

Application Packet

Credentialed Prevention
Professional (CPP)

Credentialed Prevention Specialist
(CPS)



**Office of Addiction
Services and Supports**

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Return only the forms (**in bold**) with your application documentation. Application instructions may be retained for your reference throughout the credentialing process.

PURPOSE OF THE CPP AND CPS CREDENTIALS

The New York State Office of Addiction Services and Supports (OASAS) is committed to enhancing the quality of services in New York State through the professional development of the alcoholism and substance abuse services workforce. To ensure that prevention practitioners who provide services in alcoholism and substance abuse programs are competent and ethical in their work and skilled in meeting the needs of today's society, OASAS issues the Credentialed Prevention Professional (CPP) and Credentialed Prevention Specialist (CPS) to individuals who meet specific eligibility requirements and pass an appropriate examination.

OASAS defines "Prevention" as a proactive, evidenced-based process utilizing effective programs and strategies to prevent or reduce substance use, and gambling in individuals, families, and communities. The OASAS Prevention Framework is grounded on research that substance abuse is preventable and that prevention is the most cost-effective element in the continuum of substance abuse services. Practitioner experience and research have shown that to accomplish substance abuse prevention goals, prevention professionals must work with individuals, families, schools and their communities to identify and reduce the risk factors and increase the protective factors that are predictive of alcohol and substance use in communities. Research has shown that effective community prevention systems use multiple strategies that operate across multiple domains, requiring prevention professionals to support strong community prevention coalitions. Based on data-driven planning, evidence-based programs and strategies must be selected and implemented to achieve risk and protective factors to change outcomes and thus realize the following statewide goals:

- To reduce the prevalence of substance use and abuse and problem gambling in the NYS population.
- To delay the initiation of substance use and gambling behaviors among youth as long as possible.
- To decrease the negative health, social and economic consequences and costs associated with substance abuse and problem gambling.
- To prevent the escalation of substance use and gambling behaviors to levels requiring treatment through early identification, brief intervention and referral.

CREDENTIALING PROCESS

In order to become a CPP or CPS in New York State, you must: (1) meet specific competency and ethical conduct requirements; (2) meet specific work experience requirements; (3) meet minimum education and training requirements; (4) successfully complete a criminal background check review; and (5) pass the International Certification and Reciprocity Consortium (ICRC) examination for Prevention Specialist.

Application

Upon receipt by the OASAS Credentialing Unit, your application will be reviewed to ensure that the minimum eligibility requirements have been satisfied. Based on the findings of this review, your application will be determined to be either incomplete or approved. Applications are reviewed in the order they are received, and it may take an extended time to process due to the high volume received.

Incomplete Applications

If your application is determined to be incomplete, you will be mailed a CPP/CPS Application Review Summary identifying noted deficiencies. If you are unable to address the identified deficiencies by the end of the five-year period, your application will not be approved and you will not be issued a CPP/CPS Credential. In order to be considered for a CPP/CPS in the future, you will be required to submit a new application, associated documentation, and an additional \$100 Application Processing Fee.

Minimum Qualifications

To apply to become a CPP or CPS, you must:

- be at least 18 years of age;
- CPS applicants must have earned at least (1) a High School Diploma (obtained from institutions recognized by the New York State Department of Education or its equivalent) or (2) a General Equivalency Diploma (GED);
- CPP applicants must have earned at least a Bachelor's Degree;
- be proficient in English including the ability to speak, write, comprehend orally and read at a minimum level necessary to perform as a credentialed prevention professional;
- live or work in New York State at least 51 percent of the time during the five-year application period;

CREDENTIALING PROCESS (continued)

Examination

The ICRC Prevention Specialist examination is comprised of 150 multiple-choice questions derived from the tasks identified in the 2013 ICRC Prevention Specialist Job Task Analysis (JTA).

The examination is offered on a weekly basis. A candidate may retest once every 90 days as long as an active application is on file.

Eligibility for the Prevention Specialist exam may be met by completing the following requirements:

- CPP/CPS - Satisfactory completion of 120 CPS educational hours (see page 25 of this application). A CPP/CPS certificate **will not** be issued until satisfactory completion of the 2,000 (CPS) or 4,000 (CPP) work experience hours, additional 150 hours educational hours (CPP), the submission of appropriate evaluations of competency and ethical conduct, and successful completion of the Criminal Background Check process.

-- OR --

- CPS - Satisfactory completion of 120 educational hours, 2,000 work experience hours and the submission of the appropriate evaluations of competency and ethical conduct. A CPS certificate will be issued to those candidates who successfully complete the examination process and successful completion of a criminal background check review.
- CPP - Satisfactory completion of 250 educational hours, 4,000 work experience hours and the submission of the appropriate evaluations of competency and ethical conduct. A CPP certificate will be issued to those candidates who successfully complete the examination process and successful completion of a criminal background check review.

Note: If you currently hold a CPS certificate, you may be eligible to receive a CPP certificate without having to pass another ICRC Prevention exam. Contact the Credentialing Unit at Credentialing@oasas.ny.gov for information about the CPP Upgrade requirements and fees.

FEE SCHEDULE

All fees are **non-refundable, regardless of the results of your criminal background check**. Fees **must** be in the form of a **certified check** or **money order** made payable to NYS OASAS. Personal checks will **not** be accepted, will be returned, and will delay processing of your application. Please do not send cash.

\$100 Application Processing Fee

\$170 Computer Based Examination Fee -- Do not send examination fees until your application has been approved and you have been notified that you are exam-eligible.

\$ 50 Credential Upgrade Fee

You do not need to send \$100 every time you submit additional documentation for review. The \$100 application fee covers administrative services provided during the five-year period that your application is active.

GENERAL APPLICATION INSTRUCTIONS

These instructions are intended to guide you in completing your application to become a CPP/CPS. Please **read** the following information **before** preparing your application.

- Make a copy of the Application Packet to use as a working draft **before** preparing your application. After completing the working draft, enter the final information onto the original application.
- **Please print clearly.**
- **Make a copy of the completed application, including all of the documentation and attachments, for your records. The application and all accompanying documents will become the property of OASAS and will not be returned.** This will be very important should your application expire before you fulfill all the requirements as you would then be required to submit a new application and all associated documentation.
- Submit the completed original application and required documentation. Attach the **non-refundable** \$100 Application Processing Fee to the completed Part A of this application. The Application Processing Fee must be payable to "NYS OASAS" and in the form of a **certified check** or **money order**. **Applications received without payment will not be reviewed.**

Please mail your application to:

NYS OASAS
Attn: Credentialing Unit
1450 Western Avenue
Albany, New York 12203-3526

Personal checks or cash will not be accepted, will be returned, and will delay processing of your application.

An application is active for a period of five years from the date of postmark. If you do not complete the application process by the expiration date of your application, you will need to submit a new application and a \$100 Application Processing Fee. It is suggested that you contact the Credentialing Unit prior to submitting a new application as there may be paperwork that you do not have to re-submit.

PART A – APPLICATION SUMMARY CHECKLIST

Please remember to:

- Complete Part A - Application Summary Form.
- Enter your **full, 9-digit** Social Security Number on Part A.
- Sign and date on the reverse side of the Part A form (must be within the previous one year).
- Carefully review, initial, sign and date the Canon of Ethical Principles, Misconduct, and Other Prohibited Acts Attestation on pages 7-9 of this application.
- Review, sign and date the NYS Justice Center Code of Conduct on pages 10-11 of this application.
- Attach the \$100 Application Processing Fee in the form of a **certified check** or **money order**, payable to NYS OASAS, to Part A.
 - **Personal checks cannot be accepted, will be returned and will delay processing of your application.**
- Attach a copy of your highest level of completed education (diploma or transcript).

