

**The Texas Certification Board
of Addiction Professionals**

presents

**The Texas System for Certification of
CERTIFIED PREVENTION
SPECIALISTS
(CPS)**

APPLICATION PACKAGE

Revised November 2017

**TEXAS CERTIFICATION BOARD OF
ADDICTION PROFESSIONALS**

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**Certification Criteria and
other information for
“Certified Prevention Specialist”**

AS AUTHORIZED BY THE
TEXAS CERTIFICATION BOARD OF ADDICTION PROFESSIONALS

Revised Edition
November 2017

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TEXAS SYSTEM FOR CERTIFICATION OF CERTIFIED PREVENTION SPECIALISTS

Statement of Purpose

The Certified Prevention Specialist (CPS) credential upgrades and standardizes qualifications of those working in the area of prevention throughout Texas. The CPS shall be viewed as a fully qualified specialist in the area of prevention and able to provide these services independently or with minimal supervision, to the degree allowed by applicable laws, statutes and regulations. The CPS is designed to be appropriate for those professionals currently practicing in the prevention field. A CPS is a health care professional who has been certified by the Texas Certification Board of Addiction Professionals (TCBAP) as having been adequately trained to provide prevention education training. Prevention services shall be within the limitations of all applicable state and local statutes. A CPS is also an individual who adheres to the ethical principals set forth by the Texas Association of Addiction Professionals (TAAP).

Statutory Limitations

Certification as a CPS is not to be construed as authorization to charge or collect fees for services rendered if to do so conflicts with any statutory limitations. Where statute requires that a CPS be supervised by a licensed provider/clinical supervisor, the CPS shall so be supervised.

Principles

Certain important principles have emerged in regard to this credential.

Principle 1: This prevention certification is based on a combination of competency and knowledge about prevention education to include academic achievement.

Principle 2: Authority for this certification comes from professionals nationwide working in the field of prevention who share a common concern for educational standards with a focus on International Certification and Reciprocity Consortium (IC&RC) role delineation study processes, education and competency within the practice of prevention.

Principle 3: Persons having prevention skills and utilizing them in positions other than those of counseling may be certified with this credential by TCBAP. The basic requirement for certification is the performance of prevention skills and academic achievement.

Principle 4: Application for this credential is entirely voluntary.

Principle 5: Prevention certification is offered to both members and non-members of TAAP's membership and TCBAP's certification processes.

Principle 6: Applicants for the CPS credential must make their application with the credentialing board in the state in which they reside.

Authority

The authority of the Texas Certification Board is derived from those persons who are dedicated to service as counselors and other health professionals who are most affected by certification and standardization of related counseling issues such as prevention. The authority is embodied in the statewide association of alcohol and drug abuse counselors, the Texas Association of Addiction Professionals, Inc. Recognition of certification is voluntary. The credibility of this certification results from the standards that are maintained and the performance levels established by the Texas Certification Board. However, the professional competency, knowledge, and integrity of the Certified Prevention Specialist is based on ICRC international standards. Elected by the membership of the Texas Association of Addiction Professionals (TAAP), the Texas Certification Board is governed by its own procedures. Members serve without remuneration.

Requirements for CPS Certification

The minimum requirements for certification of a CPS shall include academic achievements, work experience, formal training, plus satisfactory completion of a written examination.

- A. **Formal Training:** Applicants must provide documentation of one hundred (120) total continuing education hours across all prevention domains. 90 hours must be prevention specific, 24 hours must be AOD specific, and 6 hours must be in prevention specific ethics. Counselor, treatment, or business ethics do not qualify. Examples of AOD specific education include, but are not limited to, addiction theory, addicted family dynamics, pharmacology, drugs and the brain/body, counseling theory, and the twelve core functions. Examples of prevention specific education include, but are not limited to, prevention curriculum training, community mobilization, planning and evaluation of prevention programs, media messages, social marketing, environmental strategies, and behavioral health promotion.
- B. **Ethics:** All applicants for certification as a CPS must sign and agree to comply with the prevention specific ethical standards as set forth in the Texas System of Certification for the CPS credential. All professional ethical complaints must be resolved prior to certification.
- C. **Written Test:** All applicants for certification as a CPS must complete and satisfactorily score a passing grade on the IC&RC International Written Prevention Specialist Examination.
- D. **Practicum:** All applicants must show documentation of a one hundred twenty (120) hour supervised Practicum with a minimum of ten (10) hours in each of the six Prevention domains: Planning and Evaluation, Prevention Education Service Delivery, Communication, Community Organization, Public Policy and Environmental Change, and Professional Growth and Responsibility.
- E. **Experience:** All applicants must document 2,000 hours (approximately one year) of Alcohol, Tobacco and Other Drug (ATOD) prevention work experience. A form is included in the application package on which the work experience should be documented.
- F. **Application:** All applicants must submit a completed application along with the application fee to the Texas Certification Board.
- G. **Residency:** All persons who apply for the CPS certification through the Texas Certification Board should be a resident of Texas. At least fifty percent (51%) of the applicant's work should be done in the State of Texas. Exceptions to the residency requirement will be considered on an individual basis by petition to the Texas Certification Board.

