clients having a primary diagnosis of alcohol and/or drug abuse or dependence, prepares and reviews treatment plans, and documents client progress.

The CADC T applicant must document a minimum of 270 hours of education specific to the 12 core functions of alcohol and drug counseling with a minimum of six (6) hours of professional ethics education and a 300 hour supervised practical experience in the 12 core functions, as well as a supervision contract to qualify.

The skills necessary to perform the following functions in a variety of treatment settings must be demonstrated to complete certification as an Alcohol and Drug Abuse Counselor.

These 12 Core Functions are:

1. **Screening:** The process by which a client is determined appropriate and eligible for admission to a particular program.
2. **Intake:** The administrative and initial assessment procedures for admission to a program.
3. **Orientation:** Describing to the client the general nature and goals of the program, rules governing client conduct and infractions that can lead to disciplinary action or discharge from the program, the hours during which various services are available and the patient schedule, treatment costs to be borne by the client, if any, and the client's rights.
4. **Assessment:** Those procedures by which a counselor/program identifies and evaluates an individual's strengths, weaknesses, problems and needs for the development of the treatment plan.
5. **Treatment Planning:** The process by which the counselor and the client identify and rank problems needing resolution, establish agreed upon immediate and long term goals, and decide on the treatment methods and resources to be used.
6. **Counseling:** The utilization of special skills to assist individuals, families or groups in achieving objectives through exploration of a problem and its ramifications, examination of attitudes and feelings, consideration of alternative solutions, and decision making.
7. **Case Management:** Activities which bring services, agencies, resources or people together within a planned framework of action toward the achievement of established goals. It may involve liaison activities and collateral contacts.
8. **Crisis Intervention:** Those services which respond to an alcohol and/or drug abuser's needs during acute emotional and/or physical distress.

9. Client Education: Provision of information to individuals and groups concerning alcohol and other drug abuse and the available services and resources.
10. Referral: Identifying needs of the client that cannot be met by the counselor or agency and assisting the client to utilize the support systems and community resources available.
11. Reports and Record Keeping: Charting the results of the assessment and treatment plan, writing reports, progress notes, discharge summaries and other client-related data.
12. Consultation: Relating with counselors and other professionals in regard to client treatment and services to assure comprehensive, quality care for the client

REQUIREMENTS FOR CERTIFICATION

PORTFOLIO REQUIREMENTS:

Applicants must live and/or work within the jurisdiction of the ADACBGA. at least 51% of the time, or live in a nearby jurisdiction where IC&RC certification is not available.

1. **Experience:** Defined as supervised, paid or voluntary work experience in which the applicant has direct contact and responsibility for the AODA client. A total of 300 hours work experience must be documented.
2. **Education:** Defined as formal classroom style education (workshops, conferences, seminars, institutes, in-services, and college/university work). One clock hour of education is equal to fifty (50) minutes of continuous instruction. For the purpose of certification, clock hours of education must be related to the knowledge and skill base associated with the counselor core functions. A minimum of six (6) hours of professional ethics education must be documented as a part of the educational hours required. A total of 270 hours of addiction-specific education must be documented by copies of transcripts, certificates of attendance, in-service reports, etc. **Such college/university credits must be from a college or university licensed or accredited by the local government in order to be eligible.** All CADC T candidates for certification must have a high school diploma or its equivalent.
3. **Clinical Supervision:** Clinical Supervision is, *“A social influence process that occurs over time, in which the supervisor participates with supervisee to ensure quality clinical care. Effective supervisors observe, mentor, coach, evaluate, inspire, and create an atmosphere that promote self-motivation, learning, and professional development. They build teams, create cohesion, resolve conflict, and shape agency culture, while attending to the ethical and diversity issues in all aspects of the process. Such supervision is key to both quality improvement and the successful implementation of consensus- and evidence-based practices”* (Center for Substance Abuse Treatment, 2008, p. 3). Clinical Supervision may occur as part of the candidate’s eligible work experience, if there is an appropriately credentialed clinical supervisor onsite to provide such services, or Clinical Supervision may be obtained from a clinical supervisor outside the agency in which the candidate works. A recommended minimum ratio is one (1) hour of supervision to ten (10) hours of practical experience. Examples of clinical supervision include observation, co-leading a skill area, solo experience, group supervision, and supervision of process. Clinical Supervision is, *“a disciplined, tutorial process wherein principles are transformed into practical skills, with four overlapping foci: administrative, evaluative, clinical, and supportive”* (Powell, 2004, p. 11). A total of 300 hours of clinical supervision must be documented for the CADC-I, and a total 200 hours of clinical supervision must be documented for the CADC-II or CAADC. Clinical supervision requirements are further defined to require that a minimum of 25% of clinical supervision hours be individual (one-on-one) supervision. Clinical Supervision must include a minimum of 10 hours in each of the twelve counselor core functions. Applicants must also receive a minimum of a total of 100 hours of face to face clinical supervision during each 2000 hours of experience (i.e., there must be at least 100 hours of face to face clinical supervision per year until the candidate is fully certified). **The preferred credential for a clinical supervisor is the ADACBGA’s Certified Clinical Supervisor (CCS) and/or the IC&RC International Certified Clinical Supervisor (ICCS).** Other acceptable credentials for clinical supervisors are:
 - Licensed Professional Counselor (LPC) *who also holds* the Certified Professional Counselor Supervisor (CPCS) through LPCA of Georgia *and/or* the Approved Clinical Supervisor (ACS) through the Center for Credentialing & Education (CCE) of the National Board for Certified Counselors (NBCC),

