



# Alcohol & Drug Abuse Certification Board of Georgia

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P.O. BOX 250449  
Atlanta, GA 30325

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

Dear CPRC Applicant:

Enclosed is your informational packet and application packet for the Certified Peer Recovery Coach (CPRC). 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. Please be sure you are submitting the most current version of this application per the revision date in the lower left hand corner of each page. You may duplicate this entire packet for distribution to colleagues or other prospective applicants. When you have completed your part of the packet, send it to the above address with your application fee of \$150. Once your application is complete and approved, you will be notified of eligibility to sit for and how to apply for the exam.

Note: Personal and professional recommendations are to be sent directly to the ADACBGA. They may be returned to the applicant *only* if placed in a sealed envelope with the evaluator's signature across the back seal. Please duplicate the respective forms and give them to the appropriate persons.

The CPRC is an international credential that has been developed by the International Certification & Reciprocity Consortium (IC&RC) to establish credibility and accountability of peer-based services for those who work in the field of alcohol and drug abuse. This relationship is collaborative in nature and is focused on strengths based model, person-centered approach and Transtheoretical Model-Stages of Change. While not licensed, this status serves as a peer-based level to the profession of alcohol and drug counseling that is based on trust, experience and mutuality.

The CPRC certification is valid for two (2) years from the issue date. In order to maintain your certification you must document a total of 40 hours of continuing education in the two year period, ten (10) hours of which must be in professional ethics, and submit a recertification fee of \$150.

## FEE SCHEDULE:

APPLICATION FEE:	\$150.00
EXAM FEE:	\$180.00
RECERTIFICATION FEE:	\$150.00

## CHECKLIST FOR APPLICATION

1. Send completed pages 3-11 to ADACBGA.
2. Include check or money order for \$150 payable to ADACBGA. Online payments are accepted on our website under the “Contact Us” page. Application fees are non-refundable and are forfeited if an applicant’s file is closed.
3. Attach copies of certificates of attendance, in-service reports, and/or other verification of education hours to pages 5-10, numbering the certificates and listing them on the page. Do not send originals.
4. Arrange for official college/university transcripts to be sent to ADACBGA.
5. Have evaluators send forms on pages 12 & 13 to ADACBGA. Evaluations are not to be given back to applicant unless placed in a sealed envelope with the evaluator’s signature across the back seal.
6. Have supervisor send form on page 14. Supervision forms are not to be given back to applicant unless placed in a sealed envelope with the evaluator’s signature across the back seal.
7. **SEND MATERIALS REGULAR MAIL ONLY!** Staff may not be available to sign, and your materials may be returned. Regular mail is most reliable.
8. 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: 16 CONTACT HOURS OF ETHICS EDUCATION MUST BE DOCUMENTED!**

Please list all applicable education on the following 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 competencies of CPRC.

9. 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



# 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

## Certified Peer Recovery Coach (CPRC) 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: \_\_\_\_\_

Home address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip County

Work address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip County

Preferred Phone: (\_\_\_\_)-\_\_\_\_\_ Work (\_\_\_\_)-\_\_\_\_\_ Email: \_\_\_\_\_

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

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

Date of Birth: \_\_\_\_\_ Last four numbers of Social Security no. XXX-XX-\_\_\_\_\_

Gender: \_\_\_\_\_ Ethnic Affiliation: \_\_\_\_\_ (For statistical purposes only)

Highest Education level completed: High School or GED \_\_\_ 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, an d/or failure of the Board to bestow upon me certification as an Certified Peer Recovery Coach.

\_\_\_\_\_(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: \_\_\_\_\_



EDUCATION Table II- 10 hours in Advocacy

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

No.	Title	Date	Overview	Hours

PLEASE ATTACH COPIES OF CERTIFICATES OR REPORTS OF INSERVICE HOURS TO THIS COVER SHEET IN THE ORDER THEY ARE LISTED. SEND PHOTOCOPIES ONLY, ORIGINALS WILL NOT BE RETURNED.

