

Certified Addiction Counselor Prep Course

High Impact Training & Counseling, Inc. is an Approved Education Provider by Georgia Addiction Counselors Association and NAADAC-National Association of Alcohol and Drug Counselors. The program is designed to assist trainees to prepare for the addiction counselor certification process.

The program will prepare trainees to successfully pass the written and oral exams for National Association of Alcohol and Drug Counselors and for International Certification & Reciprocity Consortium.

The format for the training is a TIER format. TIER I individuals are those who have only GED, High School diploma, and/or does not meet the two-year work experience required prior to sitting for the written exams for either GACA or IC&RC.

Program Dates:

The program meets on the second Saturday of each month.

Fee:

The fee for the once per month training is \$120.00, which includes CEU certificates, clinical supervision, and handouts.

Course length:

10 months

Location:

Classes are held at:

High Impact Training & Counseling, Inc.

41 Marietta St., Suite 809

Atlanta, GA 30303

404-523-6074

www.angermanagementofga.com

Contact Person:

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Forms of Payment:

- Cash
- Credit Card/debit card
- Money order

Addiction Counselor Training Course

The program will prepare trainees to successfully pass the written and oral exams for National Association of Alcohol and Drug Counselors and for International Certification & Reciprocity Consortium.

The Addiction Training Program is designed to meet the trainee at their level of readiness. This will be accomplished by a review of the trainee's education and years of experience in addictive disorders and matching their qualifications up with the requirements of the certification boards. After the review of qualifications, the trainee will be placed in the TIER System to prepare the written and case management review.



Georgia Addiction Counselors Association

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TIER I (GACA ONLY)

A. CAC LEVEL I

1. The applicant must have a high school diploma or equivalency (G.E.D.).
2. Within the past five (5) years, applicant must have been actively engaged in the practice of chemical dependency/abuse counseling for two (2) years (4,000 hours). This counseling must have been full-time paid or its part-time equivalent (4,000 hours). Volunteer counseling must have been supervised by a GACA Certified Clinical Supervisor.
3. Prior to application for certification, the applicant must have completed at least 180 clock hours of education in the field of addiction. A minimum of 100 clock hours of the education must have been within the past five (5) years.
4. The applicant must have received 96 hours of supervision by a Certified Clinical Supervisor. (a minimum of 10 hours in each counselor skill group).
5. Passing score on NCAC Level I or II National Certification Exam.
6. Must be cleared of all pending charges concerning drug and alcohol use or abuse, or felonies; or at least two years must have passed since the completion of all sentencing requirements to include probation. (Request for exception or appeals of non-felony charges may be made in writing to the Certification Board.)

CAC LEVEL II

1. The applicant is asked to be an active member of GACA.
2. The applicant must have a Bachelor's degree or higher degree.
 - The degree must be from a college or university that is accredited and listed on the Council for Higher Education Accreditation website (www.chea.org) or other approved reference list. A transcript noting course dates, grade, and credit hours, and degree earned is required for initial certification or upgrade.
 - If in doubt about your degree ask the Certification Board for a ruling.
3. Within the past eight (8) years, the applicant must have been actively engaged in the practice of chemical dependency/abuse counseling for three (3) years (6,000 hours). This counseling must have been full-time paid or its part-time equivalent (6,000 hours). Volunteer counseling must have been supervised by a GACA Certified Clinical Supervisor.
4. Prior to application for certification, the applicant must have completed at least 270 clock hours of education in the field of addiction. A minimum of 160 clock hours of the education must have been within the past five (5) years.
5. The applicant must have received 144 hours of supervision from a GACA Certified Clinical Supervisor. (a minimum of 10 hours in each counselor skill group).
6. Passing score on NCAC Level I or II National Certification Exam.
7. Must be cleared of all pending charges concerning drug and alcohol use or abuse, or felonies; or at least two years must have passed since the completion of all sentencing requirements to include probation. (Request for exception or appeals of non-felony charges may be made in writing to the Certification Board.)