- Licensed Clinical Social Worker (LCSW) *who also holds* **board certification in Clinical Supervision** through the American Board of Examiners in Clinical Social Work (ABE),
- Licensed Marriage and Family Therapist (LMFT) *who also holds* the **Approved Supervisor** designation through the American Association for Marriage and Family Therapy (AAMFT),
- Certified Clinical Supervisor (CCS) through the Georgia Addiction Counselors Association (GACA), and/or
- National Clinical Supervision Endorsement (NCSE) through the National Association of Alcohol & Drug Abuse Counselors (NAADAC).

If the clinical supervisor does not hold the ADACBGA CCS and/or IC&RC ICCS but instead holds one of the other acceptable credentials for clinical supervisors listed above, the clinical supervisor must first be approved by the board ahead of the provision of clinical supervision to the candidate, provide documentation of a minimum of two (2) years practice and supervisory experience specific to substance use treatment and/or the treatment of co-occurring disorders, and must document a minimum of 5 hours of co-occurring- or substance use- specific continuing education hours each year. For the best examination results, we recommend that your clinical supervision come from an ADACBGA CCS (Certified Clinical Supervisor).

4. Evaluations: The applicant must provide three professional evaluations with an acceptable score on each one. One evaluation must be from the latest work experience supervisor; the other two must be from professionals who have had the opportunity to observe the applicant's skills and competencies. Evaluations must be returned directly to the board by the raters. Or they may be returned to the applicant *only if* they have been placed in a *sealed envelope with a signature across the back seal*.
5. Code of Ethics: The counselor must sign the code of ethics form provided in their application packet.

Once an applicant has been notified that their application is complete, they must sit for the written examination within three years, or their application will expire and be closed. A new application with all required paperwork must be resubmitted in order to become certified.

EXAMINATION

The tests administered by SMT are based on the Role Delineation Study for Alcohol and Drug Abuse Counselors, and Advanced Alcohol and Drug Abuse Counselors, conducted by the IC&RC. The tests have been proved valid, reliable, and legally defensible. In order to sit for the examination, the applicant must be eligible for the CADC I or II or CAADC examination, at which time a letter of instruction on how to register for the computer based examination will be sent to the applicant. The fee is \$180.

Applicants must successfully pass the exam within 2 years, and may only fail 2 times, or begin the application process over again, with new paperwork, supervision, education hours, and payment of fees.

Maintenance of CADC-T Status: Each year the CADC T must document completion of 20 contact hours of professional education and development with three (3) of these hours being in professional ethics and one and a half (1.5) hours in telemental health, and submit an annual supervision report (by a CADC II level or higher). **Supervision is defined as a minimum of one (1) hour face-to-face weekly supervision with a CADC II, CAADC, CCS or Licensed Professional. CADC T's are not to practice independently.**

CODE OF PROFESSIONAL ETHICS

Modeled after the National Association of Alcoholism and Drug Abuse Counselors (NAADAC) Ethical Standards.

