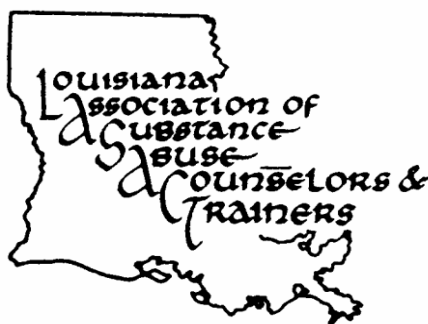


LASACT SUBSTANCE ABUSE SPECIALTY CERTIFICATE

PORTFOLIO PACKET

as authorized by the
CERTIFICATION EXAMINING BOARD
of the
LOUISIANA ASSOCIATION OF SUBSTANCE ABUSE
COUNSELORS AND TRAINERS
June 14, 2004
Revised October 1, 2007



P.O. Box 80235
Baton Rouge, LA 70898-0235
225-766-2992
admin@lasact.org
www.lasact.org

LASACT Substance Abuse Specialty Certificate Requirements

Credentialed mental health professionals at the Master's level or higher, who are not regulated by the Addictive Disorders Regulatory Authority, (i.e. LCSW, LPC, etc.), will need to hold a Specialty Substance Abuse add-on Certificate in order to qualify for the CCS. LASACT provides such a certificate free of charge to its members who meet the following requirements. This certificate is not available to non-members.

1. Prerequisite – Master's level or higher degree in the human services field with a practice credential;
2. Education – 180 contact hours specific to substance abuse, with one college credit being equivalent to 15 contact hours and/or 1/10 (.1) CEU = 1 contact hour;
3. Experience – One year (2,000 hours) paid, supervised ATOD (substance abuse/addictive disorders) specific counseling experience. Supervision must be from a qualified professionals supervisor;
4. Practicum – 300 hours of training in the Twelve Core Functions, with a minimum of 10 hours in each Core Function, under qualified professionals supervision. These hours may be obtained in the one year of experience required in Item 3 above;
5. Acceptable Qualified Professional Supervisor evaluation;
6. Acceptable Credentialed colleague reference;
7. Agree to adhere to Code of Ethics;
8. Recertify with LASACT every two years by being in the field and a member of LASACT.

Application form for the Specialty Certificate is on Page 4 of this Document.

Please Note: Applicants for the Specialty Certificate must download from www.lasact.org the appropriate forms to document/verify the above requirements.

INSTRUCTIONS/CHECKLIST FOR COMPLETION OF SUBSTANCE ABUSE SPECIALTY CERTIFICATE PORTFOLIO

1. Complete Form 1 in its entirety.
2. Attach copy of your transcript or Master's degree (or higher) in a human services field to the portfolio.
3. Attach a copy of your letter or card verifying practice credential.
3. Give Form 2 and its Cover Letter to your professional supervisor. If you need to have more than one professional supervisor complete a form, make as many copies of the letter and form as needed. **Please note that Form 2 is a two page form. Give both pages to supervisor.**
4. Complete Form 3 and have it signed as appropriate.
5. Attach certificates verifying 180 hours of contact hours specific to substance abuse,
6. Return completed portfolio to LASACT.

CERTIFICATION EXAMINING BOARD OF LASACT, INC.

P.O. Box 80235 • Baton Rouge, LA 70898-0235 • Phone: 225.766.2992

Fax 225.766.8552 • e-mail: admin@lasact.org; web site: www.lasact.org

APPLICATION FOR SPECIALTY SUBSTANCE ABUSE CERTIFICATE

Available at no charge to LASACT members only.

Download special forms needed to document education, experience, supervision, and training from www.lasact.org

Name: _____
Please Print

Address: _____
Street/Apt. #/P.O. Box City State ZIP

Phone: W _____ H _____ Fax _____ e-mail: _____

Place of Employment: _____

Employer's Address: _____

Street/Apt. #/P.O. Box City State ZIP

Enclosure on the appropriate forms obtained from www.lasact.org

- Copy of diploma or transcript verifying Master's degree or higher in the human services field.
- Copy of card or letter verifying practice credential.
- Documentation and verification of 180 education contact hours specific to substance abuse (Attach certificates from classes/workshops/conferences **related to substance abuse**)
- Documentation and verification of one year (2,000 hours) of paid, supervised AOD (substance abuse/addictive disorders) specific counseling experience with supervision from a qualified professional supervisor and evaluation of said experience on Form 2.
- Documentation and verification of 300 hours of training in the 12 Core Functions, with a minimum of 10 in each Core Function under qualified professional supervision. (Form 3).
- Credentialed colleague reference (no form needed for this)

Signature below denotes that applicant is currently active in the field of alcohol and substance abuse supervision and free of any ethical or malpractice violation. Applicant understands the Specialty Certificate is not a substitute or a replacement for the license with which to practice substance abuse counseling in Louisiana.

