

**APPLICATION HANDBOOK  
FOR**

**ALCOHOL AND DRUG  
COUNSELORS  
(CADC, IADC, IAADC)**

**MAY 2010**



**Iowa Board  
of Certification**

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# APPLICATION HANDBOOK for ALCOHOL AND DRUG COUNSELORS

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# IOWA BOARD OF CERTIFICATION

## MISSION

The Iowa Board of Certification provides the professional credentialing process for treatment and prevention providers as a means to enhance community health.

## VISION

To enhance community health, one professional at a time.

**For the Patient/Client:** To assure competent, professional alcohol and drug abuse services to persons suffering from chemical dependency; to improve the quality of service being provided to the client and family members.

**For the Public:** To assure professional competency that will meet standards required for licensing, accreditation and third-party payers.

**For the Alcohol and Drug Abuse Professional:** To provide a respected, marketable credential of professional competency; to enhance the role of the addiction professional in alcohol and drug abuse treatment.

**For the Profession:** To provide a method whereby the highest professional standards can be established, maintained and updated.

Three levels of certification are awarded to qualified applicants: Certified Alcohol and Drug Counselor (CADC), International Alcohol and Drug Counselor (IADC), and the International Advanced Alcohol & Drug Counselor (IAADC). Both the IADC and IAADC credential is eligible for reciprocity with members of International Certification and Reciprocity Consortium/Alcohol and Other Drug Abuse (IC&RC).

## **RESIDENCY REQUIREMENT**

The applicant must live and/or work in Iowa at least 51% of the time at the time of application for initial certification, recertification, and reactivation.

## **APPLICATION HANDBOOK**

This Application Handbook contains information you will not only need to become certified, but also will be very useful after the certification process. Please keep this handbook to use as a referral source. You can also find continually updated versions of this handbook on our web site, free for printing yourself.

# CERTIFICATION CRITERIA

It is the belief of the Iowa Board of Certification that the applicant must demonstrate the ability to perform the Core Functions/Domains necessary to provide quality client care. Thus, the alcohol and drug counselor certification process is based upon a specific measurable process to determine the applicant's ability to demonstrate these competencies. Applicants for certification must also meet established education and experience requirements.

## REQUIREMENTS

### **Certified Alcohol and Drug Counselor (CADC)**

#### **1 through 3 required**

1. Satisfy the requirements under the Education Track or the Experience Track (see below).
2. Receive a passing score on the Supervisor's Counselor Evaluation (Form 09).
3. Receive a passing score on the IC&RC written test.

#### **Education Track**

- a. High school diploma or general education diploma. 24 semester hours (or 33 quarter hours) of college level credit in substance abuse or its related fields (related fields are Counseling, Psychology, Sociology, Social Work, Human Services, and Criminal Justice). A minimum grade of "C" must be earned or the course will be ineligible. Documentation of the 24 semester hours will be according to instructions on Form 03, "Education Resume."

**In addition**, a minimum of 150 clock hours of relevant education is required. These 150 clock hours may be a combination of college courses, trainings, and workshops. Some special conditions apply; namely,

- \* Specifically, hours must be earned as:
  - o 45 clock hours in Counseling Theories & Techniques
  - o 45 clock hours in Alcohol and Drug Specific
  - o 6 clock hours in Special Populations
  - o 6 clock hours in Counseling Ethics
  - o 3 clock hours in Racial/Ethnic

The remaining hours may be earned under any of the Knowledge and Skill Competencies.

- \* Applicants may utilize up to 50% of the education hours from online/distance learning or IBC approved in-service training. An in-service training is the education and training which occurs within the counselor's agency, *only for* agency staff and conducted *only by* agency staff.

- \* If using college classes, the formula for converting college credit to clock hours is: one semester hour equals 15 clock hours and one quarter hour equals 10 clock hours. A minimum grade of "C" must be earned or the course will be ineligible.

Documentation of this will be according to instructions on Form 04, "Workshop Documentation."

**and**

- b. Six months full-time (or 1,000 clock hours) of supervised experience in substance abuse counseling within the past three years. Please see page 8 for information regarding supervised experience. Documentation of this will be according to instructions on Form 05, "Experience Resume."

Of the supervised experience, at least 500 clock hours must be documented in performing the Core Functions of the Alcohol and Drug Counselor and 36 of the hours in direct supervision with a qualified supervisor. The following is a list of the minimum hours that must be spent **performing** each of the Core Functions in a substance abuse setting.

<i>Screening:</i>	15 clock hours
<i>Intake:</i>	20 clock hours
<i>Orientation:</i>	20 clock hours
<i>Assessment:</i>	30 clock hours
<i>Treatment Planning:</i>	50 clock hours
<i>Counseling:</i>	50 clock hours
<i>Case Management:</i>	50 clock hours
<i>Crisis Intervention:</i>	15 clock hours
<i>Client Education:</i>	30 clock hours
<i>Referral:</i>	15 clock hours
<i>Reports and Record Keeping:</i>	30 clock hours
<i>Consultation:</i>	30 clock hours

The remaining hours may be performed under any of the Core Functions. Documentation of this will be according to instructions on Form 06, "Documentation of Core Function Experience."

**OR**

**Experience Track**

- a. High school diploma or general education diploma. 150 clock hours of training in the Alcohol and Drug Counselor Knowledge and Skill Competencies. These 150 clock hours may be a combination of college courses, trainings, and workshops. Some special conditions apply; namely,

- \* Specifically, hours must be earned as:
  - o 45 clock hours in Counseling Theories & Techniques
  - o 45 clock hours in Alcohol and Drug Specific
  - o 6 clock hours in Special Populations
  - o 6 clock hours in Counseling Ethics
  - o 3 clock hours in Racial/Ethnic

The remaining hours may be earned under any of the Knowledge and Skill Competencies.

- \* Applicants may utilize up to 50% of the education hours from online/distance learning or IBC approved in-service training. An in-service training is the education and training which occurs within the counselor's agency, *only for* agency staff and conducted *only by* agency staff.
- \* If using college classes, the formula for converting college credit to clock hours is: one semester hour equals 15 clock hours and one quarter hour equals 10 clock hours. A minimum grade of "C" must be earned or the course will be ineligible.

Documentation of college hours will be according to instructions on Form 03, "Education Resume," and workshop hours will be according to instructions on Form 04, "Workshop Documentation."

**and**

- b. One and a half years full-time (or 3,000 clock hours) of supervised experience in performing the Core Functions of the Alcohol and Drug Counselor within the past three years. Please see page 8 for information regarding supervised experience. Documentation of this will be according to instructions on Form 05, "Experience Resume."

Of the supervised experience, at least 500 clock hours must be documented in performing the Core Functions of the Alcohol and Drug Counselor and 36 of the hours in direct supervision with a qualified supervisor. The following is a list of the minimum hours that must be spent **performing** each of the Core Functions in a substance abuse setting.

<i>Screening:</i>	15 clock hours
<i>Intake:</i>	20 clock hours
<i>Orientation:</i>	20 clock hours
<i>Assessment:</i>	30 clock hours
<i>Treatment Planning:</i>	50 clock hours
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<i>Case Management:</i>	50 clock hours
<i>Crisis Intervention:</i>	15 clock hours
<i>Client Education:</i>	30 clock hours
<i>Referral:</i>	15 clock hours
<i>Reports and Record Keeping:</i>	30 clock hours
<i>Consultation:</i>	30 clock hours

The remaining hours may be performed under any of the Core Functions. Documentation of this will be according to instructions on Form 06, "Documentation of Core Function Experience."

## **International Alcohol and Drug Counselor (IADC)**

### **1 through 4 required**

There is one level of IADC, and this credential is reciprocal with other IC&RC boards offering the ADC credential.

1. High school diploma or general education diploma. Completion of 270 clock hours in the Alcohol and Drug Knowledge and Skill Competencies. These 270 clock hours may be a combination of college courses, trainings, and workshops. Some special conditions apply; namely,

- \* At least 30 hours must have been earned within the 24 months preceding the application.
- \* Specifically, hours must be earned as:
  - o 90 clock hours in Counseling Theories & Techniques
  - o 90 clock hours in Alcohol and Drug Specific
  - o 6 clock hours in Counseling Ethics
  - o 3 clock hours in Racial/Ethnic

The remaining hours may be earned under any of the Knowledge and Skill Competencies.

- \* Applicants may utilize up to 50% of the education hours from online/distance learning or IBC approved in-service training. An in-service training is education and training which occurs within the counselor's agency, *only for* agency staff and conducted *only by* agency staff.
- \* If using college classes, the formula for converting credit to clock hours is: one semester hour equals 15 clock hours and one quarter hour equals 10 clock hours. A minimum grade of "C" must be earned or the course will be ineligible.

Documentation of college hours will be according to instructions on Form 03, "Education Resume," and workshop hours will be according to instructions on Form 04, "Workshop Documentation."

2. Experience within the past six years in the **first 8 Domains** of the Alcohol & Drug Counselor is required, as follows (note – the 12 core functions are contained within the domains):

- Those with a Master's Degree or higher in a behavioral science must document 2000 hours experience
- Those with a Bachelor's Degree in a behavioral science must document 4000 hours experience
- Those with an Associate's Degree in a behavioral science must document 5000 hours experience
- Those without a college degree in a behavioral science must document 6000 hours of experience.

Documentation of this will be according to instructions on Form 05, "Experience Resume."

