APPLICATION REQUIREMENTS and COMPONENTS
Certified Clinical Supervisor (CCS)

Applicants must live and/or work in Georgia at least 51% of the time or live in a nearby jurisdiction where the IC&RC Clinical Supervisor (CS) credential is not available at the time of initial certification.

All CCS applicants must have a minimum of a bachelor’s degree in a human service field (psychology, social work, addiction counseling, etc.) or a graduate degree in any field. Applicants for the CCS must hold a valid and active CADCII, CACII, CAADC, and/or graduate level license in a behavioral health field with a specialty substance abuse credential (i.e. LCSW, LPC, LMFT, Licensed Psychologist, Psychiatrist, etc. with MAC via NBCC or NAADAC, etc.).

1. **Direct Work Experience:** Defined as supervised paid or voluntary work experience in which the applicant has direct contact and responsibility for a caseload of individuals enrolled in treatment for a substance use disorder or co-occurring mental and substance use disorders and/or in which the applicant has supervisory responsibilities related to the six (6) performance domains of a clinical supervisor while under the supervision of a CCS or other ADACBGA Approved Clinical Supervisor. The CCS applicant must demonstrate 10,000 hours (5 years full-time) experience as an addiction counselor post-certification (CADCII or CAADC) or post-licensure (graduate level behavioral health field) as well as 4,000 hours (2 years full-time) supervision experience in a clinical director and/or supervisory role under the supervision of a CCS or other ADACBGA-Approved Clinical Supervisor. The 4000 hours may be included in the 10,000 hours and must include 200 hours of face-to-face clinical supervision. **Direct Work Experience hours may only be obtained through agencies licensed and/or state-sponsored to provide treatment for substance use and/or co-occurring mental and substance use disorders that employ an appropriate CCS Candidate Job Supervisor as defined below.**

2. **CCS Candidate Job Supervisor:** Defined as an individual who is employed in a supervisory/managerial role by an agency licensed and/or state-sponsored to provide treatment for substance use and/or co-occurring mental and substance use disorders who holds an active license and/or certification that grants an independent scope of practice that includes substance use disorder counseling (i.e., CADCII, CACII, CAADC, LMSW, LCSW, LPC, LMFT, Licensed PsyD, Psychiatrist, etc.) or in a private practice when the Job Supervisor holds the ADACBGA CCS or is otherwise an Approved Clinical Supervisor. The CCS Candidate Job Supervisor may or may not also serve as the candidate’s Clinical Supervisor, depending on whether the CCS Candidate Job Supervisor also holds a CCS or is otherwise an Approved Supervisor with the ADACBGA. Individuals who obtain Clinical Supervision outside the agencies where they obtain Direct Work Experience hours must still have appropriate CCS Candidate Job Supervisors at the agency(ies) in which they work (or have worked) for Direct Work Experience hours to count toward certification. Direct Work Experience hours may only be obtained and counted towards certification when obtained in licensed and/or state-sponsored agencies with an appropriate Job Supervisor or in a private practice where the Job Supervisor has an ADACBGA CCS or otherwise is an Approved Clinical Supervisor, as defined herein. **A corresponding Job Supervisor’s Statement form must be submitted for all agencies and hours listed as part of a candidate’s Direct Work Experience.** Only direct work experience in which the applicant functioned as a counselor/therapist (10,000 hours) and/or clinical director or supervisor (4,000 hours within the total 10,000 hours) should be documented as opposed to an aide or attendant whose function is one mainly of monitoring activity, attendance, etc.

3. **Education:** Defined as formal classroom style education (workshops, seminars, online courses, institutes, in-services, and college/university work). One clock hour of education is equal to not less than 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 five (5) performance domains of clinical supervision and must be awarded by an accredited college/university or indicate a CE approval number from an established and approved entity on the Certificate of Completion (ADACBGA, NAADAC, GACA, GSCSW, NASW-GA, LPCA, NBCC, ASWB, etc.). Each CCS Candidate must complete at least six (6) hours of didactic training in each of the five (5) performance domains of clinical supervision, with at least six (6) hours in Professional and Ethical Standards specific to the Clinical Supervision of addiction counselors. **Not less than 50% of all didactic training hours for initial CCS certification must be from live, synchronous, and interactive educational training events. A total of 30 hours of education related to the five (5) clinical supervision performance domains must be documented by copies of transcripts or certificates of attendance. Official transcripts must be sent directly to the board from the college/university. College/University Courses must be in subjects that have specific relevance to the clinical supervision of addiction counselors.** One (1) semester hour equals fifteen (15) clock hours. One (1) quarter hour equals ten (10) clock hours. One (1) trimester hour equals five (5) clock hours. **College/University course credits must be from a regionally...**
4. **Clinical Supervision:** 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 Clinical Supervision to ten (10) hours of Direct Work 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 200 hours of Clinical Supervision must be documented for the CCS applicant. **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 for the CCS applicant must include a minimum of 20 hours in each of the five (5) performance domains of clinical supervision. 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, which will require case-by-case approval by the ADACBGA ahead of the provision of Clinical Supervision, 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) or otherwise qualifies to offer clinical supervision under the rules of the Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists,
- 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) including proof of having taken and passed the NCC AP’s written clinical supervisor examination (“Grandfathered” individuals who did not take an exam shall not be approved for the provision of Clinical Supervision), 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).**

5. **Code of Ethics:** The applicant must initial and sign the “Assurance and Release Ethics Statement” form provided in the application packet to indicate he or she has read and understands an ADACBGA-certified clinical supervisor’s obligations to uphold the ADACBGA Code of Ethics and other professional norms of the field.

