



# NEWSLETTER LASACT

Vol. 5, No. 2

May, 2005

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## *Letter from President Robert Jackson*

Dear Members,

Last year we saw many changes take place in our substance abuse field, especially in the area of certification. I look forward to continuing these efforts, working with the Office for Addictive Disorders and the Regulatory Authority. I feel that these are very positive changes which will strengthen our field. I am very excited about a new criminal justice credential that LASACT is now offering.

This year I would like to increase the membership of LASACT and get more members involved. This is a very important aspect, in that membership support is needed to keep our organization running.

We have a lot of projects that are in the works for this year, and I look forward to working with everyone.



## *Rules for Act 803*

The new rules for Act 803 became effective on March 21, 2005. Since that time the ADRA has been hard at work implementing the new tiered certification system. Some of you have already received your new letter and cards showing your classification as LAC, CAC, or RAC. Those who haven't will receive them shortly. The BCSAC is no more.

Additionally, the new Certified Clinical Supervisor (CCS) credential is being implemented, and thus far eleven persons have been tested and certified. The questions on everyone's mind are 'To whom does this CCS credential apply, and how do I get it?'

The Rules apply to all individuals in the process of acquiring the experiential component necessary for the various types of practice credentials that are now available, i.e. LAC, CAC, RAC. All of these credentials require that the experience component be met under the supervision of a CCS. If a CCS is not available in the area, the certification applicant must apply to ADRA for a waiver.

## **LASACT Board of Directors**

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### **President-Elect**

Chris French, Dist. 7

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Vacant

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### **LASACT Staff**

#### **Executive Director**

Marolon Mangham, MBA

#### **Office Assistants**

Patsy Becker

Danna Spayde

Hours: 8 a.m. - Noon; Mon.- Fri.

All CIT's must have CCS supervision or a waiver in order for the supervisor to work towards meeting CCS requirements or for the agency to obtain a CCS.

LAC's, CAC's, and RAC's may become CCS's. However, they cannot clinically supervise anyone at a higher certification level than they are. For example, a CAC/CCS can clinically supervise CAC, RAC, and CIT's. A CAC/CCS cannot clinically supervise an LAC. LAC's who are CCS's can clinically supervise all levels.



## ***LASACT 2005 Will be the Best Yet!***

The Planning Committee for LASACT 2005, chaired by Tammara Jenkins, has been hard at work preparing for the biggest and best Conference ever. It will be held in Lafayette from Wednesday through Saturday, August 17 - 20, at the Hilton Hotel. Thanks to some great assistance from the DHH Office for Addictive Disorders; Gulf Coast Addiction Technology Transfer Center of the University of Texas at Austin; and Louisiana Addiction Technology Transfer Center at Northwestern State University, Natchitoches. Conference Sponsors include Doctors' Hospital and Brentwood Hospital, both of Shreveport, and dePaul Hospital - Tulane Medical Center of New Orleans. The Committee is adding an extensive Prevention track to the usual lineup of Substance Abuse and Gambling tracks.

Some outstanding national experts are scheduled, including Dr. Donald Vereen of NIDA; Beverly Watts-Davis, Director, Center for Substance Abuse Prevention; Rokelle Lerner; Pam Newton; Dr. Wesley Clark, Director, Center for Substance Abuse Treatment, and many others.

On Wednesday, August 17, there will be two pre-conference workshops on Ethics, one for preventionists and one for treatment professionals. The fee for this workshop is included if you register for the full conference. If you register for only one or two days, there is a separate fee for the workshop.

Another change this year is an Awards Dinner on Friday night, instead of the usual luncheon. By the way, we need nominations for Counselor of the Year, CIT of the Year, and the newly added Prevention Specialist of the Year and PSIT of the Year for the awards presentations. Nomination forms were recently mailed to LASACT members and can be downloaded from our web site, [www.lasact.org](http://www.lasact.org). Award recipients must be LASACT members.

For some time now we have been mailing the Conference Flyer and Registration form in everything we send out. They can also be downloaded from our web site. We urge you to register and make your hotel reservation early and get your request for funding of the fees into the process early. We will look forward to seeing you at the Conference.

A Conference flyer and Registration form are included in this newsletter.

## Editorial Policy

The LASACT newsletter is published as a tool for keeping LASACT members informed of the latest developments in the addictive disorders field in the state and the nation.

Members are invited to submit original articles for consideration for publication.

Manuscripts should be 100 to 500 words; typed, original pages; double-spaced, with references. Include a short biography of the author(s).

Manuscript content is the responsibility of the author(s) alone. Newsletter Editor retains the right to edit and/or rewrite submissions. Materials may not be reproduced without written permission from LASACT. Statement of fact and opinion are those of the author(s) alone and do not represent the opinions, policies, or positions of LASACT, the board, or the editorial staff.

Acceptance of advertising does not constitute endorsement by LASACT.