300 hours of on-the-job supervision in the **first 8 domains** of counseling are required for applicants with a Bachelor's degree or higher in a behavioral science, or 500 hours with less than a Bachelor's degree, with a minimum of 10 hours in each domain. The domains are:

***Clinical Evaluation***  
***Treatment Planning***  
***Referral***  
***Service Coordination***  
***Counseling***  
***Client, Family & Community Education***  
***Documentation***  
***Professional & Ethical Responsibility***

Documentation of this will be according to instructions on Form 06, "Documentation of Domain Experience." Note: the 12 Core Functions are contained within the Domains. See page 16.

3. Passing score on the Supervisor's Counselor Evaluation (Form 09).
4. Passing score on the IC&RC exam.

**International Advanced Alcohol and Drug Counselor (IAADC)**  
**(1 through 4 required)**

This credential is reciprocal with other IC&RC member boards offering the AADC credential.

1. A Master's Degree in a behavioral science (i.e. Counseling, Psychology, Sociology, Social Work, Human Services, and Criminal Justice) plus completion of at least 180 clock hours of AODA-specific education.

An additional six (6) clock hours must be obtained in counselor ethics as well as three (3) clock hours specific to Racial/Ethnic (see Glossary of Terms for definition).

- \* Applicants may utilize up to 50% of the education hours from online/distance learning or IBC approved in-service training. An in-service training is education and training which occurs within the counselor's agency, *only for* agency staff and conducted *only by* agency staff.
- \* If using college classes, the formula for converting credit to clock hours is: one semester hour equals 15 clock hours and one quarter hour equals 10 clock hours. A minimum grade of "C" must be earned or the course will be ineligible. ***Original transcripts must be sent directly to the IBC office from the college/university.***

Documentation will be according to instructions on Form 04 of the application, "Workshop Documentation." ***See Glossary of Terms for definitions.***

- 2,000 clock hours of supervised experience in performing the **all 10 Domains** of the IAADC within the past six years. **The domains are the same as those for IADC, with two additional domains:**

- *Research, Design Analysis & Utilization*
- *Clinical Supervision*

Documentation of this will be according to instructions on Form 05, "Experience Resume."

300 hours of on-the-job supervision in the 10 domains are required, with a minimum of 10 hours in each domain. Documentation of this will be according to instructions on Form 06, "Documentation of Domain Experience." Note: the 12 Core Functions are contained within the Domains. See page 16.

3. Passing score on the Supervisor's Counselor Evaluation (Form 09 of the application).
4. Passing score on the IC&RC written exam

### **SUPERVISED EXPERIENCE**

IBC believes that supervised experience in performing the Core Functions/Domains of the Alcohol and Drug Counselor is essential in order to obtain quality skills as an alcohol and drug counselor. Therefore, IBC requires a minimum amount of supervised experience be completed in order to qualify for certification.

For the purpose of counselor certification, IBC defines supervision as:

A specific and definitive clinical process of a counselor's professional development in the didactic, experiential, and application of the Core Functions/Domains. Supervision takes place in the context of one to one and/or small groups. Methods for supervision may include - but are limited to - case review, direct supervision, video and/or audio review, and observation of the counselor's professional interaction with clients and staff.

The main goals of clinical supervision are to provide the opportunity to develop competency in the Core Functions/Domains, provide a context for professional growth and development, and ensure a continuance of quality patient/client care.

### **QUALIFICATIONS TO SUPERVISE**

The following qualifications are necessary to supervise an applicant for certification purposes: IBC certified counselors in good standing are eligible to conduct supervision (either on site or through contracted services) for the purpose of certification. Certification applicants must be supervised by a counselor certified at a level equal to or higher than the level for which the applicant is applying. Accordingly,

- A CADC may supervise a practicum student or CADC applicant.
- An IAADC/ACADC/IADC may supervise a practicum student, CADC, or IADC applicant.
- An IAADC may supervise a practicum student, CADC, IADC or IAADC applicant.

**Supervisor Designate (for IADC and IAADC applicants only):** If an IADC applicant does not have a supervisor who is an ACADC/IADC, or an IAADC does not have a supervisor who is certified as an IAADC, that applicant may use his/her supervisor so long as the supervisor meets both of the following criteria:

- The supervisor must have at least 6000 hours (3 years full time) experience in the substance abuse setting, and would need to provide to the IBC office that a letter from his/her agency that he/she is a supervisor in good standing;
- The supervisor would need to submit to the IBC office a copy of his/her applicable certification or license (CADC, IADC, IAADC, CCDP, CCS, LISWA, LMSW, LBSW, LMFA, LMHC, MD, DO, Psychologist or other certification/license as approved by IBC).

## **APPLICATION PROCESS**

Read the certification requirements to determine whether your application will be for CADC, IADC or IAADC. Each application has a unique application number that appears on each form to be submitted. **The application and its forms will expire one (1) year from the date of issue.**

If an applicant meets the advanced education and experience requirements as defined in the application handbook, but is not currently certified, he/she may apply for the advanced credential by following the application process previously listed and by passing the IC&RC exam.

To complete the application, follow these steps:

1. Applicants begin the application process in one of two ways:
  - a. Applicant may download the handbook at no charge from the IBC web site; or,
  - b. Applicant may request the handbook for a nominal fee from the IBC office when ordering the application packet.

When the applicant is ready to apply, the applicant needs to download the "Request for IBC Application" from the IBC website to request the numbered application packet from the IBC office, and pay the non-refundable application fee. Included with the application will be a cover letter to the applicant with a stamped applicant identification number on it, appendices, and relevant stamped forms. A copy of the application request will be placed in the applicant's file.

2. The applicant is required to meet the education and experience requirements indicated for the credential. The applicant is scheduled for the IC&RC exam once the application is complete.
3. The applicant is required to complete and submit the entire application to IBC for eligibility and format review, along with the exam fee (\$75.00 of the written exam fee and \$115.00 of the computer-based (CBT) fee is non-refundable if applicant does not show for the written exam or does not give IBC at least a 40-day notice of test cancellation).
4. The applicant will take and pass the IC&RC exam. Both a paper exam and computer based exam are available.
5. The applicant will be notified of approval or denial of certification once exam scores are received in the IBC office.

## How to Apply

A. Go to the IBC website at [www.iowabc.org](http://www.iowabc.org), click on "Downloads," and print the "Request for IBC Application." Complete the form and mail it to the IBC office with the applicable fee.

B. **Complete the application – photocopies are accepted for those forms where you need more than one copy.** All information must be documented on the numbered forms provided in the application, and only original applications received from the IBC office will be accepted. Forms must bear original signatures. ***It is recommended you keep a copy of your completed application before mailing it to IBC.***

C. **Ask your supervisor to complete Form 09**, "Supervisor's Evaluation." Your IBC certified supervisor selected should have been your most recent supervisor for at least three months if applying for CADC, and at least six months if applying for IADC or IAADC. The supervisor must meet the requirements listed on page 8. You may have more than one supervisor complete a Form 09.

An applicant must receive at least an average score of one on the Supervisor's Counselor Evaluation. IBC staff shall score the Supervisor's Counselor Evaluation. If the score is not sufficient, the application shall be considered incomplete and the applicant will not be scheduled for the exam until the minimum required score is received or the evaluation is resubmitted.

D. **Complete Forms 01, 02, 03, 04, 05, and 06** which will provide the needed information on your education and experience. Attach any additional documentation as directed. **Include a written job description.**

E. **Verify the completeness of your application** by reviewing the checklist on page 42. Check with your supervisor to ensure the completion and mailing of Form 09.

F. **Mail the completed application and the exam fee to:**

Iowa Board of Certification  
225 NW School St.  
Ankeny, IA 50023

G. **Questions?** Contact the IBC office at 515-965-5509 or email at [info@iowabc.org](mailto:info@iowabc.org)

## **IC&RC EXAM**

Applicants must pass the IC&RC exam within one year from the date the application was submitted to the IBC office. There are two exam options: a written exam in the Des Moines area, or a computer-based exam (CBT) offered in other parts of the state (the application packet contains information about CBT and locations).

Study Guides are available for purchase from the IBC office. Study guide order forms are available on the IBC web site or may be requested from the IBC office.

The exam consists of 150 multiple choice questions and is focused on the following eight domains: Clinical Evaluation, Treatment Planning, Referral, Service Coordination, Counseling, Client/Family/Community Education, Documentation, and Professional/Ethical Responsibilities. A score of 500 out of 800 is required to pass.

### **HOW TO UPGRADE FROM CADC TO IADC**

As CADC counselors gain more experience in the field of alcohol and drug counseling, upgrading to an IADC credential may be desirable. To encourage CADC's to upgrade to the IADC level, IBC has reduced the application fee as well as the exam fee. In addition, a new shortened upgrade application is available for upgrading, and must be purchased via the "Request for IBC Application" form found on the IBC website. Transcripts and certificates of completion previously sent and still on file do not need to be resubmitted.

All IADC applicants must pass the IC&RC exam if they have not already done so, effective June 2008 or later. If the applicant has already passed this exam, and he/she meets all education and experience/supervision requirements for IADC, his/her name will go before the board for approval and no furthering testing will be required.

### **HOW TO UPGRADE FROM IADC TO IAADC**

As Master-level CADC or IADC counselors gain more experience and education, upgrading to an IAADC credential may be desirable. Because there are additional domains and a specific test for this credential, a new application must be purchased from the IBC office via the request form found on the IBC website.

### **PROCESSING APPLICATIONS**

The application process is designed to give each applicant a fair review. The application process will include the following steps.

