

The
CAADE

California Association for Alcohol and Drug Educators

Certified Clinical Supervisor “CCS”

Application – Professional Portfolio

CAADE - CCS CERTIFIED CLINICAL SUPERVISOR APPLICATION REQUIREMENTS & MEMORANDUM OF UNDERSTANDING DATED APRIL 20, 2009

Please be advised of the following information pertinent to the CAADE-CCS Credential;

GENERAL INFORMATION

At this time:

1. There is no test for advancement to the CAADE-CCS Credential.
2. The CAADE-CCS Credential has no reciprocity (transferability) either nationally or internationally.
3. This credential does not grant one the ability to be a sole practitioner.
4. The Credential is issued directly by CAADE (California Association for Alcohol and Drug Educators) a certifying agency approved by the State of California Department of Alcohol and Drug Programs.
5. Fees are non-refundable, subject to change, and fees are made payable to CAADE CCS in the form of check or money order to be included with application. PayPal or credit card payments may also be made at **www.caade.org**. After completing the payment process on-line, print your receipt and submit it with your application.
6. Incomplete applications will not be processed. Incomplete applications will be retained by CAADE for six (6) months and then destroyed, requiring reapplication.
7. If you have any questions, you may contact the CAADE CCS Coordinator's Office at 805.777.8477 or Email to supervision@roadrunner.com

MEMBERSHIP

8. You are not required to be a member of CAADE in order to receive or maintain a CAADE credential. The initial 2 year CCS certification fee for members is \$70 and \$140 for non-members. The CCS credential requires a re-certification every two years. The CCS re-certification fee for members is \$70 and \$140 for non-members. If you would like to become a member, complete the CAADE membership application and submit the current membership fee.

THE CAADE-CCS CREDENTIAL

9. Is an advanced credential offered to alcohol and drug counselors and supervisors interested in enhancing their career through specialized education, training and professional experience in clinical supervision. This permits the CCS-Certified Clinical Supervisor to fulfill ethical and professional responsibilities in monitoring client welfare and quality of care provided by the alcohol/drug counselor-supervisee and supervisor in training. The CCS will teach by example, facilitate skill development, goal-setting, feedback, and professional development of the counselor/supervisee and supervisor in training.

INITIAL CERTIFICATION

10. The CAADE-CCS Candidate must:
 - a. **Hold a valid certification** as an addictions counselor as recognized by the California Department of Alcohol and Drug Programs and/or **licensed Mental Health Professional; in addition to the following criteria being met;**
 - b. Have earned at least **10,000 hours** of documented and verifiable experience (in no less than 4 years, or no more than 2500 hours per year) providing AOD education and counseling services as an AOD counselor.
 - c. Have earned at least **4,000 hours** of documented and verifiable experience (in no less than 2 years) as a **clinical supervisor or supervisor in training**. These 4,000 hours can be considered part of the 10,000 hours noted above. (Example: 6,000 + 4000 = 10,000 Hours).

CCS APPLICATION REQUIREMENTS – Continued

- d. Have completed at least **350 hours of formal documented AOD coursework**.
- e. Provide documentation of at least **208 hours** of group and/or individual clinical “**supervision of your supervision duties and responsibilities**”. These hours must be provided by a certified clinical supervisor or licensed mental health professional. Supervision should have occurred over a period of no less than two (2) years and accrued at a rate of at least two (2) hours per week. Example: 52 wks x 2 hrs = 104 hrs per yr x 2 yrs = 208 hrs
OR, Complete a “Waiver” of Required Supervision by signing an affidavit that you’ve been:
 - 1 The Senior Clinical Supervisor working at your facility with at least two full years experience while having no other Supervisor or Agency Director to report to; OR;
 - 2 A licensed clinician/mental health professional with at least two full years experience in supervising others working in the addiction field.
- f. Provide documentation of no less than **40 hours of training specifically related and directed to the competencies of Clinical Supervision** as outlined in CSAT’S Technical Assistance Publication TAP 21-A*. (Substance Abuse and Mental Health Services Administration’s Center for Substance Abuse Treatment). Education must be specifically related to the 5 core Foundation Areas pertinent to supervisory proficiency as well as to the 5 core Performance Domains specific to supervisory practice.
- g. Submit one (1) professional reference **letter of recommendation**.
Preferably from a certified clinical supervisor or licensed mental health professional who has at least five (5) years experience as an addiction treatment professional and who is familiar with your work as a supervisor;
OR, from a professional colleague that you have known for at least one (1) year and who is familiar with your work as a supervisor.
- h. Sign, date, and submit a CAADE CCS Supervisor’s Code of Ethics and Scope of Responsibility Statement.
- i. Complete all sections of the application and submit documentation and signatures as requested.
- j. Submit the required fees for the application portfolio review and processing, and the initial CCS Credential certification fee (valid for 2 years).