Principle 1: Non-Discrimination

The substance abuse professional should not discriminate against clients or professionals based on race, religion, age, sex, handicaps, national ancestry, sexual orientation or economic condition.

Principle 2: Responsibility

The substance abuse professional should espouse objectivity and integrity and maintain the highest standards in the services the counselor offers.

- a. The substance abuse professional, as teacher, should recognize the counselor's primary obligation to help others acquire the knowledge and skill in dealing with the disease of chemical dependency.
- b. The substance abuse professional, as practitioner, should accept the professional challenge and responsibility deriving from the counselor's work.

Principle 3: Competence

The substance abuse professional should recognize that the profession is founded on national standards of competency which promote the best interests of society, of the client and of the profession as a whole. The counselor should recognize the need for ongoing education as a component of professional competency.

- a. The substance abuse professional should prevent the practice of substance abuse counseling by unqualified and unauthorized persons.
- b. The substance abuse professional who is aware of unethical conduct or of unprofessional modes of practice should report such violations to the appropriate certifying authority.
- c. The substance abuse professional should recognize boundaries and limitations of the counselor's competencies and not offer services or use techniques outside of these professional competencies.
- d. The substance abuse professional should recognize the effect of professional impairment on professional performance and should be willing to seek appropriate treatment for oneself or for a colleague. The counselor should support peer assistance programs in this respect.

Principle 4: Legal Standards and Moral Standards

The substance abuse professional should uphold the legal and accepted moral codes which pertain to professional conduct.

- a. The substance abuse professional should not claim either directly or by implication, professional qualifications/affiliations that the counselor does not possess.
- b. The substance abuse professional should not use the affiliation with the ADACBGA. for purposes that are not consistent with the stated purposes of the board.
- c. The substance abuse professional should not associate with or permit the counselor's name to be used in connection with any services or products in a way that is incorrect or misleading.
- d. The substance abuse professional associated with the development or promotion of books or other products offered for commercial sale should be responsible for ensuring that such books or products are presented in a professional and factual way.

Principle 5: Public Statements

The substance abuse professional should respect the limits of present knowledge in public statements concerning alcoholism and other forms of drug addiction.

- a. The substance abuse professional who represents the field of alcoholism counseling to clients, other professionals or to the general public should report fairly and accurately the appropriate information.
- b. The substance abuse professional should acknowledge and document materials and techniques used.
- c. The substance abuse professional who conducts training in alcoholism or drug abuse counseling skills or techniques should indicate to the audience the requisite training/qualifications required to properly perform these skills and techniques.

Principle 6: Publication Credit

Revised 7/2019

The substance abuse professional should assign credit to all who have contributed to the published material and for the work upon which the publication is based.

- a. The substance abuse professional should recognize joint authorship, major contributions of a professional character, made by several persons to a common project. The author who has made the principle contribution to a publication should be identified as first listed.
- b. The substance abuse professional should acknowledge in footnotes or an introductory statement minor contributions of a professional character, extensive clerical or similar assistance and other minor contributions.
- c. The substance abuse professional should acknowledge, through specific citations, unpublished, as well as published material, that has directly influenced the research or writing.
- d. The substance abuse professional who compiles and edits for publication the contributions of others should list oneself as editor, along with the names of those others who have contributed.

Principle 7: Client Welfare

The substance abuse professional should respect the integrity and protect the welfare of the person or group with whom the counselor is working.

- a. The substance abuse professional should define for self and others the nature and direction of loyalties and responsibilities and keep all parties concerned informed of these commitments.
- b. The substance abuse professional, in the presence of professional conflict should be concerned primarily with the welfare of the client.
- c. The substance abuse professional should terminate counseling or consulting relationship when it is reasonably clear to the counselor that the client is not benefiting from it.
- d. The substance abuse professional, in referral cases, should assume the responsibility for the client's welfare either by termination by mutual agreement and/or by the client becoming engaged with another professional. In situations when a client refuses treatment, referral or recommendations, the substance abuse professional should carefully consider the welfare of the client by weighing the benefits of continued treatment or termination and should act in the best interests of the client.
- e. The substance abuse professional who asks a client to reveal personal information from other professionals or allows information to be divulged should inform the client of the nature of such transactions. The information released or obtained with informed consent should be used for express purposes only.
- f. The substance abuse professional should not use a client in a demonstration role in a workshop setting where such participation would potentially harm the client.
- g. The substance abuse professional should ensure the presence of an appropriate setting for clinical work to protect the client from harm and the counselor and the profession from censure.
- h. The substance abuse professional should collaborate with other health care professionals in providing a supportive environment for the client who is receiving prescribed medications.

