

## CATC V Upgrade Application: Doctoral Degree

**\*All fields are required. Please print clearly\***

Full Name: \_\_\_\_\_  
First Middle Last

Certification Number: \_\_\_\_\_

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

City/State/Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth (MM/DD/YYYY): \_\_\_\_\_ Last 4 of SSN: \_\_\_\_\_

Have you ever applied to the Addiction Counselor Certification Board of California (ACCBC) under another name?

Yes  No If yes, please state previous name used: \_\_\_\_\_

Have you ever held registration or certification with any Alcohol and Other Drug (AOD) certifying organization?

Yes  No If yes, name of certifying organization: \_\_\_\_\_

Have you ever had your AOD registration or certification suspended or revoked?

Yes  No If yes, name of certifying organization: \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Is your CATC certification current?  Yes  No Certification expiration date: \_\_\_\_\_

**Only use this application if you are upgrading your credential tier level in between renewal periods. If you are renewing your certification and would like to upgrade at the same time, please use only the corresponding Certified Addiction Treatment Counselor (CATC) Certification Renewal Application for the tier level at which you would like to renew and upgrade.**

I have read and understand the processes as outlined in the CATC Handbook describing policies and procedures and other pertinent information about certification. I have read and agree to abide by the ACCBC Code of Ethics, Scope of Practice, and Code of Conduct. It is my understanding that I am to uphold all 11 ethical principles in my work and in all contact with clients and/or patients, either employed or volunteering; and by signing this application, I agree to abide by these ethical and conduct standards. I understand that my Certification can be suspended and/or revoked if I violate any of these ethical and/or conduct standards.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Signed

DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY

### **CATC V Upgrade Application (cont'd)**

**Application Processing and Incomplete Applications:** Applications will not be approved until ALL required documents have been submitted with the correct information and fees have been paid in full. Applications will be reviewed within thirty (30) calendar days upon receipt by the ACCBC office. If an application is approved, the applicant will be notified within thirty (30) calendar days by postal mail with a copy of the new counseling certificate. If your application requires additional documentation or is incomplete, the applicant will be notified by the ACCBC office within thirty (30) calendar days by both email and postal mail documenting the steps required to complete the application. Failure to submit a complete application will delay the processing time of an application. If an application remains incomplete beyond ninety (90) calendar days after date received by the ACCBC office, it will be voided and will require submission of a new application and fees. It will be the applicant's responsibility to provide the required missing documentation before the application will be approved. Please keep copies of all submitted documents for your records; any documents submitted to the ACCBC will not be returned to you. Applicants who fail to demonstrate that they meet all the requirements for a tier upgrade will not be awarded the upgrade.

**Application Submission:** Applications can be mailed with fee of \$50.00 and all supporting documentation to the ACCBC office at 5230 Clark Ave. Suite 1, Lakewood, CA 90712, or emailed with fee of \$50.00 and all supporting documentation to [office@accbc.org](mailto:office@accbc.org). Applications submitted in person to the ACCBC office will be subject to the same processing time policies as applications that are submitted through mail and/or email. Faxed documents will not be accepted and will not be saved.

### **CATC V Upgrade Checklist:**

#### **All documents must be submitted for a complete application**

- CATC V Upgrade Application** - Must submit all pages, including the Release of Information Form. Must be signed and dated on all pages.
- ACCBC Code of Ethics** - Must submit all pages. Must be signed, initialed, and dated.
- Scope of Practice** - Must submit all pages. Must be signed, initialed, and dated.
- Code of Conduct** - Must submit all pages. Must be signed, initialed, and dated.
- Copy of Driver's License or valid Government Issued Photo ID** - Must be a clear copy.
- Proof of Doctoral Degree** - Must submit a copy of diploma or transcripts that clearly state that the degree has been conferred. Degree must be from a regionally accredited college/university and must be in Addiction Studies or a related field. Transcripts may be official or unofficial.
- CATC V Upgrade Fee of \$50.00** - Submitting this Upgrade Application will not change your certification expiration date. Payment of the Upgrade Fee of \$50.00 can be made on our website at <https://www.accbc.org/catc/get-certified/>. Please include a copy of your receipt with this application. If you choose to pay by check or money order (no cash payments accepted), please make payable to "CAADE" and add "ACCBC Upgrade" in the memo section. Returned checks will be subject to a \$35.00 fee. Applicant must submit the Upgrade Fee of \$50.00 with completed application. Fees are non-refundable and are subject to change without notice.

