

ADAD, GENERAL INFORMATION & INSTRUCTIONS FOR APPLICANTS FOR CERTIFIED PREVENTION SPECIALIST

1. The credential of Certified Prevention Specialist (CPS) fulfills two purposes. First, and most important, the public has a means by which to identify individuals who have met the minimum requirements as set forth in Hawaii Administrative Rules 11-177.1. Second, individuals are recognized for the time, education, and experience they have accumulated in the profession of drug and alcohol prevention. Certification is meant to recognize a prevention specialist's accomplishments and competence in providing prevention interventions, and not as an entry-level credential.
2. Criteria for Certified Prevention Specialist (CPS):
 - High school diploma or its equivalent.
 - Live or work 51% of the time in Hawaii or be a member of the Armed Forces stationed in Hawaii or the Pacific region.
 - 120 hours of prevention specific education. Sixty hours of this education must be alcohol, tobacco, and other drug specific. Fifty-four hours must be prevention specific education, plus, six hours must be specific to **prevention ethics** (only).
 - 2000 hours of preceptor-supervised alcohol, tobacco and other drug prevention work experience.
 - Preceptor feedback on two examples of the applicant's work.
 - Included in the 2000 hours of work experience, 120 hours of preceptor supervision specific to the International Certification & Reciprocity Consortium (IC&RC) prevention domains with a minimum of 10 hours of preceptor supervision in each domain:
 - Planning and Evaluation
 - Prevention Education and Service Delivery
 - Communication
 - Community Organization
 - Public Policy and Environmental Change
 - Professional Growth and Responsibility
 - Agree to abide by the Certified Prevention Specialist Code of Ethics included in the General Application Packet and found in HAR 11-177.1, Subchapter 3.
 - Successful completion of the International Certification & Reciprocity Consortium (IC&RC) International Written Prevention Specialist Examination.
3. The following information must be received by ADAD before an applicant is eligible to apply for the IC&RC written computer-based examination:
 - A completed application for certification.
 - Documentation (official transcripts or copies of certificates of completion) of 120 hours of ADAD-approved prevention specific education, 60 hours of which must be alcohol or other drug education.
 - Documentation on the "Work Experience Verification Record" of 2000 hours of preceptor-supervised prevention work experience, including 120 hours of preceptor supervision in the 6 prevention domains, and feedback from a preceptor on two examples of the applicant's work.
 - A signed Code of Ethics statement agreeing to abide by the Prevention Code of Ethics.
4. All signatures must be originals. Faxed signatures will not be accepted. The originating preceptor must send the "Work Experience Verification Record" and the college or university send official transcripts. Preceptor forms or transcripts received from the applicant will not be accepted. The applicant may send copies of continuing education certificates of completion.

5. **All fees must be paid by certified check or money order only to "State Director of Finance." Personal checks will not be accepted.**
6. Deadlines will not be extended.
7. Fees: General Application: \$25.00
 IC&RC Computer-Based Exam: \$115.00
 CPS Renewal: \$25.00
8. Recertification: Submit application for renewal along with 40 hours of continuing education earned during the current two-year period of certification, including 6 hours in prevention ethics.
9. Refer to Chapter 11-177.1 HAR, entitled "Certification Standards for Substance Abuse Counselors, Program Administrators, Prevention Specialists, Clinical Supervisors, Criminal Justice Addictions Professionals, and Co-Occurring Disorders Professionals-Diplomate" for more specifics regarding certification criteria. These rules can be found at: <http://co.doh.hawaii.gov/sites/har/admrules/Rules/1/11-177.1.pdf>
10. Application materials may be found at: <http://health.hawaii.gov/substance-abuse/counselor-certification/>
11. Mail completed applications to:
 Alcohol & Drug Abuse Division (ADAD)
 Attn: Certification
 601 Kamokila Boulevard, Room 360
 Kapolei, Hawaii 96707

***IMPORTANT NOTE: You must complete and forward your application BEFORE you have completed your preceptor and/or education requirements. ADAD will establish a file and notify you whenever documents that substantiate your education and experience are received It is recommended you keep a folder of all completed trainings, so you know what you have completed and don't have duplicates and send them to ADAD all at once for review.**

Once ADAD receives the application information, a review of the applicant's file will be conducted, and a status email sent to the applicant. Only those applicants who have completed and documented the required education requirement and preceptor supervision will be eligible to register for the IC&RC examination. When the applicant qualifies for the CPS examination by virtue of documenting the education and preceptor supervision requirements, an examination application packet will be sent with instructions to submit the application. If the applicant does not pass the examination, the applicant will have the opportunity to apply to re-take the test and pay the examination fee.