6. **Letters of Reference:** The applicant must have sent – directly to the Board from the referring individual – three (3) letters of reference from the following: 1) A professional who can attest to supervisory competence, 2) An individual who has been supervised, and 3) The Job Supervisor or the supervisor/manager of the Job Supervisor of the candidate.

7. **Scheduling the CCS Exam:** Once a candidate’s application is deemed complete, the ADACBGA Board Administrator will generate an email to the candidate that includes a link to schedule their exam. **They must schedule their examination within one year,** or their application will expire and be closed, and all fees paid will be forfeited. Forfeited fees are non-refundable and are not applicable towards future applications or exam fees. **A new application with all required paperwork and fees must be submitted if a candidate does not schedule their examination within one year of their application being deemed complete.**
Dear CCS Applicant:

Initial Certified Clinical Supervisor (CCS) Application reviews may take up to **30 days**.

Please use the following **APPLICATION CHECKLIST** to ensure that your application is complete:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td><strong>1.</strong></td>
<td>Completed <strong>Application and Biographical Data</strong> sheet.</td>
</tr>
<tr>
<td><strong>2.</strong></td>
<td>Completed <strong>Direct Work Experience</strong> form that lists all Agencies/Work Experience you are counting toward CCS certification (please make additional copies of this form, as necessary).</td>
</tr>
<tr>
<td><strong>3.</strong></td>
<td>Completed <strong>Job Supervisor’s Statement</strong> form(s) from all Agencies/Work Experience you listed on the Direct Work Experience form.</td>
</tr>
<tr>
<td><strong>4.</strong></td>
<td>Completed <strong>Education</strong> form(s). Number each certificate and list them in order on the cover sheet. If you are utilizing education hours from a transcript that has been sent directly to the board, you may state “see transcript” on the Education form.</td>
</tr>
<tr>
<td><strong>5.</strong></td>
<td>Attached copies of certificates of attendance, in-service verifications, etc., numbered and in the order listed. Originals will not be returned.</td>
</tr>
<tr>
<td><strong>6.</strong></td>
<td>If applicable, requested <strong>official transcript(s)</strong> from your highest level of education and for any education you are listing on the Education form be sent directly to the board.</td>
</tr>
<tr>
<td><strong>7.</strong></td>
<td>Provided <strong>Clinical Supervision</strong> form(s) to your current and/or past clinical supervisors to be completed by the supervisor and submitted to the board.</td>
</tr>
<tr>
<td><strong>8.</strong></td>
<td>Completed <strong>Assurance and Release Ethics Statement</strong> form.</td>
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<tr>
<td><strong>9.</strong></td>
<td>Provided <strong>Certified Clinical Supervisor (CCS) Professional Reference</strong> forms to the three (3) individuals who will be providing letters of reference.</td>
</tr>
<tr>
<td><strong>10.</strong></td>
<td>Included <strong>Application Fee</strong> of $150 by check or money order with completed application packet <strong>OR</strong> paid online with a credit card at <a href="https://www.adacbga.org/payments">https://www.adacbga.org/payments</a>.</td>
</tr>
<tr>
<td><strong>11.</strong></td>
<td>Mailed the completed application packet to the ADACBGA office at 777 Cleveland Ave SW, Suite 605, Atlanta, GA, 30315 via <strong>REGULAR MAIL</strong>. Allow at least 30 days for application processing.</td>
</tr>
</tbody>
</table>
Once your application is reviewed you will be notified via mail and/or email if your application is missing anything or needs clarification to be deemed complete. **THIS REVIEW MAY TAKE UP TO 30 DAYS.** Upon your application being deemed complete, you will be notified of eligibility to test and how to schedule the exam. You must pay the Examination Fee once your Application is deemed complete before you will be able to schedule an exam date and time. You must pass the IC&RC Clinical Supervisor (CS) Exam (typically administered via computer at a testing center) to be eligible for CCS certification issuance.

Your CCS credential is valid for two years from the date of issue. In order to maintain your certification and recertify, you must document a total of **40 hours of continuing education** in the two-year period, including at least **12 hours related to the five (5) performance domains of clinical supervision**. Of the 12 clinical supervision hours, **3 hours must be in professional ethics specific to the supervision of addiction counselors.** You must also submit a recertification fee of $150. CCS professionals must also maintain their CADCII, CAADC, and/or Graduate Level licensure as a behavioral health professional (LCSW, LPC, LMFT, Licensed Psychologist, etc.) with a specialty substance abuse credential (ie. MAC via NBCC or NAADAC) as a condition of ongoing CCS certification. *A lapse, suspension, or revocation of a CCS professional’s CADCII, CAADC, and/or Graduate level licensure as a behavioral health professional will result in the automatic suspension of the CCS.*

Should you have any questions, please feel free to contact the office or write to the ADACBGA Certification Committee.