### Address

LASACT  
P.O. Box 80235  
Baton Rouge, LA 70898-0235

### Telephone

225.766.2992

### Fax

225.766.8552

### E-mail

[admin@lasact.org](mailto:admin@lasact.org)

### Web Site

[www.lasact.org](http://www.lasact.org)

## *Certified Clinical Supervisor Credential (CCS) Now Available through LASACT*

LASACT is now working with the ADRA to offer the Certified Clinical Supervisor (CCS) reciprocal credential to interested and qualified persons. If you think you might like to apply for this designation, please review carefully the information below, which explains the requirements.

The term "clinical supervision" is defined as a process of developing clinical skills and competencies for persons providing counseling. A primary purpose of clinical supervision is to ensure skill development as evidenced in quality patient/client care.

### **All applicants must meet the following standards when applying for the CCS.**

#### **Education –**

documentation by certificate of thirty hours of formal didactic education training in clinical supervision. The formal education training must include six education hours **within each** of the following clinical supervision performance domains: Assessment and Evaluation, Counselor Development, Management and Administration, and Professional Responsibilities. All education hours must be documented by certificate or acceptable letter. The thirty hours must be in the LASACT Clinical Supervision Course. In July and September LASACT is offering the 30 hour course that will meet the education requirement. See next article for details.

#### **Experience –**

- (1) current certification as a LAC, CAC, RAC or AADC at the reciprocal level **OR** hold a current valid specialty substance abuse license/certification in another professional discipline in the human services field at the Master's level or higher. A substance abuse specialty certificate issued either by LASACT or the applicant's professional association is required for addiction professionals who are not certified by ADRA.
- (2) verification and documentation of five years {10,000 hours} of professional experience in the AODA field.

#### **Supervised Practicum –**

Verification and documentation of two years {4,000 hours} of clinical supervisory experience in the AODA field. The two years may be included in the five years {10,000 hours} of counseling experience and must include the provision of 200 contact hours of face-to-face clinical supervision.

#### **Code of Ethics –**

Applicants must sign a statement that they understand and agree to comply with the LASACT/CEB Code of Ethics/Code of Ethics for Clinical Supervisor.

## Advertising Policy

Advertising in the LASACT newsletter is an excellent way to announce upcoming training, workshops, and ongoing services of agencies.

This newsletter is circulated to addiction professionals throughout Louisiana.

The newsletter offers a variety of advertising sizes. Only camera ready advertisements will be accepted.

### Advertising Rates:

Full Page .....	\$100
Back Page .....	\$150
½ Page .....	\$ 75
¼ Page .....	\$ 50
Business Card. ....	\$ 25

### DISCLAIMER

Readers are advised to make appropriate inquiries and take appropriate advice before sending any money, incurring any expenses, or entering into a binding contract with any advertiser. LASACT shall not be liable to any person for loss or damage incurred or suffered as a result of his/her accepting an invitation contained in any advertisement published in this newsletter.

### Written Examination –

Each applicant must pass the international written examination as determined by IC&RC/AODA standards.

### CCS Fee Structure

Inquiry Packet	Free if e-mailed/downloaded from web \$5.00 if mailed
Portfolio Packet	Free if e-mailed/downloaded from web \$5.00 if mailed

### LASACT Members:

Application	\$ 60
Testing, one examination	\$100

### Non-members:

Application	\$100
Testing, one examination	\$125

### Recertification every 2 years

LASACT Members	\$ 75
Non-members	\$125



## CCS 30 Hour Class

In July and September LASACT will offer the thirty hour supervision class that is required for those who wish to apply for the CCS credential. In order not to take people away from their jobs for a whole week the classes will be held over a two week period – three days the first week and two days the second. The first class is scheduled in New Orleans at DePaul Hospital for the dates of July 11-13 and 19-20. The second class is scheduled for September 14 - 16 and 21 - 22 at Dr. Joseph Tyler Mental Health center, Auditorium 3, 302 Dulles Dr.

Each class will accommodate 30 people. LASACT will have 15 slots in each one and is accepting registrations on a first come, first served basis with the registration form and fees in the office. The OAD will fill the remaining 15 slots with its employees. Instructor will be Dr. Tom Durham, Project Director at Danya International, where he manages a worldwide program of clinical supervision for alcohol and drug counselors throughout the U.S. Navy and Marine Corps. He chaired the ICRC Committee that set the standards for certification of clinical supervisors.

Anyone who is interested in taking this class should contact LASACT at [admin@lasact.org](mailto:admin@lasact.org) for a brochure, and submit the registration and fee as soon as possible. Several people are already signed up. The course fee for LASACT members is \$275 and for non-members is \$335.

Other classes will be scheduled in the future based on demand.

## Organizational Members

We salute the following agencies and individuals that support LASACT as Organizational Members.