If the applicant passes the written examination, a certificate of certification will be issued, signed by the Director of Health.

For questions regarding the certification process, please contact the Certification Office at 808-692-7518.

APPLICATION
CERTIFIED PREVENTION SPECIALIST
(Please type or print in ink.)

1. Name: _____ (Previous Name(s): _____)
(Legal Name)

2. Gender: Male; Female 3. Date of Birth: _____

4. Home Address: _____
Street/P.O. Box

City/State/Zip Code

5. Home Phone: _____ Cell Phone: _____
Area Code & Number for Each

6. Email: _____

7. Social Security Number: _____

8. What language(s) are you fluent in other than English? _____

9. What is your ethnicity? (Optional -- research purposes only)

- | | |
|---------------------------|-------------------------------|
| _____ (1) Alaskan Native | _____ (14) Micronesian |
| _____ (2) American Indian | _____ (15) Samoan |
| _____ (3) Cambodian | _____ (16) Tongan |
| _____ (4) Chinese | _____ (17) Other Pacific Isle |
| _____ (5) Filipino | _____ (18) African American |
| _____ (6) Japanese | _____ (19) Caucasian |
| _____ (7) Korean | _____ (20) Portuguese |
| _____ (8) Laotian | _____ (21) Cuban |
| _____ (9) Okinawan | _____ (22) Mexican |
| _____ (10) Other Asian | _____ (23) Puerto Rican |
| _____ (11) Fijian | _____ (24) Other Hispanic |
| _____ (12) Hawaiian | _____ (25) Mixed |
| _____ (13) Part Hawaiian | _____ (26) Other Specify |

FOR OFFICIAL USE ONLY

Fee Amount: _____ Transcripts: _____

Date Received: _____ Preceptor Forms: _____

Code of Ethics: _____

DATABASE: _____ Background Check: _____

I have a high school diploma?

Any applicable higher education attendance and in what area of study?

I have requested that official transcripts be sent to ADAD: YES NO

PREVENTION SPECIFIC EDUCATION (A total of at least 120 hours documented on official transcripts or certificates of completion)

SUBSTANCE ABUSE PREVENTION WORK HISTORY

Work history must be verified through the Work Experience Verification Record.

NOTE: You may send your resume in lieu of this work history.

Start with your most recent prevention employment. If none, write “none” under employer. You must provide sufficient information to clearly document preceptor-supervised alcohol and other drug prevention experience. You may attach job descriptions or other relevant materials to provide further clarification. **INFORMATION WHICH CANNOT BE VERIFIED WILL NOT BE ACCEPTED.**

Indicate your employment status for each position as full-time (40 hours or more per week); part-time (less than 40 hours per week); Intern (position within a structured training program); or volunteer (unpaid position). **IF YOU ARE WORKING AS A VOLUNTEER, YOU MUST ATTACH A JOB DESCRIPTION FROM YOUR EMPLOYER.**

Note: This form may be reproduced, as needed, to complete your work history

EMPLOYER:	DATES OF EMPLOYMENT: FROM: TO:
EMPLOYER'S ADDRESS:	AVERAGE NUMBER OF HOURS WORKED PER WEEK:
PRECEPTOR/SUPERVISOR'S NAME:	PRECEPTOR/SUPERVISOR'S PHONE NUMBER:
EMPLOYMENT STATUS, DUTIES & RESPONSIBILITIES: EMPLOYER:	PERCENT OF YOUR TIME SPENT IN PROVIDING SUBSTANCE ABUSE PREVENTION SERVICES:
EMPLOYER:	DATES OF EMPLOYMENT: FROM: TO:
EMPLOYER'S ADDRESS:	AVERAGE NUMBER OF HOURS WORKED PER WEEK:
PRECEPTOR/SUPERVISOR'S NAME:	PRECEPTOR/SUPERVISOR'S PHONE NUMBER:
EMPLOYMENT STATUS, DUTIES & RESPONSIBILITIES: EMPLOYER:	PERCENT OF YOUR TIME SPENT IN PROVIDING SUBSTANCE ABUSE PREVENTION SERVICES:

If you have been the subject of a finding of unethical, unprofessional, or illegal conduct made as part of a final decision by a regulatory body (e.g. certification or licensing board) or by a court (civil or criminal)? (Note: Mandatory background checks **are conducted** and falsifying any information may result in your application being declined!)