Name Printed

Signature

Date

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Fax 225.766.8552 • e-mail: admin@lasact.org; web site: www.lasact.org

CONFIDENTIAL

Dear Clinical Supervisor:

Re: Clinical Supervisor's Reference Form

Your employee named on the accompanying Confidential Clinical Supervisor Evaluation Form is applying to the Louisiana Association of Substance Abuse Counselors and Trainers/Certification Examining Board for a Specialty Certificate in Substance Abuse. The information requested is an essential part of the Board's evaluation of the competence of the applicant and must be on file before the application can be processed.

The CEB believes that your observation will have developed a more complete and accurate impression of the knowledge and skills of the applicant than is available from other sources. Your evaluation, plus that received from the other references and the data furnished by the applicant will be used in determining eligibility for certification. The process can be only as good as you and the others make it by careful and truthful reporting.

Applicant needs to document 2,000 hours of paid, supervised substance abuse/addiction disorders specific counseling experience. If you are not able to document the full 2,000 hours, please inform applicant so he/she can get further documentation from other supervisors.

LASACT/CEB reserves the right to request further information from you concerning this applicant.

Please return the completed form within one week of receipt directly to the Certification Examining Board – P.O. Box 80235 – Baton Rouge, LA 70898-0235 or by fax to 225.766.8552. **Do not return the form to the applicant.**

Your cooperation will be very much appreciated in this certification effort.

Sincerely,

Ralph Melancon, Jr. Chairman
Certification Examining Board

JR:dss

CERTIFICATION EXAMINING BOARD OF LASACT, INC.

P.O. Box 80235 • Baton Rouge, LA 70898-0235 • Phone: 225.766.2992

Fax 225.766.8552 • e-mail: admin@lasact.org; web site: www.lasact.org

| |
|--|
| <p>LASACT Substance Abuse Specialty Certificate Requirements Confidential Clinical Supervisor Evaluation Form</p> |
|--|

Applicant's Name: _____

Supervisor's Name _____ Date _____

Office Address _____

Number/P.O. Box

State

Zip

Telephone #: _____ Fax # _____ e-mail: _____

I have known _____ for _____ years. My relationship with him/her was/is _____

On the basis of your knowledge of the above named applicant, please rate his/her skill in each area listed below. Circle the appropriate number according to the following scale:

1 = Poor

4 = Good

2 = Fair

5 = Excellent

3 = Acceptable

| Attribute | Poor | Excellent | N/A |
|--|-----------|-----------|-----|
| 1. Exhibits skill in active listening | 1 2 3 4 5 | | |
| 2. Exhibits skill in leading | 1 2 3 4 5 | | |
| 3. Exhibits skill in summarizing | 1 2 3 4 5 | | |
| 4. Exhibits skill in reflection | 1 2 3 4 5 | | |
| 5. Exhibits skill in interpretation | 1 2 3 4 5 | | |
| 6. Exhibits skill in confrontation | 1 2 3 4 5 | | |
| 7. Exhibits skill in self-disclosure | 1 2 3 4 5 | | |
| 8. Exhibits warmth | 1 2 3 4 5 | | |
| 9. Exhibits respect | 1 2 3 4 5 | | |
| 10. Exhibits genuineness | 1 2 3 4 5 | | |
| 11. Exhibits concreteness | 1 2 3 4 5 | | |
| 12. Exhibits empathy | 1 2 3 4 5 | | |
| 13. Exhibits skill in clarifying dysfunctional behavior & its ramifications for the individual client | 1 2 3 4 5 | | |
| 14. Exhibits skill in motivating clients to actively participate in counseling sessions and to develop functional behavior | 1 2 3 4 5 | | |
| 15. Exhibits skill in developing & implementing individual counseling programs according to client needs | 1 2 3 4 5 | | |
| 16. Exhibits skill in problem solving techniques, goal setting, and decision making in conjunction with clients. | 1 2 3 4 5 | | |
| 17. Exhibits skill in termination of counseling | 1 2 3 4 5 | | |
| 18. Exhibits skill in coordinating the designated continuum of services needed by the client. | 1 2 3 4 5 | | |