Principle 8: Confidentiality

The substance abuse professional should embrace, as a primary obligation, the duty of protecting the privacy of clients and should not disclose confidential information acquired, in teaching, practice or investigation.

- a. The substance abuse professional should inform the client and obtain agreement in areas likely to affect the client's participation including the recording of an interview, the use of interview material for training purposes and observation of an interview by another person.
- b. The substance abuse professional should make provisions for the maintenance of confidentiality and the ultimate disposition of confidential records.
- c. The substance abuse professional should reveal information received in confidence only when there is clear and imminent danger to the client or to other persons and then only to appropriate professional workers or public authorities.
- d. The substance abuse professional should discuss the information obtained in clinical or consulting relationships only in appropriate settings and only for professional purposes clearly concerned with the case. Written and oral reports should present only data germane to the purpose of the evaluation and every effort should be made to avoid undue invasion of privacy.
- e. The substance abuse professional should use clinical and other material in classroom teaching and writing only when the identity of the persons involved is adequately disguised.

Principle 9: Client Relationships

- The substance abuse professional should inform the prospective client of the important aspects of the potential relationship.
- a. The substance abuse professional should inform the client and obtain the client's agreement in areas likely to affect the client's participation including the recording of an interview, the use of interview material for training purposes and/or observation of an interview by another person.
 - b. The substance abuse professional should inform the designated guardian or responsible person of the circumstances which may influence the relationship, when the client is a minor or incompetent.
 - c. The substance abuse professional should not enter into a professional relationship with members of one's own family, intimate friends or close associates or others whose welfare might be jeopardized by such a dual relationship.
 - d. The substance abuse professional should not engage in any type of sexual activity with a client.

Principle 10: Interprofessional Relationships

The substance abuse professional should treat colleagues with respect, courtesy and fairness and should afford the same professional courtesy to other professionals.

- a. The substance abuse professional should not offer professional services to a client in counseling with another professional except with the knowledge of the other professional or after the termination of the client's relationship with the other professional.
- b. The substance abuse professional should cooperate with duly constituted professional ethics committees and promptly supply necessary information unless constrained by the demands of confidentiality.

Principle 11: Remuneration

The substance abuse professional should establish financial arrangements in professional practice and in accord with the professional standards that safeguard the best interests of the client, of the counselor and of the profession.

- a. The substance abuse professional should consider carefully the ability of the client to meet the financial cost in establishing rates for professional services.
- b. The substance abuse professional should not send or receive any commission or rebate or any other form of remuneration for referral of clients for professional services. The counselor should not engage in fee splitting.
- c. The substance abuse professional in clinical or counseling practice should not use one's relationship with clients to promote personal gain or the profit of an agency or commercial enterprise of any kind.
- d. The substance abuse professional should not accept a private fee or any other gift or gratuity for professional work with a person who is entitled to such services through an institution or agency. The policy of a particular agency may make explicit provisions for private work with its clients by members of its staff and in such instances the client must be fully apprised of all policies affecting the client.

Principle 12: Societal Obligations

The substance abuse professional should advocate changes in public policy and legislation to afford opportunity and choice for all persons whose lives are impaired by the disease of alcoholism or other forms of drug addiction. The counselor should inform the public through active civic and professional participation in community affairs of the effects of alcoholism and drug addiction and should act to guarantee that all persons, especially the needy and disadvantaged, have access to the necessary resources and services. The substance abuse professional should adopt a personal and professional stance which promotes the well-being of all human beings.