Failure to return any of the above documentation will delay processing of your application.

In order to maintain the accuracy of the Credentialing database, **please report** all changes in your postal address, e-mail address, telephone number, and/or your name, in writing and **within ten business** days, by e-mail to credentialing@oasas.ny.gov or by postal service to:

NYS OASAS
ATTN: Credentialing Unit
1450 Western Avenue
Albany NY 12203

Failure to comply with this requirement may result in the expiration of the application or imposition of penalties or other remedial actions as provided in Part 853.

PART A – APPLICATION SUMMARY FORM

Important Note: Documentation submitted without a fully completed Part A will not be processed, will be returned, and will delay the review of your application.

PART A - APPLICATION SUMMARY			APPLICATION TYPE (Check One) [] CPP [] CPS		
PERSONAL INFORMATION – PLEASE PRINT CLEARLY					
LAST NAME: _____		FIRST NAME: _____		MIDDLE INITIAL: _____	
IF YOU HAVE EVER BEEN KNOWN BY ANY OTHER NAME(S), PLEASE PROVIDE: _____					
SOCIAL SECURITY NUMBER: _____			DATE OF BIRTH: _____		
			Month	Day	Year
Full Social Security Number is Required					
MAILING ADDRESS: _____					
				Street Address	Apt. #
_____		_____		_____	
City/Town/Village	State	Zip Code	County of Residence		
HOME TELEPHONE NUMBER: () _____		CELL PHONE NUMBER: () _____			
E-MAIL ADDRESS: _____				GENDER: <input type="checkbox"/> Female <input type="checkbox"/> Male	
DEMOGRAPHIC INFORMATION - OPTIONAL					
Ethnicity:			Military Service:		
<input type="checkbox"/> White (Non Hispanic)			<input type="checkbox"/> Yes		
<input type="checkbox"/> Black (Non Hispanic)			<input type="checkbox"/> No		
<input type="checkbox"/> Asian/Pacific Islander			If applicable, I would identify myself as a person:		
<input type="checkbox"/> Native American			<input type="checkbox"/> in recovery from addiction(s).		
<input type="checkbox"/> Hispanic			<input type="checkbox"/> recovering from the effects of addiction(s) in my family.		
<input type="checkbox"/> Other: _____					
EDUCATIONAL INFORMATION -- ATTACH PROOF OF HIGHEST LEVEL COMPLETED					
<input type="checkbox"/> GED <input type="checkbox"/> High School Diploma <input type="checkbox"/> Associates Degree <input type="checkbox"/> Bachelors Degree <input type="checkbox"/> Masters Degree <input type="checkbox"/> Doctoral Degree					
PROFESSIONAL INFORMATION -- ATTACH PROOF					
<input type="checkbox"/> CASAC		<input type="checkbox"/> Licensed Creative Arts Therapist			
<input type="checkbox"/> Licensed Clinical Social Worker		<input type="checkbox"/> Physician			
<input type="checkbox"/> Licensed Master Social Worker		<input type="checkbox"/> Physician's Assistant			
<input type="checkbox"/> Certified by the National Board for Certified Counselors		<input type="checkbox"/> Registered Professional Nurse			
<input type="checkbox"/> Licensed Mental Health Counselor		<input type="checkbox"/> Licensed Nurse Practitioner			
<input type="checkbox"/> Licensed Marriage and Family Therapist		<input type="checkbox"/> Licensed Psychologist			
<input type="checkbox"/> Registered Occupational Therapist		<input type="checkbox"/> Licensed Psychoanalyst			
<input type="checkbox"/> Certified Rehabilitation Counselor		<input type="checkbox"/> Therapeutic Recreation Specialist			

THE REVERSE SIDE MUST BE COMPLETED IN ITS ENTIRETY

PART A – APPLICATION SUMMARY FORM (continued)

EMPLOYMENT INFORMATION (Please Print Clearly)			
JOB TITLE: _____	WORK TELEPHONE NO.: () _____	-	Ext. _____
CURRENT EMPLOYER: _____	DATE STARTED: _____		
OASAS CERTIFICATE NUMBER: _____	WORK UNIT/FACILITY NAME: _____		
MAILING ADDRESS: _____			
Street	City/Town/Village	State	Zip Code

AFFIRMATIONS AND CERTIFICATIONS – PLEASE PRINT CLEARLY	
HAS ANY DISCIPLINARY ACTION EVER BEEN TAKEN AGAINST YOU AS THE HOLDER OF ANY LICENSE OR CERTIFICATION ISSUED BY NEW YORK STATE OR ANY OTHER STATE OR FEDERAL AGENCY?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If “Yes”, complete the following:	
_____ Date of Disciplinary Action	_____ License or Certification
_____ Type of Action Taken	
<p>I attest that the information contained in this Application, including any attachments, is true and correct to the best of my knowledge.</p> <p>I understand that if the information submitted contains a false statement, my Application to become a CPP or CPS may be denied. If the Application is approved and later determined to contain materials that were false or misleading, OASAS has the authority to duly annul, suspend, limit, or revoke the credential issued.*</p>	
_____ APPLICANT SIGNATURE	_____ DATE**
Any CPP or CPS Applicant who engages in any acts prohibited by the Part 853 Regulations governing the Credentialing of Addictions Professionals shall be subject to one or more of the following penalties or as otherwise authorized by law: Administrative Reprimand, Suspension, Denial of Renewal/Reinstatement, Revocation, Fines, and Annulment.	
* OFFERING A FALSE INSTRUMENT FOR FILING IN THE FIRST DEGREE IS A CLASS E FELONY. A person is guilty of offering a false instrument for filing in the first degree when, knowing that a written instrument contains a false statement or false information and, with intent to defraud the State or any political subdivision thereof, he/she offers or presents it to a public office or public servant with the knowledge or belief that it will be filed with, registered or recorded in or otherwise become part of the records of such public office of public servant.	
** Part A must be dated within one year prior to submission. Applications which are not signed and dated will be returned and will delay processing of your Application.	

Personal information provided to OASAS is protected under the New York State Public Officer’s Law, Personal Privacy Protection Law, Article 6A, and may only be disclosed with written consent, a court-ordered subpoena or subject to other provisions of such law.

Remember to include the Application Processing Fee of \$100 in the form of a money order or certified check. Personal checks are not accepted and will delay processing of your application.

CANON OF ETHICAL PRINCIPLES

LAST NAME: _____	FIRST NAME: _____	MI: _____	CPP/CPS # _____
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Please initial each of the following items indicating that you have carefully read, understood and agree to abide by the Part 853 Regulation governing the Credentialing of Addictions Professionals. The attestation on page 3 of 3 must be signed and dated.

Failure to return these pages will delay the processing of your application.