### FEE SCHEDULE

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<th>Fee Type</th>
<th>Amount</th>
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<tr>
<td>APPLICATION FEE (non-refundable)</td>
<td>$150.00</td>
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<tr>
<td>EXAM FEE</td>
<td>$180.00</td>
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<tr>
<td><strong>Total Initial Certification Fees</strong></td>
<td><strong>$330.00</strong></td>
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<td>RECERTIFICATION FEE (every two years)</td>
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<tr>
<td>Online Recertification</td>
<td>$150.00</td>
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<tr>
<td>Mail in Recertification</td>
<td>$175.00</td>
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CERTIFIED CLINICAL SUPERVISOR (CCS)
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

Email: ___________________________ 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 Phone: ___________________________

*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. Some employers and potential employers use this site to verify Certification.

Would you like this information listed for public viewing? ☐ Yes   ☐ No

Date of Birth: _______________ Social Security no. XXX-XX-____________________

Race: ___________________________ Ethnicity: ☐ Hispanic ☐ Non-Hispanic

(For statistical purposes only)

Current Degree Held:

☐ Bachelor’s in a Helping Profession   ☐ Master’s Degree   ☐ Doctoral Degree

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

________________________________________________________________________

Certification(s)/Licensure(s) Currently Held:

☐ CADCII  or  ☐ CAADC  and/or  ☐ LCSW/LPC/LMFT  and/or  ☐ Other_________________

Has certification or licensure been denied or revoked by any other board? ☐ Yes   ☐ No

If yes, please explain on a separate sheet.
## DIRECT WORK EXPERIENCE for CCS CERTIFICATION

List in order, with current agency/location first. Listing must demonstrate **10,000 hours** (5 years full-time) experience as an addiction counselor *post-certification* (CADCII or CAADC) or *post-licensure* (graduate level behavioral health field) *as well as 4,000 hours* (2 years full-time) *supervision experience in a clinical director and/or supervisory role under the clinical supervision of a CCS or other ADACBG-A-Approved Clinical Supervisor.* The 4000 hours may be included in the 10,000 hours and must include 200 hours of face-to-face clinical supervision. All Agencies listed must be accompanied by a corresponding *Job Supervisor’s Statement form* documenting all experience hours counted toward CCS certification were performed in a licensed and/or state-sponsored agency with an appropriately credentialed individual in a supervisory/managerial role *or* in a private practice where the Job Supervisor is an ADACBG-A CCS or Approved Clinical Supervisor.

<table>
<thead>
<tr>
<th>Agency</th>
<th>Address</th>
<th>City, state, zip</th>
<th>Job Supervisor</th>
<th>Dates and hours of service</th>
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JOB SUPERVISOR’S STATEMENT

Applicant’s name: __________________________________________________________________

Job Supervisor’s name: __________________________________________________________________

Agency/Program name: __________________________________________________________________

Agency/Program Address: __________________________________________________________________

Agency/Program Phone: ______________________________ Fax: _____________________________

Job Supervisor’s Professional licenses and/or certifications: ____________________________________________

*Please mail with this statement copies of all licenses and/or certifications that are not issued by ADACBGA. Work Experience Hours may only be counted toward initial CCS certification in licensed and/or state-sponsored agencies which have an individual holding a license or certification granting an independent scope of practice employed in a supervisory/managerial role or in private practice settings under the supervision of an ADACBGA CCS or other ADACBGA Approved Clinical Supervisor.

How long have you been this applicant’s job supervisor/manager?

From (month/year) _____________ to  (month/year) ________________

Average hours candidate worked each week: _________________________________

Percentage of average hours worked spent in the 12 Core Functions: _____________

…spent in the 5 Clinical Supervision Domains: _____________

…spent doing Administrative or other tasks: _____________

Comments (use additional sheets of paper, as necessary):

I hereby certify and attest – under penalty of perjury and threat of ethical sanctions – 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 and correct.

_________________________________________ Date

Job Supervisor Signature

PLEASE MAIL DIRECTLY TO:

ADACBGA Certification Committee
777 Cleveland Ave SW Ste 605
Atlanta, Georgia 30315

Do NOT return this form to the applicant to include with the rest of their application packet unless it has been placed in a sealed envelope with your signature across the back seal!
**EDUCATION (30 hours minimum)**

Number each certificate, list them in order on this sheet, and attach to the cover sheet.

*Duplicate this sheet as needed.*

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<tr>
<th>No.</th>
<th>Title</th>
<th>Dates</th>
<th>Topic</th>
<th>Hours</th>
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<tbody>
<tr>
<td>1.</td>
<td>Counselor Development</td>
<td></td>
<td>Professional &amp; Ethical Standards of the Clinical Supervisor</td>
<td></td>
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<tr>
<td></td>
<td>Program Development &amp; Quality Assurance</td>
<td></td>
<td>Assessing Counselor Competencies &amp; Performance</td>
<td></td>
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<tr>
<td></td>
<td>Treatment Knowledge</td>
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Please attach copies of certificates or transcripts to this cover sheet. If including hours from online platforms such as Relias, you MUST send the CERTIFICATE for each training that indicates the training has been approved by an appropriate entity with a provider number (ADACBG, NAADAC, NBCC, ASWB, GSCSW, LPCA, GACA, etc.). Do NOT send originals, as they will NOT be returned.