REQUIREMENTS FOR CERTIFICATION

PORTFOLIO REQUIREMENTS:

1. Experience: Defined as supervised, paid or voluntary work experience in which the applicant has direct contact and responsibility for the AODA client. For a CADC OR CCDAC a total of 4,000 work experience hours must be documented. For the RADT, the applicant must document a minimum of one (1) year or two thousand (2000) hours experience of direct service (alcohol and drug counseling).
2. 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 six (6) hours of professional ethics education must be documented as a part of the educational hours required. A total of 270 hours of addiction-specific education must be documented by copies of transcripts, certificates of attendance, in-service reports, etc. All candidates for CADC certification must have a minimum of a bachelor's degree in a human service or related field. Applicants for the Certified Clinical Alcohol and Drug Abuse Counselor must have a minimum of a Masters Degree in a human service field with a clinical application. Official transcripts must be sent directly to the board from the college/university. All RADT candidates for certification must have a high school diploma or its equivalent and must be enrolled in a junior college, college or university. **Such college/university credits must be from a college or university licensed or accredited by the local government in order to be eligible.**
3. Supervised Practical Training: Defined as a supervised AODA setting which teaches the knowledge and skills of professional AODA counseling. This training may be part of the eligible work experience or may be completed under more than one supervisor or agency. A recommended minimum ratio is one (1) hour of supervision to ten (10) hours of practical experience. Examples of such training are observation, co-leading a skill area, solo experience, group supervision and supervision of process. A total of 300 supervised training hours must be documented, with a minimum of 10 hours in each of the twelve counselor core functions.
4. References: The applicant must provide three professional references with an acceptable score on each one. One reference must be from the latest work experience supervision; the other two must be from professionals who have had the opportunity to observe the applicant's skills and competencies. References must be returned directly to the board by the raters.
5. Code of Ethics: The counselor must sign the code of ethics form provided in their application packet.

Core Skill Group Training:

1. **Treatment Admission:** Treatment Admission: Tier I (Required)/Tier (Elective)

- **Definition: Screening:** Screening is the process by which the counselor, the client, and available significant others review the current situation, symptoms, and other available information to determine the most appropriate initial course of action, given the client's needs and characteristics and the available resources within the community.
- **Definition of Intake:** The administrative and initial assessment procedures for admission to a program
- **Definition of Orientation:** Describing to the client the following: general nature and goals of the program; rules governing client conduct and infractions that can lead to disciplinary action or discharge from the program; in a non-residential program, the hours during which services are available; treatment costs to be borne by the client, if any; and client rights.

Topics Addressed:

- Components to determine client eligibility and appropriateness for services
- Establishing a rapport and creating a therapeutic alliance
- Using various screening instruments including their purpose, application and limitations
- How to interpret the screening results
- Symptoms of intoxication, withdrawal, and toxicity for all psychoactive substances, alone and in interaction with one another.
- Physical, pharmacological, and psychological implications of psychoactive substance use.
- Effects of chronic psychoactive substance use or intoxication on cognitive abilities.
- Available resources for help with drug reactions, withdrawal, and violent behavior.
- When to refer for toxicity screening or additional professional help.
- How to gather information from collateral sources
- Applying confidentiality rules and regulations—client rights, confidentiality, and consent forms
- Documenting intake information
- Orientation procedures
- Understanding the DSM-IV
- Apply accepted criteria for diagnosis of substance use disorders in making treatment recommendations.
- The continuum of care and the available range of treatment modalities.
- Current *Diagnostic and Statistical Manual of Mental Disorders* (DSM) or other accepted criteria for substance use disorders, including strengths and limitations of such criteria.
- Use of commonly accepted criteria for client placement into levels of care.
- Multiaxis diagnostic criteria

2. Clinical Assessment: Clinical Assessment: Tier I (Required)/Tier II (Elective)

- Definition: counselor collaborates with the client and others to gather and interpret information necessary for planning treatment and evaluating client progress. Assessment is an ongoing process through which the