Alcohol & Drug Abuse
Certification Board of Georgia

P.O. BOX 250449
Atlanta, GA 30325

770.825.0481 Fax: 770.790.0018
ADACBGA.org info@adacbga.org

CADC-T CLINICAL SUPERVISION

APPLICANT'S NAME _____

SUPERVISOR'S NAME _____

AGENCY _____

PROFESSIONAL LICENSES AND/OR CERTIFICATES YOU HOLD _____

***Supervisors must include a photocopy of a state or federal photo ID and a copy of the appropriate certification and/or licensure.**

Purpose: The Clinical Supervised Experience is a crucial experiential learning component to assist in the development of qualified counselors. This form is to document that the candidate has received clinical supervision directly relating to the 12 Core Functions. Methods of clinical supervision that will be accepted are individual and/or group activities designed to provide direct supervision of counselor activities, review, and/or processing counseling activities. These activities are monitored and documented by the clinical supervisor, who provides timely feedback to assist the counselor in this learning process. There is no expiration on your clinical supervision, however, to pass the IC&RC examination you will need to be engaged in currently accepted practices.

Supervisors:

- Supervisors should have a good clinical background in substance abuse, chemical dependencies and co-occurring disorders.
- **The preferred credential for a clinical supervisor is the ADACBGA's Certified Clinical Supervisor (CCS) and/or the IC&RC International Certified Clinical Supervisor (ICCS).** Other acceptable credentials for clinical supervisors are:
 - Licensed Professional Counselor (LPC) *who also holds* the Certified Professional Counselor Supervisor (CPCS) through LPCA of Georgia *and/or* the Approved Clinical Supervisor (ACS) through the Center for Credentialing & Education (CCE) of the National Board for Certified Counselors (NBCC),
 - Licensed Clinical Social Worker (LCSW) *who also holds board certification in Clinical Supervision* through the American Board of Examiners in Clinical Social Work (ABE),
 - Licensed Marriage and Family Therapist (LMFT) *who also holds* the **Approved Supervisor** designation through the American Association for Marriage and Family Therapy (AAMFT),
 - Certified Clinical Supervisor (CCS) through the Georgia Addiction Counselors Association (GACA), and/or
 - National Clinical Supervision Endorsement (NCSE) through the National Association of Alcohol & Drug Abuse Counselors (NAADAC).

Clinically Supervised Experience Requirements:

- The CADC-T Candidate must complete **300** hours of face-to-face clinical supervision within 3 years.
- The CADC-T must complete a minimum of **40** hours of face-to-face clinical supervision for their initial application.
- **Clinical supervision can be done individually, as part of a supervision group, clinical review meetings and via video conferencing if necessary. All Clinical Supervision should be supported by well-maintained documentation by the Clinical Supervisor. Clinical Supervision is not done via email, text or phone calls.**
- Candidates must demonstrate a minimum of **10** hours clinical supervision in each of the **12** core functions.
- Candidates must receive a minimum of 100 Hours face-to-face clinical supervision per 2000 experience hours required for their certification level.

- The Addiction Counselor Trainee may not have more than 3 years of cumulative experience practicing under supervision for the purpose of addiction certification, per GA Rule 43-10A, and;
- Persons who are training to be addiction counselors but only when such persons are: employed by an agency or facility that is licensed to provide addiction counseling; supervised and directed by a supervisor who meets the qualifications established by the certifying body; actively seeking certification, i.e. receiving supervision & direction, receiving required educational experience, completion of required work experience. (Georgia Rule 43-10A)

1. SCREENING: The process by which the client is determined appropriate and eligible for admission to a particular program.

- Evaluate psychological, social, and physiological signs and symptoms of alcohol and other drug use and abuse.
- Determine the client's appropriateness for admission or referral.
- Determine the client's eligibility for admission or referral.
- Identify any coexisting conditions (medical, psychiatric, physical, etc.) that indicate need for additional professional assessment and/or services.
- Adhere to applicable laws, regulations and agency policies governing alcohol and other drug abuse services.

Hours spent with you in supervision of this task: _____

Supervisor's Signature/Date

2. INTAKE: The administrative and initial assessment procedures for admission to a program.

- Complete required documents for admission to the program.
- Complete required documents for program eligibility and appropriateness.
- Obtain appropriately signed consents when soliciting from or providing information to outside sources to protect client confidentiality and rights.

Hours spent with you in supervision of this task: _____

Supervisor's Signature/Date

3. ORIENTATION: Describing to the client the following: general nature and goals of the program; rules governing client conduct and infractions that can lead to disciplinary action or discharge from the program; in a nonresidential program, the hours during which services are available; treatment costs to be borne by the client, if any; and client rights.