Each CCS Candidate must complete **at least six (6) hours of didactic training in each of the five (5) performance domains of clinical supervision, with at least six (6) hours in Professional and Ethical Standards specific to the Clinical Supervision of addiction counselors.**

*Not less than 50% of all didactic training hours for initial CCS certification must be from live, synchronous, and interactive educational training events.*
CLINICAL SUPERVISION for the CERTIFIED CLINICAL SUPERVISOR (CCS)

APPLICANT’S NAME _______________________________________________________

SUPERVISOR’S NAME ______________________________________________________

SUPERVISOR’S CREDENTIALS ________________________ ADACBGA CCS? □ YES □ NO

*Clinical Supervisors MUST include a photocopy of a government-issued photo ID as well as a copy of their ADACBGA Approved Supervisor Letter if they do not hold the ADACBGA CCS and/or IC&RC ICCS.

Purpose: 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. This form is to document that the candidate has received clinical supervision directly relating to the five (5) performance domains of the clinical supervisor. Methods of clinical supervision that will be accepted are individual and/or group activities designed to provide direct supervision of supervision activities, review, and/or processing supervision activities. These activities are monitored and documented by the clinical supervisor, who provides timely feedback to assist the aspiring supervisor in this learning process. Clinical Supervision hours for CCS certification should have been obtained within the last five (5) years, as the field of substance use treatment counseling and clinical supervision is ever-changing.

Clinical Supervisors:

• Clinical Supervisors should have a good clinical background in substance abuse, chemical dependencies, and co-occurring disorders.

• Clinical Supervision will only be accepted across the board and without case-by-case approval when provided by an individual with the ADACBGA’s Certified Clinical Supervisor (CCS) and/or the IC&RC Internationally Certified Clinical Supervisor (ICCS). With prior written approval from the ADACBGA ahead of the provision of any clinical supervision, 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) or otherwise qualifies to offer clinical supervision under the rules of the Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists,
  • 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) including proof of having taken and passed the NCC AP’s written clinical supervisor examination (“Grandfathered” individuals who did not take an exam shall not be approved for the provision of Clinical Supervision), 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. A non-ADACBGA CCS Approved Supervisor must have an ADACBGA Approved Supervisor Letter BEFORE providing clinical supervision. Clinical supervision hours provide prior to the date on the ADACBGA Approved Supervisor Letter will NOT be counted towards Clinical Supervision hours.
CLINICAL SUPERVISION REQUIREMENTS for the CCS APPLICANT

- The CCS applicant must complete 200 hours of face-to-face clinical supervision across the five (5) performance domains of the clinical supervisor.
- Clinical supervision can be done individually, as part of a supervision group, clinical review meetings, and/or via live interactive video conferencing. Clinical Supervision hours must be supported by well-maintained documentation by the Clinical Supervisor and must be made available to the ADACBGA if requested. Clinical Supervision may not be done via email, text or phone calls.
- Candidates must demonstrate a minimum of 20 total hours clinical supervision in each of the 5 performance domains.
- Clinical supervision requirements are further defined to require that a minimum of 25% of clinical supervision hours be individual (one-on-one) supervision.

1. COUNSELOR DEVELOPMENT
   - Build a supportive and individualized supervisor alliance, teach the purpose of clinical supervision, and respect professional boundaries, including knowledge and application of clinical supervision models, techniques, and modalities, relationship-building models and strategies, problem solving/conflict resolution theories, monitoring of the core conditions to establish and maintain rapport with the supervisee, adopting counseling and communications techniques for supervisory purposes, and establishing informed consent and expectations.
   - Maintain a constructive, safe supervisory learning environment that fosters self-awareness and awareness of others, including knowledge and application of motivational techniques, cultural and lifestyle differences, observation techniques (verbal and non-verbal), supervisees’ strengths and limitations, and providing feedback.
   - Help supervisees develop skills specific to working with culturally diverse clients, including knowledge and application of cultural diversity, recognizing values, attitudes, and world views towards self and others, and evaluating special populations for specific needs.
   - Provide ongoing feedback to supervisees on their conceptualization of client needs and appropriate therapeutic interventions, including knowledge and application of case conceptualization, providing feedback, counseling skills, observation techniques (indirect and direct), counselor job functions, therapeutic modalities, assessment of co-occurring, substance use, and addictive disorders, and using assessment tools.
   - Create a professional development plan in collaboration with supervisees that includes specific, measurable goals and objectives, including knowledge and application of career development strategies, assessment theories, practices, and tools, identifying staff training needs, and reviewing and updated supervisory goals.
   - Direct supervisory activities to teach and develop supervisees, including knowledge and application of adult learning styles, supervisory techniques and modalities (including technology), self-care strategies, trauma-informed care and vicarious trauma, and adult teaching and training modalities.
   - Educate supervisees regarding best practice developments, including knowledge and application of trends in treating substance use and addictive disorders, best practices, evidence-based modalities, trends in treating co-occurring disorders, trends in research, identifying educational resources, and maintaining professional development.