**Screening.** The Iowa Board of Certification staff will screen the application upon receipt for completeness. If any corrections or clarifications are necessary, the applicant will be contacted.

**Review and Evaluation.** Four times a year IBC sponsors the IC&RC written exam. Please refer to the "Schedule of Events" (as part of the application packet and also available online) for specific dates.

**Recommendation for Denial.** If an applicant fails to achieve a passing score on the written exam, a report of denial will be made to the IBC Board of Directors.

**Denial.** If an applicant fails IC&RC exam, the applicant may re-take the test upon submission of a letter listing the desired test date and submission of the test fee. The exam must be successfully completed within one year of the original submission of the application or the applicant must purchase a new handbook and begin the application process anew.

**Repeating the Application Process.** An applicant who repeats the application process must receive a new application number through the purchase of a new Application Packet. Application materials submitted as part of the first application may be combined with part of the second application. However, the new application number must appear on each section of the second application.

**Recommendation for Approval.** Upon determining that demonstration of competence has been shown in the IC&RC exam, a recommendation is made to the IBC Board that the applicant be granted CADC or IADC certification.

**Certification.** Once the IBC Board approves the recommendation, the applicant will receive notification after successful completion of competency reviews, along with a request for payment of the certification fee. When the fee is received, IBC will issue a certificate to the applicant as verification of certification. The fee must be paid within thirty (30) days of the date of notification or the application will be considered invalid and the applicant must reapply. Certification is not valid until approved by the IBC board and receipt of the certification fee.

## **CERTIFICATION PERIOD**

The Iowa certification period encompasses two calendar years, commencing from the first day of the month that follows approval by the Iowa Board of Certification. Dates of validation are printed on the counselor's certificate.

## **DUAL CERTIFICATION**

To support those substance abuse professionals who wish to carry more than one IBC credential, the certification fee of the both credentials shall be discounted by 25%.

Similarly, those holding more than one IBC credential shall receive a 25% decrease in the recertification fees as long as both credentials are maintained.

This policy refers to IBC credentials only: Certified Alcohol and Drug Counselor (CADC), International Alcohol and Drug Counselor (IADC), International Advanced Alcohol & Drug Counselors (IAADC), Certified Prevention Specialist (CPS), Certified Assessment Specialist (CAS), Certified Co-Occurring Disorders Professional (CCDP or CCDP-D), Certified Criminal Justice Professional (CCJP), Certified Gambling Treatment Counselor (CGTC), and Certified Clinical Supervisor (CCS). State/National credentials/licenses do not apply.

## **FEES**

Refer to the "Fee Schedule" attached to the Certification Application or on the IBC web site.

# **CORE FUNCTIONS OF THE ALCOHOL AND DRUG COUNSELOR**

## **(For CADC's)**

The tasks which the alcohol and drug counselor performs generally fall into the following Core Functions:

- I. **SCREENING** - The process by which a client is determined appropriate and eligible for admission to a particular program.

### ***Global Criteria***

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

- II. **INTAKE** - The administrative and initial assessment procedures for admission to a program.

### ***Global Criteria***

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

- III. **ORIENTATION** - Describing to the client the general nature and goals of the program; the 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.

### ***Global Criteria***

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

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

### ***Global Criteria***

12. Gather relevant history from client including but not limited to alcohol and other drug abuse using appropriate interview techniques.
13. Identify methods and procedures for obtaining corroborative information from significant secondary sources regarding client's alcohol and other drug abuse and psycho-social history.

14. Identify appropriate assessment tools.
15. Explain to the client the rationale for the use of assessment techniques in order to facilitate understanding.
16. Develop a diagnostic evaluation of the client's substance abuse and any coexisting conditions based on the results of all assessments in order to provide an integrated approach to treatment planning based on the client's strengths, weaknesses, and identified problems and needs.

V. **TREATMENT PLANNING** - The process by which the counselor and the client identify and rank problems needing resolution, establish agreed upon immediate and long-term goals, and decide upon a treatment process and the resources to be utilized.

***Global Criteria***

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

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

***Global Criteria***

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

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

***Global Criteria***

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

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

***Global Criteria***

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

IX. **CLIENT EDUCATION** - Provision of information to individuals and groups concerning alcohol and other drug abuse and the available services and resources.

***Global Criteria***

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

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

***Global Criteria***

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

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

***Global Criteria***

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

XII. **CONSULTATION WITH OTHER PROFESSIONALS IN REGARD TO**

**CLIENT TREATMENT/SERVICES** - Relating with in-house staff or outside professionals to assure comprehensive, quality care for the client.

***Global Criteria***

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

An alcohol and drug counselor may be expected to perform a number of other activities. While they may be important to the particular agency, they are not, for professional certification purposes, considered an essential part of the alcohol and drug counselor's function.

# **PERFORMANCE DOMAINS**

(For IADC's and IAADC's)

## **Domain 1: Clinical Evaluation**

- Establish rapport by demonstrating effective verbal and non-verbal communication.
- Discuss with the client the rationale, purpose, and procedures associated with the assessment process to facilitate client understanding and cooperation.
- Assess client's current situation, including signs and symptoms of intoxication and withdrawal, by evaluating observed behavior and other available information in order to determine client's immediate needs.
- Administer the appropriate screening and assessment instruments specific to the client's age, developmental level, culture, and gender.
- Using interview techniques, gather and document relevant biopsychosocial information from the client and/or concerned others.
- Screen for physical, medical, and co-occurring disorders that might require referral for additional assessment.
- Formulate both initial and principle diagnosis(es) based on the signs and symptoms of impairment, withdrawal, and co-occurring disorders by interpreting observable behavior, laboratory data, and results of interview and assessment to determine the most appropriate level of care.
- Develop a comprehensive written summary based on the results of a biopsychosocial assessment performed by an advanced counselor and/or a multidisciplinary team.

## **Domain 2: Treatment Planning**

- Explain and discuss with the client and concerned others the results of a comprehensive biopsychosocial assessment performed by an advanced counselor and/or a multidisciplinary team.
- Formulate and prioritize mutually agreed upon problems, immediate and long-term goals, measurable objectives, and treatment methods and resources based upon assessment findings.
- Collaborate with the client in reviewing and modifying the treatment plan.
- Apply pharmacological knowledge by incorporating substance specific and co-occurring disorder data.

## **Domain 3: Referral**

- Recognize conditions that are outside the counselor's expertise that indicate the need for additional services.
- Identify referral needs; differentiating between client self-referral and direct counselor referral.
- Match client needs with community resources by considering client's abilities, gender, sexual orientation, developmental level, culture, ethnicity, age, and health status.
- Facilitate the client's participation with community resources by explaining the rationale for referral.
- Determine effectiveness and outcome of referrals by ongoing evaluation.

#### **Domain 4: Service Coordination**

- Establish and maintain community contacts by developing ongoing relationships with community leaders and other service providers.
- Match community resources with client needs in order improve the effectiveness of treatment by considering cultural and lifestyle characteristics of clients.
- Advocate for the client's best interests by negotiating with appropriate systems.
- Ensure quality service coordination by evaluating the effectiveness of service coordination through collaboration with the client, treatment team members, and community resources.
- Consult with the client, family, professionals, and community resources, eliciting alternative views, in order to ensure the best continuum of care.

#### **Domain 5: Counseling**

- Educate the client regarding the structure, expectations, and limitations of the counseling process.
- Develop a therapeutic relationship with clients, families, and concerned others in order to facilitate self-exploration, disclosure, behavior change, and problem solving.
- Utilize individual and group counseling strategies and modalities to match the interventions with the client's level of readiness.
- Continually evaluate the client's level of risk regarding personal safety and potential relapse in order to anticipate and respond to crises.
- Enhance treatment effectiveness by applying appropriate counseling strategies in order to facilitate progress towards completion of treatment objectives.
- Adapt counseling strategies to match the client's needs; including abilities, gender, sexual orientation, developmental level, culture, ethnicity, age, and health status.
- Apply pharmacological knowledge to the implementation of selected counseling strategies by incorporating substance-specific and biopsychosocial information.
- Monitor the client's progress by evaluating the effectiveness of counseling strategies; including crisis events, to determine the need to modify treatment.
- Develop an effective continuum of care plan; problem-solving with the client in order to strengthen ongoing recovery.
- Assist families and concerned others in understanding substance use and/or co- occurring disorders and in utilizing strategies that sustain recovery and maintain healthy relationships.
- Document all relevant aspects of treatment.

#### **Domain 6: Client, Family and Community Education**

- Provide culturally relevant formal and informal education that raises awareness and knowledge of substance use, prevention, and recovery; including self-help, peer, and other support resources available in the community.
- Provide education on issues of cultural identity, ethnic background, age, sexual orientation, and gender in prevention, treatment and recovery.
- Provide education on health and high-risk behaviors associated with substance use; including transmission and prevention of HIV/AIDS, tuberculosis, sexually transmitted infections, hepatitis, and other infectious diseases.

- Provide education on life skills, such as stress management, relaxation, communication, assertiveness and refusal skills, relevant to substance use and substance use disorders.
- Provide education on the biological, medical, and physical aspects of substance use in order to develop an understanding of the effects of chemical substances on the body.
- Provide education on the cognitive, emotional, and behavioral aspects of substance use in order to develop an understanding of the psychological aspects of substance use and substance use disorders.
- Provide education on the sociological and environmental effects of substance use in order to develop an understanding of the impact of substance use on the affected family system.
- Provide education on the continuum of care and resources available in order to develop an understanding of prevention, intervention, treatment and recovery.
- Inform clients, concerned others, professionals, and the community about the biopsychosocial effects of psychoactive substances in accordance with current pharmacological literature in order to raise awareness, increase knowledge, and effect behavior change.
- Educate clients, concerned others, professionals, and the community about the impact of co-occurring disorders on both the individual and the community.