The CPP and CPS:

- _____ (1) Must recognize that the profession is founded on national standards of competence which promote the best interest of society, the service recipient, the professional and the profession as a whole.
- _____ (2) Must do no harm to service recipients. Practices shall be respectful and non-exploitative. Services shall protect the recipients from harm and the professional and the profession from censure.
- _____ (3) Must maintain an objective, non-possessive relationship with those they serve and shall not exploit them sexually, financially or emotionally.
- _____ (4) Must not promote personal gain or profit.
- _____ (5) Must not discriminate against service recipients or colleagues based on race, religion, national origin, sex, age, sexual orientation, economic condition or physical or mental disability. The CPP and CPS shall broaden his/her understanding and acceptance of cultural and individual differences and, in so doing, render services and provide information sensitive to those differences.
- _____ (6) Must observe the profession's technical and ethical standards, strive continually to improve personal competence and quality of service delivery and discharge professional responsibility to the best of his/her ability.
- _____ (7) Must be diligent in discharging responsibilities by rendering services carefully and promptly, by being thorough and by observing applicable technical and ethical standards.
- _____ (8) Must adequately plan and supervise any professional activity for which he/she is responsible.
- _____ (9) Must recognize limitations and boundaries of competencies and not use techniques or offer services outside of his/her own competencies. The CPP and CPS is responsible for assessing the adequacy of his/her own competence for the responsibility to be assumed.
- _____ (10) Must report to the appropriate authorities any unethical conduct or practice on the part of any agency or individual providing prevention services when aware of such conduct or practice. The CPP and CPS must not participate in the filing of ethics complaints that are frivolous or have a purpose other than to protect the public.
- _____ (11) Must perform all professional responsibilities with the highest sense of integrity in order to maintain and broaden public confidence. Integrity can accommodate the inadvertent error and the honest difference of opinion. It cannot accommodate the deceit or subordination of principle.
- _____ (12) Must not subordinate services and the public trust for personal gain and advantage. Services, including referrals, shall be based in the best interest of the recipient(s). All information shall be presented fairly and accurately. The CPP and CPS shall document and assign credit to all contributing sources used in published material or public statements.
- _____ (13) Must not misrepresent, either directly or by implication, professional qualifications or affiliations.
- _____ (14) Must not be associated, directly or indirectly, with any services or products in any way that are misleading or incorrect.
- _____ (15) Must report any evidence of child abuse to the appropriate agency. Follow up to ensure that appropriate action has been taken.
- _____ (16) Must be supportive of assistance and treatment where there is evidence of impairment in a colleague or service recipient.
- _____ (17) Must recognize the effect of impairment on professional performance and be willing to seek appropriate treatment for him/herself.

CONTINUED ON NEXT PAGE

LAST NAME: _____ FIRST NAME: _____ MI: _____ CPP/CPS # _____

Please initial each of the following items indicating that you have carefully read, understood and agree to abide by the Part 853 Regulation governing the Credentialing of Addictions Professionals. The attestation on page 3 of 3 must be signed and dated. **Failure to return these pages will delay the processing of your application.**

- _____ (18) Must protect service recipient rights and ensure confidentiality by adhering to all applicable state and federal laws and regulations. The CPP and CPS shall not participate in, or condone, any illegal activity, including the use of illegal chemicals or the possession, sale or distribution of illegal chemicals. The CPP and CPS shall not participate in, condone, or be an accessory to, dishonesty, fraud, deceit or misrepresentation.
- _____ (19) Must take the initiative to support, promote and improve the delivery of high-quality services throughout the continuum of care of prevention, intervention, treatment and aftercare.
- _____ (20) Must advocate for changes in public policy and legislation to afford opportunities and choices for all persons whose lives are impaired or impacted by the disease of alcoholism, tobacco use and other drug abuse and addictions and to promote the health and well-being of all human beings.
- _____ (21) Must actively participate in the public awareness of the effects of alcohol, tobacco and other drug effects, including alcoholism and other addictions and act to ensure all persons, especially the disadvantaged, have access to necessary resources and services.

MISCONDUCT

The following shall constitute misconduct by a CPP/CPS:

- _____ (1) Obtaining the credential fraudulently.
- _____ (2) Practicing or providing services fraudulently, with gross incompetence, with gross negligence on a particular occasion or negligence or incompetence on more than one occasion, or otherwise acting contrary to the interests of a patient or service recipient.
- _____ (3) Practicing or providing services while under the influence of alcohol and/or other substances.
- _____ (4) Violating any term or condition or limitation imposed on the certified/credentialed professional by the Office.
- _____ (5) Refusing to provide services to a person, individual, organization or community because of race, creed, color, gender, age, disability, national origin, sexual orientation, or socioeconomic status.
- _____ (6) Being convicted of or committing an act constituting a crime under New York State law, Federal law, or the law of another jurisdiction which, if committed within this State, would constitute a crime under New York State law, and not promptly reporting such conviction to the Office.
- _____ (7) Promoting the inappropriate sale of services, goods, property or drugs in such manner as to exploit the patient or service recipient for the financial gain of the certified/credentialed professional or of a third party.
- _____ (8) Directly or indirectly offering, giving, soliciting or receiving, or agreeing to receive, any fee, or other consideration to or from a third party for the referral of a patient or service recipient in connection with the performance of chemical dependence counseling services or alcohol and substance use, abuse and dependence prevention services; and/or problem gambling services.
- _____ (9) Entering into an exploitative, sexual or other intimate relationship with patients/former patients/service recipients or their significant others that is outside the boundaries of professional conduct.
- _____ (10) Engaging in any conduct which would constitute a "reportable incident" as such terms are defined in 14 NYCRR Part 836 [Incident Reporting in OASAS Certified, Licensed, Funded or Operated Services].
- _____ (11) Failure to notify the Office of any disciplinary action taken against you as the holder of any other license or certification issued by New York State or any other federal or state authority.

CONTINUED ON NEXT PAGE

OTHER PROHIBITED ACTS

LAST NAME: _____ FIRST NAME: _____ MI: _____ CPP/CPS # _____

Please initial each of the following items indicating that you have carefully read, understood and agree to abide by the Part 853 Regulation governing the Credentialing of Addictions Professionals. The attestation on page 3 of 3 must be signed and dated. **Failure to return these pages will delay the processing of your application.**

- _____ (a) **Unlawful use of the title CPP/CPS.** No person shall use the title CPP/CPS unless authorized pursuant to this Part.
- _____ (b) **Private practice prohibited.** No person shall use the title CPP/CPS to engage in private practice unless otherwise authorized by law.

I, the undersigned applicant, have received as part of this Application, and have read, understand, and agree to abide by the Part 853 Regulations governing the Credentialing of Addictions Professionals, which includes the Canon of Ethical Principles, Misconduct, and Other Prohibited Acts.

I also understand that any questions regarding the interpretation of the Part 853 Regulations (Credentialing of Addiction Professionals), especially as it relates to ethical and professional standards, may be directed to the Credentialing Unit at credentialing@oasas.ny.gov or 1-800-482-9564 (option 5).

Any CPP or CPS who engages in any acts prohibited by the Part 853 Regulations governing the Credentialing of Addictions Professionals shall be subject to one or more of the following penalties or as otherwise authorized by law: Administrative Reprimand, Suspension, Denial of Renewal/Reinstatement, Revocation, Fines, and Annulment.

APPLICANT SIGNATURE DATE

If you suspect an individual has violated the Prevention Canon of Ethical Principles, Misconduct, or Other Prohibited Acts, please call the OASAS Credentialing Unit at 1-800-482-9564 (option 5).

New York State Justice Center for the Protection of People with Special Needs

CODE OF CONDUCT FOR CUSTODIANS OF PEOPLE WITH SPECIAL NEEDS

Revised January 21, 2016

Introduction

The Code of Conduct, as set forth in the Code of Conduct itself, sets forth a framework intended to assist impacted employees to help people with special needs "live self-directed, meaningful lives in their communities, free from abuse and neglect, and protected from harm," in addition to the specific guidance provided by the agency's policies and training.

Similarly, the Notice to Mandated Reporters contains guidance designed to assist mandated reporters, and is intended to provide a summary of reporting obligations for mandated reporters. It is not intended to supplement or in any way add to the reporting obligations provided by law, rule, or regulation.

As provided by law, rule, or regulation, only custodians who have or will have regular and direct contact with vulnerable persons receiving services or support from facilities or providers covered by the *Justice Center Act* must sign that they have read and understand the Code of Conduct.