   Individual Hours: _____________   Group Hours: _____________   Total Hours: _____________

   Supervisor’s Signature       Date

2. PROFESSIONAL AND ETHICAL STANDARDS
   - Ensure adherence to professional codes of ethics, including knowledge and application of policies governing appropriate counselor/client and supervisor/supervisee relationships, ethical standards and codes, professional standards and codes, confidentiality standards and limitations, consequences of violations of policies, standards, and codes, informed consent, clients’ rights and responsibilities, jurisdictional laws and regulations, role of the supervisor as gatekeeper, practicing only within one’s areas of clinical and supervisory competence, and following due process guidelines for grievances and appeals.
   - Participate in Clinical Supervisor professional development, including knowledge and application of currency with research and evidence-based practice, professional affiliations and workforce development, professional consultation/supervision, stages of clinical supervisor development, and assessing personal educational needs.
   - Seek supervision and implement a professional development plan, including knowledge and application of
importance of ongoing supervision and consultation, the Clinical Supervisor’s individual development plan, importance of modeling appropriate clinical, professionals, and personal behavior, and elements of a professional development plan.

- **Ensure that supervisees disclose supervision practices to clients**, including knowledge and application of the purpose and value of consultation, documentation of supervision requirements, and regulations regarding informed consent in relation to clinical supervision.

- **Use and teach supervisees ethical decision-making models and monitor their use**, including knowledge and application of ethical decision-making models, ethical codes and guidelines, relevant laws, and regulations, procedures to report ethical violations, identifying ethical dilemmas and violations, confronting breaches of ethical standards, laws, or regulations, identifying resources for ethical consultation or scholarship, and addressing conflicts among personal values, legal mandates, ethical issues, and agency policies.

- **Understand the risks of dual relationships**, including knowledge and application of the impact of establishing a dual relationship, technology/social media platforms and their impact on boundaries and confidentiality, legal and ethical implications of dual relationships, recognizing conflicts of interest, recognizing transference and countertransference, and maintaining boundaries in counseling.

- **Provide timely consultation and guidance to supervisees in situations that present moral, legal, and/or ethical dilemmas**, including knowledge and application of importance of addressing supervision issues in a timely manner, understanding vicarious liability, counselor/supervisor resistance to reporting issues, confronting agency resistance to reporting issues, communicating to supervisees the importance of consultation, using consultation techniques, and explaining ethical considerations related to counseling and financial remuneration.

- **Recognize and address impaired practice of self and others**, including knowledge and application of indications of impaired practice, personal impairment, signs of stress and burnout, signs of compassion fatigue and vicarious trauma, self-care strategies, utilizing agency/professional resources, and advocating for supportive systems and assistance.

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<thead>
<tr>
<th>Individual Hours:</th>
<th>Group Hours:</th>
<th>Total Hours:</th>
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</table>

**Supervisor’s Signature**

**Date**

3. **PROGRAM DEVELOPMENT AND QUALITY ASSURANCE**

- **Structure and facilitate staff education**, including knowledge and application of recovery management models and the use of counseling interventions, alternative counseling approaches and techniques, defining training needs, using motivational techniques to encourage participation, and employing a variety of education and training techniques.

- **Recognizing and understanding the limitations of evidence-based practices**, including knowledge and application of fidelity/adaptation reviews, evidence-based practices, and community needs assessment and cultural norms.

- **Develop strategies for enhancing client access, engagement, and retention in treatment**, including knowledge and application of quality improvement standards, engagement strategies, empathic skills, determining measurement metrics and tools, monitoring and measuring client engagement and outcomes, understanding special population needs, identifying and addressing barriers to care.

- **Support and develop the agency quality assurance plan and comply with all monitoring and documenting requirements**, including knowledge and application of the role of the quality assurance plan in the provision of quality care, quality improvement standards, the role of accreditation bodies regarding policies and procedures, documentation/recordkeeping standards, reviewing client charts for internal consistency and clinical quality.

- **Utilize referral sources and other community programs**, including knowledge and application of locating, assessing, and using community resources, professional relationship building, networking models and strategies, ethical standards related to referrals, problem-solving and conflict resolution theories, consensus-building strategies, advocacy for required services, and collaboration.

- **Identify and assess program needs and develop a plan to improve clinical services**, including knowledge and application of program needs assessment, assessment theories, practices, and tools, determining metrics and measurement tools, applicable professional standards and codes, role delineations in a multidisciplinary team, developing staff competencies, formulating program plans, implementing program changes, and performing outcome measurements.

- **Perform crisis intervention and management**, including knowledge and application of the supervisors’ role and responsibilities, risk management and emergency policies and procedures, supervisee role in crisis intervention and management, incident debriefing, and reporting requirements.
4. ASSESSING COUNSELOR COMPETENCIES AND PERFORMANCE

• Establish counselor role expectations, including knowledge and application of job duties, counselor competencies and scope of practice, performance indicators, criteria and benchmarking used to evaluate job performance, assessment tools and techniques for assessing clinical competence, ethical standards, gatekeeping functions of supervisors, and applicable policies, procedures, rules, and laws.

• Understand supervision as a bi-directional evaluative process, including knowledge and application of the role of the Clinical Supervisor evaluation, tools for the Clinical Supervisor evaluation, the evaluative aspects of the supervisory working alliance, and giving and receiving feedback in a manner that promotes counselor development.

• Assess supervisees’ motivation, professional development, cultural, and clinical competence, including knowledge and application of competency assessment tools and strategies, counselor developmental models, assessing clinical competence, assessing multicultural awareness and biases, assessing supervisee motivation and suitability for the work, and evaluating supervisee progress on the individualized development plan.