Fees for Certification

The following fee structure shall apply for all individuals who apply for certification as a CPS.

Application Fee	\$140.00
IC&RC Certificate Fee	\$10.00 (optional)

Requirements for Recertification

The CPS certification shall be issued for a period of two (2) years. The requirements for recertification shall be as follows:

- A. Submission of an application including a signed copy of the ethical standards for the CPS.
- B. Absent of any ethical or malpractice violations in this or any other certifications or licenses.
- C. Completion of forty (40) hours of continuing education across the prevention domains within the last two years.
- D. Recertification fee will be \$100.00 every two (2) years.

PROCEDURE FOR CODE OF ETHICS COMPLAINTS

TCBAP has a process established to provide an avenue through which persons can file complaints about the ethical conduct of a TCBAP CPS or an applicant to the certification system. This provides a procedure and a forum by which such a professional or applicant may make a good-faith dispute and respond to such complaints. This system is used to adjudicate complaints, which, have been found to be irresolvable through other means. Prior to employing the process, persons are encouraged to attempt to resolve the situation through other means, i.e., personally with the CPS professional or through the CPS professional's supervisor/employing agency. If this means fail or do not satisfactorily resolve the circumstances, the disciplinary review process may be the appropriate vehicle to address the complaint. Ethic complaints must be submitted in writing and mailed to TCBAP Headquarters at 401 Ranch Road 620 South, Suite 310, Austin, TX 78734.

**CERTIFIED PREVENTION SPECIALIST (CPS)
CERTIFICATION APPLICATION**

Name _____

Address _____

City/State/Zip _____

Work Phone _____ **Home Phone** _____

Email _____ **D.O.B.** _____

Social Security Number _____ **Gender** _____

Ethnic Origin African American American Indian
 Asian American Caucasian
 Hispanic Other _____

Health Care Licenses/State Certifications (Please list type and expiration date) _____

Have you ever undergone a disciplinary action for violation of any Code of Ethics?

YES _____ NO _____ (If YES, please attach letter of explanation)

Education

Associate's Degree (Type & Date Awarded) _____

Undergraduate Degree (Type & Date Awarded) _____

Graduate Degree (Type & Date Awarded) _____

Doctorate Degree (Type & Date Awarded) _____

Enclosures

- _____ Certification Application
- _____ Professional Work Experience Forms documenting at least 2,000 hours
- _____ Signed Code of Ethics
- _____ Documentation of ninety (90) Prevention specific education hours
- _____ Documentation of twenty-four (24) Alcohol and Drug specific education hours
- _____ Documentation of six (6) hours of prevention ethics (may be included in the 90 hours)
- _____ Documentation of one hundred twenty (120) hour Prevention Practicum
- _____ Copy of successful ICRC International Prevention Specialists Examination scores
- _____ International Certificate Application, optional (\$10.00 fee required)

CPS Fees

- _____ Certification Fee \$140.00
- _____ IC&RC Certificate Fee.....\$10.00 (optional)

Payment Information

_____ I have enclosed a check or money order payable to TCBAP
 _____ I authorize TCBAP to charge my credit card in the amount of \$ _____
 _____ Visa _____ Mastercard _____ American Express _____ Discover
 Card No. _____ Exp Date _____ Code _____
 Cardholder Name _____
 Cardholder Signature _____

I understand that my credit card billing statement will show charges from "TAAP".

ASSURANCES AND RELEASES

TCBAP may request further information from all persons listed on the application form, in order to verify training, employment, etc. This information is not available to others outside the certification process without the written consent of the applicant.

"I give my permission for the TCBAP and staff to investigate my background as it relates to information contained in this application for certification. I understand that intentionally false or misleading statements, or intentional omissions, shall result in denial or revocation of certification."

"I consent to the release of information contained in my application file, and other pertinent data submitted to, or collected by the TCBAP, to officers, members, and staff of the aforementioned board."

"I further agree to hold the TCBAP, its officers, board members, employees, and examiners free from civil liability for damages or complaints by reason of any action that is within the scope of the performance of their duties which they may take in connection with this application and subsequent examinations, and/or the failure of TCBAP to issue certification."

"I hereby affirm that the information provided on this form is correct and that I believe I am qualified for the certification for which I am applying."