Topics Addressed

- Select and use a comprehensive assessment process that is sensitive to age, gender, racial and ethnic culture, and disabilities that includes but is not limited to:
 - History of alcohol and drug use
 - Physical health, mental health, and addiction treatment histories
 - Family issues
 - Work history and career issues
 - History of criminality
 - Psychological, emotional, and worldview concerns
 - Current status of physical health, mental health, and substance use
 - Spiritual concerns of the client
 - Education and basic life skills
 - Socioeconomic characteristics, lifestyle, and current legal status
 - Treatment readiness
 - Level of cognitive and behavioral functioning.
- Selecting and administering appropriate assessment instruments and protocols within the counselor's scope of practice
- Conducting comprehensive assessment interviews and collecting information from collateral sources.

3. Treatment Planning: Treatment Planning: Tier I (Required)/Tier II (Elective)

- Definition: A collaborative process in which professionals and the client develop a written document that identifies important treatment goals; describes measurable, time-sensitive action steps toward achieving those goals with expected outcomes; and reflects a verbal agreement between a counselor and client.

Topics Addressed

- Treatment interventions, client placement criteria, and outside referral options. Current research findings on various treatment models. Alternatives to treatment, including no treatment.
- Matching interventions to the client's needs and resources.
- Explaining strategies in terms understandable to the client and significant others.
- Individualizing treatment plans that balance strengths and resources with problems and deficits.
- Negotiating and contracting a mutually agreeable plan.
- Writing a plan using positive, jargon-free, and proactive terms.

- Describe and document the treatment process, progress, and outcome.
- Demonstrating clear and concise oral and written communication.

4. **Counseling:** Counseling: TIER I & Tier II Required

- Definition: A collaborative process that facilitates the client's progress toward mutually determined treatment goals and objectives.

Elements of Counseling

- Individual Counseling
- Group Counseling
- Counseling, Families, Couples, and Significant Others

Counseling includes methods that are sensitive to individual client characteristics and to the influence of significant others, as well as the client's cultural and social context. Competence in counseling is built on an understanding of, appreciation of, and ability to appropriately use the contributions of various addiction counseling models as they apply to modalities of care for individuals, groups, families, couples, and significant others.

Topics Addressed

- Theories, research, and evidence-based literature.
- Approaches to counseling that are person centered and have demonstrated effectiveness with substance use disorders.
- Definitions of warmth, respect, genuineness, concreteness, and empathy.
- The role of the counselor.
- Transference and countertransference.
- Alternative theories and methods for motivating the client in a culturally appropriate manner.
- Stages-of-change and motivational interviewing models used in engagement and treatment strategies
- Apply Counseling theory, treatment, and practice literature as it applies to substance use disorders.
- Describe relapse prevention theory, practice, and outcome literature.
- Describe behaviors and cognition consistent with the development, maintenance, and attainment of treatment goals.
- Counseling treatment methods that support positive client behaviors consistent with recovery
- Differences between crisis prevention, crisis intervention, and other kinds of therapeutic intervention.
- Carry out the actions necessary to form a group, including but not limited to determining group type, purpose, size, and leadership; recruiting and selecting members; establishing group goals and clarifying behavioral ground rules for participating; identifying outcomes; and determining criteria and methods for termination or graduation from the group.
- Understanding Co-occurring Disorders

Client, Family, and community education:

Definition: The process of providing clients, families, significant others, and community groups with information on risks related to psychoactive substance use, as well as available prevention, treatment, and recovery resources.

Topics Addressed:

- The continuum of use and abuse, including the warning signs and symptoms of a developing substance use disorder
- How psychoactive substance use by one family member affects other family members or significant others.
- The family's potential positive or negative influence on the development and continuation of a substance use disorder.
- The role of the family, couple or significant other in treatment and recovery.
- Educating clients, families, and the community about the effect of substance use disorders on the family, couple, or significant others.
- Identifying and making referrals to local health, allied health, and behavioral health resources.