| Attribute | Poor | Excellent | N/A |
|--|-----------|-----------|-----|
| 19. Exhibits skill in case follow-up | 1 2 3 4 5 | | |
| 20. Exhibits skill in working with clients on an individual basis | 1 2 3 4 5 | | |
| 21. Exhibits skill in working with clients on a family basis | 1 2 3 4 5 | | |
| 22. Exhibits skill in working with clients on a group basis. | 1 2 3 4 5 | | |
| 23. Exhibits skill in client intake process | 1 2 3 4 5 | | |
| 24. Exhibits skill in initial & ongoing client evaluation | 1 2 3 4 5 | | |
| 25. Exhibits skill in interpretation and assessment of case records | 1 2 3 4 5 | | |
| 26. Exhibits skill in assessment of the treatment plan or strategy for the purpose of evaluation and/or modification | 1 2 3 4 5 | | |
| 27. Exhibits skill in identifying the additional resources & services best suited for the individual client | 1 2 3 4 5 | | |
| 28. Exhibits skill in directing the client to additional resources and services best suited for the individual client | 1 2 3 4 5 | | |
| 29. Exhibits skill in maintaining follow-up with the client & with service providers to assure that the client's needs are met | 1 2 3 4 5 | | |
| 30. Exhibits skill in efficient productive handling and coordination of, and involvement with, clients throughout the counseling process, from initial intervention or intake through disposition, termination, and follow-up | 1 2 3 4 5 | | |
| 31. Exhibits skill in maintenance of up to date accurate, and understandable case files and records, including history, intervention, intake, progress reports, staffings, referral dispositions, and termination. | 1 2 3 4 5 | | |
| 32. Exhibits skill in treating client files and records in accordance with federal, state, local, and agency confidentiality regulations and the client's best interests, including careful and professional disclosure in the discussion of material and/or specific client concerns in consultation, referral, or client advocacy in inter- or intra-agency setting. | 1 2 3 4 5 | | |
| 33. Exhibits skill in verbal and written communication with co-workers and supervisors | 1 2 3 4 5 | | |

I hereby certify that I have been in a position to observe and have first hand knowledge of the work of _____ at the _____

Applicant's name _____ Agency name _____
 I have observed the applicant's work from _____ to _____
 Date _____ Date _____

Describe the procedures you have used to supervise and evaluate the applicant. Attach additional sheets if necessary

I hereby certify that all of the above material is, to the best of my knowledge, true.

Signature _____ Agency _____ Title _____ Date _____

**DO NOT RETURN THIS FORM TO APPLICANT – PLEASE RETURN TO:
 CEB OF LASACT - P.O. BOX 80235 - BATON ROUGE, LA 70898-0235**

CERTIFICATION EXAMINING BOARD OF LASACT, INC.

P.O. Box 80235 • Baton Rouge, LA 70898-0235 • Phone: 225.766.2992

Fax 225.766.8552 • e-mail: admin@lasact.org; web site: www.lasact.org

**Substance Abuse Specialty Certificate Practicum
Core Functions Training Documentation/Verification**

Program: _____
Please Print

Supervisor: _____
Please Print

Professional Degree (Master's or higher)

Degree Year obtained Name of Accredited University from which obtained

Core Function

Minimum 10 in each for total minimum of 300

- Screening _____
- Intake _____
- Orientation _____
- Assessment _____
- Treatment Planning _____
- Counseling _____
- Case Management _____
- Crisis Intervention _____
- Client Education _____
- Referral _____
- Reports & Record Keeping _____
- Consultation with Other Professionals _____

TOTAL – (MINIMUM OF 300 HOURS) _____

Signature, Substance Abuse Specialty Certificate Applicant

Date

I attest that this applicant for a LASACT Substance Abuse Specialty Certificate has 300 hours of training in the 12 Core Functions, with a minimum of 10 hours in each, under my professional supervision.

Signature, Professional Supervisor

Date

GLOBAL CRITERIA FOR THE TWELVE CORE FUNCTIONS

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

Global Criteria

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

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

Global Criteria

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

III. **ORIENTATION** -- Describing to the client: (1) general nature and goals of the program; (2) rules governing client conduct and infractions that can lead to disciplinary action or discharge from the program; (3) in a non-residential program, the hours during which services are available; (4) treatment costs to be borne by the client, if any, and (5) client's rights.