____/____/____

Applicant Signature

Credentials

Date

CERTIFIED PREVENTION SPECIALIST (CPS)

CODE OF ETHICS

Prevention Think Tank Code of Ethical Conduct Preamble

TCBAP has adopted the Prevention Think Tank Code of Ethics for Certified Prevention Specialist, Certified Prevention Specialist Intern and Advanced Certified Prevention Specialist.

The principles of ethics are models of exemplary professional behavior. These principles of the Prevention Think Tank Code express prevention professionals' recognition of responsibilities to the public, to service recipients, and to colleagues within and outside of the prevention field. They guide prevention professionals in the performance of their professional responsibilities and express the basic tenets of ethical and professional conduct. The principles call for honorable behavior, even at the sacrifice of personal advantage. These principles should not be regarded as limitations or restrictions, but as goals toward which prevention professionals should constantly strive. They are guided by core values and competencies that have emerged with the development of the prevention field.

Principles

I. Non-Discrimination

Prevention professionals shall not discriminate against service recipients or colleagues based on race, ethnicity, religion, national origin, sex, age, sexual orientation, education level, economic or medical condition, or physical or mental ability. Prevention professionals should broaden their understanding and acceptance of cultural and individual differences and, in so doing, render services and provide information sensitive to those differences.

II. Competence

Prevention professionals shall master their prevention specialty's body of knowledge and skill competencies, strive continually to improve personal proficiency and quality of service delivery, and discharge professional responsibility to the best of their ability. Competence includes a synthesis of education and experience combined with an understanding of the cultures within which prevention application occurs. The maintenance of competence requires continual learning and professional improvement throughout one's career.

- a. Prevention professionals should be diligent in discharging responsibilities. Diligence imposes the responsibility to render services carefully and promptly, to be thorough, and to observe applicable standards.
- b. Due care requires prevention professionals to plan and supervise adequately, and to evaluate any professional activity for which they are responsible.
- c. Prevention professionals should recognize limitations and boundaries of their own competence and not use techniques or offer services outside those boundaries. Prevention professionals are responsible for assessing the adequacy of their own competence for the responsibility to be assumed.
- d. Prevention professionals should be supervised by competent senior prevention professionals. When this is not possible, prevention professionals should seek peer supervision or mentoring from other competent prevention professionals.
- e. When prevention professionals have knowledge of unethical conduct or practice on the part of another prevention professional, they have an ethical responsibility to report the conduct or practice to funding, regulatory or other appropriate bodies.
- f. Prevention professionals should recognize the effect of impairment on professional performance and should be willing to seek appropriate treatment.

III. Integrity

To maintain and broaden public confidence, prevention professionals should perform all responsibilities with the

highest sense of integrity. Personal gain and advantage should not subordinate service and the public trust. Integrity can accommodate the inadvertent error and the honest difference of opinion. It *cannot* accommodate deceit or subordination of principle.

- a. All information should be presented fairly and accurately. Prevention professionals should document and assign credit to all contributing sources used in published material or public statements.
- b. Prevention professionals should not misrepresent either directly or by implication professional qualifications or affiliations.
- c. Where there is evidence of impairment in a colleague or a service recipient, prevention professionals should be supportive of assistance or treatment.
- d. Prevention professionals should not be associated directly or indirectly with any service, product, individual, or organization in a way that is misleading.

IV. Nature of Services

Practices shall do no harm to service recipients. Services provided by prevention professionals shall be respectful and non-exploitive.

- a. Services should be provided in a way that preserves and supports the strengths and protective factors inherent in each culture and individual.
- b. Prevention professionals should use formal and informal structures to receive and incorporate input from service recipients in the development, implementation and evaluation of prevention services.
- c. Where there is suspicion of abuse of children or vulnerable adults, prevention professionals shall report the evidence to the appropriate agency.

V. Confidentiality

Confidential information acquired during service delivery shall be safeguarded from disclosure, including—but not limited to—verbal disclosure, unsecured maintenance of records or recording of an activity or presentation without appropriate releases. Prevention professionals are responsible for knowing and adhering to the State and Federal confidentiality regulations relevant to their prevention specialty.

VI. Ethical Obligations for Community and Society

According to their consciences, prevention professionals should be proactive on public policy and legislative issues. The public welfare and the individual’s right to services and personal wellness should guide the efforts of prevention professionals to educate the general public and policy makers. Prevention professionals should adopt a personal and professional stance that promotes health.

Adopted by the Texas Certification Board of Addiction Professionals

I have read and understand the Prevention Think Tank Code of Ethical Principles. I will, to the best of my ability, adhere to and honor this Code in my professional and personal dealings and agree to the authority of the Texas Certification Board of Addiction Professionals. In regards to my certification as a Prevention Specialist, I will surrender my certification, if necessary, for violation of any portion of the Code of Ethics.