Applicant Name: \_\_\_\_\_

EDUCATION Table III- 10 hours in Mentoring/ Education

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

No.	Title	Date	Overview	Hours

PLEASE ATTACH COPIES OF CERTIFICATES OR REPORTS OF INSERVICE HOURS TO THIS COVER SHEET IN THE ORDER THEY ARE LISTED. SEND PHOTOCOPIES ONLY, ORIGINALS WILL NOT BE RETURNED.

Applicant Name: \_\_\_\_\_







## PERSONAL PEER RECOVERY COACH STATEMENT

Please write a response to all four questions: *(Please type your response-Hand written responses will not be accepted):*

1. Briefly describe your experience with substance abuse recovery.
2. Briefly describe your history of sustained recovery from alcohol and/or drugs.
3. Explain why you are interested in becoming a Peer Recovery Coach.
4. How do you think Peer Recovery Coaching can benefit others? How do you think coaches may guide others to achieve, e.g. to assist in engaging individuals in recovery from crisis services into treatment, to assist in accessing mutually-assisted recovery supports, etc.

EVALUATIONS

Please list the name, address and phone number of the sponsor, counselor, spiritual advisor/mentor or accountability partner to whom you have given evaluation forms. Both evaluation forms should be completed.

NAME\_\_\_\_\_

ADDRESS\_\_\_\_\_

PHONE\_\_\_\_\_

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\*\*\*\*\*

Please list the names of two professional references to who you have given evaluation forms. These should be people, other than sponsors, friends in recovery or family members, who know you professionally and can attest to your professional skills. One should be given to your supervisor.

NAME\_\_\_\_\_

ADDRESS\_\_\_\_\_

PHONE\_\_\_\_\_

\*\*\*\*\*  
\*\*\*\*\*

NAME\_\_\_\_\_

ADDRESS\_\_\_\_\_

PHONE\_\_\_\_\_

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EVALUATION FORM (Page 1 of 2)

Applicant Name: \_\_\_\_\_

Evaluator Name: \_\_\_\_\_

Relationship to Applicant:  Sponsor  Former/Current Counselor  Supervisor

Accountability Partner  Spiritual Advisor/Mentor  Other \_\_\_\_\_

Evaluator Address: \_\_\_\_\_

Evaluator Telephone: \_\_\_\_\_

How long have you known applicant? \_\_\_\_\_

Please describe the reasons that you would or would not endorse the applicant to work in the addiction field as a Peer Recovery Coach: (You may type a response and attach if preferred)

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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

**Please do not return this form to the applicant unless it is placed in a sealed envelope with the evaluator's signature across the back seal.**

APPLICANT'S NAME \_\_\_\_\_

EVALUATOR'S NAME \_\_\_\_\_

Following are the skills and knowledge needed by Certified Peer Recovery Coaches. Please evaluate the above named applicant based on the abilities you have seen him/her demonstrate. Use the following scale to evaluate the applicant:

- 1 = NOT APPLICABLE
- 2 = POOR
- 3 = AVERAGE
- 4 = ABOVE AVERAGE
- 5 = EXCELLENT

Skills and Knowledge Rating

\_\_\_\_\_ Common sense in dealing with others

\_\_\_\_\_ Respect for others

\_\_\_\_\_ Care and concern for others

\_\_\_\_\_ Empathy for others

\_\_\_\_\_ Flexibility with others

\_\_\_\_\_ Spontaneity with others

\_\_\_\_\_ Capacity for confrontation with others

\_\_\_\_\_ Capacity for appropriate self-disclosure

\_\_\_\_\_ Concreteness

\_\_\_\_\_ Ability to communicate effectively with others

\_\_\_\_\_ Ability to set boundaries with others

\_\_\_\_\_ Knowledge of the addictions field

\_\_\_\_\_ Capacity for acting in an ethical manner

\_\_\_\_\_ Ability to set limits with others

\_\_\_\_\_ Ability to facilitate appropriate change

\_\_\_\_\_ Knowledge of physical, behavioral, attitudinal, and effective manifestations of addictions

GENERAL REMARKS: \_\_\_\_\_

Evaluators Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Please do not return this form to the applicant unless it is placed in a sealed envelope with the evaluator's signature across the back seal.**

# 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 and 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 THE CANDIDATE:

This manual describes and outlines the requirements for certification for professionals desiring certification as a Certified Peer Recovery Coach (CPRC) from the Alcohol and Drug Abuse Certification Board of Georgia, Inc.