#### **Domain 7: Documentation**

- Protect client's rights to privacy and confidentiality according to best practices in preparation and handling of records; especially regarding the communication of client information with third parties.
- Obtain informed written consent to release information from the client and/or legal guardian, according to best practices and administrative rules.
- Prepare accurate and concise screening, intake, assessment, and discharge documents.
- Document treatment and continuing care plans that are consistent with best practices and applicable administrative rules.
- Document client's progress in relation to treatment goals and objectives.
- Prepare accurate and concise reports and records; including recommendations, referrals, case consultations, legal reports, and family sessions.
- Document all relevant aspects of service coordination activities.
- Document process, progress, and outcome measurements.

#### **Domain 8: Professional and Ethical Responsibilities**

- Adhere to established professional codes of ethics and standards of practice in order to promote the best interests of the client and of the profession.
- Adhere to jurisdictionally specific rules and regulations regarding best practices in substance use disorder treatment in order to protect and promote client rights.
- Recognize counselor and client differences by gaining knowledge about personality, cultures, lifestyles, gender, sexual orientation, special needs, and other factors that influence client behavior.
- Recognize personal biases, feelings, concerns, and other issues in order to minimize interference from these variables in the counseling process.
- Continue professional development through self-evaluation, clinical supervision, consultation, and educational opportunities.

- Identify and evaluate patient issues that are outside of the counselor’s scope of practice and refer to appropriate professionals.
- Advocate for populations affected by substance use and substance use disorders by initiating and maintaining effective relations with professionals, government entities, and communities.
- Engage in and apply current counseling and psychoactive substance use research literature to improve client care and enhance counselor’s professional development.
- Assess personal life choices and circumstances with the willingness to change behavior and seek assistance as appropriate by maintaining an awareness of present interests and problems.
- Protect the integrity of the profession and best interests of clients by identifying, reporting, and advocating for the impaired professional.
- Protect the integrity of the profession and best interests of clients by identifying and reporting unethical practices.

**Domain 9: Research Design, Analysis, and Utilization (IAADC’s only)**

- Apply research findings to program development and clinical practice by integrating new information into existing programs.
- Develop procedures and measures to monitor program efficacy.
- Use program data and outcome measures to incorporate changes into the program design.

**Domain 10: Clinical Supervision (IAADC’s only)**

- Create a safe environment that supports self-exploration and that is conducive to the counselor’s professional development.
- Establish a supervisory relationship with clinical staff and/or interns by conducting periodic, face-to-face supervisory sessions.
- Adapt supervisory strategies to match the counselor’s needs; including abilities, gender, sexual orientation, developmental level, culture, ethnicity, age, and health status.
- Assess the individual strengths and weaknesses of the counselor by reviewing education, experience, and counseling activities.

## **CERTIFICATION APPEAL PROCEDURES**

**Appeal of the Denial for Certification.** Every applicant shall be provided the opportunity to appeal the decision of the Board regarding the applicant’s certification to the Ethics and Appeals Committee. Only under extraordinary circumstances can an appeal be submitted for the denial of either the IC&RC exam.

If the applicant desires to appeal the decision of the Board regarding certification, the applicant shall send a written request for an appeal review meeting within thirty (30) days of receipt of the certified notice of denial of certification. The response shall be addressed to:

Executive Director  
Iowa Board of Certification  
225 NW School St.  
Ankeny, Iowa 50023

**Appeal Review Meeting.** An appeal review meeting shall be held at a time and place fixed by the chairperson of the Ethics and Appeals Committee.

- A. All appeal review meetings of the Ethics and Appeals Committee shall be closed to the public. Only committee members, those invited by the committee to testify, and staff members shall be in attendance.
- B. There shall be no contact prior to the appeal review meeting between the applicant and any member of the Ethics and Appeals Committee for the purpose of discussing the appeal.
- C. The Ethics and Appeals Committee shall review with the applicant the reasons for denial of certification and the applicant may present any information he/she feels is relevant.
- D. The Ethics and Appeals Committee may not consider additional materials presented by the applicant for the purposes of correcting deficiencies in the written test.
- E. The Ethics and Appeals Committee shall make a determination to:
  - 1. Recommend that the Board uphold the decision regarding certification.
  - 2. Recommend that the Board overturn the decision regarding certification.
  - 3. Recommend that the Board remand the application to the Professional Development and Credentialing Committee for re-review.
- F. If an applicant who has requested an appeal review meeting, and upon whom proper notice of the meeting has been served, fails to appear for the meeting, the Committee shall proceed with the conduct of the review and the applicant shall be bound by the results to the same extent as if the applicant had been present.
- G. The Board shall, at its next regular scheduled meeting, vote to accept or reject the recommendations of the Ethics and Appeals Committee.
- H. The applicant shall be notified by certified mail within two weeks of the decision of the Board concerning the appeal.

## **RECERTIFICATION**

### **HOW TO RENEW CERTIFICATION**

Certification must be renewed every two years. Dates of validation are printed on the certificate. Recertification is a continuous process which involves earning continuing education credit on an ongoing basis, as well as submission of the actual recertification application.

Recertification applications can be found on IBC's web site at [www.iowabc.org](http://www.iowabc.org). In addition, counselors may check their recertification expiration date on the website. **Please note: It is the responsibility of the counselor to keep track of recertification dates and to make timely application for recertification.** Recertification applications need to be printed from the web site just prior to recertifying to ensure that the most up-to-date version is being used.

**Recertification materials will not be sent to you unless you request them from the IBC office.**

An application for recertification shall include the following:

1. Completion of Form 12, "Application for Recertification." This form must be signed and dated by the counselor.
2. Submission of Form 11, "Verification of Continuing Education" form to be completed for all training attended with copies of certificates of completion attached, totaling at least 40 clock hours, signed by the counselor. **All continuing education hours must be completed within the validation dates shown on the certificate.**
3. Submission of the recertification fee, as well as applicable CEU processing fees and the late penalty fee, if applicable.

### **LATE PENALTIES**

1. The application for recertification must be postmarked on or before the certification expiration date, or the late penalty will be imposed beginning on the day following the certification expiration date.
2. A forty-five (45) day penalty period following the certification expiration date shall be allowed.
3. During the penalty period of the certification, the professional may choose to do one of the following:
  - a. Renew the certification by submitting the required documentation of Professional Development, the recertification fee, and the penalty fee; **or**
  - b. Apply for voluntary inactive status, if applicable; **or**
  - c. Allow the certification to lapse. Certification will lapse on the 46th day. If certification is lapses, the professional may again apply for certification whenever he/she believes that the criteria can be met. At that time, the professional may purchase a new application packet and begin the application process anew.

### **CONTINUING EDUCATION REQUIREMENTS**

Certified counselors must obtain forty (40) clock hours of continuing education during the two-year certification period to qualify for recertification.

- Three (3) of the clock hours must be in ethics.
- The remaining hours must be in relevant topics (i.e. alcohol & drug specific, special populations, counseling, mental health, social work, etc.).

No more than 20 clock hours may be earned through online/distance learning for each certification period.

Recertification applicants may use up to 10 hours of credit for in-service trainings (see Glossary of Terms) per recertification period, **so long as the in-service has been approved by IBC.**

To receive college credit for clock hours a minimum grade of “C” is required. One semester hour equals 15 clock hours. One quarter hour equals 10 clock hours. If college courses are being used, an original transcript must be sent from the college to the IBC office.

The required forty (40) clock hours may be obtained in more than one category. If desired, all forty (40) clock hours may be earned in Category A.

### **CATEGORY A - ATTENDING FORMAL TRAININGS**

A minimum of twenty-five (25) clock hours must be obtained through a combination of pertinent courses, workshops and/or seminars. Accredited home-study courses may be included.

Counselors will be assessed a CEU Processing Fee per submitted workshop that has not been IBC-approved. The fee is not charged for college courses submitted for IBC credit.

### **CATEGORY B- TEACHING OTHER PROFESSIONALS**

A maximum of fifteen (15) clock hours may be obtained in this category. The number of hours awarded will be equal to the number of hours spent in actual teaching time. Credit also will be awarded for repeated workshop presentations offered by a counselor as the presenter.

### **CATEGORY C - PARTICIPATORY LEARNING EXPERIENCES AND COMMUNITY INVOLVEMENT**

Prior approval is recommended. A maximum of fifteen (15) clock hours may be obtained in this category which includes documented credit for direct participation (e.g. public speaking or volunteering in a professional capacity) with substance abuse or community boards, committees, or task forces which are substance abuse related. Volunteering as a parent, such as a teacher’s assistant or Cub Scout leader, DOES NOT qualify for credit.

The intent of the category is to encourage counselors to participate in the community in a professional capacity to promote the profession and the welfare of the public.

### **CATEGORY D - ADVANCED CAREER DEVELOPMENT (for IADC/IAADC only)**

Prior approval is required for this category. A maximum of 20 clock hours may be obtained.

The intent of this category is to encourage on-going employment development in the substance abuse field. Supervision, management, and leadership are examples of topics that might receive credit. This category is only for education, experience does not apply.

Counselors will be assessed a CEU Processing Fee per submitted workshop that has not been IBC-approved. The fee is not charged for college courses submitted for IBC credit, and an original transcript sent from the college to the IBC office is required for using college credit for recertification.