### **District 1 - New Orleans Area**

SACO, District 1  
Choices of Louisiana  
Responsibility House

### **District 2 – Baton Rouge Area**

ADAPT

### **District 4 – Lafayette Area**

New Beginnings Addiction  
Recovery Center

### **District 7 Shreveport Area**

Steve Denmon, BCSAC  
Brentwood Hospital  
Doctors' Hospital  
Council on Alcoholism & Drug  
Abuse



### **Benefits of Individual Membership in LASACT**

- discounts on LASACT sponsored educational offerings, including the annual Conference and home study courses;
- newsletter & web page;
- reciprocity to other states;
- advocacy for professional interests on national, state, and local level;
- eligibility to serve as evaluator for oral tests;
- training/testing for DOT work;
- networking opportunities;
- support the profession

## National Addiction Organizations Plan Collaborative Effort

*Printed below is a news release concerning a proposed merger between ICRC, S-CAP, NAADAC, and NCC. Our Executive Director, Marolon Mangham, is a member of the work group and represented Louisiana at the meeting in Washington, D.C. in February.*

**Washington, DC – February 22, 2005** – The Presidents and Chairs of the National Association for Addictions Professionals (NAADAC), The National Certification Commission (NCC), the International Certification and Reciprocity Consortium (ICRC), and the Society of Credentialed Addiction Professionals (S-CAP) today announced the outcomes of a meeting of their senior leadership in Washington DC on February 19th and 20th.

The meeting was held to discuss specific ways the four organizations will jointly address addiction professional certification, education and public policy related issues.

At the conclusion of in-depth discussions in each of these areas, the group agreed that the four organizations will vigorously move forward to construct a formal structure for collaboration leading to unity within the addictions profession.

Said both Mary Woods, RNC, LADC, MSHS, President of NAADAC and Jim Scarborough, M.Div., President of both ICRC and S.CAP: “Foremost among our recommendations is that the members of our respective organizations embrace the collaborative spirit that is evidenced by the results of our discussions. As we stated before our meetings last weekend: Challenging times often call for bold action. Today the addictions profession is confronting multiple challenges that must be addressed through a marshaling of resources and a truly unified effort. We now have an historic opportunity to join together in more effective ways to address the needs of our profession.”

“In our meeting last weekend we faced the challenges that lie ahead for our profession and for our organizations. If we do not chart our destiny, it will be charted for us. We must be unified in our efforts so that we are prepared to best serve professionals in a rapidly changing environment. The process of defining a new collaborative structure will be difficult, but it is imperative that we do so to achieve our ultimate goal of serving our clients by advancing the profession.”

The group, in a series of unanimous votes, adopted the following to describe their collaboration as they move forward:

### **Vision**

United in voice and action to advance the addiction profession for the welfare of individuals and families, the workforce and the larger community.

## **Mission**

We will respect and support each other's mission with a commitment to our mutual vision.

## **Models for Collaboration**

NAADAC and ICRC/S.CAP will move forward to identify models for collaboration and unity.

## **Certification**

The organizations have agreed that:

A national tiered system from entry to doctoral level for the addiction profession should be jointly developed by ICRC and NAADAC (and other addiction professionals) so that there is no "wrong door" for entry.

NAADAC and ICRC should jointly develop the standards and a scope of practice tied to each of these tiered levels. NAADAC and ICRC will invite other addiction professional organizations to work on these processes.

## **Education, Training, Public Policy and Public Relations**

ICRC and NAADAC will move forward toward unification of their certification programs.

NAADAC/NCC and ICRC/S.CAP will advocate together on behalf of the addiction community and profession.

NAADAC/NCC and ICRC/S.CAP will jointly identify gaps in resources in professional education and training and develop solutions for meeting needs.

At the conclusion of the meeting three joint workgroups of the larger group were established to develop models for 1) collaboration and funding; 2) certification; and 3) education, training, public policy and public relations. These workgroups will be establishing goals, objectives and timelines for their activities. The certification workgroup has defined the central issues they will consider and developed a plan to move forward to develop models for collaboration and unity. Each workgroup will seek input from ICRC member boards and the NAADAC membership as they proceed. "We greatly value the perspectives of the NAADAC/NCC and ICRC/S.CAP membership bodies and will also continually solicit member input as the work plans, recommendations and

reports of the workgroups and the larger group proceed," said both Scarborough and Woods.

"We are looking forward to an open, informed and vigorous dialogue on these issues with our members as well as our public and private sector partners," said both Scarborough and Woods, "and we are looking forward to shaping our future together as we all confront the challenges and historic opportunities our profession faces."