• Participate in performance recognition, disciplinary actions, and other personnel decisions, including knowledge and application of human resources policies and procedures, credentialing/certification/licensing standards, career development interventions and strategies, writing job descriptions, and correlating job requirements to the job description.

5. TREATMENT KNOWLEDGE

• Demonstrate an understanding of substance use disorders, co-occurring disorders, process addictions, and self-help philosophy, including knowledge and application of alcohol and other drugs of abuse, pharmacology, self-help philosophy and traditions, non-substance-related addiction disorders, integrated healthcare, and co-occurring disorders.

• Understand the principles and theories of addiction, addiction prevention and treatment, and treatment limitations, including knowledge and application of prevention strategies and research, treatment models and applicability, progress of substance use disorders, withdrawal management, American Society of Addiction Medicine (ASAM) patient placement criteria, substance use and addiction disorders resources and research, assessment of readiness for change, recovery and support programs, harm reduction models, the addiction process and recovery management, Diagnostic and Statistical Manual of Mental Disorders (DSM), levels of intervention, relapse prevention and continuing care, bioassays (drug and alcohol testing and screening), the continuum of care, and understanding the appropriate use and limitations of assessment and evaluation tools.

• Understand the use of pharmacological interventions and interactions, including knowledge and application of pharmacological interventions, drug interactions, neuropharmacology, assessing motivation of patient for pharmacological intervention, integrating pharmacological interventions into treatment, and providing medication education and information.
The candidate has spent the following **GRAND TOTAL** hours of Clinical Supervision with me (total of all three sections in each of the 5 performance domains above):

<table>
<thead>
<tr>
<th>Individual Total Hours:</th>
<th>Group Total Hours:</th>
<th>Grand Total Hours:</th>
</tr>
</thead>
</table>

*a minimum of 25% of total clinical supervision hours must be individual (one-on-one) supervision*

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 _________________

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**PLEASE MAIL DIRECTLY TO:**

ADACBGA Certification Committee  
777 Cleveland Ave SW Ste 605  
Atlanta, Georgia 30315

*Do NOT return this form to the applicant to include with the rest of their application packet unless it has been placed in a sealed envelope with your signature across the back seal!*
ASSURANCE AND RELEASE
ETHICS STATEMENT

Applicant: Please initial next to each statement before signing at the bottom to indicate you have read and understand your obligations to uphold the ADACBGA Code of Professional Ethics for Clinical Supervisors and other professional norms of the field.

_______(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 ADACBGA Code of Ethics, ADACBGA Code of Professional Ethics for Clinical Supervisors, NAADAC Code of Ethics, and any other codes of ethical conduct 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 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. I understand that I must keep my contact information up-to-date with the ADACBGA at all times, as failure to retrieve a certified letter or respond to an email shall not be a valid reason to failure to respond to official correspondence from the ADACBGA and/or the Ethics Committee.

_______(Initial) I agree to have my current valid certificate from ADACBGA on display or easily accessible if I am providing clinical supervision.

_______(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 a Certified Clinical Supervisor (CCS).

_______(Initial) I further understand that ADACBGA will post on our website and provide to IC&RC my contact information for their database, along with my certification number, 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.
CERTIFIED CLINICAL SUPERVISOR
PROFESSIONAL REFERENCE

Applicant

Reference’s Name__________________________________________ Credential(s)__________________________

Address__________________________________________ City________________ State________ Zip__________

Work Phone___________________________________ Mobile Phone_________________________________________

Relationship to Applicant______________________________________ Length of time known_____________________

Are you an ADACBGA Certified Clinical Supervisor (CCS)? □ YES □ NO

The above applicant is applying for the Certified Clinical Supervisor (CCS) credential with the ADACBGA. It is our request that you provide information to the Certification Board regarding the applicant and their relationship with you and others. In addressing interpersonal relationships, it is the belief that these traits impact the ethical provision of clinical supervision. Your evaluation is of utmost importance in this approval process.

Please complete the following statements:

The applicant may be an asset to the field as a Certified Clinical Supervisor because he/she is: ______________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

The applicant may be a liability to the field as a Certified Clinical Supervisor because he/she is: _____________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

General Comments: _________________________________________________________________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

OFFICIAL RECOMMENDATION: I, the undersigned, □ DO □ DO NOT recommend the applicant to become a Certified Clinical Supervisor with the Alcohol & Drug Abuse Certification Board of Georgia, Inc.

I hereby certify that all information given herein is true and complete to the best of my knowledge.

Signature of Reference ____________________________________________________________________________ Date ____________________________________________________________________________

This form, along with a letter of formal recommendation on your letterhead, must be sent directly to the ADACBGA at 777 Cleveland Ave SW, Suite 605, Atlanta, GA 30315.
EXAMINATION:

Once you receive notification that your application is complete, you will receive a test registration form. Complete the test registration form and return to our office along with payment. You will then be pre-registered for the appropriate examination. Once you have been pre-registered, the testing company will send final registration instructions via email. You will then select your testing date, time and location. You will have one year from the date of pre-registration to complete your examination.

The examinations administered by the ADACBGA are based on the Job Analysis for Clinical Supervisors conducted by the IC&RC. The exams have been proven valid, reliable, psychometrically sound, and legally defensible. The examination fee is $180 each time you sit for the exam.