The framework provides:

1. Person-Centered Approach

My primary duty is to the people who receive supports and services from this organization. I acknowledge that each person of suitable age must have the opportunity to direct his or her own life, honoring, where consistent with agency policy, their right to assume risk in a safe manner, and recognizing each person's potential for lifelong learning and growth. I understand that my job will require flexibility, creativity and commitment. Whenever consistent with agency policy, I will work to support the individual's preferences and interests.

2. Physical, Emotional and Personal Well-being

I will promote the physical, emotional and personal well-being of any person who receives services and supports from this organization, including their protection from abuse and neglect and reducing their risk of harm to others and themselves.

3. Respect, Dignity and Choice

I will respect the dignity and individuality of any person who receives services and supports from this organization and honor their choices and preferences whenever possible and consistent with agency policy. I will help people receiving supports and services use the opportunities and resources available to all in the community, whenever possible and consistent with agency policy.

4. Self-Determination

I will help people receiving supports and services realize their rights and responsibilities, and, as consistent with agency policy, make informed decisions and understand their options related to their physical health and emotional well-being.

5. Relationships

I will help people who receive services and supports from this organization maintain or develop healthy relationships with family and friends. I will support them in making informed choices about safely expressing their sexuality and other preferences, whenever possible and consistent with agency policy.

THE REVERSE SIDE MUST BE COMPLETED IN ITS ENTIRETY

PART B – EVALUATION OF ETHICAL CONDUCT

Requirements

You must have **three** individuals complete an Evaluation of Ethical Conduct for you. Evaluations must be submitted on the Part B *Evaluation of Competency and Ethical Conduct* form (page 14-15) of this Application Packet.

All evaluators must have **direct knowledge** of your **prevention-related work experience** for a minimum of **six months**, and may **not** be a family member, subordinate, instructor or professor. Evaluators must meet the following qualifications:

- One evaluator **must** be your current Qualified Prevention Supervisor. In the absence of a current Qualified Prevention Supervisor, the evaluator may be your most recent Qualified Prevention Supervisor.

A Qualified Prevention Supervisor means an individual who is:

- a CPP;
 - non-credentialed but meets the CPP work experience and education requirements; or
 - a CASAC supervising a program providing prevention services.
- The remaining two evaluations must be completed by individuals who are familiar with your work in providing alcohol and substance abuse prevention services.

Instructions

Complete the Applicant Consent to Release Information section of Part B (Evaluation of Competency and Ethical Conduct) form and provide the form to each evaluator.

Request that the evaluator complete the evaluation, discuss the evaluation with you, and return the completed form to you, with any other required documentation. **Evaluations must be signed and dated within one year prior to submission.**

If you suspect an individual has violated the CPP/CPS Canon of Ethical Principles, Misconduct, or Other Prohibited Acts, please call the OASAS Credentialing Unit at 1-800-482-9564 (option 5).

PART B – EVALUATION OF ETHICAL CONDUCT CHECKLIST

Please remember to:

- Make enough copies of the *Evaluation of Ethical Conduct* form for all three of your evaluators.
 - Part B does **not** need to be submitted at this time to be eligible for the Prevention Examination.
- Complete, sign, and date the “Applicant Consent to Release Information” section of **each** *Evaluation of Ethical Conduct* form and provide the form to each evaluator.
- Only submit evaluations from evaluators who have known you for a minimum of 6 months. Evaluations must be completed by:
 - your current or most recent Qualified Prevention Supervisor,
 - two individuals familiar with your work as a provider of prevention services.
- Request that each evaluator: (1) complete the entire evaluation; (2) attach a copy of their license or credential; (3) discuss the evaluation with you; and (4) return the completed form to you, with any other documentation required.
- Include **three** completed Evaluations of Ethical Conduct **and** any other **accompanying documentation**.
- Include a copy of a **current** credential claimed by each evaluator.
- Check to make sure that the Evaluation of Ethical Conduct forms are dated within **one year** prior to submission.

Please note that OASAS may not intervene in workplace disputes should a supervisor refuse to sign an evaluation form.

PART B – EVALUATION OF ETHICAL CONDUCT FORM

Applicant Reminder: Make copies of the Evaluation of Ethical Conduct form to provide to all three evaluators.

APPLICANT TO COMPLETE THIS SECTION - CONSENT TO RELEASE INFORMATION – Please Print Clearly

LAST NAME: _____ FIRST NAME: _____ SSN #: **XXX-XX-** _____

By my signature below, I am authorizing the provider/person identified below to provide information and documentation to NYS OASAS.

Applicant Signature

Date

EVALUATOR TO COMPLETE FROM THIS POINT FORWARD -- Please Print Clearly and Answer ALL Questions

Information and Instructions to Evaluator: The above-named individual is applying to OASAS to become a CPP or CPS. As part of the application process, the applicant has selected you as one of three persons who is considered competent to judge his/her ethical conduct. **Do not complete the Evaluation of Ethical Conduct unless the above release is signed and dated.** Please return this completed form to the applicant with any other documentation required. If you have any questions related to this form, or to the evaluation process, please contact the OASAS Credentialing Unit at 1-800-482-9564 (option 2).

- Note:** Yes Evaluator has direct knowledge of the applicant's alcoholism and substance abuse prevention work experience observed for a minimum of six months. If yes, continue to complete the remainder of this form.
- No Evaluator does not have direct knowledge of the applicant's alcoholism and substance abuse prevention work experience observed for a minimum of six months Do not proceed any further and please return this form to the applicant.

EVALUATOR NAME: _____ WORK SITE PHONE NUMBER: () _____

CURRENT PROVIDER/EMPLOYER: _____ CURRENT JOB TITLE: _____

PHYSICAL WORK ADDRESS: _____
Street City/Town/Village State Zip Code

EVALUATOR KNOWLEDGE OF APPLICANT -- Check the box that describes your current relationship to the applicant.

- Current Clinical Supervisor Co-Worker Other: _____
 Former Clinical Supervisor Former Co-Worker

• Period covered in professional relationship with applicant (six month minimum): _____ To _____
(Month/Year) (Month/Year)

• **Evaluator's Employer** During Professional Relationship: _____

• **Evaluator's Job Title** During Professional Relationship: _____

• **Applicant's Employer** During Professional Relationship: _____

• **Applicant's Job Title** During Professional Relationship: _____

SUPERVISOR CERTIFICATION

I certify that I am a Qualified Prevention Supervisor by my signature on the following page and as indicated by my status shown below (check all that apply).

- CPP (**attach a copy of current CPP certificate**)
- Licensed, certified or credentialed in a related discipline (CASAC, Credentialed Problem Gambling Counselor, Certified Teacher, Health Educator, Guidance Counselor, Rehabilitation Counselor, Licensed Clinical Social Worker, Licensed Master Social Worker, Licensed Mental Health Practitioner, Family Therapist, Registered Nurse, Physician, or a National Board Certified Counselor) with **two years** of qualifying prevention work experience and **60 hours** of prevention specific education and training. (**Attach a copy of current license or certification.**)

THE REVERSE SIDE MUST BE COMPLETED IN ITS ENTIRETY

PART B – EVALUATION OF ETHICAL CONDUCT (continued)

The CPP and CPS must:

- (1) must recognize that the profession is founded on national standards of competence that promote the best interest of society, the service recipient, the professional and the profession as a whole.
- (2) must do no harm to service recipients. Practices shall be respectful and non-exploitative. Services must protect the recipients from harm and the professional and the profession from censure.
- (3) must maintain an objective, non-possessive relationship with those they serve and shall not exploit them sexually, financially or emotionally.
- (4) must not promote personal gain or profit.
- (5) must not discriminate against service recipients or colleagues based on race, religion, national origin, sex, age, sexual orientation, economic condition or physical or mental disability. The CPP and CPS must broaden his/her understanding and acceptance of cultural and individual differences and, in so doing, render services and provide information sensitive to those differences.
- (6) must observe the profession's technical and ethical standards, strive continually to improve personal competence and quality of service delivery and discharge professional responsibility to the best of his/her ability.
- (7) must be diligent in discharging responsibilities by rendering services carefully and promptly by being thorough and by observing applicable technical and ethical standards.
- (8) must adequately plan and supervise any professional activity for which he/she is responsible.
- (9) must recognize limitations and boundaries of competencies and not use techniques or offer services outside of his/her own competencies. The CPP and CPS is responsible for assessing the adequacy of his/her own competence for the responsibility to be assumed.
- (10) must report to the appropriate authorities any unethical conduct or practice on the part of any agency or individual providing prevention services when aware of such conduct or practice. The CPP and CPS must not participate in the filing of ethics complaints that are frivolous or have a purpose other than to protect the public.
- (11) must perform all professional responsibilities with the highest sense of integrity in order to maintain and broaden public confidence. Integrity can accommodate the inadvertent error and the honest difference of opinion. It cannot accommodate the deceit or subordination of principle.
- (12) must not subordinate services and the public trust for personal gain and advantage. Services, including referrals, shall be based in the best interest of the recipient(s). All information must be presented fairly and accurately. The CPP and CPS shall document and assign credit to all contributing sources used in published material or public statements.
- (13) must not misrepresent, either directly or by implication, professional qualifications or affiliations.
- (14) must not be associated, directly or indirectly, with any services or products in any way that are misleading or incorrect.
- (15) must report any suspected child abuse to the appropriate agency and follow up to ensure that appropriate action has been taken.
- (16) must be supportive of assistance and treatment where there is evidence of impairment in a colleague or service recipient.
- (17) must recognize the effect of impairment on professional performance and be willing to seek appropriate treatment for him/herself.
- (18) must protect service recipient rights and ensure confidentiality by adhering to all applicable state and federal laws and regulations. The CPP and CPS must not participate in, or condone, any illegal activity, including the use of illegal chemicals or the possession, sale or distribution of illegal chemicals. The CPP and CPS shall not participate in, condone, or be an accessory to, dishonesty, fraud, deceit or misrepresentation.
- (19) must take the initiative to support, promote and improve the delivery of high-quality services throughout the continuum of care of prevention, intervention, treatment and recovery.
- (20) must advocate for changes in public policy and legislation to afford opportunities and choices for all persons whose lives are impaired or impacted by the disease of alcoholism, tobacco use and other drug abuse and addictions and to promote the health and well-being of all human beings.
- (21) must actively participate in the public awareness of the effects of alcohol, tobacco and other drug effects, including alcoholism and other addictions and act to ensure all persons, especially the disadvantaged, have access to necessary resources and services.
- (22) must not engage in sexual activities or sexual contact with former clients because of the potential for harm to the client. If a credentialed professional engages in conduct contrary to this prohibition or claims that an exception to this prohibition is warranted because of extraordinary circumstances, it is the credentialed professional who assumes the full burden of demonstrating that the former client has not been exploited, coerced, or manipulated, intentionally or unintentionally.
- (23) Notify appropriate authorities, including employers and OASAS, when they have direct knowledge of a colleague's impairment or misconduct which may interfere with treatment effectiveness and place service recipients and others at risk.

EVALUATOR SUMMARY: Please check one of the following boxes and provide comments below as appropriate.

I ENDORSE THIS APPLICANT. I am not a relative or a subordinate. I have no reservations regarding the applicant's ethical conduct. The applicant meets or exceeds ethical standards. To the best of my knowledge, the applicant has no current problem with alcohol, other drugs or any other addictions or conditions which might interfere with his/her ability to perform as a CPP or CPS. I have discussed this endorsement with the applicant.

I DO NOT ENDORSE THIS APPLICANT. I have serious reservations about the applicant's ethical conduct or other condition which could interfere with his/her ability to perform as a CPP or CPS. I have discussed these reservations with the applicant.

I AM UNABLE TO EVALUATE THIS APPLICANT.

COMMENTS :

EVALUATOR ATTESTATION -- I attest that the information I have provided is true and correct to the best of my knowledge. I have directly observed and provided my best independent judgment of the applicant's work as a **prevention professional**. I have not been influenced by the opinions of any other person. I will not discuss or reveal the content of this evaluation with any person other than the applicant in that I consider it to be confidential and private.

Evaluators Signature

Date *

* Must be dated within one year prior to submission of the Part B form. Forms not dated within one year prior to submission cannot be considered.

PART C – WORK EXPERIENCE

Approved Work Experience

Work experience claimed must:

- include the provision of prevention services based on data-driven planning, evidence-based programs and strategies that reduce risk factors and increase protective factors predictive of alcohol and substance abuse in communities.
- include a minimum of 120 hours of Supervised Practical Training. Each of the following six performance domains must have been performed for a minimum of 10 hours, under the supervision of a Qualified Prevention Supervisor (QPS):

Domain 1: Planning and Evaluation

- Determine the level of community readiness for change.
- Identify appropriate methods to gather relevant data for prevention planning.
- Identify existing resources available to address the community needs.
- Identify gaps in resources based on the assessment of community conditions.
- Identify the target audience.
- Identify factors that place persons in the target audience at greater risk for the identified problem.
- Identify factors that provide protection or resilience for the target audience.
- Determine priorities based on comprehensive community assessment.
- Develop a prevention plan based on research and theory that addresses community needs and desired outcomes.
- Select prevention strategies, programs, and best practices to meet the identified needs of the community.
- Implement a strategic planning process that results in the development and implementation of a quality strategic plan.
- Identify appropriate prevention program evaluation strategies.
- Administer surveys/pre/posttests at work plan activities.
- Conduct evaluation activities to document program fidelity.
- Collect evaluation documentation for process and outcome measures.
- Evaluate activities and identify opportunities to improve outcomes.
- Utilize evaluation to enhance sustainability of prevention activities.
- Provide applicable workgroups with prevention information and other support to meet prevention outcomes.
- Incorporate cultural responsiveness into all planning and evaluation activities.
- Prepare and maintain reports, records, and documents pertaining to funding sources.

- Coordinate prevention activities.
- Implement prevention education and skill development activities appropriate for the target audience.
- Provide prevention education and skill development programs that contain accurate, relevant, and timely content.
- Maintain program fidelity when implementing evidence-based practices.
- Serve as a resource to community members and organizations regarding prevention strategies and best practices.

Domain 3: Communication

- Promote programs, services, activities, and maintain good public relations.
- Participate in public awareness campaigns and projects relating to health promotion across the continuum of care.
- Identify marketing techniques for prevention programs.
- Apply principles of effective listening.
- Apply principles of public speaking.
- Employ effective facilitation skills.
- Communicate effectively with various audiences.
- Demonstrate interpersonal communication competency.

Domain 4: Community Organization

- Identify the community demographics and norms.
- Identify a diverse group of stakeholders to include in prevention programming activities.
- Build community ownership of prevention programs by collaborating with stakeholders when planning, implementing, and evaluating prevention activities.
- Offer guidance to stakeholders and community members in mobilizing for community change.
- Participate in creating and sustaining community-based coalitions.
- Develop or assist in developing content and materials for meetings and other related activities.
- Develop strategic alliances with other service providers within the community.
- Develop collaborative agreements with other service providers within the community.
- Participate in behavioral health planning and activities.