## *February 19-20 Meeting Participants in Washington, DC*

### **NAADAC**

Mary Woods, President  
Sharon Morgillo Freeman, President Elect  
Paul Potter, Treasurer  
William Cote, NCC Chair  
Patricia Greer, Mid-South RVP  
Shirley Beckett Mikell, Director of NCC Certification  
Cynthia Moreno Tuohy, Acting Executive Director

### **ICRC/S.CAP**

Jim Scarborough, ICRC President, S.CAP Chair  
Jeff Wilbee, Vice President  
Richard Bowe, Treasurer  
John Barlow, Secretary  
Marolon Mangham, Louisiana  
Bart Grimes, North Carolina  
Dennis J. Barbour, Executive Director

NAADAC is the premier global organization of addiction-focused professionals who enhance the health and recovery of individuals, families, and communities. NAADAC's mission is to lead, unify, and empower addiction focused professionals to achieve excellence through education, advocacy, knowledge, standards of practice, ethics, professional development and research.

[www.naadac.org](http://www.naadac.org),

NCC's (NAADAC Certification Commission) purposes are to develop and implement national standards of requisite knowledge in addiction counseling, provide evaluation mechanisms for measuring and monitoring the level of knowledge required for the National Certified Addiction Counselor (NCAC I&II) and the Master Addiction Counselor (MAC), provide formal recognition to those who meet the NCAC or MAC standards, and

establish policy for acquiring and maintaining the NCAC and/or MAC in accordance with Federal non-discrimination regulations regarding race, creed, religion, sex, age, ethnic background, sexual orientation, and other guidelines set by the National Organization for Competency Assurance.

**ICRC's** vision is to serve as the source that establishes standards globally for credentialing and that provides resources to advance quality in addiction-related healthcare. ICRC's mission is to protect the public through the development and advancement of competency standards and programs for professionals engaged in the prevention and treatment of substance use disorders. [www.addictionboards.org](http://www.addictionboards.org)

The mission of the **Society of Credentialed Addiction Professionals (S.CAP)** is to ensure quality of care in addiction prevention and treatment by promoting credentialing of professionals in the field of addictions. S.CAP is a membership organization composed of individual professionals as well as non-profit and for-profit entities that support its mission. [www.addictionsociety.org](http://www.addictionsociety.org)



### *Meet the New Staff at ADRA*

In February, 2005 **Susan Sandifer** joined Bob Sawyer, Director and Lorraine Mayeaux on the team at the Addictive Disorders Regulatory Authority (ADRA) as an Administrative Assistant. Susan graduated from Southeastern University in 2001 with a BA in Health Promotion and Exercise Science. She interned at Tangipahoa Alcohol and Drug Abuse Council in Hammond and has taught Physical Education at Northwestern Middle School in Zachary and at Silliman Institute in Clinton. Susan is married to Randy Sandifer and has a 3 month old daughter Randy.

Long time LASACT member, former CEB Chairman, and Legislative Work Group Chairman **Roy Baas**, joined the staff of ADRA on April 5 as a Program Manager. Roy is adjusting to life in Baton Rouge after a number of years in Monroe. His ADRA responsibilities include going through files to set up the new tiered certification system, con-

ducting portfolio reviews, and reviewing AEP's. Roy says that by the end of May everyone should have received their LAC, CAC, and RAC letters and cards. If you have not received yours by then, contact the Regulatory Authority.

We welcome Susan and Roy to ADRA.



### *New Substance Abuse Professionals (SAP's)*

Since our last newsletter, LASACT has issued SAP certificates to the persons listed below, who are now eligible to conduct assessments and referrals of DOT employees needing a Substance Abuse Professional

All SAP's who have completed the required DOT course and passed the ICRC exam are listed on our web page with contact information.

Anyone interested in becoming an SAP can check our web page for information about the required home study course and exam. The DOT Home Study Course offers 12 hours of CEU credits whether you take the SAP exam or not.

#### *District 5*

*(Lake Charles Area)*

Sheryl Johnson

#### *District 7*

*(Shreveport Area)*

Don Thomas



### *Passing of Some Friends*

Since the publication of our last Newsletter, we have mourned the passing of the following persons who were members and/or friends of LASACT.

McTavish Williamson	2/23/05
Doug Morgan	3/6/05
Nancy Olson	4/26/05

## *Alcoholism Treatment Pioneer Dies*

Nancy Olson, who was a featured speaker at our 2004 Conference, passed away on Easter Sunday, 2005. Ms. Olson was involved in the alcoholism field from 1965 until her death and had served in a variety of capacities. She was possibly the country's foremost living authority on the early years of alcoholism treatment in the U.S., according to former Senator Harold Hughes (D-Iowa), shortly before his death. Senator Hughes requested that she write the history of this period, and her book is available through LASACT.