RE-CERTIFICATION

- 11. The CAADE-CCS Credential is renewed as follows:
 - k. The re-certification period occurs every two (2) years.
 - l. A minimum of forty (40) CAADE approved provider CEH’s (Continuing Education Hours) must be completed every two (2) years between CCS re-certification dates. A minimum of 6 hours in clinical supervision plus 9 hours in law and ethics CEH’s must be included within the 40 hours. Copies of training certificates must be submitted with the renewal application.
 - m. The CEH’s used for the CAADE-CATC re-certification may be the same CEH’s used for the CAADE-CCS CEH re-certification requirements.
 - n. However, the CCS CEH’s must include a minimum of 6 hours of clinical supervisor’s training from a CAADE approved CCS CEU/CEH training provider.
 - o. Submit the required fees for the re-certification application.

APPLICANT ACKNOWLEDGMENT

Applicant Signature	Print Name of Applicant	Date
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**APPLICATION FOR ADVANCEMENT TO CAADE CCS CREDENTIAL
"Certified Clinical Supervisor"**

INSTRUCTIONS:

- It is recommended that you first photocopy at least one set of blank forms before entering your information.
- Type or print all forms legibly in black ink.
- All sections of the application must be completed, signed and dated where required.
- Resumes may not be substituted for any section of the application.
- Please keep one copy of your entire completed application portfolio (with attachments) for your personal records.
- Please ensure you have attached copies of information requested, as no documentation from your application will be returned to you.
- Letters of reference and clock hour experience verification pages signed by others require those pages being submitted to have an original signature
- Incomplete applications will not be processed. Incomplete applications will be retained by CAADE for six (6) months and then destroyed, requiring reapplication.
- All fees or proof of payment receipt must be submitted with the application. All fees are non-refundable. Fees are payable to CAADE CCS and may be paid in the form of check, money order, or paid on-line via PayPal or credit card at www.caade.org.

- **CAADE MEMBERS:** The **\$160** fee is comprised of **\$90** for the **Application Portfolio review** and processing, and **\$70** is for the Initial **CCS Certification Fee** valid for 2 years.
 Check box if you are a Member of CAADE* Expiration Date: _____
*You may become a member by completing page 13

- **NON-MEMBERS:** The **\$240 fee** is comprised of **\$90** for the **Application Portfolio review** and processing, and **\$140** is for the Initial **CCS Certification Fee** valid for 2 years.

- Please **send by mail** your entire CCS Application Portfolio with fee or proof of payment to:

Laurie Sanders, LMFT, ICADC-II, ICCS
CAADE CCS Certification Coordinator
P.O. Box 7297
Ventura, CA 93006

- If you have any questions, please call the CAADE CCS Certification Coordinator's Office at **805.777.8477** or Email: supervision@roadrunner.com

- Please sign and date these instructions on the lines below and submit this page as a part of your application portfolio.

Applicant Signature

Print Name

Date

CAADE California Association for Alcohol and Drug Educators

DATA SHEET FOR CCS Certified Clinical Supervisor Applicant

CAADE CATC # _____ State CA Expires _____
Other AOD Certification # _____ State _____ Expires _____
Other Practice License # _____ State _____ Expires _____
Drivers License # _____ State _____ Expires _____
 Mr. Ms. DOB _____ State _____ Country _____

Have you ever had a registration, certification credential or license suspended or revoked?
 NO YES /Explain: _____

Check all that apply to your education:

ADS Certificate AA/AS BA/BS MA/MS PsyD/PhD M.D.

Print name as you would like it on your certificate _____

Last Name First Name Middle Name or Initial

Home Address City State and Zip Code

Mailing Address City State and Zip Code

Cell Home Phone Home Phone Work Phone

Email Address _____

Current Employer's Name _____

Address _____

Job Title _____ Start Date _____

Supervisor's Name _____ Supervisor's Title _____

Applicant Signature Date

CONSENT TO RELEASE INFORMATION AND RECORDS OF CCS Certified Clinical Supervisor Applicant to:

CAADE California Association for Alcohol and Drug Educators/CCS Certification Committee