## DEFINITIONS

See Glossary of Terms on page 39.

## **GENERAL GUIDELINES**

The following general guidelines apply to Continuing Education:

- A. The content of all courses on continuing education must be relevant to the Core Functions and Knowledge and Skill Competencies as listed in the Application Handbook.
- B. The following is an example of continuing education that will not receive IBC credit.
  - 1. Parenting or other programs that are designed for lay people.
  - 2. Basic living skills.
  - 3. Orientation programs, meaning, a specific series of activities designed to familiarize employees with the policies and procedures of an institution.
- C. Continuing education hours exclude non-program time such as coffee breaks, social hours, and time allocated for meals.
- D. The forty (40) clock hours must be obtained within each certification period; that is, between the validation dates of certification shown on the certificate. Therefore, hours earned before the last application was submitted will not be accepted.
- E. Continuing education hours are not cumulative. Therefore, additional hours earned during one certification period **and** before the recertification application was submitted will not be accepted for the next period.
- F. One approved college or university semester hour credit is the equivalent of fifteen (15) clock hours and one approved college or university quarter hour credit is the equivalent of ten clock hours. In order to give IBC credit for college coursework, an original transcript will need to be sent to the IBC office.
- G. Counselors cannot repeat an *identical* training within his or her recertification period.
- H. The minimum acceptable unit of credit for any single experience is one clock hour.
- I. It is the responsibility of each counselor to maintain records of continuing education credit for submission with the Application for Recertification. *IBC does not keep records of a counselor's credits.*

## VOLUNTARY INACTIVE STATUS

Inactive certification status is for the certified counselor who is currently **not working as an alcohol and drug counselor**, yet plans to someday return to alcohol and drug counseling. Not having earned enough continuing education hours or an employer not requiring IBC-certification are inadequate reasons to be granted inactive status.

In addition to the professional not working in the field of substance abuse, the Iowa Board of Certification may grant inactive status under the following circumstances:

1. Behavior-Medical problems
2. Maternity, paternity, or family
3. Education
4. Military service
5. Other valid reasons

**Instructions.** Certified individuals desiring inactive status shall send a letter of request to the IBC office which includes:

1. Current home address and telephone number.
2. Reason for request.
3. Final date of employment in the alcohol and drug field.
4. Anticipated date of return to employment in the alcohol and drug field.
5. Non-refundable enrollment fee.

This letter of request and the inactive fee must be postmarked on or before the date of expiration of either certification or the prior inactive time period. At the next scheduled regular IBC Board meeting, the request for inactive status will be considered. The applicant will be notified upon the Board's decision.

### **Fees.**

To maintain inactive status, a letter of request, as described above, and the appropriate fee must be sent on or before the annual expiration date or the late fee will be assessed. The 45-day penalty period and late fees apply.

To restore to active certification, the application for recertification must be submitted along with the applicable recertification fee.

### **Rights, Limitations, and Responsibilities.**

1. While on inactive status, an individual shall continue to receive all bulletins, newsletters, and other communications from IBC.
2. A counselor on inactive status may not use the initials of a certified counselor (e.g., CADC).
3. Individuals on inactive status are not eligible for reciprocity.

4. Inactive individuals must adhere to applicable aspects of the IBC Code of Ethics.
5. The inactive individual must notify IBC immediately upon returning to work in the alcohol and drug field. Failure to notify the Board within 30 days of returning to such employment will constitute a violation of the IBC Code of Ethics and will result in referral to the Board for investigation, in accordance with the procedures outlined in the Code of Ethics. The inactive individual must successfully reactivate certification within 90 days of returning to employment.

**Reactivation.** Individuals requesting reactivation of their certification status shall follow the recertification process and meet residency requirements. Current recertification forms will be available on the IBC web site. At least 20 of the 40 clock hours must have been earned within two years of the reactivation application.

## **RECIPROCITY**

Iowa counselors who are certified as an IADC or IAADC may apply for reciprocity to any certification board that is a member of the International Certification and Reciprocity Consortium/Alcohol and Other Drug Abuse (IC&RC).

Applications for reciprocity may be obtained from the IBC office, and completed forms shall be sent to the IBC office along with a check/money order made out to IC&RC; the IBC will complete its portion of the reciprocity application and forward all paperwork and fees to the IC&RC office.

The members of the IC&RC are listed on the addendum on page 43. From time to time organizations apply for or withdrawal their membership. You are welcome to contact the IBC office for current information, or you may review current IC&RC membership at their web site ([www.icrcaoda.org](http://www.icrcaoda.org)).

# **CODE OF ETHICS**

## **FOR ALCOHOL AND DRUG COUNSELORS**

### **INTRODUCTION**

**All counselors must subscribe to the IBC Code of Ethics upon application for certification.** This Code of Ethics is adopted to aid in the delivery of the highest quality of professional care to persons seeking chemical dependency services. It is hoped that these standards will assist the counselor to determine the propriety of his or her conduct in relationships with clients, colleagues, members of allied professions, and the public.

The Board is committed to investigate and sanction those who breach this Code of Ethics. Alcohol and drug counselors, therefore, are encouraged to thoroughly familiarize themselves with the Code of Ethics and to guide their behavior according to the principles set forth below.

Violation of the IBC Code of Ethics shall be deemed as grounds for discipline. Engaging in unethical conduct includes, in addition to violation of the Principles enumerated herein, any other violation that is harmful or detrimental to the profession or to the public.

### **SUBSCRIPTION TO CODE OF ETHICS**

**Persons applying for certification must subscribe to the Iowa Board of Certification's Code of Ethics for Alcohol and Drug Counselors and so indicate by signing Form 02.** This subscription will be in effect until their certification is no longer valid. In the event the applicant did not successfully complete the certification process, the subscription shall be in effect until the application period expires. IBC can provide specific information regarding these time-frames.

### **SPECIFIC PRINCIPLES**

**PRINCIPLE I. Responsibility to clients.** Alcohol and drug counselors respect the rights of those persons seeking their assistance and make reasonable efforts to ensure that their services are used appropriately.

- A. Alcohol and drug counselors do not discriminate against or refuse professional service to anyone on the basis of race, gender, religion, national origin or sexual orientation.
  - 1. Alcohol and drug counselors avoid bringing personal or professional issues into the counseling relationship. Through an awareness of the impact of stereotyping and discrimination, the counselor guards the individual rights and personal dignity of clients.
  - 2. Alcohol and drug counselors are knowledgeable about disabling conditions, demonstrate empathy and personal emotional comfort in interactions with clients with disabilities, and make available physical, sensory, and cognitive accommodations that allow clients with disabilities to receive services.

- B. Alcohol and drug counselors do not use their professional relationships with clients to further their own interests.
- C. Alcohol and drug counselors respect the right of clients to make decisions and help them to understand the consequences of these decisions.
- D. Alcohol and drug counselors continue therapeutic relationships only as long as it is reasonably clear that clients are benefiting from the relationship.
- E. Alcohol and drug counselors assist persons in obtaining other therapeutic services if the counselor is unable or unwilling to provide professional help.
- F. Alcohol and drug counselors do not abandon or neglect clients in treatment without making reasonable arrangements for the continuation of such treatment.
- G. Alcohol and drug counselors obtain written, informed consent from clients before videotaping, audio recording, or permitting third-party observation.
- H. Alcohol and drug counselors respect the integrity and protect the welfare of the client. The counselor, in the presence of professional conflict, is concerned primarily with the welfare of the client.
- I. Alcohol and drug counselors ensure the presence of an appropriate setting for clinical work to protect the client from harm and the counselor and professional from censure.
- J. Alcohol and drug counselors do not continue to practice while having a physical or mental disability which renders the counselor unable to practice the occupation or profession with reasonable skill or which may endanger the health and safety of the persons under the counselor's care.
- K. Alcohol and drug counselors do not engage in the conduct of one's practice while suffering from a contagious disease involving risk to the client's or public's health without taking adequate precautions including, but not limited to, informed consent, protective gear or cessation of practice.

**PRINCIPLE II. Dual relationships.**

- A. Alcohol and drug counselors are aware of their influential position with respect to clients, and they avoid exploiting the trust and dependency of such persons. Counselors, therefore, make every effort to avoid dual relationships with clients that could impair professional judgment or increase the risk of exploitation. When a dual relationship cannot be avoided, counselors take appropriate professional precautions to ensure judgment is not impaired and no exploitation occurs. Examples of such dual relationships include, but are not limited to, business or close personal relationships with clients.

1. Solicitation of sexual conduct, or solicitation of any other personal relationship, with clients is prohibited; this includes the one year following the termination of services.
  2. Sexual conduct with clients is prohibited; this includes the one year following the termination of services.
  3. Alcohol and drug counselors do not accept as clients anyone with whom they have engaged in sexual conduct.
- B. Alcohol and drug counselors are aware of their influential position with respect to students, employees, and supervisees, and they avoid exploiting the trust and dependency of such persons. Counselors, therefore, make every effort to avoid dual relationships that could impair professional judgment or increase the risk of exploitation. When a dual relationship cannot be avoided, counselors take appropriate professional precautions to ensure judgment is not impaired and no exploitation occurs. Examples of such dual relationships include, but are not limited to, business or close personal relationships with students, employees or supervisees.
1. Provision of therapy to students, employees, or supervisees is prohibited.
  2. Sexual conduct with students or supervisees is prohibited.