I have read, understand, and agree to the aforementioned policies and procedures and I have included the required documentation.

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Signature of Applicant

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Date Signed

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DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY

## RELEASE OF INFORMATION

I understand that additional information may be necessary for the Addiction Counselor Certification Board of California (ACCBC) to complete the certification process. I hereby authorize the release of my employment and/or personal reference information to any authorized representative of the ACCBC. Further, I give consent for the ACCBC to release information and/or my photo regarding my ACCBC status to prospective employers, members of the public, or State or County Substance Use Disorder administrators or their agents. I recognize there is no expiration date on this request.

I understand that intentionally making false or misleading statements on this application will result in my being declared ineligible for certification. I understand that It is my responsibility to submit course descriptions for classes taken in programs that are not already approved by the ACCBC. I understand that after submission, the application, exam and fees become the property of the ACCBC. All fees are non-refundable. All levels (Certified Addiction Treatment Counselor (CATC, I,II,III,IV,V, N) far exceed the minimum requirements for certification. I have read and understand the processes as outlined in the CATC Candidate Handbook describing policies and procedures and other pertinent information about certification.

I understand and agree to cooperate with any requests of the ACCBC with regard to processing this application; this includes submitting name changes, address changes, phone number changes, employer address changes (if applicable).

I understand and agree to comply with the ACCBC Code of Conduct as outlined in this document. I understand I must comply with the ACCBC Code of Conduct, Scope of Practice, and the ACCBC Code of Ethics contained herein, as well as California Code of Regulations Title 9 Regulations and any other applicable provisions of law. I also understand and consent to the release of information pertaining to registration or certification, any ethical violation(s) and/or sanctions as part of the process of becoming and maintaining ACCBC registration and/or certification. Information may be disclosed to the California Department of Health Care Services (DHCS), Department approved certification bodies and/or employers. I further agree not to sue the ACCBC or CAADE (California Association for Alcohol and Drug Educators) relative to the certification/examination process and I agree to indemnify and hold the ACCBC and CAADE and its respective officers, directors, agents, and employees harmless from any and all liabilities, losses, costs, damages, and any other expenses which ACCBC and CAADE or its officers, directors, agents, and employees may sustain or incur as a result of or arising from the certification process. I agree to reimburse the ACCBC and CAADE for any attorneys' fees and costs incurred as a result of my breach of this hold harmless provision. I agree to cooperate with complaint investigations and supply information requested during complaint investigations unless such disclosure of information would violate the confidentiality requirements of Subpart 2, Title 42, Code of Federal Regulations. I understand failure to comply with the Ethics Review Committee or DHCS may result in immediate suspension and/or revocation of my registration or certification until such time that I comply. I understand that the ACCBC website will include the term "pending" until such time a complaint is resolved and/or sanctions are completed by respondent; suspensions and revocations will be posted on the public database (website).

I understand I do not have to be a member of CAADE to become certified by the ACCBC. This form will allow the ACCBC to send you important information related to your certification process and allow you to handle other official business that requires your approval, by electronic transmission (including fax or email). It also allows you to send the same types of information to the ACCBC via fax or email.

Before signing this form, please review and be aware of the following:

1. You are not required to sign this form. You may request that all correspondence be sent to you via regular mail.
2. You have the right to withdraw your written consent at any time after signing this form by providing the ACCBC with written notice (by email or by mailing, addresses below) that you are withdrawing your consent relative to electronic transmission. No fee will be charged for withdrawing your consent.
3. This consent to electronic transmission is broad, and may include transmission of meeting notices, ballots, and other important information regarding the ACCBC. This consent form represents consent under both California Corporations Code 20 and 21 (transmission from and to the ACCBC). This consent form also meets the requirements for consent under the federal Electronic Signatures in Global and National Commerce Act (15 U.S.C. Sec. 7001(c)(1)).
4. Consenting to electronic transmission via fax requires that you have access to a fax machine and have a current fax number on file with the ACCBC.
5. Consenting to electronic transmission via email requires that you have access to a computer, have a current email account in your name, and have provided your current email address to the ACCBC.