1. I consent and authorize CAADE to inspect and make inquiries relative to all documents and records that may be material to a thorough evaluation and background check relative to the certification process.
2. I consent and authorize CAADE to investigate my qualifications, character, ethical standards and practices, professional competence, experience, education and/or other information relative to the certification process, which may include but is not limited to confirming my membership status, professional affiliations, associations, registrations, licenses, credentials, certifications, or privileges that may have ever been or may be issued, amended/restricted, suspended, and/or revoked by any other agency, organization, institution, and/or any State and County AOD Program.
3. I consent and authorize CAADE to consult with any previous or present supervisor, manager, agency director, professional colleague, personal association, employer, law enforcement agency, institution, organization, agency, person, and/or any State and County AOD Program with which I have been associated or who may have knowledge pertinent to my character, personal background and history, moral and ethical standards and practices, professional competence, discipline, experience, education, qualifications, and/or other information relative to the certification process.
4. I hereby release from liability all representatives of CAADE for acts performed in good faith, due diligence, and without malice concerning the review and evaluation of my application and credentials.
5. I hereby release from liability all persons, agencies, institutions, and organizations who provide confidential and/or privileged information/records to CAADE in good faith and without malice by responding to the requests necessary to conduct the evaluation process.
6. I declare that I have presented and disclosed all information concerning my qualifications, skills, education, applicable experience (employment, volunteer work, field service training and supervision), certificates, credentials, certifications, licenses, program accreditation, personal and professional history (whether favorable or not) with regard to and relative to the CCS-Certified Clinical Supervisor certification process.
7. I further understand that any misrepresentations, acts of deceit, deliberate acts of omission concerning significant information, legal and ethical violations relevant to practice standards and my qualifications, competence, and certification now or in the future will result in a disciplinary action by the CAADE CCS Certification Committee which may include but is not limited to the denial, amendment/restriction, suspension, revocation of certification, reporting such to other certifying agencies, and/or legal action.

Applicant Signature

Print Applicant Name

Date

CERTIFICATES AND DEGREES

PROFILE for CAADE CCS APPLICANT

Completing this form is optional...

If you are already credentialed as a CATC, CADC, CCS, LMFT, LCSW, Lic. Psy., or MD
If you would like such information maintained in your CAADE certification file, then please complete and enter below only your formal education.

Completing this form is "required"...

If you are credentialed as a CAS, Certified Addictions Specialist, Certified Alcoholism and Other Drug Addictions Recovery Specialist, or have an out of state credential and/or license. You must document at least 350 hours of formal AOD coursework.

All college or university work should be supported by documentation of an official academic certificate, degree, or transcript (copies acceptable). Accredited learning institutes or certificate programs attended and completed should be supported by attaching a copy of your certificates of achievement/completion. Do not enter special training or continuing education courses below.

Educational Institution	City and State	Dates Attended	Date Graduated	Discipline Studied	Units Completed	Degree Earned
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1 Community College

2 College or University

3 Graduate School(s)

4 Accredited Learning Institutes & Programs

- [A]
- [B]
- [C]

Comments or Additional Information:

Copies of Certificates, Degrees, or Transcripts Attached For Items: 1 2 3 4

Applicant's Signature <small>Rev 07.25.09/las/d</small>	Print Applicant's Name Page 6	Date
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EDUCATION FOR CAADE-CCS APPLICANT

Specifically Related and Directed to the Competencies of Clinical Supervision

Documentation of no less than **40 hours** of didactic/academic training must be completed in Clinical Supervision specifically related to Competencies for Substance Abuse Treatment Clinical Supervisors as per CSAT'S Technical Assistance Publication TAP 21-A.*

**Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Treatment*

This education may be obtained from a CAADE-approved continuing education provider or from an accredited college or university. Any exception to this requirement must be approved by the CCS Certification Coordinator.

Clinical supervision competencies are presented under two major headings identified as *foundation areas* and *performance domains*. A **minimum of 4 hours** of education must be completed **in each area and domain** in order to meet the initial competency training criteria.

Foundation areas identify the broad knowledge and concepts essential to supervisory proficiency. The competencies representing these foundations of supervision are grouped into five **(5) areas**:

- FA1 Theories, Roles, and Modalities of Clinical Supervision
- FA2 Leadership
- FA3 Supervisory Alliance
- FA4 Critical Thinking
- FA5 Organizational Management and Supervision

Performance domains identify the specific responsibilities, skills, and abilities essential for supervisors protecting client welfare, improving clinical services, developing a competent staff, and fulfilling an organization's missions and goals. The competencies relating to these performance domains specific to supervisory practice are grouped into five **(5) domains**:

- PD1 Counselor Development
- PD2 Professional and Ethical Standards
- PD3 Program Development and Quality Assurance
- PD4 Performance Evaluation
- PD5 Administration

NOTE: Clinical supervision is distinguished from **administrative supervision**; however, in substance use disorder treatment settings, the two (2) kinds of supervision significantly overlap.

Applicant Initial: _____

VERIFICATION OF EXPERIENCE & HOURS EARNED FOR CAADE-CCS APPLICANT

After receiving an approved alcohol and drug counseling credential issued by your certifying organization, you may have earned additional service hours between your initial certification and the current period in which you are requesting the CAADE – CCS Certified Clinical Supervisor Credential.

You must have earned at least 10,000 hours (in no less than 4 years or no more than 2500 hours per year) in providing alcohol and drug counseling services with at least 4,000 of those hours (earned in no less than 2 years) while performing clinical supervision duties. Please check the box that represents the AOD credential(s) currently held. Then enter below the additional hours earned in order to calculate how your 10,000 hours were obtained.