- Provide an overview to the client by describing program goals and objectives for client care.
- Provide an overview to the client by describing program rules, and client obligations and rights.
- Provide an overview to the client of program operations.

Hours spent with you in supervision of this task: _____

Supervisor's Signature/Date

4. ASSESSMENT: The procedures by which a counselor/program identifies and evaluates an individual's strengths, weaknesses, problems and needs for the development of a treatment plan.

- Gather relevant history from client including but not limited to alcohol and other drug abuse using appropriate interview techniques.
- Identify methods and procedures for obtaining corroborative information from significant secondary sources regarding clients' alcohol and other drug abuse and psycho-social history.
- Identify appropriate assessment tools.
- Explain to the client the rationale for the use of assessment techniques in order to facilitate understanding.
- Develop a diagnostic evaluation of the client's substance abuse and any coexisting conditions based on the results of all assessments in order to provide an integrated approach to treatment planning based on the client's strengths, weaknesses, and identified problems and needs.

Hours spent with you in supervision of this task: _____

Supervisor's Signature/Date

5. TREATMENT PLANNING: Process by which the counselor and the client identify and rank problems needing resolution; establish agreed upon immediate and long-term goals; and decide upon a treatment process and the resources to be utilized.

- Explain assessment results to client in an understandable manner.
- Identify and rank problems based on individual client needs in the written treatment plan.
- Formulate agreed upon immediate and long-term goals using behavioral terms in the written treatment plan.
- Identify the treatment methods and resources to be utilized as appropriate for the individual client.

Hours spent with you in supervision of this task: _____

Supervisor's Signature/Date

6. COUNSELING: (Individual, Group, and Significant Others): The utilization of special skills to assist individuals, families or groups in achieving objectives through exploration of a problem and its ramifications; examination of attitudes and feelings; consideration of alternative solutions; and decision-making.

- Select the counseling theory(ies) that apply(ies).
- Apply techniques to assist the client, group, and/or family in exploring problems and ramifications.
- Apply techniques to assist the client, group, and/or family in examining the client's behavior, attitudes, and/or feelings if appropriate in the treatment setting.
- Individualize counseling in accordance with cultural, gender and lifestyle differences.
- Interact with the client in an appropriate therapeutic manner.
- Elicit solutions and decisions from the client.
- Implement the treatment plan.

Hours spent with you in supervision of this task: _____

Supervisor's Signature/Date

7. CASE MANAGEMENT: Activities which bring services, agencies, resources, or people together within a planned framework of action toward the achievement of established goals. It may involve liaison activities and collateral contacts.

- Coordinate services for client care.
- Explain the rationale of case management activities to the client.

Hours spent with you in supervision of this task: _____

Supervisor's Signature/Date

8. CRISIS INTERVENTION: Those services which respond to an alcohol and/or other drug abuser's needs during acute emotional and/or physical distress.

- Recognize the elements of the client crisis.
- Implement an immediate course of action appropriate to the crisis.
- Enhance overall treatment by utilizing crisis events.

Hours spent with you in supervision of this task: _____

Supervisor's Signature/Date

9. CLIENT EDUCATION: Provision of information to individuals and groups concerning alcohol and other abuse and the available services and resources.

- Present relevant alcohol and other drug use/abuse information to the client through formal and/or informal processes.
- Present information about available alcohol and other drug services and resources.

Hours spent with you in supervision of this task: _____

Supervisor's Signature/Date

10. REFERRAL: Identifying the needs of a client that cannot be met by the counselor or agency and assisting the client to utilize the support systems and community resources available.

- Identify need(s) and/or problem(s) that the agency and/or counselor cannot meet.
- Explain the rationale for the referral to the client.
- Match client needs and/or problems to appropriate resources.
- Adhere to applicable laws, regulations and agency policies governing procedures related to the protection of the client's confidentiality.
- Assist the client in utilizing the support systems and community resources available.

Hours spent with you in supervision of this task: _____

Supervisor's Signature/Date

11. REPORT AND RECORD KEEPING: Charting the results of the assessment and treatment plan, writing reports, progress notes, discharge summaries and other client-related data.