The undersigned has read and understands the foregoing, and hereby provides this written (non-revoked) consent to receive and send information, including but not necessarily limited to information related to ACCBC certification or ACCBC updates, via electronic transmission (fax and/or email), until such time as this consent is revoked in writing.

I understand that certifications offered by the ACCBC are not governmentally sanctioned and are issued by the ACCBC which is not a state, federal or other governmental entity; I also understand that these nongovernmental certifications do not imply or allow me (the individual holder) to diagnose any conditions as specified under applicable state or federal law. Certifications are not issued by state or federal law.

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Addiction Counselor Certification Board of California**  
5230 Clark Ave, Suite #1, Lakewood, CA, 90712  
Ph: (800) 991-2997 Fax: 562-275-3150 Email: [office@accbc.org](mailto:office@accbc.org)

**CODE OF ETHICS**

This Code of Ethics applies to the following individuals: those who are registered to obtain certification by the Addiction Counselor Certification Board of California and individuals holding a Certified Addiction Treatment Counselor Intern (CATC-i), (hereinafter referred to as “Registrant”), and Certified Addiction Treatment Counselor (CATC I, II, III, IV, V, and N) credential (hereinafter referred to as “AOD Counselor”).

**Specific Principles**

**Principle 1: Non-Discrimination**

The Registrant or AOD Counselor shall not discriminate against clients or professionals based on race, religion, age, gender, disability, national ancestry, sexual orientation or economic condition.

- A. The Registrant or AOD Counselor shall be knowledgeable about disabling conditions, demonstrate empathy in interactions with clients with disabilities, and make available physical, sensory, and cognitive accommodations that allow clients with disabilities to receive services.

**Principle 2: Responsibility**

The Registrant or AOD Counselor shall espouse objectivity and integrity, and maintain the highest standards in the services the Registrant or AOD Counselor offers.

- A. The Registrant or AOD Counselor shall maintain respect for institutional policies and management functions of the agencies and institutions within which the services are being performed, but may take appropriate initiative toward improving such policies when it will better serve the interest of the client.
- B. The Registrant or AOD Counselor shall not verbally, physically, or sexually harass, threaten, or abuse another staff member.
- C. The Registrant or AOD Counselor, who is aware of unethical conduct or unprofessional modes of practice shall report such inappropriate behavior to the appropriate authority.
- D. An applicant who sits for the CATC Examination shall be responsible for assuring that he/she has met all of the requirements for certification except passage of that examination, and that he/she has appropriately documented his/her compliance.

**Principle 3: Competence**

The Registrant or AOD Counselor shall recognize that the profession is founded on national standards of competency which promote the best interests of society, of the client, of the Registrant or AOD Counselor, and of the profession as a whole. The Registrant or AOD Counselor shall recognize the need for ongoing education and clinical supervision as a component of professional competency.

- A. The Registrant or AOD Counselor recognize professional boundaries and limitations of the Registrant or AOD Counselor’s competencies and only offer/provide services or use techniques within the scope of his/her registration or certification as an AOD counselor.
- B. The Registrant or AOD Counselor shall be sensitive to the potential harm to clients of any personal impairment and shall be willing to seek appropriate treatment for himself/ herself. The AOD Counselor or Registrant shall support employee assistance programs in this respect.

**Principle 3.5: Supervision**

Any experience obtained under the supervision of a spouse or relative by blood or marriage shall not be credited toward the required hours of supervised experience. Any experience obtained under the supervision of a supervisor

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**CODE OF ETHICS (cont'd)**

with whom the applicant has a personal relationship that undermines the authority or effectiveness of the supervision shall not be credited toward the required hours of supervised experience.