Credential Held	Hours Earned At Certification	Add'l Hrs Earned	TOTAL Service Hours Earned	Dates and Years Hours Were Earned At Service Sites A, B, C, & D Noted Below
<input type="checkbox"/> CATC	_____	+ _____	= _____	
<input type="checkbox"/> CADDC	_____	+ _____	= _____	
<input type="checkbox"/> CAS	_____	+ _____	= _____	
<input type="checkbox"/> CCS	<u>10,000</u>	+ _____	= _____	
<input type="checkbox"/> Other	_____	+ _____	= _____	

Description/Explain:

Facility Name(s)	Address - City - State	Phone Number
A)		
B)		
C)		
D)		

Supervisor Name(s)* <small>*(If applicable)</small>	Address – City – State	Phone Number
A)		
B)		
C)		
D)		

I certify that all of the above information is true and correct and I give consent for its verification.

Applicant's Signature Rev 07.25.09/las/d	Print Applicant's Name Page 9	Date
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If you meet the "Waiver" requirements outlined on Page B, Section (d) of the instructions, you may complete Page 10-B instead of Page 10-A. If you have had supervision of your supervision experience, then we would encourage you to also complete Page 10-A in the future event CA-DADP requests such documentation.

SUPERVISION OF SUPERVISION VERIFICATION

FOR CAADE – CCS APPLICANT [208 Hours Requirement]

******Photo copy additional pages for each supervisor providing you supervision of your supervision responsibilities. You will need a separate sheet for each supervisor. BOTH, you and your supervisor must sign and date this form.**

The CCS Credential requires that each professional advancing to the CCS credential must have a minimum of 208 hours of documented supervision of their supervision experience verified by a credentialed CCS-Certified Clinical Supervisor or Licensed Mental Health Professional.

These hours are to be obtained through individual or group supervision over a period of no less than 104 weeks/2 years while one is engaged in the capacity of a Supervisor-In-Training (SIT) or as a working Clinical Supervisor (CS). Please complete the information required below:

Enter beneath each month the total number of individual and/or group hours of supervision you received as a supervisor in training or as a working clinical supervisor during a specific month. You cannot earn more than 10 hours per month or exceed 104 hours per year.

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	=	TOTAL Hours
•														
•														
•														

I certify that all of the above information is true and correct and I give consent for its verification.

Applicant' Signature	Print Applicant's Name	Date
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Supervisor's Signature & Credential	Print Supervisor's Name	Date Verified
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Supervisor's Address: _____

Phone Number: _____ Facility Name: _____

If you meet the "Waiver" Requirements outlined on Page B, Section (d) of the instructions, you may complete this page instead of Page 10-A. If you have had supervision of your supervision experience, then we would encourage you to also complete Page 10-A. In the future event CA-ADP requests such documentation; then your portfolio will readily reflect such experience on file.

**CAADE – CCS APPLICANT
"WAIVER" OF SUPERVISION OF SUPERVISION REQUIREMENT**

****** AFFIDAVIT ******

I, (Print Name) _____ Degree(s) _____

Having earned the following licenses and/or credentials _____;
do hereby certify that I have experience that sufficiently substitutes for the 208 hours of supervision of supervision requirements hereby being waived. Supervisory experience earned which is being substituted in lieu of those 208 hours is as follows:

(Check and initial all qualifications that apply).

I have performed the duties of a Clinical Supervisor for _____ years.
The supervision duties performed at the agency/facility/organization listed below have been served over a period of _____ years; **and** during that time I have been a Clinical Supervisor working there while having no other Supervisor or Clinical Agency Director to report to.
Check if: Volunteer Employee Business Owner Other _____
Initial: _____

And/or; I am a licensed clinician with at least two full years experience in supervising others working in the addiction field at the following locations and times.
Initial: _____

Name Facility/Organization: _____

Address – City – State – Zip: _____

Phone – Fax Numbers: _____

Dates / Period of Service: _____

Applicant Signature

Date

CAADE – CCS APPLICANT’S LETTER OF PROFESSIONAL REFERENCE AND RECOMMENDATION

You are requested to submit a professional reference letter of recommendation.
The reference letter must:

- Be a signed and dated original letter (not copy)
- Be on an organization’s business letterhead noting the address, phone, and fax numbers
- Be submitted in a sealed envelope from that organization with a signature across the flap (Include both sealed letters with your application portfolio)
- Define the length of time known and nature of your working relationship relative to the person providing your reference letter.

Recommendation Letter

Must be from a certified clinical supervisor or licensed mental health professional having at least 5 years of experience in addiction counseling and who is familiar with your work as a supervisor; **or**,

From a professional colleague you’ve known at least for 1 year and who is familiar with your work as a supervisor.

You may submit more than one letter.

Please provide the following information regarding those individuals who will be providing references on your behalf.