Domain 2: Prevention Education and Service Delivery

PART C – WORK EXPERIENCE (continued)

Domain 5: Public Policy and Environmental Change

- Provide resources, trainings, and consultations that promote environmental change.
- Participate in enforcement initiatives to affect environmental change.
- Participate in public policy development to affect environmental change.
- Use media strategies to support policy change efforts in the community.
- Collaborate with various community groups to develop and strengthen effective policy.
- Advocate to bring about policy and/or environmental change.

Domain 6: Professional Growth and Responsibility

- Demonstrate knowledge of current prevention theory and practice.
- Adhere to all legal, professional, and ethical principles.
- Demonstrate cultural responsiveness as a prevention professional.
- Demonstrate self-care consistent with prevention messages.
- Recognize importance of participation in professional associations locally, statewide, and nationally.
- Demonstrate responsible and ethical use of public and private funds.
- Advocate for health promotion across the life span.
- Advocate for healthy and safe communities.
- Demonstrate knowledge of current issues of addiction.
- Demonstrate knowledge of current issues of mental, emotional, and behavioral health.

To satisfy the 120 hours of Supervised Practical Training, a **minimum** of 12 hours must have been **face-to-face** with a QPS.

To satisfy the 4,000 hour (CPP) or 2,000 hour (CPS) work experience requirement, a **minimum** of 1,000 hours **must** be gained during the five years **prior** to submission of the Work Experience Verification Record.

You must document a minimum of 4,000 hours (CPP) or 2,000 hours (CPS) of supervised experience in an **approved prevention services work setting**. An approved work setting means:

- It holds a valid OASAS operating certificate and/or is funded by OASAS to provide prevention services.
- It is a program that includes alcoholism and/or substance abuse prevention services consistent with OASAS’ standards and is licensed and/or operated by another recognized State or Federal authority to include the Indian Health Service and Veterans Administration (e.g., OMH).
- It is a **non-certified setting** which involves **the legal provision of prevention services** and which affords the opportunity to establish proficiency in one or more of the performance domains associated with a credential administered by OASAS and on-site supervision by a QPS meeting the supervisory standards established by OASAS. **Only 50 percent of the required work experience may be obtained in this work setting.**

Work experience may **not** include any experience gained as part of, or required under, participation as a patient in a formal problem gambling program or a formal alcoholism and/or substance abuse treatment/aftercare program and/or plan.

PART C – WORK EXPERIENCE

Academic Degrees – CPP Only

Substitution of a Master’s (or higher) Degree in an **approved Human Services Field** (see below list) for 2000 hours of work experience must be supported by either an academic transcript or a copy of your diploma from an accredited college or institution which **clearly states the approved Human Services Field**.

Examples of approved Human Services Fields include:

- | | |
|------------------------------------|---------------------------|
| Anthropology | Human Services |
| Art/Dance Therapy | Music Therapy |
| Audiology | Nursing/Medicine |
| Child Development/Family Relations | Nutrition |
| Community Mental Health | Occupational Therapy |
| Chemical Dependence Administration | Pastoral Counseling |
| Counseling/Guidance | Physical Therapy |
| Criminal Justice | Psychology |
| Divinity/Religion/Theology | Recreational Therapy |
| Drama Therapy | Rehabilitation Counseling |
| Education | Social Work |
| Gerontology | Sociology |
| Health Administration | Special Education |
| Health Education | Vocational Counseling |
| Speech Pathology | |

Note: Other degrees may be considered if at least 50 percent of the coursework is in the Human Services Field.

It is very important to note the following:

- Certificates of Advanced Study and Teaching Certificates are **not** considered or comparable to attainment of a degree.
- A **formal internship or formal field placement** may be claimed as work experience **or** education and training, **but not both**. You should calculate the need to claim a formal internship or formal field placement as either work experience or education and training.

Did you know that all Prevention Practitioners and Applicants are Mandated Reporters?

It is a Mandated Reporter’s legal duty under the New York State Protection of People with Special Needs Act (the Act) to report Abuse, Neglect and Significant Incidents involving vulnerable persons to the Vulnerable Persons’ Central Register (VPCR).

The Justice Center operates a centralized, statewide toll-free hotline and incident reporting system, known as the Vulnerable Persons Central Register (VPCR), which receives and tracks allegations of abuse and neglect 24 hours a day, 7-days a week.

The Justice Center Hotline number is 1-855-373-2122.

PART C – WORK EXPERIENCE VERIFICATION CHECKLIST

Please remember to:

- Complete Part C Work Experience Verification Record(s) and any other documentation required.
 - Part C does **not** need to be submitted at this time to be eligible for the Prevention Examination.
- Include a copy of at least one current credential or license claimed by your clinical supervisor.
- Include a copy of the employer's operating certificate/license if applicable.
- The certification at the bottom page 22 must include the signature of the:
 - Authorized Representative (for paid work experience)
 - or**
 - clinical supervisor (for volunteer/non-paid work experience).
- Include total numbers of hours worked in clock hours. Days/weeks worked will not be accepted.
- Include only those hours worked specific to the provision of substance abuse treatment services.
- Check work setting #3 for a non-certified setting, if applicable.

PART C – WORK EXPERIENCE VERIFICATION FORM (Page 1 of 3)

APPLICANT CONSENT TO RELEASE INFORMATION (To Be Completed By Applicant – Please Print Clearly)

LAST NAME: _____ FIRST NAME: _____ SSN #: XXX-XX- _____

By my signature below, I am authorizing the provider/person identified below to provide information and documentation to the New York State Office of Addiction Services and Supports (OASAS). I attest that the work experience hours claimed were **NOT** gained during the course of or as part of the applicant's participation as a patient in a formal alcoholism and/or substance abuse treatment/aftercare program and/or plan.

Applicant Signature _____ Date

THIS SECTION TO BE COMPLETED BY THE APPLICANT'S SUPERVISOR - Must be a Qualified Prevention Supervisor

This form reflects your knowledge of the applicant's work experience and/or supervised practical training while employed at the work setting indicated. Be sure that the applicant has signed and dated the above "Applicant Consent to Release Information" allowing you to make available to OASAS any and all information regarding his/her work experience needed to meet the CPP/CPS eligibility requirements. Please return this completed form to the applicant with any other documentation. Questions may be directed to the OASAS Credentialing Unit at 1-800-482-9564 (option 2).

PROVIDER/EMPLOYER NAME: _____

UNIT WHERE APPLICANT WORKED: _____ WORK SITE TELEPHONE NUMBER: () _____

MAILING ADDRESS: _____
Street City/Town/Village State Zip Code

OASAS defines "Prevention" as a proactive, evidenced-based process utilizing effective programs and strategies to prevent or reduce substance use, and gambling in individuals, families, and communities. The OASAS Prevention Framework is grounded on research that substance abuse is preventable and that prevention is the most cost-effective element in the continuum of substance abuse services. Practitioner experience and research have shown that to accomplish substance abuse prevention goals, prevention professionals must work with individuals, families, schools and their communities to identify and reduce the risk factors and increase the protective factors that are predictive of alcohol and substance use in communities. Research has shown that effective community prevention systems use multiple strategies that operate across multiple domains, requiring prevention professionals to support strong community prevention coalitions. Based on data-driven planning, evidence-based programs and strategies must be selected and implemented to achieve risk and protective factor change outcome and thus realize the following statewide goals:

1. To reduce the prevalence of substance use and abuse and problem gambling among the NYS population.
2. To delay the initiation of substance use and gambling behaviors among youth as long as possible.
3. To decrease the negative health, social and economic consequences and costs associated with substance abuse and problem gambling.
4. To prevent the escalation of substance use and gambling behaviors to levels requiring treatment through early identification, brief intervention and referral.