5. Documentation: TIER I and TIER Required

- Definition: The recording of the screening and intake process, assessment, treatment plan clinical reports, clinical progress notes, discharge summaries, and other client-related data.

Topics Addressed:

- Demonstrate knowledge of accepted principles of client record management.
- Regulations pertaining to client records.
- The essential components of client records, including release forms, assessments, treatment plans, progress notes, and discharge summaries and plans.
- Composing timely, clear, complete, and concise records that comply with regulations.
- Documenting information in an objective manner.
- Prepare accurate and concise discharge summaries.
- Document treatment outcome, using accepted methods and instruments.
- Knowledge of Federal, State, and program confidentiality rules and regulations.

6. Case Management/Service Coordination: TIER I Required and TIER II Elective

- Definition: The administrative, clinical, and evaluative activities that bring the client, treatment services, community agencies, and other resources together to focus on issues and needs identified in the treatment plan.
- Service coordination, which includes case management and client advocacy, establishes a framework of action to enable the client to achieve specified goals. It involves collaboration with the client and significant others, coordination of treatment and referral services, liaison activities with community resources and managed care systems, client advocacy, and ongoing evaluation of treatment progress and client *needs*.

Topics Addressed:

- Initiate collaboration with the referral source.
- How to access and transmit information necessary for referral.
- Describe the missions, functions, and resources of the community service network.
- Explain managed care and other systems affecting the client.
- Determine eligibility criteria for referral to community service providers.
- Describe appropriate confidentiality rules and regulations.
- Have a working knowledge of terminologies appropriate to the referral source.
- Implement documentation requirements and confidentiality rules and regulations.
- Knowledge of how to apply confidentiality rules and regulations to documentation and sharing of client information.
- Ethical standards related to confidentiality rules and regulations.
- Clients' rights and responsibilities.
- Know how to apply confidentiality rules and regulations in emergency situations (medical/suicide prevention/mandatory reports of child abuse or neglect situations).

7. Discharge planning and continuing:: TIER I Required and TIER II Elective

- Definition: Discharge planning will begin at the initial assessment or as soon as possible after treatment is initiated. A proposed plan for discharge follow-up care, referred to as a Transition Plan, will be clearly documented in the client's clinical record. Care decisions are based on the client's identified needs, preferences, and care priorities. These needs and care priorities are continually assessed throughout treatment to facilitate timely and appropriate discharge and continuous post discharge care.

Topics Addressed:

- Develop a description of the reasons for treatment or services, treatment/services provided, a description of the individual's condition at discharge, diagnosis at beginning and end of treatment, involvement of the family or representative, and any instructions given upon discharge.
- Document the client and/or a family representative participates in the development of a written discharge plan.

- The discharge plan will include, but not necessarily be limited to the identification of the client's needs for continued care or support services and the specific resources to be utilized to meet those needs.
- Document the discharge plan shall be completed in a timely manner so that appropriate arrangements for care management are made before discharge and the plan will be documented in the clinical record.
- Document the client and/or family member/representative indicate their understanding and agreement by signing the discharge plan.
- Document a post-discharge follow-up will be completed upon discharge to assess the effectiveness of services and whether additional services are needed.

8. Legal, Ethical and Professional Growth Issues: Tier I & Tier II Required

- Definition: The obligations of an addiction counselor to adhere to accepted ethical and behavioral standards of conduct and continuing professional development.

Topics Addressed:

- Describe federal, state, and agency regulations that apply to addiction counseling.
- Apply confidentiality rules and regulations in addiction counseling.
- Explain clients' rights and responsibilities.
- Explain legal ramifications of noncompliance with confidentiality rules and regulations.
- Describe legal ramifications of violating clients' rights.
- Describe grievance processes.
- Use a range of supervisory options to process personal feelings and concerns about clients.
- Conduct self-evaluations of professional performance applying ethical, legal, and professional standards to enhance self-awareness and performance.
- Understanding Dual Relationships
- Develop ethical decision making skills