#1 Name _____ Degree: _____

Type of Certification or License Held: _____ # of Years _____

Organization Name _____ Title _____

Address _____ City _____ State/Zip _____

Phone# _____ Fax # _____ Email: _____

Nature of your relationship: _____

#2 Name _____ Degree: _____

Registration, Certification, License Held: _____ # of Years _____

Organization Name _____ Title _____

Address _____ City _____ State/Zip _____

Phone# _____ Fax # _____ Email: _____

Nature of your relationship: _____

Applicant’s Name: _____ Date: _____

CAADE – VERIFICATION LETTER OF CCS APPLICANT’S SUPERVISION EXPERIENCE

Applicant: Please have your Clinical Supervisor, Agency Director, Program Manager, or Faculty Department Chair verify your supervisory experience. You must have a minimum of 4,000 hours (equivalent to 2 full time years) of experience *supervising others* providing AOD* treatment services. You may need to make several copies of this page for your use.

To Applicant’s Clinical Supervisor, Agency Director, Program Manager, or Faculty Dept. Chair:

The following professional is applying for advanced certification as a CAADE - Certified Clinical Supervisor.

Name: _____ Print Name _____.

All relevant experience must be verified specifying *Alcohol and Other Drug education, counseling, and treatment services provided by the applicant while performing in a supervisory capacity.

You may photocopy or scan this verification form letter onto your organization’s business letterhead. The letter must have an original signature and date.

To the CAADE CCS Certification Coordinator

c/o Laurie Sanders, LMFT, ICADC-II, ICCS

805.777.8477

2219-102 E. Thousand Oaks Blvd. #186, Thousand Oaks, CA 91362

- Please be advised that I am currently or have been the immediate supervisor** of the person noted above. Name: _____
- The above professional’s job title is/was: _____
- This person has worked for our organization Full-time Part-time
- Since his her original start date of: _____ through _____
- This individual has accrued work hours in a **supervisory capacity** totaling _____ hours of service for the time period stated above.
- A brief description of the professional’s **supervisory duties and responsibilities** follows:

For further questions or verification, I can personally be reached at the following:

Phone Number and Extension:

Fax Number:

Email Address:

Sincerely,

Original Signature

Title

Print Name

Date

CAADE California Association For Alcohol and Drug Counselors

MEMBERSHIP APPLICATION

Name:

Address:

City-State-Zip:

Email:

Phone Number _____ Fax _____

Select a membership category below:

- \$ 65 Annual Membership Fee (1 Year)**
 \$130 Biennial Membership Fee (2 Years)

• **Certification and/or licensing not required for membership**

Current Addiction Treatment Credential Held: Check all that apply

- CATC CADC CAS CCS LICENSED
 OTHER: _____ State _____

- \$ 25 Student - Annual Membership Fee (1 Year)**

- \$ 50 Student - Biennial Membership Fee (2 Years)**

Current ADS Registered Student** at College: _____

***You are not considered eligible for student membership if you are currently a credentialed AOD counselor or licensed mental health professional.*

Include your membership fee made payable to CAADE in the form of check or money order. Or you may pay by credit card or PayPal at www.caade.org. After completing the payment process on-line, print your receipt and submit it with your application as proof of payment. **Mail application and payment/proof of payment to:**

Becca Porter, CATC
CAADE MEMBERSHIP
P.O. Box 7297
Ventura, CA 93006
Phone & Fax 805.641.1677
Email caadecentraloffice@yahoo.com
Website www.caade.org

CODE OF ETHICS, CONDUCT, AND RESPONSIBILITIES FOR THE CERTIFIED CLINICAL SUPERVISOR – CCS AND THE SUPERVISOR IN TRAINING - SIT

Ethical Standards Adopted 4.20.09
Revision Update 7.25.09

PRINCIPLE 1: NON-DISCRIMINATION

- a. The CCS/SIT shall not discriminate against clients, interns/supervisees, or other professionals based on race, religion, age, disability, national ancestry, gender, sexual orientation, economic condition or status.
- b. The CCS/SIT shall be knowledgeable about disabling conditions, demonstrate empathy and consideration in interactions with clients, interns/supervisees, and other professionals with disabilities.
- c. The CCS/SIT shall make available to the best of his/her ability accommodations that allow others with disabilities to receive services, training, and supervision.