**PRINCIPLE III. Confidentiality.** Alcohol and drug counselors embrace, as primary obligation, the duty of protecting the privacy of clients and do not disclose confidential information acquired in teaching, practice or investigation without appropriately executed consent.

- A. Alcohol and drug counselors make appropriate provisions for the maintenance of confidentiality and the ultimate disposition of confidential records. Counselors ensure that data obtained, including any form of electronic communication, are secured by the available security methodology. Data shall be limited to information that is necessary to and appropriate to the services being provided and be accessible only to appropriate personnel.
- B. Alcohol and drug counselors adhere to all federal, state, and local laws regarding confidentiality and the counselor's responsibility to report clinical information in specific circumstances to the appropriate authorities.
- C. Alcohol and drug counselors discuss the information obtained in clinical, consulting, or observational relationships only in the appropriate settings for professional purposes that are in the client's best interest. Written and oral reports present only data germane and pursuant to the purpose of evaluation, diagnosis, progress, and compliance. Every effort is made to avoid undue invasion of privacy.
- D. Alcohol and drug counselors reveal information received in confidence only when there is a clear and imminent danger to the client or other persons, and then only to appropriate workers, public authorities, and threatened parties.

**PRINCIPLE IV. Professional competence and integrity.** Alcohol and drug counselors maintain high standards of professional competence and integrity.

- A. Alcohol and drug counselors seek appropriate professional assistance for their personal problems or conflicts that may impair work performance or clinical judgment.
- B. Alcohol and drug counselors, as teachers, supervisors, and researchers, are dedicated to high standards of scholarship and present accurate information.
- C. Alcohol and drug counselors do not engage in sexual or other harassment or exploitation of clients, students, trainees, supervisees, employees, colleagues, research subjects, or actual or potential witnesses or complainants in investigations and ethical proceedings.
- D. Alcohol and drug counselors do not diagnose, treat, or advise on problems outside the recognized boundaries of their competence.
- E. Alcohol and drug counselors do not engage in conduct which does not meet the generally accepted standards of practice for the alcohol and drug profession including, but not limited to, incompetence, negligence or malpractice.
  - 1. Falsifying, amending or making incorrect essential entries or failing to make essential entries of client record.
  - 2. A substantial lack of knowledge or ability to discharge professional obligations within the scope of the alcohol and drug profession.
  - 3. A substantial deviation from the standards of skill ordinarily possessed and applied by professional peers in the state of Iowa acting in the same or similar circumstances.
  - 4. Acting in such a manner as to present a danger to public health or safety, or to any client including, but not limited to, impaired behavior, incompetence, negligence or malpractice.
  - 5. Failing to comply with a term, condition or limitation on a certification or license.
  - 6. Failing to obtain an appropriate consultation or make an appropriate referral when the problem of the client is beyond the alcohol and drug counselor's training, experience or competence.
  - 7. Suspension, revocation, probation or other restrictions on any professional certification or licensure imposed by any state or jurisdiction, unless such action has been satisfied and/or reversed.
  - 8. Administering to oneself any controlled substance, or aiding and abetting the use of any controlled substance by another person.
  - 9. Using any drug or alcoholic beverage to the extent or in such manner as to be dangerous or injurious to self or others, or to the extent that such use impairs the ability of such person to safely provide professional services.

10. Using alcohol or any dangerous drug or controlled substance while providing professional services.
11. Refusing to seek evaluation and follow through with the recommended treatment for chemical dependency or a mental health problem which impairs professional performance.

**PRINCIPLE V. Responsibility to students, employees, and supervisees.** Alcohol and drug counselors do not exploit the trust and dependency of students, employees, and supervisees.

- A. Alcohol and drug counselors do not permit students, employees, or supervisees to perform or to hold themselves out as competent to perform professional services beyond their training, level of experience and competence.
- B. Alcohol and drug counselors who supervise others accept the obligation to facilitate further professional development of these individuals by providing accurate and current information, timely evaluations, and constructive consultation.

**PRINCIPLE VI. Responsibility to the profession.** Counselors respect the rights and responsibilities of professional colleagues.

- A. Counselors treat colleagues with respect, courtesy, and fairness and afford the same professional courtesy to other professionals.
  1. Alcohol and drug counselors do not offer professional services to a client in counseling with another professional except with the knowledge of the other professional or after the termination of the client's relationship with the other professional.
  2. Alcohol and drug counselors cooperate with duly constituted professional ethics committees and promptly supply necessary information unless constrained by the demands of confidentiality.
  3. Alcohol and drug counselors report the unethical conduct or practice of others in the profession to the appropriate certifying authority.
  4. Alcohol and drug counselors do not knowingly file a false report against another professional concerning an ethics violation.
- B. As employees or members of organizations, alcohol and drug counselors refuse to participate in an employer's practices which are inconsistent with the ethical standards enumerated in this Code.
- C. Alcohol and drug counselors assign publication credit to those who have contributed to a publication in proportion to their contributions and in accordance with customary professional publication practices.
- D. Alcohol and drug counselors who are the authors of books or other materials that are published or distributed cite persons to whom credit for original ideas is due.

**PRINCIPLE VII. Financial arrangements.** Alcohol and drug counselors make financial arrangements for services with clients and third-party payers that are reasonably understandable and conform to accepted professional practices.

- A. Alcohol and drug counselors do not offer, give or receive commissions, rebates or other forms of remuneration for the referral of clients.
- B. Alcohol and drug counselors do not charge excessive fees for services.
- C. Alcohol and drug counselors disclose their fees to clients at the beginning of services.
- D. Alcohol and drug counselors do not enter into personal financial arrangements.
- E. Alcohol and drug counselors represent facts truthfully to clients and third-party payers, regarding services rendered.
- F. Alcohol and drug counselors do not accept a private fee or any other gift or gratuity for professional work.

**PRINCIPLE VIII. Advertising.** Alcohol and drug counselors engage in appropriate informational activities, including those that enable lay persons to choose professional services on an informed basis.

- A. Alcohol and drug counselors accurately represent their competence, education, training, and experience.
- B. Alcohol and drug counselors do not use a firm name, letterhead, publication, term, title designation or document which states or implies an ability, relationship or qualification which the counselor does not have.
- C. Alcohol and drug counselors do not use any professional identification (such as a business card, office sign, letterhead, or telephone or association directory listing) if it includes a statement or claim that is false, fraudulent, misleading, or deceptive. A statement is false, fraudulent, misleading, or deceptive if it:
  - 1. contains a material misrepresentation of fact;
  - 2. fails to state any material fact necessary to make the statement, in light of all circumstances, not misleading; or
  - 3. is intended to or is likely to create an unjustified expectation.

**PRINCIPLE IX. Legal and Moral Standards.** Alcohol and drug counselors uphold the law and have high morals in both professional and personal conduct.

**Grounds for discipline** under this principle include, but are not limited to, the following:

- 1. Conviction of any felony or misdemeanor, excluding minor traffic offenses, whether or not the case is pending an appeal. A plea or verdict of guilty or a conviction following an Alford Plea, or any other plea which is treated by the court as a plea of guilty and all the proceedings in which the sentence was deferred or suspended, or the conviction expunged shall be deemed a conviction within the meaning of this section.

2. Permitting, aiding, abetting, assisting, hiring or conspiring with an individual to violate or circumvent any of the laws relating to licensure or certification under any licensing or certification act.
3. Fraud-related conduct under this principle includes, but is not limited to, the following:
  - a. Publishing or causing to be published any advertisement that is false, fraudulent, deceptive or misleading.
  - b. Engaging in fraud, misrepresentation, deception or concealment of material fact in:
    1. Applying for or assisting in securing certification or certification renewal.
    2. Taking any examination provided for #1 above including fraudulently procured credentials.
  - c. Making misleading, deceptive, untrue or fraudulent representation in the practice or the conduct of the alcohol and drug profession or practicing fraud or deceit, either alone or as a conspirator.
  - d. Failing to cooperate with an investigation by interfering with an investigation or disciplinary proceeding by willful misrepresentation of facts before the disciplining authority or its authorized representatives; by use of threats or harassment against, or inducement to any patient, client or witness to prevent them from providing evidence in a disciplinary proceeding or any person to prevent or attempt to prevent a disciplinary proceeding or other legal action from being filed, prosecuted or completed. Failing to cooperate with a board investigation in any material respect.
  - e. Committing a fraudulent insurance act.
  - f. Signing or issuing, in the certified alcohol and drug counselor's capacity, a document or statement that the counselor knows, or ought to know, contains a false or misleading statement.
  - g. Using a firm name, letterhead, publication, term, title designation or document which states or implies an ability, relationship or qualification which the counselor does not have.
  - h. Practicing the profession under a false name or name other than the name under which the certification is held.
  - i. Impersonating any certified professional or representing oneself as a certified professional for which one has no current certification.
  - j. Charging a client or a third party payer for a service not performed, or submitting an account or charge for services that is false or misleading. This does not apply to charging for an unkept appointment by a client.

- k. Charging a fee that is excessive in relation to the service or product for which it is charged.
  - l. Offering, giving or promising anything of value or benefit to any federal, state, or local employee or official for the purpose of influencing that employee or official to circumvent federal, state, or local law, regulation or ordinance governing the certified counselor or the alcohol and drug profession.
4. Engaging in sexual conduct, as defined in the Iowa Code, with a client during a period of time in which a professional relationship exists and for one year after that period of time.

## **DEFINITIONS**

See Glossary of Terms for definitions.

## **INVESTIGATION**

**Complaint Procedure.** Any individual may file a complaint against a certified professional by submitting a completed “Ethics Violation Allegation Worksheet” (available on IBC’s web site at [iowabc.org](http://iowabc.org) or by requesting one from the IBC office).