Highlights of her service in the field of alcoholism treatment include:

- ✓ Appointed in 1969 by Sen. Hughes to staff newly created Special Subcommittee on Alcoholism and Narcotics (later Subcommittee on Alcoholism and Drug Abuse).
- ✓ Worked closely with Sen. Hughes during his six year chairmanship of that Subcommittee; assisted him in passing an amendment to the Office of Economic Opportunity Act to earmark funds for alcoholism and an amendment to the Selective Service Act to require treatment and rehabilitation for military alcoholics.
- ✓ Involved in development of Comprehensive Alcohol Abuse & Alcoholism Prevention, Treatment & Rehabilitation Act of 1970, ("the Hughes Act") which created National Institute on Alcohol Abuse & Alcoholism.
- ✓ Staffed Hughes office during the 1974 amendments to above Act.
- ✓ A recovered alcoholic – like Hughes – she assisted him in counseling alcoholics and their family members, including Members of Congress or their wives, congressional staff members, and high-ranking government and military personnel, as well as strangers who walked in off the street.
- ✓ Re-appointed in 1975 to staff of Subcommittee on Alcoholism & Drug Abuse by Hughes' successor, Senator Harrison A. Williams of New Jersey, chair of the Labor & Public Welfare Committee, of which the Subcommittee was a part.

- ✓ Involved deeply in drafting 1976 & 1979 amendments to the Hughes Act and had primary staff responsibility for congressional oversight of activities of National Institute on Alcohol Abuse & Alcoholism and National Institute on Drug Abuse.

She left the Senate Subcommittee in 1980, but she remained a close observer of the alcoholism field. Her presentation at the 2004 Conference was that of a true pioneer in the alcoholism treatment field and delighted the crowd with her historical perspective.

## *Memorial Tribute to Jake Hadley*

The following tribute was put together in memory of Jake Hadley, who was a pioneer in the development of the addiction profession in Louisiana. The writer, an addiction professional who wishes to remain anonymous, stated that "Jake was my counselor, mentor, and friend. I miss him very much and am very grateful for his influence in my life." We feel sure that many others feel the same way.

**J** - judgmental he was not

**A** - accepted people where they were

**K** - kindness and compassion were two of his attributes

**E** - empathy was another

**H** - honest, honorable & humble

**A** - advanced addiction treatment in Louisiana

**D** - devoted to family, friends and others

**L** - leader

**E** - endeared by all who knew him

**Y** - you will be missed

## *New Newsletter Editor*

We welcome Cher Powers back to the fold as newsletter Editor. She had taken the job a few months ago but had to resign because of family obligations. But she's back now, and we're delighted to have her.

Cher has been contacting some of you for information and articles. We'd like to know what is going

on in the various districts, so let her know what's happening where you are. Try writing an article for the newsletter, and send it to her like Phil Coco did for the next article. Thanks, Phil.

***“The Times They Are A-Changin’”  
by Phillip Coco***

Bob Dylan may have written the song, but this statement has stood true for hundreds of years, for time is a continually changing part of our lives. Treatment for gambling addiction is no different. Though the changes have been slow in coming, they are on the move. As a relatively new addiction – as far as the public is concerned – gambling addiction, like other addictions, has been around since the time of the Roman Empire and before.

Public opinions, the attitudes of society, the legal system, and those establishing moral standards, have viewed problem gambling as a deliberate behavior of uncaring or thoughtless individuals. Since the introduction of widely available access to "Gaming" opportunities and a change in how these businesses are marketed to the public, an increase in the number of identified problem gamblers has been noted. This has been an eye opener to individual families as well as the professional, legal and political communities. Through a collaborative effort by these groups, times and attitudes are *slowly* changing, but they *are* changing!

This brings me to the 2004 Louisiana Compulsive Gambling Conference recently held in Shreveport. The overall message appeared to center on a sincere and effective effort to chip away, through education of the families and the public, at the stigma that has been attached to problem gambling. This education has been focused on identifying compulsive gambling as a disease that can be treated. In respect to the addiction professionals who address the problem head on, the conference provided education on both the commonalities and differences of treating a pathological gambler, compared to other addiction treatment.

Overall, the conference provided education, information, and some practical application of treatment techniques to 150 registered attendees. Congratulations to Earl Reed who was named Gambling Counselor of the Year.

One of the many highlights of the conference was the involvement of the State Attorney General's Office in establishing a diversionary pilot program for first time non-violent offenders, which was presented to the conference participants by Attorney General Charles Foti. (See Page 12 for more on this program) This program will provide those with a gambling problem an opportunity to break the cycle with support from multiple arenas of state government. Yes, "the times, they are a changin'".



***Co-Occurring Disorders Course  
Graduates***

Congratulations to the following persons who have successfully completed our newest home study course on Co-occurring Disorders:

- |                               |                              |
|-------------------------------|------------------------------|
| Nanette Carney, Vidalia       | Stacy Horn-Koch, New Orleans |
| Kathy Martin, Ferriday        | John C. Stephenson, Ferriday |
| Doreen Taravella, Baton Rouge | Melinda Vincent, Harvey      |
| Brett Zerby, Ferriday         |                              |

This excellent course offers 12 hours of continuing education credit. For more information about it consult our web page.



***Membership Notes***

LASACT membership now numbers 247, not including the nine organizational members.