*Applicants must successfully pass the examination within one (1) year and may only fail two (2) times. In the event the IC&RC examination is not successfully passed after two (2) attempts, the applicant will be required to seek additional clinical supervision with an ADACBGA Certified Clinical Supervisor (CCS), additional education hours, and payment of the examination fee for each additional attempt. All fees paid are forfeited, non-refundable and may not be applied to future applications or examination fee.*

REQUIREMENTS FOR RE-CERTIFICATION:

Certified Clinical Supervisor (CCS) certification is for a period of two (2) years. Counselors will be notified of certificate expiration via email approximately six (6) to eight (8) weeks prior to submission deadline, however it is your responsibility to keep your certification in effect.

- Candidates for recertification are required to provide documentation to the board that they have completed 40 contact hours of professional education during the previous two (2) years.
- Twelve (12) of these 40 contact hours for re-certification of the CCS must be related to the five (5) Performance Domains of Clinical Supervision, and
- Three (3) of the twelve (12) hours related to the five (5) Performance Domains of Clinical Supervision must be in Professional Ethics specific to the supervision of addiction counselors.
- Any educational hours submitted for re-certification that are not related to the five (5) Performance Domains of the Clinical Supervisor must be related to the Twelve (12) Core Functions of the Alcohol & Drug Abuse Counselor.

Once a certification’s expiration date has been reached, recertification packets postmarked past that date will be assessed a $35 late fee for reinstatement. Each month past the due date an additional $10 will be assessed for reinstatement. Continuing education requirements of 20 contact hours per year must be documented. Reinstatement after the expiration date may also result in additional, documented Clinical Supervision requirements, and re-instatement can only occur after approval from the Certification Committee or President of the ADACBGA.

If, after all attempts to contact the certified professional have failed, portfolios will be discarded once the certificate has expired for one (1) year. A new application including all fees and testing must occur after a credential has been expired for greater than one (1) year.
MISSION:

The goal of the Alcohol & Drug Abuse Certification Board of Georgia, Inc. (ADACBGA) is to protect the public through the provision of competency-based credentials that will assure quality care for individuals living with substance use disorders or other process addictions. ADACBGA Certification is a voluntary process whereby professionals with a special interest in providing treatment to individuals with substance use disorders and/or other process addictions 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. ADACBGA Certification offers evidence that standards of knowledge, skill, experience, attitudes, and demonstration of competency have been met.

The Alcohol and Drug Abuse Certification Board of Georgia, Inc. (ADACBGA) is an independent, non-governmental, 501c3 non-profit organization that is the largest SUD treatment and recovery professional’s certification board in the State of Georgia.

The ADACBGA was formed in 1992 to offer certification to Alcohol and Drug Abuse Counselors and to Clinical Supervisors in alcohol and drug counseling. The board is based on the standards and methods offered by the International Certification and Reciprocity Consortium/Alcohol and Other Drug Abuse (IC&RC), an international body organized to promote uniform professional standards and quality for the substance use disorder counseling profession and to give the profession greater visibility in the United States and around the world. As a result of membership in IC&RC, our certified counselors may relocate to other states, the military services, other countries, and they may transfer their credentials with a minimum of effort and expense.
CODE OF PROFESSIONAL ETHICS for CLINICAL SUPERVISORS:

This Code of Ethics applies to professionals who are seeking certification as Certified Clinical Supervisors and applies to their conduct during the performance of their clinical duties as supervisors.

I. COMPETENCE

A CCS shall limit practice to areas of competence in which proficiency has been gained through education or documentable experience or through the awarding of a reciprocal professional certification or license. A CCS shall accurately represent areas of competence, education, training, experience and professional affiliations, in response to responsible inquiries, including those from appropriate boards, the public, supervisees and colleagues. A CCS shall aggressively seek out consultation with other professionals when called upon to supervise counseling situations outside their realm of competence. A CCS will refer supervisees to other competent professionals when they are unable to provide adequate supervisory guidance to the supervisee.

II. CLIENT WELFARE AND RIGHTS

The primary obligation of a CCS is to train substance abuse counselors to respect the integrity and promote the welfare of their clients. A CCS should have supervisees inform clients that they are supervised and that details of their treatment can and will be discussed or reviewed with a supervisor. Any audio or video taping of a client/consumer’s treatment must be authorized in writing. A CCS should make supervisees aware of clients’ rights, including protecting clients’ rights to privacy and confidentiality in the counseling relationship and the information resulting from it. Clients should also be informed that their right to privacy and confidentiality will not be violated by the supervisory relationship. Records of the supervisory relationship, including interview notes, test data, correspondence, the electronic storage of these documents, and audio and video recordings are to be treated as confidential materials. Written permission for use of these materials outside of the supervisory session must be granted by the client. A CCS is responsible for monitoring the professional actions of their supervisees. A CCS is responsible for the presentation of adequate training for all supervisees in the area of transference, dual relationships, cultural sensitivity and professional deportment.

III. PROFESSIONAL BEHAVIOR

Due to the unique scope of practice alcohol and other drug counselors provide, the CCS must monitor the following behaviors of their staff and themselves.