The CPRC credential is offered through IC&RC. The CPRC was designed as a peer-based level certification for applicants who want to work with those seeking recovery, those who are in active recovery themselves from alcohol & drugs and who have proven professional competency to work as a CPRC in the alcohol and drug abuse field.

The CPRC is a person who has special recovery knowledge, professional training and actively lives a lifestyle of recovery. The CPRC is intended for those who want to reach a higher level of performance, satisfaction or learning. The CPRC 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 CPRC is defined as a person who has primary responsibility for clients to help gain access to needed resources in the community by assisting them in overcoming barriers and helping them bridge gaps between their needs and available resources for ongoing recovery. The CPRC is a motivator, confidant, advocate, role model, teacher, mentor, problem solver, resource broker, community organizer and lifestyle consultant. That means CPRCs ask questions, offer reflections, and hold clients accountable and capable of choosing what is best for them. CPRC's help those to become ready and willing to seek treatment as well as help someone explore their options for recovery or treatment. The CPRC may also participate as a part of the treatment team and will have the ability to participate in the recommendation of treatment needs of clients. Although the CPRC is a professional in the field of alcohol and drug abuse, they cannot diagnose any addiction, cannot provide clinical based addiction treatment and cannot dictate how recovery is defined.

All CPRC candidates will be required to demonstrate their understanding of recovery and principles that define their understanding. The ADACBGA utilizes SAMSHA's working definition and principles of Recovery:

Recovery is a process of change whereby individuals work to improve their own health and wellness and to live a meaningful life in a community of their choice while striving to achieve their full potential (SAMSHA, 2011).

### 10 Principles of Recovery

- ***Recovery emerges from hope:*** The belief that recovery is real provides the essential and motivating message of a better future – that people can and do overcome the internal and external challenges, barriers, and obstacles that confront them.
- ***Recovery is person-driven:*** Self-determination and self-direction are the foundations for recovery as individuals define their own life goals and design their unique path(s) towards those goals.
- ***Recovery occurs via many pathways:*** Individuals are unique with distinct needs, strengths, preferences, goals, culture, and backgrounds including trauma experiences that affect and determine their pathway(s) to recovery.
- ***Recovery is holistic:*** Recovery encompasses an individual's whole life, including mind, body, spirit, and community.
- ***Recovery is supported by peers and allies:*** Mutual support and mutual aid groups, including the sharing of experiential knowledge and skills, as well as social learning, play an invaluable role in recovery.

***Recovery is supported through relationship and social networks:*** An important factor in the recovery process is the presence and involvement of people who believe in the person's ability to recover; who offer hope, support, and encouragement; and who also suggest strategies and resources for change.

- ***Recovery is culturally-based and influenced:*** Culture and cultural background in all of its diverse representations including values, traditions, and beliefs are keys in determining a person's journey and unique pathway to recovery.

- ***Recovery is supported by addressing trauma:*** The experience of trauma (such as physical or sexual abuse, domestic violence, war, disaster, and others) is often a precursor to or associated with alcohol and drug use, mental health problems, and related issues.
- ***Recovery involves individual, family, and community strengths and responsibility:*** Individuals, families, and communities have strengths and resources that serve as a foundation for recovery.
- ***Recovery is based on respect:*** Community, systems, and societal acceptance and appreciation for people affected by mental health and substance use problems. (SAMSHA, 2011)

The CPRC has the knowledge necessary to understand the process of the following domains in a variety of treatment settings to complete certification as a Certified Peer Recovery Coach. These 4 domains are:

1. Advocacy:
  - Serve as the client's individual advocate.
  - Advocate within systems to promote client centered recovery support services.
  - Assure that the client's choices define and drive their recovery planning process.
  - Promote client-driven recovery plans by serving on the client's recovery oriented team.
2. Mentoring/ Education:
  - Serve as a role model of an individual in recovery.
  - Establish and maintain a "peer" relationship rather than a hierarchical one.
  - Promote social learning through shared experiences.
  - Teach clients life skills.
  - Encourage clients how to self-advocate.
3. Recovery Support:
  - Serve as an active member of the client's recovery-oriented team(s).
  - Assure that all recovery-oriented tasks and activities build on the client's strengths and resiliencies.
  - Help the client identify their options and participate in all decisions related to establishing and achieving recovery goals.
  - Help the client develop problem-solving skills so they can respond to challenges to their recovery.
  - Help the client access the services and supports that will help them attain their individual recovery goals.
4. Ethical Responsibility:
  - Respond appropriately to risk indicators to assure the client's welfare and physical safety.
  - Immediately report suspicions that the client is being abused or neglected.
  - Maintain confidentiality.
  - Communicate personal issues that impact your ability to perform job duties.
  - Assure that interpersonal relationships, services and supports reflect the client's individual differences and cultural diversity.
  - Document service provisions as required by the employer.
  - Gather information regarding the clients' personal satisfaction with their progress toward recovery goals.

#### APPLICATION REQUIREMENTS:

Applicants must live and/or work within the jurisdiction of the ADACBGA at least 51% of the time.

1. Complete pages 12-20 of the application and pay application fee of \$150. Payments can be made with a check or money order made out to ADACBGA or online with a credit card under the "Contact Us" page of our website. Once received application fees are non-refundable.

2. Personal Recovery Coach Statement: The applicant must document three (3) years ongoing and continuous years of recovery from alcohol and/or drugs. Documentation will be required through a personal Peer Recovery Coach statement.



3. Experience: 500 hours of volunteer or paid supervised practical experience specific to the CPRC Domains.

4. Supervision: 50 hours of face to face supervision specific to the CPRC domains.

5. Education: Defined as formal classroom style education (workshops, 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 sixteen (16) hours of professional ethics education must be documented as a part of the educational hours required. A total of 100 hours of addiction-specific education must be documented by copies of transcripts, certificates of attendance, in-service reports, etc. All candidates for CPRC need a minimum of a high school diploma or equivalency. Official transcripts must be sent directly to the board from the college/university. Such college/university credits must be from a college or university licensed or accredited by the local government in order to be eligible.

**100 hours of Education/Training:**

16 hours in Ethical Responsibility

10 in Advocacy

10 in Mentoring/ Education

10 in Recovery Support

54 hours remaining can be any training relevant to the competencies of CPRC

6. Evaluations: The applicant must provide three recovery evaluations with an acceptable score on each one. One evaluation must be from a sponsor, accountability partner or former counselor regarding the applicant's recovery experience; one must be from the supervisor who fills out the supervised practical experience form; one must be from a professional (i.e., professor, instructor, former supervisor) who has had the opportunity to observe the applicant's recovery or professional skills and competencies. Evaluations must be returned directly to the Board by the raters. Evaluations may be returned to applicants *only* if they are placed in a sealed envelope with the evaluator's signature across the back seal.

7. Code of Ethics: The Peer Recovery Coach must sign the code of ethics form provided in their application packet.

8. Exam: In order to sit for the exam the applicant must have a completed application on file. At that time a test registration letter will be sent to the candidate. Computer based exams are available at various locations and times. The testing fee is \$180.00

Once an applicant has been notified that their application is complete, they must sit for the computer based examination within one year, or the application will expire and be closed. A new application with all required paperwork and fees must be resubmitted in order to become certified. All previous fees submitted will be forfeited. 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. All previous fees submitted will be forfeited.

## REQUIREMENTS FOR RECERTIFICATION

The CPRC certification is for a period of two (2) years and must apply for recertification before their expiration date. Candidates for recertification are required to provide the following documentation to the board:

1. Continuing Education Hours: 40 contact hours of professional education and development during the previous two years, 10 of these hours must be in professional ethics. The training must relate to the peer recovery field and should include training in the development of professional skills described in the 4 CPRC Domains.
2. Supervision: Candidates for recertification must have received a minimum of 96 hours of supervision from a licensed clinician or a certified addiction professional. There must have a minimum of 4 hours of documented supervision monthly – this will consist of individual and group supervision.