**Principle 4: Legal and Ethical Standards**

The Registrant or AOD Counselor shall abide by and uphold the ethical standards contained in this Code of Ethics.

- A. The Registrant or AOD Counselor shall be fully cognizant and abide by all state and federal laws and laws governing the practice of alcoholism and drug abuse counseling, including but not limited to regulations protecting participant's, patient's, or resident's rights to confidentiality in accordance with the Code of Federal Regulations, Title 42, Part 2, Sections 2.1 et seq., and the Counselor Certification Regulations in the California Code of Regulations, Title 9, Sections 13000 et seq.
- B. The Registrant or AOD Counselor shall not claim either directly, or by implication, professional qualifications/affiliations that the Registrant or AOD Counselor does not possess.
- C. The Registrant or AOD Counselor will not use, possess, or be under the influence of alcohol or illicit drugs on program premises or while attending or conducting program services.
- D. The Registrant or AOD Counselor shall cooperate with investigations into alleged violations of this Code of Ethics, whether initiated by the California Department of Health Care Services, or the Addiction Counselor Certification Board of California, and shall supply information requested during the course of any investigation unless disclosure of the information would violate the confidentiality requirements of the Code of Federal Regulations, Title 42, Part 2, Sections 2.1 et seq. By registering with or being certified by the ACCBC, Registrant or AOD Counselors authorize the ACCBC to release any and all information to ACCBC its board, or its agents possess, and hereby releases CAADE and the ACCBC, their boards, or their agents from any liability therefor.

**Principle 5: Publication Credit**

The Registrant or AOD Counselor assign credit to all who have contributed to the published material and for the work upon which the publication is based.

- A. The Registrant or AOD Counselor who publishes books or articles and/or makes professional presentations will assure that all sources of information and contributions are properly cited.

**Principle 6: Client Welfare**

The Registrant or AOD Counselor shall hold the welfare of the client paramount when making any decisions or recommendations concerning referral, treatment procedures or termination of treatment.

- A. The Registrant or AOD Counselor shall disclose to clients that she/he operates under a code of ethics and that same shall be made available to the client if requested.
- B. The Registrant or AOD Counselor shall terminate a counseling or consulting relationship when it is reasonably clear to the Registrant or AOD Counselor that the client is not benefiting from the relationship.
- C. The Registrant or AOD Counselor shall not use or encourage a client's participation in any demonstration, research, or other non-treatment activities when such participation would have potential harmful consequences for the client or when the client is not fully informed.
- D. The Registrant or AOD Counselor shall take care to provide services in an environment that will ensure the privacy and safety of the client at all times and ensures the appropriateness of service delivery.
- E. The Registrant or AOD Counselor shall not verbally, physically, or sexually harass, threaten, or abuse a client, a client's family members, or any other person known to be significant to the client.

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**CODE OF ETHICS (cont'd)**

**Principle 7: Confidentiality**

The Registrant or AOD Counselor working in the best interest of the client shall embrace, as a primary obligation, the duty of protecting client's rights under confidentiality and shall not disclose confidential information acquired in teaching, practice, or investigation without appropriately executed consent.

- A. The Registrant or AOD Counselor shall provide the client his/her rights regarding confidentiality, in writing, as part of informing the client in any areas likely to affect the client's confidentiality. This includes the recording of the clinical interview, the use of material for insurance purposes, and the use of material for training or observation by another party.
- B. The Registrant or AOD Counselor shall make appropriate provisions for the maintenance of confidentiality and the ultimate disposition of confidential records. The Registrant or AOD Counselor shall 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 and appropriate to the services being provided and shall be accessible only to appropriate personnel.
- C. The Registrant or AOD Counselor shall adhere to all federal and state laws regarding confidentiality and the Registrant or AOD Counselor responsibility to report clinical information in specific circumstances, such as child or elder abuse or duty to warn, to the appropriate authorities and their supervisor.
- D. The Registrant or AOD Counselor shall discuss the information obtained in clinical, consulting, or observational relationships only in appropriate settings for professional purposes and on a need- to-know basis. Written and oral reports must present only data germane and pursuant to the purpose of evaluation, diagnosis, progress, and compliance. Every effort shall be made to avoid undue invasion of privacy.
- E. The Registrant or AOD Counselor shall use clinical and other material in teaching and/or writing only when there is no identifying information used about the parties involved.