A. Conviction for the possession or use of any illegal drug, narcotic or mood-altering substance.
B. The use of intoxicants and/or non-physician prescribed and monitored mood-altering substance when engaged in professional pursuits.
C. The conducting of intimate, personal and/or business relationships of any kind with any patient or their families. This applies to all clients. A supervisee should have all relationships of this kind reviewed. A CCS should consult with an objective peer when this issue is raised.
D. Counselors who are members of any Twelve Step group shall not become a sponsor to any active or discharged patient or their family members.
E. A CCS respects the dignity and protects the welfare of participants in research and is aware of federal and state laws, regulations and professional standards governing the conduct of research, including informed consent.
F. A CCS makes financial arrangements with clients, third party payers and supervisees that are understandable and conform to accepted professional practices. Supervisors do not allow their supervisees to offer or accept payment for referrals. Clinical supervisors will disclose their fees to clients and supervisees at the beginning of services and represent facts truthfully to clients, third party payers and supervisees regarding services rendered.

G. A CCS accurately represents their competence, education, training and experience relevant to their practice as a CCS and clinical experience. A CCS assures that advertisements and publications in any media (such as directories, announcements, business cards, newspapers, radio, television and facsimiles) convey information that is necessary for the public to make an appropriate selection of professional services.

H. A CCS is in violation of this code if they:
   1. Are convicted of any felony
   2. Engage in conduct which could lead to conviction of a felony or misdemeanor or are convicted of a misdemeanor related to their qualifications or function.
   3. Are expelled from or disciplined by other professional organizations
   4. Have their certification suspended, revoked, or otherwise disciplined by regulatory bodies
   5. Refuse to seek treatment for alcohol/drug abuse, mental/emotional problems, or physical health problems that interfere with professional functioning
   6. Fail to cooperate at any point of an ethical complaint investigation.

IV. SUPERVISORY ROLE

Inherent and integral to the role of supervisor are responsibilities for monitoring of client welfare, insuring compliance with relevant legal and professional standards of service delivery, monitoring clinical performance and professional development of supervisees and evaluating and certifying current performance and potential of supervisees for academic, screening, selection, placement, employment and credentialing purposes.

A. A CCS must maintain professional decorum and standards. Unprofessional behaviors as outlined in III above will not be tolerated.
B. A CCS should obtain ongoing training in supervision.
C. A CCS should pursue professional and personal continuing education activities to maintain their CCS credential and improve their supervisory skills. Competency in the Performance Domains of Clinical Supervision must be maintained.
D. A CCS should make their supervisees aware of professional and ethical standards and legal responsibilities of the counseling profession. In the absence of agency or state policy, industry standards of ethical behavior should be explained to the supervisee.
E. A CCS should not exploit, but should strive to enable supervisees to be competent, autonomous, professional, judicious, aware of limitations, and to become future supervisors if that is an appropriate career goal.
F. Procedures for contacting the supervisor, or an alternative supervisor, to assist in handling crisis situations should be established and communicated to supervisees.
G. Supervision is maintained through regular face-to-face meetings with supervisee in group or individual sessions.
H. Actual work samples via audio, counselor report, video or observation should be part of the regularly scheduled supervision process.
I. A CCS should provide supervisees with ongoing feedback on their performance.
J. A CCS who has multiple roles (e.g. teacher, clinical supervisor, administrator, etc.) with supervisees should avoid any conflict of interest caused by these disparate roles. The supervisees should know the limitations placed on the CCS and the supervisor should share supervision when appropriate.

K. A CCS should not sexually harass, make sexual advances or participate in any form of sexual contact with supervisees. Supervisors should not engage in any form of social contact or interaction which would compromise the supervisor-supervisee relationship. Dual relationships (including outside consults, partnerships, nepotism, etc.) with supervisees that might impair the supervisor’s objectivity and professional judgment should be avoided and/or the supervisory relationship terminated.

L. A CCS shall not use the supervision process to further personal, religious, political or business interests.

M. A CCS should not endorse any treatment that would harm a client either physically or psychologically and will ensure the professional quality of the program in which the supervisee participates.

N. A CCS should not establish a psychotherapeutic relationship as a substitute for supervision. Personal issues should be addressed in supervision only in terms of the impact of these issues on clients and on professional functioning.

O. A CCS should never supervise past or current clients who are staff, or their family members.

P. A CCS should model appropriate use of supervision themselves for problem solving and practice reviewing.

Q. A CCS must be straightforward with supervisees about observed professional and clinical limitations of the supervisee. These concerns must be clearly documented and shared with the supervisee.

R. A CCS should not endorse a supervisee for certification or credentialing if the supervisor has documentable proof of impairment or professional limitations that would interfere with the performance of counseling duties in a competent and ethical manner. The presence of any impairment should begin with a process of feedback and remediation so that the supervisee understands the nature of the impairment and has the opportunity to remedy the problem and continue with his/her professional development.

S. A CCS should incorporate the principles of informed consent and participation; clarity of requirements, expectations; roles and rules; and due process and appeal, into the establishment of policies related to progressive discipline.

T. A CCS must be able to integrate the Core Functions of Alcohol and Other Drug Abuse Clinical Competency into their theoretical and supervisory approach. A clear understanding of the Global Criteria is essential.

U. A CCS should be an active participant in quality assurance and peer review.

V. The supervision provided by a CCS must be provided in a professional and consistent manner to all supervisees regardless of age, race, national origin, religion, physical disability, sexual orientation, political affiliation, marital or social or economic status. When a supervisor is unable to provide non-judgmental supervision a referral to an appropriate supervisor with a complete explanation to the supervisee must be made.