I hereby certify that this Prevention Certification application and related material, to the best of my knowledge, are true and correct. I hereby release from liability TCBAP the organization, all representative Board members and agents of the Board from liability for their acts performed in good faith and without malice in connection with reviewing, evaluating, processing, and monitoring my application, my testing, my certification, and recertification.

Signature _____ **Date** _____

Printed Name _____

CERTIFIED PREVENTION SPECIALIST (CPS)
PROFESSIONAL WORK DOCUMENTATION/REFERENCE FORM

Complete one form for each Prevention Employment Reference

Employer.....

Address.....

City/State/Zip.....

TelephoneNumber.....

Title or Position.....

Supervisor (Title)

Period Worked (From/To).....

Total Years/Months Worked.....

Total number of hours per week as Preventionist or Consultant

Hours of School Prevention Activities _____

Hours of ATOD Prevention Activities _____

Hours of Personal Consultation _____

Hours of Community Prevention Relation _____

Other _____

TOTAL _____

What percentage of your agency/organization's work or clinical population's work is in:

_____% School & Community Activities: Primary____ Secondary____ High School ____ Higher Ed ____

_____% ATOD Prevention Activities

_____% Primary Prevention

_____% Secondary Prevention

_____% Other family focus functions: Description_____

CERTIFIED PREVENTION SPECIALIST (CPS)

Supervised Practicum Form—Documentation of Hours

Instructions for Completion: Supervisor’s should complete this form and are also required to keep time sheets/documentation verifying supervised practical experience for a minimum of five years after completion. A sample weekly time sheet can be found at www.tcbap.org. **Unless otherwise indicated, please type or print all information on this form.**

APPLICANT’S NAME: _____

CERTIFYING STATEMENT:

“I hereby certify that the above named individual has successfully completed the 120 hour Practicum experience, including at least ten (10) hours of experience in each of the six (6) Prevention Domains, as outlined at the bottom of this form. Weekly time sheets/documentation verifying supervised practical experience shall be kept on file for a minimum of five years after completion and I will provide time sheets/documentation to TCBAP should they be requested.”

NAME OF PRACTICUM SUPERVISOR: _____

TITLE: _____

AGENCY NAME: _____

AGENCY PHONE NUMBER: _____

PRACTICUM SUPERVISOR SIGNATURE: _____

PRACTICUM STUDENT’S SIGNATURE: _____

DATE COMPLETED: _____

Prevention Domain	Number of Hours of Experience in Domain	Skills Rating <i>Scale: Excellent, Good, Fair or Poor</i>	Supervisor Initials
I. Planning and Evaluation			
II. Education and Service Delivery			
III. Communication			
IV. Community Organization			
V. Public Policy and Environmental Change			
VI. Professional Growth and Responsibility			

Certified Prevention Specialist (CPS) Sample Supervised Practical Experience Documentation Form

This is a sample Supervised Practical Experience Documentation Form for the Certified Prevention Specialist (CPS) provided by TCBAP. Agencies may utilize another form of time sheet/documentation form but it should include at a minimum the information on this form. Applicants ARE NOT required to return this form to TCBAP with their application but practicum supervisors/agencies are required to keep this documentation on file for a at least five years from the date of completion.

For an excel version of this spreadsheet with formulas to help tabulate totals visit www.tcbap.org.

Student Name: _____

Domain	Week Beginning:				Week Ending:				Current Week Total	Last Week's Cumulative Total	New Cumulative Total
	Mon	Tues	Wed	Thurs	Fri	Sat	Sun				
Planning and Evaluation								0		0	
Education & Service Delivery								0		0	
Communication								0		0	
Community Organization								0		0	
Public Policy & Environmental Change								0		0	
Professional Growth & Responsibility								0		0	
DAILY TOTAL HOURS:	0	0	0	0	0	0	0	0		0	

STUDENT SIGNATURE: _____

SUPERVISOR SIGNATURE: _____

This is a sample provided by TCBAP.

Supervisors may utilize another time sheet/documentation but it must include hours in each domain and should be kept on file for at least five years after completion.

If you have any questions about any portion of this application, call the office for assistance at:
(512) 708-0629

Be sure to make a copy of this application and all materials sent with it for your permanent record and as back-up in case it should get lost or damaged in the mail.

Please note we cannot accept piece mail. Please be certain your portfolio is complete prior to submitting it to TCBAP. Incomplete portfolios will be returned.

Return completed application packet to:

**TCBAP
401 Ranch Road 620 South
Suite 310
Austin, TX 78734**