TYPE OF WORK SETTING – Check Only One:

- (1) It holds a valid operating certificate of approval issued by OASAS and/or is funded by OASAS or holds a similar license or other approval from another state's alcohol and/or substance abuse authority for the state in which the agency, facility or program is located which authorizes the provision of alcohol and substance abuse prevention services
- (2) It is a program that includes alcoholism and/or substance abuse prevention services consistent with OASAS' standards for prevention programs and is licensed and/or operated by another New York State agency or a federally organized/funded program such as Veterans Administration or Indian Health Service.
- (3) It is a non-certified program that involves: (1) the legal provision of alcoholism and substance abuse prevention and/or problem gambling services; (2) the opportunity to establish proficiency in one or more of the professional competencies associated with a credential administered by OASAS; and (3) on-site supervision by a qualified prevention supervisor meeting the supervisory standards established by OASAS.

PAGES 1, 2 AND 3 MUST BE COMPLETED

PART C – WORK EXPERIENCE VERIFICATION FORM (Page 2 of 3)

SUPERVISED PRACTICAL TRAINING/SUPERVISOR CERTIFICATION

Work experience must be based on a comprehensive, multi-dimensional prevention services approach which includes six performance domains (areas of professional expertise). Applicants must document a total of 120 hours of supervised practical training, including a minimum of 10 hours in each domain. **Of the 120 hours, a minimum of 12 hours must be face-to-face with a Qualified Prevention Supervisor.** In each of the following domains enter the total number of hours that the applicant received supervised practical training.

Domain 1: Planning and Evaluation

- Determine the level of community readiness for change.
- Identify appropriate methods to gather relevant data for prevention planning.
- Identify existing resources available to address the community needs.
- Identify gaps in resources based on the assessment of community conditions.
- Identify the target audience.
- Identify factors that place persons in the target audience at greater risk for the identified problem.
- Identify factors that provide protection or resilience for the target audience.
- Determine priorities based on comprehensive community assessment.
- Develop a prevention plan based on research and theory that addresses community needs and desired outcomes.
- Select prevention strategies, programs, and best practices to meet the identified needs of the community.

- Implement a strategic planning process that results in the development and implementation of a quality strategic plan.
- Identify appropriate prevention program evaluation strategies.
- Administer surveys/pre/posttests at work plan activities.
- Conduct evaluation activities to document program fidelity.
- Collect evaluation documentation for process and outcome measures.
- Evaluate activities and identify opportunities to improve outcomes.
- Utilize evaluation to enhance sustainability of prevention activities.
- Provide applicable workgroups with prevention information and other support to meet prevention outcomes.
- Incorporate cultural responsiveness into all planning and evaluation activities.
- Prepare and maintain reports, records, and documents pertaining to funding sources.

HOURS

Domain 2: Prevention Education and Service Delivery

- Coordinate prevention activities.
- Implement prevention education and skill development activities appropriate for the target audience.
- Provide prevention education and skill development programs that contain accurate, relevant, and timely content.

- Maintain program fidelity when implementing evidence-based practices.
- Serve as a resource to community members and organizations regarding prevention strategies and best practices

HOURS

Domain 3: Communication

- Promote programs, services, activities, and maintain good public relations.
- Participate in public awareness campaigns and projects relating to health promotion across the continuum of care.
- Identify marketing techniques for prevention programs.

- Apply principles of effective listening.
- Apply principles of public speaking.
- Employ effective facilitation skills.
- Communicate effectively with various audiences.
- Demonstrate interpersonal communication competency.

HOURS

Domain 4: Community Organization

- Identify the community demographics and norms.
- Identify a diverse group of stakeholders to include in prevention programming activities.
- Build community ownership of prevention programs by collaborating with stakeholders when planning, implementing, and evaluating prevention activities.
- Offer guidance to stakeholders and community members in mobilizing for community change.

- Participate in creating and sustaining community-based coalitions.
- Develop or assist in developing content and materials for meetings and other related activities.
- Develop strategic alliances with other service providers within the community.
- Develop collaborative agreements with other service providers within the community.
- Participate in behavioral health planning and activities.

HOURS

Domain 5: Public Policy and Environmental Change

- Provide resources, trainings, and consultations that promote environmental change.
- Participate in enforcement initiatives to affect environmental change.
- Participate in public policy development to affect environmental change.

- Use media strategies to support policy change efforts in the community.
- Collaborate with various community groups to develop and strengthen effective policy.
- Advocate to bring about policy and/or environmental change.

HOURS

Domain 6: Professional Growth and Responsibility

- Demonstrate knowledge of current prevention theory and practice.
- Adhere to all legal, professional, and ethical principles.
- Demonstrate cultural responsiveness as a prevention professional.
- Demonstrate self-care consistent with prevention messages.
- Recognize importance of participation in professional associations locally, statewide, and nationally.

- Demonstrate responsible and ethical use of public and private funds.
- Advocate for health promotion across the life span.
- Advocate for healthy and safe communities.
- Demonstrate knowledge of current issues of addiction.
- Demonstrate knowledge of current issues of mental, emotional, and behavioral health.

HOURS

Total Supervised Practical Training Hours: _____

Total Face-to-Face Supervised Practical Training Hours with a Qualified Prevention Supervisor: _____

PART C – WORK EXPERIENCE VERIFICATION FORM (page 3 of 3)

QUALIFIED PREVENTION SUPERVISOR CERTIFICATION:

The information provided on the work experience of the applicant named on Page 1 is true to the best of my knowledge and belief. The prevention services provided at the work setting indicated are consistent with the definitions and goals outlined. The applicant has demonstrated knowledge of, and the ability to engage in, these professional techniques and activities that ensure a safe level of practice. I attest that the work experience hours claimed were **NOT** gained during the course of or as part of the applicant's participation as a patient in a formal alcoholism and/or substance abuse treatment/aftercare program and/or plan.

I certify that I am a Qualified Prevention Supervisor as indicated by my status as shown below (check all that apply).

- CPP (attach a copy of current CPP certificate)**
- Licensed, certified or credentialed in a related discipline (CASAC, Credentialed Problem Gambling Counselor, Certified Teacher, Health Educator, Guidance Counselor, Rehabilitation Counselor, Licensed Clinical Social Worker, Licensed Master Social Worker, Licensed Mental Health Practitioner, Family Therapist, Registered Nurse, Physician, or a National Board Certified Counselor) with **two years** of qualifying prevention work experience and **60 hours** of prevention specific education and training. (**Attach a copy of current license or certification.**)

Name of Applicant's Supervisor (Please Print): _____ Job Title: _____
 _____ () _____
 Signature of Applicant's Supervisor Date Work Site Telephone Number

WORK EXPERIENCE (Includes Supervised Practical Training)

- Is this a paid position? **Yes -- A Human Resources or Payroll Department representative must complete the following section.**
 No -- Your current prevention supervisor as identified above must complete the following section.

Applicant's Job Title: _____ Dates of Employment: _____ to _____
 (month/day/year) (month/day/year)
 Total # Clock Hours Actually Worked (excluding holidays, vacation, sick leave, etc.): _____

AUTHORIZED REPRESENTATIVE CERTIFICATION: I have reviewed employment records and certify that the information provided on the work experience hours of the above-named applicant is true to the best of my knowledge and belief. I attest that the work experience hours claimed were not gained during the course of, or as part of, the applicant's participation as a patient in a formal alcoholism and/or substance abuse treatment/aftercare program and/or plan.