**Principle 8: Client Relationships**

It is the responsibility of the Registrant or AOD Counselor to safeguard the integrity of the counseling relationship and to ensure that the client has reasonable access to effective treatment. The Registrant or AOD Counselor shall provide the client and/or guardian with accurate and complete information regarding the extent of the potential professional relationship.

- A. The Registrant or AOD Counselor shall inform the client and obtain the client's agreement in areas likely to affect the client's participation, including the recording of an interview, the use of interview material for training purposes, and/or observation of an interview by another person.
- B. The Registrant or AOD Counselor shall not engage in dual relationships with clients that have any significant probability of causing harm to the client, or the counseling relationship. A dual relationship occurs when a Registrant or AOD Counselor and his/her client engage in a separate and distinct relationship, either simultaneously with the therapeutic relationship or within two years following the termination of the professional relationship. As a general rule, a Registrant or AOD Counselor should not provide services to friends, family members, or any person with whom they have or have had a social, business, or financial relationship.
- C. The Registrant or AOD Counselor shall not exploit relationships with current or former clients for personal or financial gain, including social or business relationships. This could include, but not be limited to, borrowing from or loaning money to clients; accepting gifts from clients; accepting favors from clients such as volunteer labor; or accepting goods or services in lieu of payment.
- D. The Registrant or AOD Counselor shall not under any circumstances engage in sexual behavior (both verbal and non-verbal) with clients, clients' family members, or other persons known to be significant to

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**CODE OF ETHICS (cont'd)**

the client, either simultaneously with the therapeutic relationship or within two years following the termination of the professional relationship.

- (i) The Registrant or AOD Counselor does not engage in sexual intimacies with former clients even after a two-year interval except in the Registrant or AOD Counselor who engages in such activity after the two years following cessation or termination of counseling and of having no sexual contact with the former client bears the burden of demonstrating that there has been no exploitation, in light of all relevant factors, including (1) the amount of time that has passed since counseling terminated; (2) the nature, duration, and intensity of the counseling; (3) the circumstances of termination; (4) the client's personal history; (5) the client's current mental status; (6) the likelihood of adverse impact on the client; and (7) any statements or actions made by the Registrant or AOD Counselor during the course of counseling suggesting or inviting the possibility of a post-termination sexual or romantic relationship with the client.
- E. The Registrant or AOD Counselor shall not accept as clients anyone with whom they have engaged in sexual behavior.
- F. The Registrant or AOD Counselor will avoid dual relationships with current or past clients in self-help based recovery groups (such as A.A., N.A., Al-Anon, Smart Recovery, etc.) by not sponsoring a current or former client; by not having as a client a former sponsor or sponsee; by avoiding meetings, whenever possible, where clients are present; and by maintaining clear and distinct boundaries between the professional counselor and self-help sponsor roles.
- G. The Registrant or AOD Counselor will refrain from promoting or advocating any particular religious orientation or from utilizing any particular religious doctrine as part of a treatment program, except in those circumstances where such a religious orientation is an accepted part of the program's mission and clients have voluntarily agreed to participate in such a program.

**Principle 9: Inter-Personal Relationships**

The Registrant or AOD Counselor shall treat colleagues with respect, courtesy, fairness, and good faith and shall afford the same to other professionals.

- A. The Registrant or AOD Counselor shall refrain from offering professional services to a client in counseling with another professional except with the knowledge of the other professional or after the termination of the client's relationship with the other professional.
- B. The Registrant or AOD Counselor shall cooperate with duly constituted professional ethics committees and promptly supply necessary information unless constrained by the demands of confidentiality.
- C. The Registrant or AOD Counselor shall not in any way exploit relationships with supervisees, employees, students, research participants, volunteers, or clients.
- D. The Registrant or AOD Counselor shall seek resolution of workplace or professional issues in an appropriately assertive, understanding, and sensitive manner, utilizing established protocols when such exist.