PRINCIPLE 2: RESPONSIBILITIES

- a. The CCS/SIT shall espouse objectivity and integrity, and maintain the highest standards one can offer.
- b. The CCS/SIT shall maintain respect for and uphold policies, procedures, practices, protocol and management functions of the agencies and institutions within which CCS/SIT services are performed, but may take appropriate initiative toward improving such when it will better serve the safety and welfare of clients, interns/supervisees, other professionals, and the agency/institution as a whole.
- c. The CCS/SIT who is aware of unethical or unprofessional conduct and practices of other colleagues shall report such inappropriate behavior to the appropriate authorities.
- d. The CCS/SIT role is that of teacher, educator, tutor, coach, guide, facilitator, monitor, evaluator, advisor, mentor, and servant to developing professionals.
- e. The CCS/SIT shall provide supervision in order to facilitate the goals and functions of supervision which are to:
 - Monitor client safety, welfare and quality of care provided by the supervisee.
 - Enhance counselor's/supervisees professional development by guiding him/her towards a higher degree of performance, confidence, and clinical wisdom.
 - Evaluate the professional development of the supervisee through continuous feedback to identify needs for his/her next level of growth and change.
 - Maintain a supportive learning environment.
 - Provide guidance and oversight in order that the supervisee is engaging within safe, legal, and ethical practice standards.
- f. The CCS/SIT shall either establish or follow a previously prescribed formal or informal learning contract developed for the supervisee that raises awareness, promotes growth in knowledge of substance abuse and related disorders, understanding and maintaining accountability practices relative to fiscal, legal, ethical, academic, and credentialing requirements, and increasing counseling skills and client engagement practices.
- g. The CCS/SIT shall utilize supervisory interventions which enhance the supervisee's professional growth through facilitative, prescriptive, confronting, catalytic, and conceptual-contextual interventions.
- h. The CCS/SIT shall utilize effective methods of supervision such as: contracting an individual development plan with time sensitive goals and objectives, observing, listening, demonstrating, evaluating, and reviewing the supervisee's work.
- i. The CCS/SIT shall supervise within the context of an established model of supervision which fosters a process of insight, understanding, and skill acquisition.
- j. The CCS/SIT shall be knowledgeable of and engage in the four (4) primary administrative, clinical, evaluative, and supportive components of supervisory responsibility known as ACES.
- k. The CCS/SIT shall strive for and maintain traits that facilitate effective supervision.

Initial: _____ / Date: _____

PRINCIPLE 3: COMPETENCE

- a. The CCS/SIT shall recognize that the profession is founded on state, national, and international standards of competency which promote the best interests and welfare of society, clients, interns/supervisees, other professionals, and the profession as a whole.
- b. The CCS/SIT shall recognize and encourage self, interns/supervisees, and other professionals to engage in the need for ongoing education and training as a component of professional competency.
- c. The CCS/SIT shall recognize and uphold professional boundaries, understand and provide services only within one's scope of practice, responsibilities, and competencies.
- d. The CCS/SIT shall be cognizant of one's own personal impairments and limitations and avoid interactions or practices that could pose potential harm to clients, colleagues, interns/supervisees, other professionals, and the agency/institution.
- e. The CCS/SIT shall support employee assistance programs and encourage self-development and well-being through other therapeutic assistance services and counseling. Should the CCS/SIT recognize the effect of one's impairment on professional performance, then the CCS/SIT shall be willing to seek appropriate treatment for ones self.
- f. The CCS/SIT shall be proficient as a supervisor as per the foundation areas and performance domains outlined and defined in CSAT'S* Technical Assistance Publication Tap 21-A "Competencies for Substance Abuse Treatment Clinical Supervisors. (*SAMHSA Center for Substance Abuse Treatment).

PRINCIPLE 4: LEGAL AND ETHICAL STANDARDS

- a. The CCS/SIT shall uphold legal and ethical codes which pertain to professional conduct and practices.
- b. The CCS/SIT shall be fully cognizant of all federal and state laws, county and city codes and standards, agency and institutional standards and protocol respective to governing the practice of alcohol/drug abuse counseling and clinical supervision requirements.
- c. The CCS/SIT shall not claim either directly or by implication, professional qualifications and/or affiliations that the CCS/SIT does not possess.
- d. The CCS/SIT will not use, possess or be under the influence of alcohol or illicit drugs on any program premises or while counseling, consulting, conducting supervision, and/or attending other program services.
- e. The CCS/SIT shall not allow or permit another person to possess or be under the influence of alcohol or illicit drugs on any program premises or while attending and/or conducting program services.
- f. The CCS/SIT shall collaborate with other health care professionals on behalf of a client who is receiving prescribed medications.
- g. The CCS/SIT shall recognize and inform clients of the necessary referrals and after care suggestions important sustaining the client's recovery process.
- h. The CCS/SIT shall prevent the practice of alcohol and drug counseling by any unqualified, unregistered, non-credentialed, unlicensed, or unauthorized individuals.
- i. The CCS/SIT shall not permit the supervisor's name to be used in connection with any service or product that is incorrect or misleading.
- j. The CCS/SIT shall not use the affiliation with CAADE for purposes that are not consistent with or in adherence of the stated purposes of the Association.