As noted in the President's letter on page 1, increasing our membership is a priority for this year. Even though it's already May, it's never too late to join. Download a Membership Application, and send your dues in **NOW!**

## ***LASACT Offering Quarterly Test Preparation Workshops***

LASACT is now offering workshops to help candidates for the ADRA practice credentials (LAC, CAC, RAC) prepare for both the written and oral tests. The workshops are offered quarterly in various parts of the state. Those who have taken the workshops have done very well on the tests. ADRA is requiring those who failed a test to take these classes.

**Oral Prep Workshops** are held in, Scott, and Shreveport and are conducted by Jay and/or Betty Fletcher and Bill Rose respectively. Dates for the remainder of 2005 are July 23 and October 22. Fees are \$30 for LASACT members and \$60 for non-members.

The **Written Prep Workshops** are conducted in Baton Rouge by Ed Rankin, in Shreveport by Bill Rose, and in Metairie by Frances Meador and Anthony Lowery. Those dates for the balance of 2005 are August 13 and November 19. Fees are \$45 for LASACT members and \$75 for non-members.

We thank Ed Rankin for his hard work in preparing an excellent Manual for the Written Prep Workshops.

Brochures with registration forms for the workshops are posted on the our web site [www.lasact.org](http://www.lasact.org). Or they can be obtained by contacting the LASACT office at 225.766.2992. By verifying financial need, **registered CIT's** may apply to the Betty Breen Memorial Tuition Foundation for financial assistance for these workshops as well as for the Conference. Visit our web site for more information and Application Form.



## ***LASACT Nomination Committee***

With the retirement and impending departure for Belize of Rosie Ridgeway, LASACT has named a new Nomination Committee Chairperson, former

President **Frances Meador**. Other Committee members include Lisa Schuster, Penny Henderson, Chris French, and Rosie Ridgeway, who will serve as a member but not Chair.

We appreciate Rosie's faithful service as Chair of this Committee for several years. It's not an easy job to get nominations for all the officers and Board positions that must be filled each year. We also appreciate Roy Baas' long time and devoted service on the Committee.

Nomination information was mailed to members a few weeks ago and is available on the web page. Please take the time to think carefully about the people whom you would like to see serving on the Board and as officers of your Association.

Nominations are also needed for the awards to be given to the Counselor of the Year, Prevention Specialist of the Year, CIT and PSIT of the Year. Send all nominations to Frances Meador at 13 Driftwood Blvd. , Kenner, LA 70065.



## ***Online Home Study Courses Available***

LASACT is pleased to have entered into agreements with two providers of home study courses that are available online at reasonable rates. Below is a description of the opportunities available through the **Distance Learning Center** and **CEU Home Study**. Both offer a variety of courses related to addiction counseling and test preparation.

### **The Distance Learning Center**

[www.readytotest.com](http://www.readytotest.com) for test preparation materials;  
[www.dlca.com](http://www.dlca.com) for other courses

For persons preparing to take the AODA (LAC, CAC, RAC) test, the Distance Learning Center offers the following three preparation manuals for use in studying for exams. **Use Code ST004 to order and get a 7% discount on these items.** Order these materials at [www.readytotest.com](http://www.readytotest.com).



## *Procedures for Filing an Ethical Complaint*

Anyone who believes that an ethical violation has occurred must take the following steps to report it.

### •Initiation:

Any individual with personal knowledge that any person has violated the Code of Ethics, any other rules of the Board or the statute authorizing the work of this Board may file a complaint against the substance abuse professional by submitting a written complaint on proper board forms addressed to the Chair of the Ethics Committee.

### •Form:

The complaint, stating the nature of the alleged offense and signed by the complainant (person making the complaint) shall include:

1. The name, address, and phone number of the complainant;
2. The name, address, and phone number of the person against whom the complaint is made (respondent);
3. A statement of the facts which clearly and accurately describes the allegations against the person.

### •Investigation:

The complaint shall be investigated as set out in the Administrative Code

For further information contact: Bob Sawyer, ADRA Director, 225.922.7700.



## *Evaluator Training*

In March LASACT conducted training sessions for new CPM evaluators. Classes were held in Baton Rouge and Shreveport. Barry Mangham and Rosie Ridgeway conducted the Baton Rouge class, while Chris French and Bill Rose led the Shreveport training. The following persons successfully completed

the course, and several of them were involved in their first evaluation sessions on May 7.

Donna Barras, Lafayette	Anthony Lowery, New Orleans
Ken Benedik, Lafayette	Jewel May, West Monroe
Bill Blanchard, Baton Rouge	Terrence Pierce, New Orleans
Michael Boudreaux New Orleans	Janice Rebstock, Baton Rouge
Corinne Dumestre, Jefferson	Christy Snuggs, Scott
Thomas Estis, Rayville	Martin Thibodeaux, New Orleans
Florence Fowler, Shreveport	Donald Thomas, Shreveport
Thomas Fricks, St. Landry	James Truax, Watson
Patsy Leger, Lafayette	Willie Young, Opelousas
Steve Denmon, Shreveport	

Additionally, Frances Meador and Mackley McCurdy trained in Part 1 of 2 to become Evaluator Trainers.