**Principle 10: Financial Arrangements**

- A. The Registrant or AOD Counselor shall inform the client of all financial policies.
- B. The Registrant or AOD Counselor shall consider the ability of a client to meet the financial cost in establishing rates for professional services (sliding fee scale).
- C. The Registrant or AOD Counselor shall not engage in fee splitting. Fee splitting is defined as the practice of giving part of the fee charged a referred client or patient to a Registrant or AOD Counselor who makes the referral. Referral incentive may erode the fiduciary relationship, potentially elevating a Registrant or AOD Counselor's financial interests above the needs of the patient or client. The Registrant or AOD

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**CODE OF ETHICS (cont'd)**

Counselor shall not send or receive any commission or rebate or any other form of remuneration for referral of clients for professional services.

- D. The Registrant or AOD Counselor, in the practice of counseling, shall not at any time use one's relationship with clients for personal gain or for the profit of an agency or any commercial enterprise of any kind.

**Principle 11: Societal Obligations**

The Registrant or AOD Counselor shall to the best of his/her ability actively engage the legislative processes, educational institutions, and the general public to change public policy and legislation to make possible opportunities and choice of service for all human beings of any ethnic or social background whose lives are impaired by alcoholism and/or drug abuse.

As a Registrant or AOD Counselor, I will abide by the Code of Ethics stated herein, I understand that this Code of Ethics may be amended in the future and that I will be required to abide by that amended Code of Ethics to maintain my status as a Registrant or AOD Counselor and my signature below indicates my desire and right to grant a release of information and waiver of confidentiality related to any allegations of unprofessional conduct concerning myself and can be shared with and investigated by the appointed members of the ACCBC Ethics Committee.

I understand that as a Registrant or AOD Counselor, I will be notified of changes made to the Code of Ethics by the ACCBC office electronically and in writing within 30 calendar days of the changes being made.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

This Code of Ethics should be read thoroughly by the applicant. Once you have read the Code of Ethics, please initial each page, sign last page, and submit all pages with your application.

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## SCOPE OF PRACTICE

This Scope of Practice applies to the following individuals: those who are registered to obtain certification by the Addiction Counselor Certification Board of California and individuals holding a Certified Addiction Treatment Counselor Intern (CATC-i), (hereinafter referred to as “Registrant”), and Certified Addiction Treatment Counselor (CATC I, II, III, IV, V, and N) credential (hereinafter referred to as “AOD Counselor”).

**Purpose:** To assure a consistent standard of quality education, training and experience for alcohol and drug counselors. Certification is necessary to safeguard public health, safety, and welfare, and to protect the public from services delivered by non-certified alcohol/drug counselors, and unprofessional conduct by certified alcohol/drug counselors.

**Requirements:** Competencies required for alcohol/drug counseling include TAP 21 competencies: screening, intake, orientation, assessment, treatment planning, counseling, case management, crisis intervention, client education, referral, reports and record keeping, and consultation with other professionals. **Educational Requirements:** Possession of the Alcohol/Drug Studies Certificate from a regionally accredited approved AOD/ADS program or ACCBC approved Educational Equivalency. **Experiential Requirements:** Documented verification of 2,240 hours of supervised AOD clinical work experience. (This may include the 250 plus hours of college internship/practicum experience.) **Exam requirements:** Passing score of 70% or more on the CATC Exam. The AOD Counselor must renew certification every two years by adhering to the: payment of the renewal fee, ascribing to the ACCBC Code of Ethics, Scope of Practice, and Code of Conduct at each certification renewal period; and completing a minimum of forty (40) hours of approved continuing education with a minimum of nine (9) hours specific to addiction counselor ethics in each renewal cycle.

**Role of the Registrant and AOD Counselor:** To assist and support clients, family members, and others with alcohol/drug abuse or dependence, to attain and maintain abstinence.