PRINCIPLE 5: PUBLICATIONS AND ADVERTISING

- a. The CCS/SIT shall ensure that publication credit is acknowledged and assigned to those who have contributed to the published material and for the work upon which the publication is based.
- b. The CCS/SIT who makes professional presentations, publishes books, and articles, shall ensure that sources of information and contributions are properly cited.
- c. The CCS/SIT shall be responsible for ensuring that printed materials, presentation materials, and advertising/marketing materials are presented in a professional and factual manner.
- d. The CCS/SIT and his/her supervisees shall clearly identify without misrepresentation one's credentials by listing the correct initials and certification/license numbers shown on websites, business cards, stationary letters, signage, advertising/marketing literature, publications, articles, presentation materials, etc.
- e. The CCS/SIT shall advise all trainees/interns that they shall reference on business cards or other printed materials that they are a trainee/intern. Business cards should also reflect the name of the supervisee's clinical supervisor and/or agency director.

PRINCIPLE 6: WELFARE OF OTHERS

- a. The CCS/SIT shall hold the welfare and safety of the client paramount when making any decisions, recommendations, referrals, treatment planning and procedures, or discharge from treatment.
- b. The CCS/SIT shall also hold the welfare and safety of interns/supervisees, and/or other professionals important when making clinical decisions affecting those individuals.
- c. The CCS/SIT shall disclose this code of ethics to interns/supervisees and other relevant professionals, and ensure that interns/supervisees inform their clients of the following: 1) the counselor/supervisee is being clinically supervised 2) contact information for the clinical supervisor 3) the counselor/supervisee is operating under a code of ethics from a state approved certifying organization 4) the code shall be made available upon request.
- d. The CCS/SIT shall terminate the counseling, supervisory, and/or consulting relationship when it is reasonably clear that the respective relationship is not beneficial to the individual receiving services.
- e. The CCS/SIT shall not use or encourage a client, intern/supervisee, and/or professional to participate in any demonstration, research, training, supervision activity, or other non-treatment activity when such participation would pose potential harmful consequences to them or when those individuals are not fully informed about their participation.
- f. The CCS/SIT shall take care to provide services and supervision in a safe and appropriate environment and provide appropriate services within one's scope of practice, competency, and responsibility.
- g. The CCS/SIT shall take care to provide services within a context and environment of safety that will ensure client privacy, safety, and welfare.

PRINCIPLE 7: CONFIDENTIALITY

- a. The CCS/SIT and/or one's supervisees working in the best interests of a client, shall embrace as a primary obligation, the duty of protecting one's rights under confidentiality and shall not disclose confidential information acquired in counseling, consulting, teaching, supervising, practice or investigation without an appropriately executed consent.
- b. The CCS/SIT and/or one's supervisees shall provide the client his/her rights regarding confidentiality, in writing, as part of informing the client in any areas likely to effect the client's confidentiality. This includes, but is not limited to the recording of the clinical interview, the use of information for insurance purposes, and training or observation by another party.
- c. The CCS/SIT shall ensure that individuals, interns/supervisees, and other professionals under the CCS's/SIT's supervision also adhere to protecting and upholding client rights and consents as stated above.
- d. The CCS/SIT and/or one's supervisees shall take appropriate measures to handle and safeguard client records in a manner that preserves their confidentiality, addresses safe storage and disposition of those confidential records.
- e. The CCS/SIT and/or one's supervisees shall ensure the information and data obtained including any form of electronic communication is secured by available security practices and methodology. Client data shall be limited to information that is necessary, relative, and appropriate to the services provided and be accessible only to appropriate personnel.
- f. The CCS/SIT and/or one's supervisees shall adhere to all federal and state laws regarding confidentiality and shall uphold the responsibility of self and supervisees to report clinical information in specific circumstances, such as child, elder, and adult-dependent abuse, and the duty to warn as required to appropriate authorities, supervisors, and potential victims.
- g. The CCS/SIT and/or one's supervisees shall discuss the information obtained in clinical, consulting, observational or supervisory relationships only in appropriate settings for professional purposes and on a relative need to know basis. Written and oral reports, presentations, teaching and instructional materials, and supervision case studies shall protect the identity of the client(s)/parties by removing all identifying information, shall ensure the appropriate handling of client information, and present only data/information germane and pursuant to the purpose of evaluation, diagnosis, treatment planning, interventions, referrals, progress and compliance, discharge planning, and after care.