Global Criteria

1. Provide an overview to the client by describing program goals and objectives for client care.
2. Provide an overview to the client by describing program rules, and client obligations and rights.
3. Provide an overview to the client of program operations.

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

Global Criteria

1. Gather relevant history from client including but not limited to alcohol and other drug abuse using appropriate interview techniques.
2. Identify methods and procedures for obtaining corroborative information from significant secondary sources regarding clients' alcohol and other drug abuse and psycho-social history.
3. Identify appropriate assessment tools.
4. Explain to the client the rationale for the use of assessment techniques in order to facilitate understanding.

5. Develop a diagnostic evaluation of the client's substance abuse and any coexisting conditions based on the results of all assessments in order to provide an integrated approach to treatment planning based on the client's strengths, weaknesses, and identified problems and needs.

V. TREATMENT PLANNING -- Process by which the counselor and the client: (1) identify and rank problems needing resolution, (2) establish agreed upon immediate objectives and long-term goals, and (3) decide on a treatment process, resources to be utilized, and frequency of application.

Global Criteria

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

VI. COUNSELING (Individual, Group, & Family or Significant Others) -- The utilization of special skills to assist individuals, families, or groups in achieving objectives through: (1) exploration of a problem and its ramifications, (2) examination of attitudes and feelings, (3) consideration of alternative solutions, and/or (5) decision making or problem solving.

Global Criteria

1. Select the counseling theory(ies) that apply(ies).
2. Apply technique(s) to assist the client, group, and/or family in exploring problems and ramifications.
3. Apply technique(s) to assist the client, group, and/or family in examining the client's behavior, attitudes, and/or feelings if appropriate in the treatment setting.
4. Individualize counseling in accordance with cultural, gender, and lifestyle differences.
5. Interact with the client in an appropriate therapeutic manner.
6. Elicit solutions and decisions from the client
7. Implement the treatment plan.

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

Global Criteria

1. Coordinate services for client care.
2. Explain the rationale of case management activities to the client.

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

Global Criteria

1. Recognize the elements of the client crisis.
2. Implement an immediate course of action appropriate to the crisis.
3. Enhance overall treatment by utilizing crisis events.

IX. CLIENT EDUCATION -- Provision of factual information to individuals and groups concerning alcohol and other drug abuse, the impact on individuals and life styles, and the available resources and services to make changes.

Global Criteria

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

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

Global Criteria

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

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

Global Criteria

1. Prepare reports and relevant records integrating available information to facilitate the continuum of care.
2. Chart pertinent ongoing information pertaining to the client.
3. Utilize relevant information from written documents for client care.

XII. CONSULTATION WITH OTHER PROFESSIONALS IN REGARD TO CLIENT TREATMENT/SERVICES -- Relating with counselors and other health care professionals to assure comprehensive, quality care for the client.

Global Criteria

1. Recognize issues that are beyond the counselor's base of knowledge and/or skill.
2. Consult with appropriate resources to ensure the provision of effective treatment services.
3. Adhere to applicable laws, regulations and agency policies governing the disclosure of client identifying data.

REQUIREMENTS FOR RENEWAL OF LASACT SUBSTANCE ABUSE SPECIALTY CERTIFICATE

Addiction professionals who are not under the regulation and authority of the ADRA must maintain a current LASACT Substance Abuse Specialty Certificate **OR** a current Substance Abuse Specialty Certificate from their professional association in order to remain certified as a CCS. The LASACT Certificate must be renewed every two years on the anniversary of its original issuance. Requirements for renewal of certificate are listed below. There is no charge to LASACT members for renewal of this Certificate. It is not available to non-members.

Candidates for LASACT certificate renewal must:

1. Be active in the field of alcohol and substance abuse at the time of application for certificate renewal;
2. Be a current member of LASACT;
3. Submit verification of valid professional license;
4. Be free of any ethical or malpractice violations;
5. Present verification and documentation of completion of minimum of 8 hours of continuing education **specific to substance abuse** since the date of previous certificate.
6. Submit an application that must arrive in the LASACT office prior to the expiration of the original certificate. The application must include a signed statement that applicant adheres to the ethical standards for addiction professionals.