- a) Develop a program appropriate to the individual in support of a recovery process that will affect an improved quality of living.
- b) Provide quality professional counseling for clients with alcohol/drug abuse or dependence, their family members and others by means of: providing current and accurate information and education on the disease of alcoholism and other drug dependency issues and recovery processes; and assisting in identifying and understanding the defense mechanisms that support continued addiction.
- c) Facilitate a process for clients to self-explore the consequences of alcoholism and other drug dependence.
- d) Utilize the functions of alcohol/drug counseling including: screening, intake, orientation, assessment, treatment planning, counseling, case management, crisis intervention, client education, referral, reports/record keeping and consultation.
- e) Assist in relapse prevention planning and recognizing relapse symptoms and behavior patterns.
- f) Provide current and accurate information and education for identifying and understanding the roles of family members and others in the alcoholism/drug dependency system.
- g) Educate regarding self-help groups (for example, Alcoholics Anonymous, Al-Anon, Women for Sobriety, Narcotics Anonymous, Secular Organization for Sobriety, Co-dependents Anonymous, etc.) and the way in which they may complement alcoholism/drug addiction or dependency counseling and the unique role of each in the recovery process.
- h) Assist clients to establish life management skills to support a recovery process.
- i) Facilitate problem solving and the development of alternatives to alcohol/drug use or abuse in approaching related problems of family members and others.
- j) Provide support as part of a treatment team by referring clients, family members, and others to other appropriate health professionals as needed.
- k) Maintain appropriate records, in a confidential manner, for the purpose of treatment planning and case management.
- l) Provide all services in accordance with the ACCBC Code of Ethics and Code of Conduct.

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**SCOPE OF PRACTICE (cont'd)**

- m) Utilize the appropriate skills to assist in developing sobriety life management and communication skills that support recovery, including: active listening, intervention, leading, confrontation, summarizing, feedback, reflection, concreteness, empathy, and education.

**Setting for the delivery of services:** An ACCBC Registrant or AOD Counselor may conduct counseling of clients with alcohol/drug addiction or dependence, their family members and others in: hospitals, agencies, and other facilities where alcohol and/or drug services are delivered. Services may be provided in an interdisciplinary team, in hospitals or other agencies, where professionals including those licensed by the State of California under the Medical Practices Act, the Social Work Licensing Law, the Psychology Licensing Act, or the Marriage, Family and Child Counselors Licensing Law work in an integrated fashion for the benefit of clients.

I understand that as a Registrant or AOD Counselor, I will be notified of changes made to the Scope of Practice by the ACCBC office electronically and in writing within thirty (30) calendar days of the changes being made.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

This Scope of Practice should be read thoroughly by the applicant. Once you have read the document, please initial each page, sign last page, and submit all pages with your application.

\_\_\_\_\_ Initial

## CODE OF CONDUCT

This Code of Conduct applies to the following individuals: those who are registered to obtain certification by the Addiction Counselor Certification Board of California and individuals holding a Certified Addiction Treatment Counselor Intern (CATC-i), (hereinafter referred to as “Registrant”), and Certified Addiction Treatment Counselor (CATC I, II, III, IV, V, and N) credential (hereinafter referred to as “AOD Counselor”).

**California Code of Regulations (CCR), Title 9, Chapter 8, Section 13060 and its preceding subsections** require each certifying organization (CO) to develop a code of conduct which establishes *minimum* standards for Registrants and AOD Counselors. CO’s may impose more stringent standards that do not conflict with the standards contained within this Uniform Code of Conduct. The ACCBC Code of Conduct is designed to safeguard the rights of clients in Alcohol and Other Drug (AOD) programs and facilities. ACCBC Registrants and AOD Counselors are governed by the Code of Conduct and are held accountable to the provisions contained in this Code of Conduct.