PRINCIPLE 8: CLIENT RELATIONSHIPS

- a.** The CCS/SIT and/or one's supervisee has the responsibility to safeguard the integrity of the counseling relationship and to ensure that the client has reasonable access to effective treatment.
- b.** The CCS/SIT and/or one's supervisees shall provide the client and/or guardian with accurate and complete information regarding the extent of the potential professional relationship.
- c.** The CCS/SIT and/or one's supervisees shall inform the client and obtain the client's agreement in areas likely to effect 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.
- d.** The CCS/SIT and/or one's supervisees shall not engage in dual relationships with clients or each other, which have any significant probability of causing harm to the client, counseling relationship, intern/supervisee supervisory relationship, and/or other related professional relationship. A dual relationship occurs when a CCS/SIT, CATC, supervisee, and/or another professional and his/her client engage in a separate and distinct relationship, either simultaneously with the therapeutic relationship/supervisory relationship or within two years following the termination/closure of the professional relationship. Therefore, the CCS/SIT, CATC, supervisee, and/or other professional should avoid the provision of services to friends, family members, or any person with whom they have or have had a social, business or financial relationship.
- e.** The CCS/SIT and/or one's supervisees shall not exploit relationships with current or former clients for personal or financial gain, including social or business relationships. This could include, but not be limited to, borrowing from or loaning money to clients; accepting gifts from clients; accepting favors from clients such as volunteer labor; or accepting goods or services in lieu of payment.
- f.** The CCS/SIT and/or one's supervisees shall not under any circumstance engage in sexual behavior (both verbal and non-verbal) with each other, clients, clients' family members, or other persons known to be significant to the client, either simultaneously with the professional relationship or within two years following the termination of the professional relationship.
- g.** The CCS/SIT and one's supervisees shall not accept as clients or as supervisees anyone with whom they have engaged in sexual behavior.
- h.** The CCS/SIT and one's supervisees shall avoid dual relationships with current or past clients in self-help based recovery groups (such as AA, NA, AL-ANON, Smart Recovery, etc.) by not sponsoring a current or former client; by not having as a client a former sponsor or sponsee; by avoiding meetings whenever possible, where clients are present; and by maintaining clear and distinct boundaries between the CCS/SIT, professional counselor, supervisee and self-help sponsor roles.
- i.** The CCS/SIT and one's supervisees will refrain from promoting or advocating any particular religious orientation or from utilizing any particular religious doctrine as a part of a treatment program, except those circumstances where such religious orientation is an accepted part of the program's mission and clients have voluntarily agreed to participate in such a program.

PRINCIPLE 9: INTERPERSONAL/ INTER-PROFESSIONAL RELATIONSHIPS

- a.** The CCS/SIT shall treat others with courtesy, respect, fairness, and in good faith and manners.
- b.** The CCS/SIT shall refrain from offering professional services to a client in counseling with another professional except with the knowledge of the other professional or after the termination of the client's relationship with the other professional.
- c.** The CCS/SIT shall cooperate with duly constituted professional ethics committees and promptly supply necessary information unless constrained by the demands of confidentiality.
- d.** The CCS/SIT shall not in any way exploit relationships with other professionals, supervisors, supervisees, employer, employees, students, research participants, volunteers or clients.
- e.** The CCS/SIT shall seek resolution of workplace and/or professional interpersonal issues in an appropriately assertive, understanding, and sensitive manner, utilizing solution-focused protocols when such exist.

Initial: _____ / **Date:** _____

PRINCIPLE 10: FINANCIAL REMUNERATION

- a. The CCS/SIT and/or one's supervisees shall inform the client of agency financial policies and practices.
- b. The CCS/SIT and/or one's supervisees shall consider the ability of a client to meet the financial cost for professional services (sliding fee scale).
- c. The CCS/SIT and/or one's supervisees shall not engage in fee splitting. They shall not send or receive any commission or rebate or any other form of remuneration for referral of clients for professional services.
- d. The CCS/SIT shall not accept a private fee, gift, and/or gratuity for professional services with an individual who is entitled to such services through the institution or agency within which the CCS/SIT is employed or contracted to work.
- e. The CCS/SIT and one's supervisees engaged in the practice of counseling shall not at any time use one's relationship with clients to exploit clients for personal gain, for the benefit of an agency, or to become engaged in any commercial enterprise of any kind. (Generally accepted and standard remuneration/fees received for services rendered are not applicable to this paragraph).

PRINCIPLE 11: SOCIETAL OBLIGATIONS

- a. The CCS/SIT shall to the best of their ability actively engage in legislative processes, encourage educational institutions, and the general public to change public policy, legislation, advance the understanding and study of addiction, and to make possible opportunities and choice of service for all human beings of any ethnic or social background whose lives are effected by or impaired by alcoholism and/or drug abuse.

PRINCIPLE 12: SUPERVISORY RELATIONSHIP

- a. *The CCS/SIT shall make every effort to uphold all of the foregoing principles as they may reciprocally apply and are relative to impacting the supervisor and supervisee relationship.*

ACKNOWLEDGMENT

As a Certified Clinical Supervisor (CCS) or Supervisor in Training (SIT), I will abide by the Code of Ethics, Conduct, and Responsibilities stated herein, and my signature below indicates my desire and authorization to grant a release of information and waiver of confidentiality related to any allegations or unprofessional conduct. I further consent, that such personal and professional information obtained can be shared with and further investigated by members of the CAADE Ethics and Certification Committees. Any legal or ethical violations and/or other sanctions relative to my ability to practice safely and competently may be disclosed to the California Department of Alcohol and Drug Programs or other counselor certifying agencies or boards. The undersigned also agrees to abide by the California Department of Alcohol and Drug Program's Administrative Code of Conduct outlined in Chapter 8, Sub-chapter 3, Section 13060.

Signature	Print Name	Date
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