With this new cadre of evaluators and trainers LASACT is able to conduct oral tests all over the state and not exclusively in Baton Rouge as in the past. This will make it much easier on persons being tested, as they won't have to travel such long distances as before.

Another training session will be held later in the year. Anyone interested in becoming an Evaluator should submit an application to the LASACT office to be put on the list to take it. The form is available on our web site.



**The LASACT office is "officially" open Monday through Friday from 8 a.m. till noon. Sometimes – but not always – staff is on hand in the afternoon until 2 or 2:30. As long as someone is in the office, the phone will be answered. However, there is no guarantee that anyone will be in after noon.**

## *Breaking the Cycle of Gambling Addiction*

### *New Pilot Project Aims to Help Gambling Addicts*

At the 9<sup>th</sup> Annual Louisiana State Conference on Gambling Behavior in Shreveport in Nov. 2004, Attorney General Charles Foti introduced the "Gambling Treatment Referral Program Pilot Project." This cutting-edge program is aimed at helping those who have committed non-violent

crimes that are directly related to compulsive gambling receive treatment rather than jail time.

While Criminal Sheriff of Orleans Parish, Mr. Foti became aware that criminal activity such as theft, forgery, issuing worthless checks and failure to pay child support, was sometimes related to gambling compulsions and addictions. Almost without exception, gambling addicts were incarcerated or otherwise punished without being given either an option or opportunity to solve their problem through treatment, leading to concerns about recidivism, docket crowding and over-crowding of jails.

AG staff, representatives from Office for Addictive Disorders, the Louisiana Association on Compulsive Gambling and the 26<sup>th</sup> JDC District Attorney's Office met to discuss various ways these offices could work together to establish a diversionary program for individuals whose criminal activity is a direct result of gambling. Thus, the Gambling Treatment Referral Program pilot project was born. District Attorney Schuyler Marvin in the 26<sup>th</sup> Judicial District Court agreed to coordinate this innovative pilot project, the primary goals of which are: restitution, decreased recidivism, relief of crowded dockets, reduction in number of persons incarcerated, and cost efficiency. With the cost of incarceration averaging approximately \$36,000 per year per person and with treatment costing less than \$100 per day per referral, the cost efficiency of this program is apparent.

Another goal of the program is to reduce the effects of crime related to gambling addiction on the entire "victim" group, which includes not only the direct victim of the crime, but the family of the gambling addict who often face overwhelming debt or bankruptcy. Employers and co-workers often suffer because the gambling addict spends time on the job pursuing his gambling addiction or stealing from the company.

Although the pilot project is housed in the 26<sup>th</sup> JDC District Attorney's Office, this program will be offered statewide to all District Attorneys on a voluntary basis. The treatment program is free to Louisiana citizens and is funded through the Office for Addictive Disorders, Compulsive and Problem Gambling Fund, which receives revenue from the gambling industry as required by law.

Initial screening for participation in the treatment program begins with the District Attorney and his staff. If the District Attorney determines the person's crime was directly related to gambling addiction, he/she will make a referral to the Gambling Treatment Referral Program. A counselor from the Louisiana Association on Compulsive Gambling will review the case and assess the offender for participation in the program. If eligible the offender must sign the District Attorney's Gambling Treatment Referral Program Agreement and make arrangements to sign the Louisiana Gambling Control Board's self-exclusion form. Offenders who do not successfully complete the conditions enumerated in the diversion program will be returned to the judicial system for further proceedings.

Of the five in-patient compulsive and problem gambling treatment facilities in the country, two are located in Louisiana: CORE in Shreveport and CORE South in New Orleans. During the treatment period, the participant may receive residential, outpatient or halfway house treatment, moving through the program according to his/her level of positive response.

Questions regarding the Gambling Treatment Referral Program can be directed to Assistant Attorney General Sue McNabb at 225-326-6500.



## *LASACT and ADRA What's the Difference?*

The LASACT office gets many inquiries that need to be directed to ADRA, and vice versa. We would like to clarify the difference between the roles of the two organizations and hopefully clear up some of the confusion between the two. The two organizations work together closely, but their roles are very different.

LASACT is the statewide professional association for addiction professionals. It is a membership organization with dues of \$90 per calendar year. LASACT's job, according to its Mission Statement is *"To promote and enhance addiction professionals and providers in areas of treatment,*

*education, prevention and advocacy.*” Therefore, LASACT’s role is primarily education and advocacy.

LASACT also has a Certification Examining Board (CEB), which handles credentialing and certification issues and functions under authority granted to it by LASACT. CEB carries out its duties independent of the political structure of LASACT. CEB currently contracts with ADRA to administer testing to certification applicants and, in the case of the CCS credential, review portfolios.