## CODE OF PROFESSIONAL ETHICS

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

### **Principle 1: Non-Discrimination**

The Certified Peer Recovery Coach 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 Certified Peer Recovery Coach should espouse objectivity and integrity and maintain the highest standards in the services the recovery coach offers.

- a. The Certified Peer Recovery Coach, as teacher, should recognize the recovery coach's primary obligation to help others acquire the knowledge and skill in dealing with the disease of chemical de-pendency.
- b. The Certified Peer Recovery Coach, as a practitioner, should accept the professional challenge and responsibility deriving from the recovery coach's work.

### **Principle 3: Competence**

The Certified Peer Recovery Coach 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 recovery coach should recognize the need for ongoing education as a component of professional competency.

- a. The Certified Peer Recovery Coach should prevent the practice of substance abuse peer coaching by unqualified and unauthorized persons.
- b. The Certified Peer Recovery Coach who is aware of unethical conduct or of unprofessional modes of practice should report such violations to the appropriate certifying authority.

c. The Certified Peer Recovery Coach should recognize boundaries and limitations of the recovery coach's competencies and not offer services or use techniques outside of these professional competencies.

d. The Certified Peer Recovery Coach 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 recovery coach should support peer assistance programs in this respect.

#### **Principle 4: Legal Standards and Moral Standards**

The Certified Peer Recovery Coach should uphold the legal and accepted moral codes which pertain to professional conduct.

a. The Certified Peer Recovery Coach should not claim either directly or by implication, professional qualifications/affiliations that the recovery coach does not possess.

b. The Certified Peer Recovery Coach should not use the affiliation with the ADACBGA for purposes that are not consistent with the stated purposes of the board.

c. The Certified Peer Recovery Coach should not associate with or permit the recovery coach's name to be used in connection with any services or products in a way that is incorrect or misleading.

d. The Certified Peer Recovery Coach 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 Certified Peer Recovery Coach should respect the limits of present knowledge in public statements concerning alcoholism and other forms of drug addiction.

a. The Certified Peer Recovery Coach who represents the field of alcoholism, peer coaching to clients, other professionals or to the general public should report fairly and accurately the appropriate information.

b. The Certified Peer Recovery Coach should acknowledge and document materials and techniques used.

c. The Certified Peer Recovery Coach who conducts training in alcoholism or drug abuse peer coaching skills or techniques should indicate to the audience the requisite training/qualifications required to properly perform these skills and techniques.

#### **Principle 6: Publication Credit**

The Certified Peer Recovery Coach should assign credit to all who have contributed to the published material and for the work upon which the publication is based.

a. The Certified Peer Recovery Coach 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 Certified Peer Recovery Coach 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 Certified Peer Recovery Coach should acknowledge, through specific citations, unpublished, as well as published material, that has directly influenced the research or writing.

d. The Certified Peer Recovery Coach 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 Certified Peer Recovery Coach should respect the integrity and protect the welfare of the person or group with whom the recovery coach is working.

a. The Certified Peer Recovery Coach 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 Certified Peer Recovery Coach, in the presence of professional conflict should be concerned primarily with the welfare of the client.

c. The Certified Peer Recovery Coach should terminate peer coaching or consulting relationship when it is reasonably clear to the recovery coach that the client is not benefiting from it.

d. The Certified Peer Recovery Coach, 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 Certified Peer Recovery Coach 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 Certified Peer Recovery Coach 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 Certified Peer Recovery Coach should not use a client in a demonstration role in a workshop setting where such participation would potentially harm the client.

g. The Certified Peer Recovery Coach should ensure the presence of an appropriate setting for clinical work to protect the client from harm and the recovery coach and the profession from censure.

h. The Certified Peer Recovery Coach should collaborate with other health care professionals in providing a supportive environment for the client who is receiving prescribed medications.

### **Principle 8: Confidentiality**

The Certified Peer Recovery Coach 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 Certified Peer Recovery Coach 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 Certified Peer Recovery Coach should make provisions for the maintenance of confidentiality and the ultimate disposition of confidential records.

- c. The Certified Peer Recovery Coach 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 Certified Peer Recovery Coach 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 Certified Peer Recovery Coach 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 Certified Peer Recovery Coach should inform the prospective client of the important aspects of the potential relationship.