1. The Ethics Violation Allegation Worksheet shall be submitted to:  
Executive Director  
Iowa Board of Certification  
225 NW School St.  
Ankeny, Iowa 50023
2. A copy of the Worksheet is forwarded to the Ethics & Appeals Committee chairperson.
3. The Executive Director shall send a letter to the complainant to acknowledge receipt of the complaint and that it has been forwarded to the Ethics Committee.
4. The Ethics Committee, at their next monthly meeting, determines which principle(s) may have been violated.
5. If a potential violation has been determined, an investigator is assigned and the investigation is started.
6. If, in committee review, the allegation does not warrant assignment of an investigation, the complainant and the person who is alleged to have violated the principle will be notified of that decision. The allegation worksheet will be maintained in a committee file.
7. The Executive Director sends a certified letter to the respondent, notifying him/her that a complaint has been received, that an investigation has begun, and that he/she will be sent correspondence by the investigator. **Note: not cooperating with an investigation can result in a violation of Principle VI-A-2.**
8. The Executive Director shall send a certified letter to the complainant stating that the investigation has begun and that the investigator may be in contact with him/her.
9. When all investigation is completed, the investigator will report to the Ethics Committee. The committee shall review the information and make one of the following recommendations to the hearing panel:

- a. Disciplinary hearing be held, or
  - b. Dismiss the complaint
10. Following the hearing, the respondent and complainant are notified in writing of the actions taken by the Board.

Should further violations be uncovered in the course of an investigation, these would comprise an additional complaint by the Committee on Ethics and Appeals.

If a complaint has been filed, the Ethics Committee may, at its discretion, proceed with an investigation even if the complainant subsequently requests that the complaint be withdrawn.

## **HEARING PROCEDURES**

**Order for Hearing.** Upon recommendation of the Committee on Ethics and Appeals, the IBC Board shall approve the date, time and place for an ethics hearing and shall appoint a hearing panel for the proceedings. Within ten (10) days of Board action, a written notice will be sent to the complainant, the respondent and the hearing panel members.

- A. The hearing panel shall be comprised of three directors of the Board, excluding any member having a conflict of interest in the matter. At least one of the three members of the hearing panel shall be a certified professional.
- B. Both the respondent and complainant will be provided with a copy of the investigative summary and recommendations including the level of violation severity and the hearing procedures.
- C. The notice of the hearing shall state:
  1. The date, time, and location of the hearing; and
  2. The respondent may, at his or her expense, be represented by legal counsel at the hearing; and
  3. The rules by which the hearing shall be governed.

**Conduct of Hearing.** The hearing shall be conducted in compliance with the following rules:

- A. The hearing shall be conducted by the hearing chair as assigned by the Ethics & Appeal Committee Chair or Executive Director, an impartial administrative law judge, attorney, or other person designated by the Board.
- B. The investigator or chairperson of the Committee on Ethics and Appeals, or a representative designated by the Committee on Ethics and Appeals, shall present evidence in support of the Committee's recommendation before the hearing panel. The complainant and the respondent shall be allowed the opportunity to participate in the hearing. Witnesses will be called when appropriate, but shall only be present in the hearing during their testimony. The hearing shall be closed to the public.

- C. The hearing panel shall not be bound by common law or statutory rules of evidence, and may consider all evidence having probative value.
- D. No discovery shall be permitted and no access to Board files shall be allowed by the respondent except as specifically provided for herein. The Board shall keep all files in permanent form and confidential, unless otherwise provided or directed in writing by the President of the Board or the President's designee, for disciplinary purposes or by a specific rule of the IBC Board.
- E. After completion of the investigation and prior to the commencement of the hearing, members of the Board and hearing panel shall not discuss the case with either the complainant or the respondent in order to maintain neutrality and impartiality. The Executive Director may act as a source of general information to all parties.
- F. Members of the hearing panel may inquire and/or conduct relevant fact-finding to obtain the information necessary to make an accurate determination of the facts of the case. If additional violations are discovered during the hearing, it may result in additional sanctions.
- G. Board members and committee members who are not serving in an official capacity during the hearing shall not be present unless all parties present agree to such circumstances.
- H. A member of the IBC staff shall be responsible for record keeping at the hearing.
- I. The hearing shall be audio taped.

**Failure by Respondent to Appear.** If a respondent, upon whom proper notice of hearing has been served, fails to appear either in person or represented by counsel at the hearing or otherwise respond to the complaint, the respondent shall be deemed to be at default and bound by the results of the hearing to the same extent as if the respondent had been present.

**Right to Waive Hearing.** At any time during the ethics investigation process, a respondent has the right to waive an ethics hearing by formal notification in written form with an original signature to IBC. In so doing, the respondent stipulates that the allegations of the ethics violation(s) are correct. As soon as practical, but no later than 90 days upon receipt of the waiver or scheduled hearing date, the Board shall determine any disciplinary sanctions. The decision of the Board shall be final.

**Deliberation of the Hearing Panel.** Once the chairperson of the Committee on Ethics and Appeals or a representative designee has presented the case information, the complainant and the respondent have had an opportunity to speak, and the hearing panel has asked any questions, the hearing panel will meet in closed session to discuss the facts. A member of the IBC staff is permitted to be present during the deliberation. All panel deliberations will be audio taped.

**Decision of the Hearing Panel.** The hearing panel shall make the determination regarding violation(s) and disciplinary sanctions as founded, substantiated, unsubstantiated or unfounded.

Upon conclusion of the hearing, the hearing panel chair shall submit a written report to the IBC office which shall include:

1. A concise statement of the findings of fact;
2. A conclusion as to whether any specific Principles have been substantiated, undetermined or unsubstantiated; and
3. The sanctions imposed by the Panel.

At its next regularly scheduled Board meeting, the Board shall be notified of the hearing panel's decision.

The hearing panel's decision and the official hearing panel report shall be sent by certified mail to both the respondent and the complainant and include information on how an appeal may be requested.

**Discretion of the Hearing Panel.** The following factors may be considered by the hearing panel in determining the nature and severity of the disciplinary sanction to be recommended:

1. The relative seriousness of the violation as it relates to assuring the citizens of this state a high standard of professional service and care;
2. The facts of the particular violation;
3. Any extenuating circumstances or other counter-vailing considerations;
4. The number of complaints;
5. Prior violations or complaints and/or sanctions;
6. Whether the violation was self-reported;
7. Whether remedial action has previously been taken;
8. The level of cooperation from the respondent; and
9. Other factors which may reflect upon the competency, ethical standards and professional conduct of the individual.

**Method of Discipline.** The hearing panel may impose the following disciplinary sanctions:

1. Temporary revocation or permanent revocation; or
2. Suspension of certification or application privileges; or
3. Denial of an application for certification;
4. Reprimand; or
5. Other sanctions which may be deemed appropriate, such as additional education, training, supervision, competency demonstration, assessment and completion of any recommendations resulting from the assessment and/or other additional requirements in conjunction with any of the above disciplinary sanctions.

**Announcement of Decision.** At its next scheduled regular meeting, the Board shall be notified of the hearing panel's decision. The decision and the official hearing panel report shall be sent by certified mail to both the respondent and the complainant and include information on how an appeal may be requested.

**Confidentiality.** At no time prior to the release of the decision by the hearing panel shall any portion or the whole thereof of any action be made public or be distributed to any persons other than the directors of the Board, its Committee on Ethics and Appeals, and its staff.

**Publication of Decisions.** The decision in any disciplinary proceeding shall be published in whatever manner deemed appropriate by the Board. The employer, if any, shall be notified by certified mail of the final decision of the Board if a violation was founded. IBC may report a disciplinary action against certified professionals to the Iowa Department of Public Health-Division of Health Promotion, Prevention and Addictive Behaviors.

## **PROCEDURES AND REINSTATEMENT FOLLOWING DISCIPLINARY SANCTION(S)**

**Repossession of Certificate.** If a respondent's IBC credential has been suspended, denied, or revoked, the respondent must return his or her certificate to IBC no later than twenty-one (21) days after he or she receives notice of the suspension, denial, or revocation. The IBC certificate remains the property of IBC. Failure to return the certificate as required may result in additional sanctions.

**Reinstatement Following a Suspension.** Upon expiration of the suspension period, the Board shall authorize reinstatement of the professional's credential for the balance of his or her certification period, unless:

1. The respondent did not submit a letter of application for reinstatement or the letter did not present facts which, if established, would be sufficient to enable the Board to determine that the basis for sanction no longer exists;
2. Another suspension or revocation of the respondent's certification has occurred;
3. The respondent has committed another violation of the Code of Ethics;
4. The respondent has failed to remit the recertification fees or make an application for recertification in a timely manner; or
5. The respondent has failed to comply fully with the terms of his or her suspension.

**Possible Consideration Following Revocation.** It is recognized that there may be mitigating circumstances which could warrant granting permission to apply for certification following revocation. This does not apply to a permanent revocation sanction.

1. Permission to apply for certification following revocation may be considered only after two years have lapsed from the date of the Board's final decision.
2. The request for permission to apply for certification shall be initiated by the respondent. The request shall present facts which, if established, would be sufficient to enable the Board to determine that the basis for sanction no longer exists.
3. Permission to seek certification following revocation is granted solely within the discretion of the Board.

**Permanent Revocation.** Permanent revocation of certification or application privileges shall be construed as lasting a lifetime without the possibility for reinstatement.