Name of Authorized Representative (Please Print): _____ Job Title: _____
 _____ () _____
 Signature of Authorized Representative Date Work Site Telephone Number

Work experience may **not** include any experience gained as part of, or required under, participation as a patient in a formal problem gambling program or a formal alcoholism and/or substance abuse treatment/aftercare program and/or plan.

PART D – EDUCATION AND TRAINING

CPP and CPS applicants must demonstrate:

- Knowledge of the variety of models and theories of alcohol and/or substance use, abuse and dependence-related problems.
- Understanding of the value of a comprehensive systems approach to prevention.
- Knowledge of the social, political, economic and cultural context within which alcohol and/or substance use, abuse and/or dependence exists.
- Knowledge of the importance of family, social networks and community systems in the prevention, treatment and recovery process.
- Knowledge of the behavioral, psychological, physical health and social effects of alcohol and/or substance use, abuse or dependence on individuals, families and communities.
- Fundamental knowledge of the philosophies, practices and outcomes of the most generally accepted theories and models of prevention, including universal, selected and indicated prevention strategies.
- Fundamental knowledge of the potential for alcohol and/or substance use, abuse or dependence to mimic a variety of medical and psychological disorders and the potential for medical and psychological disorders to co-exist with alcohol and/or substance use, abuse or dependence.
- Ability to incorporate the special needs of diverse racial and ethnic cultures and special populations in prevention practice, including their distinct patterns of communication.
- Knowledge of the obligation to adhere to generally accepted ethical and behavioral standards of conduct in the professional relationship.

In addition, CPP applicants must also demonstrate fundamental knowledge of:

- The philosophies, practices, polices and outcomes of the most generally accepted models of treatment, recovery, relapse prevention and continuing care for alcohol and/or substance use, abuse or dependence-related problems.
- The established diagnostic criteria for alcohol and/or substance use, abuse and dependence and understanding of the variety of prevention services, treatment options and placement criteria within the continuum of care.
- The various counseling strategies for alcohol and/or substance use, abuse and dependence.

General Instructions

OASAS will consider education and training obtained through accredited colleges or universities; governmental agencies; professional organizations; training institutes; or in-service training programs.

CPP applicants may claim a maximum of 30 clock hours for documented participation in conferences by professional organizations. CPS applicants may claim a maximum of 12 clock hours for documented participation in conferences by professional organizations.

There is no limit on the number of clock hours completed through distance learning. However, OASAS will only consider distance learning course work completed through the following entities:

- accredited colleges or universities;
- National Addiction Technology Transfer Center-approved distance education sponsors (www.nattc.org/); and
- OASAS-certified education and training providers.

A formal internship or formal field placement may be claimed as education and training **based on the academic credit associated with completion, not the number of hours served in the field.**

NOTE: A formal internship field placement may be claimed as CPP work experience OR education and training, but not both. You should calculate the need to claim a formal internship or formal field placement as training, but not both.

PART D – EDUCATION AND TRAINING - CPP

Minimum Requirements for CPP

You must document completion of education and training consisting of a minimum of 250 clock hours in the field of alcohol and substance abuse prevention. All education and training being claimed **must** be in the form of an academic transcript or Certificate of Completion which includes your name; the name of the educational institution or provider; title of the course/training; date of completion; and number of clock hours associated with completion of the course/training.

SECTION I – 85 Clock Hours Related to Knowledge of Alcoholism and Substance Abuse at all Age Levels and Among People of Diverse Backgrounds and Cultures

**A minimum of 4 hours in this section MUST be related to tobacco use and nicotine dependence.
A minimum of 15 hours in this section MUST be related to the area of cultural competence.**

Examples of appropriate education and training in this Section include:

- Basic Knowledge: Physical and Pharmacological Effects
- Diversity of Intervention and Treatment Approaches
- Knowledge of 12 Step and Mutual Aid Groups
- Cultural Diversity
- Special Populations
- Tobacco Use and Nicotine Dependence
- Cultural Competence

SECTION II – 60 Prevention Specific Clock Hours Related to the Performance Domains (Areas of Professional Expertise)

Examples of appropriate education and training in this Section include:

- Planning and Evaluation
- Prevention Education and Service Delivery
- Communication
- Community Organization
- Public Policy and Environmental Change
- Professional Growth and Responsibility

SECTION III – 45 Clock Hours Related to Professional Development and Ethical Responsibilities

**A minimum of 2 hours in this section MUST include Child Abuse and Maltreatment: Mandated Reporter training.
A minimum of 15 hours in this section MUST be in the area of Ethics specific to Prevention Professionals.**

Examples of other appropriate education and training in this Section include:

- Leadership Skills
- Computer Literacy/Resources (ex: Data Entry)
- Mandated Reporter Training
- Ethics Specific to Prevention Professionals

SECTION IV – 60 Clock Hours Related to Prevention Principles and Practices and the Services Continuum

Examples of appropriate education and training in this Section include:

- Systems Approach to Prevention, Principles and Practices
- Addiction Services Continuum

PART D – EDUCATION AND TRAINING - CPS

Minimum Requirements for CPS

You must document completion of education and training consisting of a minimum of 120 clock hours in the field of alcohol and substance abuse prevention. All education and training being claimed **must** be in the form of an academic transcript or Certificate of Completion which includes your name; the name of the educational institution or provider; title of the course/training; date of completion; and number of clock hours associated with completion of the course/training.

SECTION I – 50 Clock Hours Related to Knowledge of Alcohol and Substance Abuse at all Age Levels and Among People of Diverse Backgrounds and Cultures

**A minimum of 4 hours in this section MUST be related to tobacco use and nicotine dependence.
A minimum of 15 hours in this section MUST be related to cultural competence.**

Examples of appropriate education and training in this Section include:

- Basic Knowledge: Physical and Pharmacological Effects
- Diversity of Intervention and Treatment Approaches
- Knowledge of 12 Step and Mutual Aid Groups
- Cultural Diversity
- Special Populations

SECTION II – 48 Clock Hours Related to the Performance Domains (Areas of Professional Expertise)

Examples of appropriate education and training in this Section include:

- Planning and Evaluation
- Prevention Education and Service Delivery
- Communication
- Community Organization
- Public Policy and Environmental Change
- Professional Growth and Responsibility

SECTION III – 22 Clock Hours Related to Professional Development and Ethical Responsibilities

**A minimum of 2 hours in this section MUST include Child Abuse and Maltreatment: Mandated Reporter training.
A minimum of 10 hours in this section MUST be in the area of Ethics specific to Prevention Professionals.**

Examples of other appropriate education and training in this Section include:

- Leadership Skills
- Computer Literacy/Resources (ex: Data Entry)
- Mandated Reporter Training
- Ethics Specific to Prevention Professionals

PLEASE NOTE THE FOLLOWING:

- OASAS reserves the right to verify all information and documents submitted with the application and/or request any additional information and documents.
- The application and all information and documents submitted with the application become the property of OASAS and will not be returned. **Keep a copy for your records**, as it is your responsibility to maintain a copy of the application and all associated documentation.

PART D – EDUCATION AND TRAINING CHECKLIST

Please remember to:

- Attach either Certificates of Completion for the 250 hours (CPP) or 100 hours (CPS) and/or academic transcripts.
 - Transcripts must include your name, name of institution, type of degree granted, major or field of concentration, titles of coursework, date of completion, and grade.
 - Include course descriptions for the applicable academic coursework submitted.

Protect People with Special Needs

**If You See or Suspect
Abuse or Neglect**

Report It



Call the Vulnerable Persons Central Register Hotline
Toll Free: 1-855-373-2122
TTY: 1-855-373-2123

**NYS
Justice Center**
For the Protection of People with Special Needs

Hotline receives calls 24 hours a day, seven days a week.