- Prepare reports and relevant records integrating available information to facilitate the continuum of care.
- Chart pertinent ongoing information pertaining to the client.
- Utilize relevant information from written documents for client care.

Hours spent with you in supervision of this task: _____

Supervisor's Signature/Date

12. CONSULTATION WITH OTHER PROFESSIONALS IN REGARD TO CLIENT TREATMENT/SERVICES: Relating with in-house staff or outside professionals to assure comprehensive, quality care for the client.

- Recognize issues that are beyond the counselor's base of knowledge and/or skill.
- Consult with appropriate resources to ensure the provision of effective treatment services.
- Adhere to applicable laws, regulations and agency policies governing the disclosure of client-identifying data.
- Explain the rationale for the consultation to the client, if appropriate.

Hours candidate spent performing this task: _____

Hours spent with you in supervision of this task: _____

Supervisor's Signature/Date

TOTAL Hours spent with you in supervision of these tasks: _____

I hereby attest that all the information given herein is true and complete to the best of my knowledge and belief. I understand that falsification of any portion of this application will result in my being denied certification, or revocation of same, upon discovery. I have read, understand, and agree to act in accordance with the code of ethics recognized by my profession and in compliance with any and all codes of professional conduct in effect in the State of Georgia. I acknowledge the right of ADACBGA to verify the information in this application or to seek further information from employers, schools or persons mentioned herein.

Supervisor's Signature/Date

Documentation of Supervision of Addiction Counselor Trainees*

According to the State Department of Behavioral Health and Developmental Disabilities, (DBHDD), Addiction Counselor Trainees may provide certain services under Practitioner Level 5. See Service Guideline for information regarding practitioners authorized to provide specific services. The definition of Addiction Counselor Trainee is "an individual who is actively seeking certification as a CADC, CCAADC, CAC II or MAC and is receiving appropriate Clinical Supervision". The Addiction Counselor Trainee Supervision Form (Appendix 2) and supporting documentation indicating compliance with the below requirements must be provided for all services provided by an Addiction Counselor Trainee on or after August 1, 2009. The following outlines the definition of supervision and requirements of clinical supervision:

- Supervision means the direct clinical review, for the purpose of training or teaching, by a supervisor of a specialty practitioner's interaction with a client. It may include, without being limited to, the review of case presentations, audio tapes, video tapes, and direct observation in order to promote the development of the practitioner's clinical skills.
- Monthly Staff Supervision form must be present and current in the personnel record. The Supervision Form for the previous month must be in the employee file by the 10th day of the following month.

PLEASE RETURN DIRECTLY TO
Alcohol and Drug Abuse Certification Board of Georgia, Inc.
P.O BOX 250449
Atlanta, GA 30325

Do not return this form to the applicant unless it has been placed in a sealed envelope with your signature across the back seal!

SUPERVISOR EVALUATION

APPLICANT _____

SUPERVISOR _____

PLEASE USE THE FOLLOWING RATING SCALE TO EVALUATE THE APPLICANT'S SKILLS IN THE AREAS REQUESTED:

NA = NOT APPLICABLE

1 = POOR

2 = FAIR

3 = AVERAGE

4 = ABOVE AVERAGE

5 = EXCELLENT

Acceptable scores are fair (2) or above.

The items below represent skills needed by addictions counselors in the core functions. Please evaluate the applicant's abilities in each area.

Score	Function
	Screening - the process by which a client is determined appropriate and eligible for admission to a particular program.
	Intake - The administrative and initial assessment procedures for admission to a program
	Orientation - describing to the client the general nature and goals of the program, rules governing client conduct and infractions that can lead to disciplinary action or discharge from the program, the hours and times services are available, treatment costs to be borne by the client if any, and client rights.
	Assessment - those procedures by which a counselor identifies and evaluates an individual's strengths, weaknesses, problems, and needs for the development of the treatment plan.
	Treatment Planning - the process by which the counselor and the client identify and rank problems needing resolution, establish agreed upon immediate and long term goals, decide on a treatment process and the resources to be utilized.
	Individual Counseling - a one-to-one counselor-client process for the purpose of assessing a client's problems and facilitating appropriate changes.
	Group Counseling - A process involving several clients for the purpose of jointly exploring the client's problems and facilitating appropriate changes.
	Family Counseling - A process of exploring the dynamics of the family system and facilitating appropriate changes.
	Case Management – Activities which bring services, agencies, resources or people together within a planned framework of action toward the achievement of established goals. It may involve liaison activities and collateral contacts.
	Crisis Intervention - those services which respond to an alcohol and/or other drug abuser's needs during acute emotional and/or physical distress.