- a. The Certified Peer Recovery Coach 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 Certified Peer Recovery Coach 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 Certified Peer Recovery Coach 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 Certified Peer Recovery Coach should not engage in any type of sexual activity with a client

**10: Interprofessional Relationships**

The Certified Peer Recovery Coach should treat colleagues with respect, courtesy and fairness and should afford the same professional courtesy to other professionals.

- a. The Certified Peer Recovery Coach should not offer professional services to a client in recovery coaching 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 Certified Peer Recovery Coach should cooperate with duly constituted professional ethics committees and promptly supply necessary information unless constrained by the demands of confidentiality.

**Principle 11: Remuneration**

The Certified Peer Recovery Coach should establish financial arrangements in professional practice and in accord with the professional standards that safeguard the best interests of the client, of the recovery coach and of the profession.

- a. The Certified Peer Recovery Coach should consider carefully the ability of the client to meet the financial cost in establishing rates for professional services.
- b. The Certified Peer Recovery Coach 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 Certified Peer Recovery Coach in clinical or peer recovery coaching 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 Certified Peer Recovery Coach 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 Certified Peer Recovery Coach 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 recovery coach 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 Certified Peer Recovery Coach 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

**CERTIFIED PEER RECOVERY COACH CLINICAL SUPERVISION**

APPLICANT'S NAME \_\_\_\_\_

SUPERVISOR/ TITLE \_\_\_\_\_

PROFESSIONAL LICENSES AND/OR CERTIFICATES YOU HOLD\* \_\_\_\_\_

\*If Applicable

AGENCY \_\_\_\_\_ PHONE \_\_\_\_\_

How long have you supervised this applicant?

From (m/y) \_\_\_\_\_ to (m/y) \_\_\_\_\_

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

**Purpose:** The supervised practical experience is to document that the candidate has received supervision directly relating to the CPRC domains. Methods of supervision that will be accepted include activities designed to provide training of specific recovery coach functions. These activities are monitored by supervisory personnel who provide timely positive and negative feedback to assist the counselor in this learning process.

**Supervised Practical Experience Requirements:**

- One (1) hour of supervision to ten (10) hours of *practical experience*.
- Candidate must receive a minimum of 10 hours face-to-face supervision per domain.
- Candidates must receive a minimum total of 50 hours face-to-face supervision.
- **Supervision can be done individually, as part of a supervision group, clinical review meetings and via video conferencing if necessary. All Supervision should be supported by well-maintained documentation by the Supervisor. Supervision is not done via email, text or phone calls.**

CPRC DOMAINS	# hours face to face supervision
Advocacy	
Mentoring/ Education	
Recovery Support	
Ethical Responsibility	

\*Supervisor must also fill out an evaluation form.

Following is the outline of the tasks that fall under each domain.

## **Domain 1: Advocacy**

### **Associated Tasks:**

- Relate to the individual as an advocate.
- Advocate within systems to promote person-centered recovery/wellness support services.
- Describe the individual's rights and responsibilities
- Apply the principles of individual choice and self-determination.
- Explain importance of self-advocacy as a component of recovery/wellness.
- Recognize and use person-centered language. • Practice effective communication skills.
- Differentiate between the types and levels of advocacy.
- Collaborate with individual to identify, link, and coordinate choices with resources.
- Advocate for multiple pathways to recovery/wellness.
- Recognize the importance of a holistic (e.g., mind, body, spirit, environment) approach to recovery/wellness.

## **Domain 2: Ethical Responsibility**

### **Associated Tasks:**

- Recognize risk indicators that may affect the individual's welfare and safety.
- Respond to personal risk indicators to assure welfare and safety.
- Communicate to support network personal issues that impact ability to perform job duties.
- Report suspicions of abuse or neglect to appropriate authority.
- Evaluate the individual's satisfaction with their progress toward recovery/wellness goals.
- Maintain documentation and collect data as required.
- Adhere to responsibilities and limits of the role.
- Apply fundamentals of cultural competency.
- Recognize and adhere to the rules of confidentiality.
- Recognize and maintain professional and personal boundaries.
- Recognize and address personal and institutional biases and behaviors.
- Maintain current, accurate knowledge of trends and issues related to wellness and recovery.
- Recognize various crisis and emergency situations.
- Use organizational/departmental chain of command to address or resolve issues.
- Practice non-judgmental behavior.