## **APPEALS OF DECISIONS OF HEARING PANEL**

**Notice of Right to Appeal.** The respondent has the right to appeal the hearing panel's decision. The IBC office shall provide notice to the respondent that he or she may file an appeal of the hearing panel's decision.

**Filing of Appeal.** Appeals must be postmarked or personally delivered to IBC within thirty (30) days of receiving the certified notice of the hearing panel's decision. Appeals shall be addressed to:

Executive Director  
Iowa Board of Certification  
225 NW School St.  
Ankeny, Iowa 50023

**Administrative Fee for Appeals.** A non-refundable administrative fee must be submitted to IBC with the party's written appeal.

**Content of Appeal.** The appeal shall contain the following information.

1. Name, address, and telephone number of appealing party;
2. A written statement of the reasons supporting the appealing party's dissatisfaction with the hearing panel's decision;
3. A statement of the relief desired by the appealing party;
4. Copies of all relevant documents;
5. Signature of the appealing party.

**Review and Adjudication of Appeal.** The Directors of the Board, excluding any member having a conflict of interest in the matter, will review the case within 75 days of receipt of the request for appeal. The original hearing panel members may participate in the review with at least one member representing the hearing panel's decision.

Review of the appeal shall include review of the written appeal, any relevant documents submitted for purposes of the appeal, and transcripts of the hearing panel proceedings.

The Board shall make the determination to do one of the following.

1. Uphold the decision of the hearing panel;
2. Overturn or otherwise alter the decision of the hearing panel; or
3. Recommend a new hearing.

**Final Decision.** If no request for an appeal is made within the required time frame stated above, the decision of the hearing panel shall be final. Once the appeal process is completed, the decision of the Board shall be final.

Respondents who waive their right to a hearing also waive their right to appeal the sanctions determined by the board.

## **GLOSSARY OF TERMS**

**Alcohol and Drug Counselor:** A person who has applied for certification or who is certified as an alcohol and drug counselor by the Iowa Board of Certification.

**Alcohol and Drug Specific:** Includes history, uses, and pharmacology of stimulants, depressants, psychotherapeutic drugs, alcohol, tobacco, and various other substances as well as the psychological, biological and social aspects of substance abuse. Appropriate intervention for preventing and treating substance abuse in special populations is also acceptable. In simpler terms, the training must be either about chemical substances or directly relate the topic to substance use and abuse.

**Board:** The Iowa Board of Certification.

**CEU:** Literally means a continuing education unit and is synonymous with "clock hour."

**Client:** A person who seeks or is assigned the services of an alcohol and drug counselor, regardless of the setting in which the counselor works, and for one year after the termination of services which includes aftercare, growth group and/or continuing care.

**Clock Hour:** Sixty minutes of participation in an organized learning experience. The unit of measurement for Professional Development credit for alcohol and drug counselors.

**Complainant:** A person who has filed an official complaint pursuant to these rules.

**Continuing Education:** The variety of forms of learning experiences including, but not limited to lectures, conferences, academic studies, institutes, workshops, extension studies, and home study programs undertaken by applicants.

**Counseling Theories and Techniques:** Philosophical and practical ways of thinking that offer a framework for understanding the client's world and guidelines for problem solving. Well-developed theories cover Metaphysics - how the world works, Ethics - how people should act, Logic - cause and effect in relationships, Epistemology - how people learn, and Ontology - the meaning of human existence. Examples of appropriate education in this category are Adlerian Therapy, Brief Therapy, Rational Emotive Therapy, and Rogerian Therapy.

**Date of Application:** The date on which the Iowa Board of Certification receives the completed Application Handbook.

**Disciplinary Proceeding:** Any proceeding conducted under the authority of the Board.

**Discipline:** Any sanction the Board may impose upon a counselor for conduct which denies or threatens to deny the citizens of this state a high standard of professional care.

**Distance Learning:** Education that is obtained via Internet, home study programs, or other means in which the counselor works independently from an instructor and classroom. A limit of 20 clock hours can be earned by this method per recertification period. ICN trainings are not considered distance learning.

**Ethics:** Moral and ethical conduct as described in the IBC Code of Ethics.

**Experience:** Actual work in the field of alcohol and drug counseling. This may include practicum, volunteer, or part-time counseling, if provided under direct supervision.

**Hearing Panel:** A panel comprised of directors of the Board, which conducts a disciplinary proceeding pursuant to these rules.

**Home Study Courses:** Continuing education courses offered for individual study.

**IBC-Approved:** When a sponsor submits workshop materials to IBC demonstrating that a workshop has relevant content and requesting IBC CEU's for all participants.

**In-Service Training:** The education and training which occurs within the applicant's agency, *only for agency staff and conducted only by agency staff.*

**Internal Complaint:** A complaint registered against any IBC director of the Board or any of its committee members.

**Permanent Revocation:** The permanent loss of certification or application privileges.

**Racial/Ethnic:** Covers training including, but not limited to, the following categories: American Indian/Alaskan Native, Asian, African American, Native Hawaiian/Pacific Islander, and Hispanic/Latino.

**Reactivation:** The process of certification becoming active following Inactive Status. This is done by completing the recertification application which can be found on the IBC web site or by requesting the forms from the IBC office.

**Relevant Content:** Content relevant to the development and maintenance of current competency in the delivery of alcohol and drug counseling. Such course content may include, but is not limited to, the Core Functions and Knowledge and Skill Competencies as defined in the Application Handbook.

**Reprimand:** A formal written reproof or warning. Two reprimands within a two year period will result in a six month suspension.

**Residency Requirement:** IBC's policy that the applicant must live and/or work in Iowa at least 51% of the time at the time of application for initial certification, recertification, and reactivation.

**Respondent:** A person who is seeking or who has obtained certification from the Iowa Board of Certification and against whom a complaint has been filed pursuant to this Code.

**Revocation:** The loss of certification, including all related test scores.

**Sexual Conduct:** Includes kissing; touching of the clothed or unclothed inner thigh, breast, groin, buttocks, anus, pubes, or genitals; and sex acts which include intercourse, oral sex, and sexual contact with fingers, hands, objects.

**Special Populations:** Clients from various populations who are unique in their needs.

Special Populations include age, race, national origin, religion, gender, economic status, sexual orientation, disability, HIV positive, veterans, rural or urban, dual diagnosis of mental health disorder and substance abuse, gangs, Post Traumatic Stress Disorder, impoverished, criminals, and abuse victims.

**Sponsor:** An organization or presenter seeking IBC hours for all participants at a specific workshop.

**Substantiated Ethics Violation:** There is proof that the ethics complaint/allegation is true, a sanction will be imposed, and a record of the violation will be kept in the professional's certification file.

**Successful Completion:** Meeting all criteria as specified by the sponsor for continuing education course credit.

**Supervisor:** A person who meets the criteria to conduct supervision for counselor certification purposes.

**Suspension:** A time-limited loss of certification or the privilege of making application for certification.

**Undetermined Ethics Violation:** The hearing panel is unsure of proof of the ethics allegation/complaint, sanctions and recommendations may be made by the hearing panel, and a record of these sanctions/recommendations will be kept in the professionals' certification file.

**Unsubstantiated Ethics Violation:** There is no proof that the ethics allegation/complaint is true, and no record of the complaint will be kept in the professional's certification file.

**Workshop:** A systematic learning experience, at least one hour in length, which deals with and is designed for the acquisition of tasks, knowledge, skills, and information for application in client care.

# CHECKLIST

## APPLICATION FOR ALCOHOL AND DRUG COUNSELORS

**Applicants for CADC and IADC must submit a completed application, which needs to include:**

- \_\_\_\_\_ 1. Form 01, "Applicant Information"
- \_\_\_\_\_ 2. Form 02, "Assurances and Release"
- \_\_\_\_\_ 3. Form 03, "Education Resume"  
\* Have you requested your college(s) to send transcripts to IBC?
- \_\_\_\_\_ 4. Form 04, "Workshop Documentation"
- \_\_\_\_\_ 5. Form 05, "Professional Experience Resume"
- \_\_\_\_\_ 6. Form 06, "Documentation of Core Function/Domain Experience"
- \_\_\_\_\_ 7. A written job description
- \_\_\_\_\_ 8. Completed Form 09, sent by supervisor
- \_\_\_\_\_ 9. Exam fee: a check or money order payable to IBC

## ADDENDUM

### Members of International Certification and Reciprocity Consortium (IC&RC)

#### National

Alabama

Arizona

Arkansas

California

Connecticut

Delaware

District of Columbia

Florida

Georgia

Hawaii

Idaho

Illinois

Indian Health Services

    Albuquerque Area

    California Area

    Nashville Area

    Northern Plains Area

    Southwest Area

    Upper Midwest Area

Indiana

Iowa

Kentucky

Louisiana

Maryland

Massachusetts

Michigan

Minnesota

Mississippi

Missouri

Nebraska

New Hampshire

New Jersey

New Mexico

New York

North Carolina

Ohio

Oklahoma

Pennsylvania

Puerto Rico

Rhode Island

South Dakota

Texas

U.S. Administrative

    Office of the Courts

U.S. Air Force

U.S. Army

U.S. Navy

Utah

Vermont

Virginia

West Virginia

Wisconsin

#### International

Bermuda

Canada

Costa Rica

Germany

Greece, Malta, Cyprus, Bulgaria

Guam

Iceland

Indonesia

Israel

Malaysia

Mexico

Pacific

Singapore

Sweden

United Kingdom

World Federation of

    Therapeutic Communities