### **Principle 1:**

Registrants and AOD Counselors shall conduct themselves in an honest, forthright and professional manner. Registrants and AOD Counselors are prohibited from engaging in the commission of any dishonest, corrupt, or fraudulent act substantially related to the qualifications, functions or duties of a registrant or counselor including but not limited to the following:

- a. Securing a registration, certification or renewal by fraud, deceit or misrepresentation on any application or material in support of any application for registration certification or renewal;
- b. Misrepresenting the type or status of registration or certification held by the person, or otherwise misrepresenting or permitting misrepresentation of his or her education, professional qualifications or professional affiliations to any person, program or entity;
- c. Refusal or failure to provide proper identifying registration, credential, certification or license where appropriate or required (e.g., when offering or providing AOD counseling services, on business cards, on informational or marketing materials, etc.);
- d. Advertising, marketing or promoting programs, services, training, education or experience in a false and misleading manner, as set forth in Business and Professions Code sections 17200, et seq.;
- e. Providing services beyond the scope of his/her registration or certification as an AOD counselor, or his/her professional license, if the individual is a licensed professional as defined in CCR, Title 9, Division 4, Chapter 8, Section 13015.

### **Principle 2:**

Registrants and AOD Counselors shall maintain professionally appropriate boundaries with clients and family members of clients and shall conduct themselves in a professional, non-exploitive and lawful manner, and are prohibited from:

- a. Engaging in inappropriate social relationships, sexual relations or soliciting sexual relations with a client or with a former client within two years from the termination date of the counseling relationship;
- b. Committing an act of sexual abuse, misconduct or an act punishable as a sexually related crime;
- c. Engaging in a business relationship for personal gain with program participants, patients, or residents, their family members or other persons who are significant to them within one year from the termination of the counseling relationship;
- d. Discriminating against program participants, patients, residents, or other staff members, based on race, religion, age, gender, disability, national ancestry, sexual orientation, or economic condition;
- e. Verbally, physically, or sexually harassing, threatening, or abusing any participant, patient, resident, their family members, other persons who are significant to them, or other staff members;
- f. Unlawfully administering to himself or herself any controlled substance as defined in Section 4021 of the California Business and Professions Code (B&P), or using any of the dangerous drugs or devices specified

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**CODE OF CONDUCT (cont'd)**

in Section 4022 of the B&P, or using any alcoholic beverage to the extent, or in a manner, as to be dangerous or injurious to the person holding or applying for a registration, certification or license or to any other person, or to the public;

- g. Providing counseling services, attending any program services or activities, or being present on program premises while under the influence of any amount of alcohol or illicit drugs. As used in this subsection, "illicit drugs" means any substance defined as a drug in Section 11014, Chapter 1, Division 10, Health and Safety Code, except:
  - 1) Drugs or medications prescribed by a physician or other person authorized to prescribe drugs, in accordance with Section 4036, Chapter 9, Division 2, Business and Professions Code, and used in the dosage and frequency prescribed; or
  - 2) Over-the-counter drugs or medications used in the dosage and frequency described on the box, bottle, or package insert.

**Principle 3:**

Registrants and AOD counselors are required to protect the participant's, patient's, or resident's rights to confidentiality in accordance with Part 2, Title 42, Code of Federal Regulations. Registrants and AOD counselors are required to cooperate with complaint investigations and supply information requested during complaint investigations unless such disclosure of information would violate the confidentiality requirements of Subpart 2, Title 42, Code of Federal Regulations. Registrants and AOD counselors shall comply with all Federal and State Laws and Regulations that pertain to patient/client confidentiality, mandated reporting exceptions, record keeping requirements, and patient/client records access. Registrants and AOD counselors are prohibited from:

- a. Violating client/patient confidentiality except as required or permitted by law including, but not limited to: Part 2, Title 42, Code of Federal Regulations, child abuse, elder abuse, and public safety laws and regulations;
- b. Failing to maintain records consistent with the nature of services being rendered, including, but not limited to, the destruction of records;
- c. Refusing or denying patient/client access to charts and records as required by law;
- d. Violating, attempting to violate, or conspiring to violate any law or regulation governing AOD registrants and/or certified AOD counselors.

I understand that as a Registrant or AOD Counselor I will be notified of changes made to the Code of Conduct by the ACCBC office electronically and in writing within 30 calendar days of the changes being made. I understand that disciplinary action may occur as a result of violating this Code of Conduct.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

This Code of Conduct should be read thoroughly by the applicant. Once you have read the Code of Conduct, please initial each page, sign last page, and submit all pages with your application.

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