Applicant Name: _____

	Client Education – Provision of information to individuals and groups concerning alcohol and other drug abuse and the available services and resources.
	Referral - Identifying the needs of the client that cannot be met by the counselor or agency and assisting the client to utilize the support systems and community resources available.
	Reports and Record Keeping - charting the results of the assessment and treatment plan, writing reports, progress notes, discharge summaries and other client-related data.
	Consultation - relating with counselors and other professionals in regard to client treatment and services to assure comprehensive, quality care for the client.

Using the same scale, please evaluate the applicant on the following areas of interpersonal relationships with clients, based on your observations:

Score	Relationship Areas
	Respect for the client
	Care and concern for the client
	Genuineness with the client
	Empathy with the client
	Flexibility with the client
	Judgment with the client
	Spontaneity with the client
	Capacity for confrontation with the client
	Capacity for appropriate self-disclosure
	Sense of immediacy
	Concreteness
	Ability to set appropriate boundaries

The Alcohol and Drug Abuse Certification Board of Georgia reserves the right to request further information from you concerning this applicant.

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ADACBGA
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Atlanta, GA 30325

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SUPERVISOR'S STATEMENT

Applicant's name _____

Supervisor's name _____

Program name _____

Address _____

Phone _____ Fax _____

Professional licenses and/or certificates you hold _____

How long have you supervised this applicant?

From (m/y) _____ to (m/y) _____

Size of applicant's caseload in:

Individual counseling _____ Group counseling _____ Family counseling _____

Average number of hours per week the applicant worked in:

Direct services _____ Indirect services _____

Please describe the indirect services:

Please add any comments on an additional sheet of paper.

I HEREBY CERTIFY THAT I HAVE OBSERVED AND HAVE FIRSTHAND KNOWLEDGE OF THIS APPLICANT'S WORK AND THAT THE ABOVE INFORMATION IS, TO THE BEST OF MY KNOWLEDGE, TRUE

Signature _____ date _____

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P.O BOX 250449
Atlanta, GA 30325

Do not return this form to the applicant unless it has been placed in a sealed envelope with your signature across the back seal!

These 12 Core Functions are:

1. **Screening**: The process by which a client is determined appropriate and eligible for admission to a particular program.
2. **Intake**: The administrative and initial assessment procedures for admission to a program.
3. **Orientation**: Describing to the client the general nature and goals of the program, rules governing client conduct and infractions that can lead to disciplinary action or discharge from the program, the hours during which various services are available and the patient schedule, treatment costs to be borne by the client, if any, and the client's rights.
4. **Assessment**: Those procedures by which a counselor/program identifies and evaluates an individual's strengths, weaknesses, problems and needs for the development of the treatment plan.
5. **Treatment Planning**: The process by which the counselor and the client identify and rank problems needing resolution, establish agreed upon immediate and long term goals, and decide on the treatment methods and resources to be used.
6. **Counseling**: The utilization of special skills to assist individuals, families or groups in achieving objectives through exploration of a problem and its ramifications, examination of attitudes and feelings, consideration of alternative solutions, and decision making.
7. **Case Management**: Activities which bring services, agencies, resources or people together within a planned framework of action toward the achievement of established goals. It may involve liaison activities and collateral contacts.
8. **Crisis Intervention**: Those services which respond to an alcohol and/or drug abuser's needs during acute emotional and/or physical distress.
9. **Client Education**: Provision of information to individuals and groups concerning alcohol and other drug abuse and the available services and resources.
10. **Referral**: Identifying needs of the client that cannot be met by the counselor or agency and assisting the client to utilize the support systems and community resources available.
11. **Reports and Record Keeping**: Charting the results of the assessment and treatment plan, writing reports, progress notes, discharge summaries and other client-related data.
12. **Consultation**: Relating with counselors and other professionals in regard to client treatment and services to assure comprehensive, quality care for the client.