## **Domain 3: Mentoring and Education**

### **Associated Tasks:**

- Serve as a role model for an individual.
- Recognize the importance of self-care.
- Establish and maintain a peer relationship rather than a hierarchical relationship.
- Educate through shared experiences.
- Support the development of healthy behavior that is based on choice.
- Describe the skills needed to self-advocate.
- Assist the individual in identifying and establishing positive relationships.
- Establish a respectful, trusting relationship with the individual.
- Demonstrate consistency by supporting individuals during ordinary and extraordinary times.
- Support the development of effective communication skills.



- Support the development of conflict resolution skills.
- Support the development of problem-solving skills.
  - Apply principles of empowerment.
- Provide resource linkage to community supports and professional services.

## **Domain 4: Recovery/Wellness Support**

### **Associated Tasks:**

- Assist the individual with setting goals.
- Recognize that there are multiple pathways to recovery/wellness.
- Contribute to the individual’s recovery/wellness team(s).
- Assist the individual to identify and build on their strengths and resiliencies.
- Apply effective coaching techniques such as Motivational Interviewing.
- Recognize the stages of change.
  - Recognize the stages of recovery/wellness.
- Recognize signs of distress.
- Develop tools for effective outreach and continued support.
- Assist the individual in identifying support systems.
- Practice a strengths-based approach to recovery/wellness.
- Assist the individual in identifying basic needs.
- Apply basic supportive group facilitation techniques.
- Recognize and understand the impact of trauma.

**Candidate has spent \_\_\_\_\_ hours in supervision with me (total of all lines)**

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.

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**Supervisor’s Signature/Date**

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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

**Please do not return this form to the applicant unless it is placed in a sealed envelope with the supervisor’s signature across the back seal.**

EVALUATION FORM (Page 1 of 2)

Applicant Name: \_\_\_\_\_

Evaluator Name: \_\_\_\_\_

Relationship to Applicant:  Sponsor  Former/Current Counselor  Supervisor

Accountability Partner  Spiritual Advisor/Mentor  Other \_\_\_\_\_

Evaluator Address: \_\_\_\_\_

Evaluator Telephone: \_\_\_\_\_

How long have you known applicant? \_\_\_\_\_

Please describe the reasons that you would or would not endorse the applicant to work in the addiction field as a Peer Recovery Coach: (You may type a response and attach if preferred)

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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:

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P.O BOX 250449, Atlanta, GA 30325

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EVALUATION FORM (page 2 of 2)

APPLICANT'S NAME \_\_\_\_\_

EVALUATOR'S NAME \_\_\_\_\_

Following are the skills and knowledge needed by Certified Peer Recovery Coaches. Please evaluate the above named applicant based on the abilities you have seen him/her demonstrate. Use the following scale to evaluate the applicant:

- 1 = NOT APPLICABLE
- 2 = POOR
- 3 = AVERAGE
- 4 = ABOVE AVERAGE
- 5 = EXCELLENT

Skills and Knowledge Rating

\_\_\_\_ Common sense in dealing with others

\_\_\_\_ Respect for others

\_\_\_\_ Care and concern for others

\_\_\_\_ Empathy for others

\_\_\_\_ Flexibility with others

\_\_\_\_ Spontaneity with others

\_\_\_\_ Capacity for confrontation with others

\_\_\_\_ Capacity for appropriate self-disclosure

\_\_\_\_ Concreteness

\_\_\_\_ Ability to communicate effectively with others

\_\_\_\_ Ability to set boundaries with others

\_\_\_\_ Knowledge of the addictions field

\_\_\_\_ Capacity for acting in an ethical manner

\_\_\_\_ Ability to set limits with others

\_\_\_\_ Ability to facilitate appropriate change

\_\_\_\_ Knowledge of physical, behavioral, attitudinal, and effective manifestations of addictions

GENERAL REMARKS: \_\_\_\_\_

\_\_\_\_\_  
Evaluators Signature: \_\_\_\_\_ Date \_\_\_\_\_