The role of the Addictive Disorders Regulatory Authority (ADRA), which came into being in July, 2004, with the passage of Act 803, is to issue credentials to practice substance abuse counseling, compulsive gambling counseling, and prevention counseling in the state of Louisiana. **All questions regarding practice credentials should be directed to ADRA at 225.922.7700 and not LASACT.**

Some of the confusion probably stems from the fact that prior to the inception of the old State Board in 1989, LASACT’s Certification Examining Board (CEB) issued all certifications that were available to addiction professionals. At the present time LASACT/CEB administers the IC&RC testing under contract with ADRA, but ADRA dispenses the test results and issues the certifications.

In summary, contact ADRA if you have questions and concerns related to practice credentials – how to apply for them, when they expire, testing schedules, test scores, etc. You can get lots of your questions answered, download forms, etc. by looking at ADRA’s web page: [www.la-adra.org](http://www.la-adra.org).

Contact LASACT for information about educational opportunities, annual Conference, legislative advocacy, employment opportunities and materials, Betty Breen Memorial Tuition Foundation, etc. Visit our web page at [www.lasact.org](http://www.lasact.org) for answers to many of your questions. Contact LASACT/CEB for certifications they offer.



## *Certifications Offered by LASACT/CEB*

LASACT currently works in conjunction with ADRA to offer three reciprocal IC&RC certifications for its members: Advanced Alcohol & Drug Counselor (AADC), the Co-Occurring Disorder Credential; Certified Clinical Supervisor (CCS); and Certified Criminal Justice Professional (CCJP).

**AADC** – The Advanced Alcohol and Drug Counselor credential upgrades and standardizes qualifications of those working in the field of alcohol and drug abuse counseling. The minimum requirements for AADC certification include academic achievement, work experience, and formal training.

**CCS** – Certified Clinical Supervisor – Clinical supervision is a process of developing clinical skills and competencies for persons providing counseling. A primary purpose of clinical supervision is to ensure skill development as evidenced in quality patient/client care.

The actual CCS certificate is issued by ADRA. LASACT attests an applicant’s appropriateness for the issuance of the certificate. For LASACT members this is a reciprocal certificate.

**CCJP** – This credential is designed for those who practice substance abuse counseling in a criminal justice setting.

For all credentials each requirement must be verified and documented.

None of these credentials is in lieu of the practice credentials offered by the Addictive Disorders Regulatory Authority. For the CCS, LASACT accepts the applications, reviews the portfolios, and administers the necessary testing in accordance with IC&RC standards. When the applicant meets all IC&RC requirements, LASACT issues a certificate to that effect and notifies ADRA. The applicant must then apply to ADRA for the certification and document and verify any required information.

The next page is a handy reference chart on these credentials.

## Summary of Requirements for Credentials Offered by LASACT CEB

Credential	Experience Requirements	Education Requirement	Supervised Practical Training	Testing Required
<b>Advanced Alcohol &amp; Drug Counselor (AADC)</b> (Co-occurring Disorder Credential)	Current certification as LAC; 2,000 hrs supervised AODA specific work experience including documentation of 300 hr practicum in Twelve Core Functions	Master's Degree in a Human Services or Behavioral Sciences field with clinical application (i.e. practicum)	180 hrs AODA- specific work, including six hours of professional ethics. Training must be in setting where AODA counseling is provided & specifically related to Twelve Core Functions.	Written & Oral if never taken before; sign Code of Ethics Statement
<b>Certified Clinical Supervisor (CCS)</b>	Current certification as LAC, CAC, RAC, or AADC at reciprocal level <b>OR</b> current valid specialty substance abuse license or certification in another professional discipline in human services field at Master's level or higher; verification & documentation of five years {10,000 hours} professional experience in AODA field.*	Documentation of 30 hrs formal didactic education training in clinical supervision, which must include six education hours within each of the following clinical supervision performance domains: Assessment and Evaluation, Counselor Development, Management and Administration, Professional Responsibilities.	Verification & documentation of two yrs {4,000 hrs} of clinical supervisory experience in the AODA field; two years may be included in the five years {10,000 hours} of counseling experience & must include provision of 200 contact hours of face-to-face clinical supervision.	Written only and sign Code of Ethics Statement
<b>Certified Criminal Justice Professional (CCJP)</b>	6,000 hours (3 years) supervised, paid (full/part-time) or voluntary work experience providing direct service to individuals involved in the criminal justice system	270 contact hours of training specifically related to the IC&RC/AODA Certified Criminal Justice Professional (CCJP) performance domains as they relate to both adults and juveniles.	200 hours of direct clinical supervision specific to the CCJP performance domains (with a minimum of 10 hours in each domain;	Written only; sign Code of Ethics Statement

\*LASACT offers the Specialty Substance Abuse Certificate to its members only free of charge. Documentation & verification are necessary. Contact LASACT office for appropriate forms.