YES

No

(If yes, you must attach an explanation and copies of official court documents showing all charges have been adjudicated and you are not on probation or parole.)

"I hereby certify that all of the information given herein and on any attachment is true and complete to the best of my knowledge. I also authorize any necessary investigations and the release of personal information to the Alcohol and Drug Abuse Division. I understand that falsification of any portion of this application or attachments may result in the revocation of this application.

I further agree to hold the Department of Health, Alcohol and Drug Abuse Division agents, staff and examiners free from any civil liability for damages or complaints about any action within the scope and arising out of the performance of their duties and which is taken in connection with this application, the examinations, grades received on examinations, and/or the failure of the Division to issue me a certificate."

Applicant's Name (PRINT IN INK)

Applicant's Signature (SIGN IN INK)

Date

**** You must sign the "Code of Ethics Statement" which is included in this packet. Unsigned or incomplete applications will not be processed.**

RECORD STORAGE

The Alcohol and Drug Abuse Division maintains records on all applicants for Certified Prevention Specialist. Inactive records are archived for three (3) years from date of last correspondence and may be destroyed after three (5) years from the date of last correspondence. Therefore, it is important to keep ADAD informed of any address or email change.

Please mail your completed application to:
Certification Department
Alcohol and Drug Abuse Division
601 Kamokila Boulevard, Room 360
Kapolei, HI 96707

*Remember to include your \$25 certified check or money order Payable to:
"State Director of Finance"*

Please mail your application, payment, and signed code of ethics statement BEFORE you include any certificates of completed trainings or send for any transcripts so that we can first open a file for you in our office. Mahalo!

Certified Prevention Specialist Code of Ethics

Keep this for your record

(Adapted from the International Certification & Reciprocity Consortium)

PREAMBLE

The Principles of Ethics are a model of standards of exemplary professional conduct. These Principles of the Code of Ethical Conduct for Prevention Professionals express the professional's recognition of his or her responsibilities to the public, to service recipients, and to colleagues. They guide members in the performance of their professional responsibilities and express the basic tenets of ethical and professional conduct. The Principles call for commitment to 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 field.

PRINCIPLE 1: Non-Discrimination

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

PRINCIPLE 2: Competence

Prevention Specialists shall observe the profession's technical and ethical standards, strive continually to improve personal competence and quality of service delivery, and discharge professional responsibility to the best of his/her ability. Competence is derived from a synthesis of education and experience. It begins with the mastery of a body of knowledge and skill competencies. The maintenance of competence requires a commitment to learning and professional improvement that must continue throughout the professional's life.

a. Prevention Specialists should be diligent in discharging responsibilities.

Diligence imposes the responsibility to render services carefully and promptly, to be thorough, and to observe applicable technical and ethical standards.

b. Due care requires a Prevention Specialist to plan and supervise adequately and evaluate, to the extent possible, any professional activity for which she/he is responsible.

c. A Prevention Specialist should recognize limitations and boundaries of competencies and not use techniques or offer services outside of his/her competencies.

Each professional is responsible for assessing the adequacy of her/his own competence for the responsibility to be assumed.

d. Ideally, Certified Prevention Specialists should supervise Prevention Specialists. When this is not available, Prevention Specialists should seek peer supervision or mentoring from other competent prevention professionals.

e. When a Prevention Specialist has knowledge of unethical conduct or practice on the part of an agency or Prevention Specialist, he/she has an ethical responsibility to report the conduct or practices to appropriate funding or regulatory bodies or to the public.

f. A Prevention Specialist should recognize the effect of impairment on professional performance and should be willing to seek appropriate treatment for her/himself.

g. Ideally, Certified Prevention Specialists should supervise Prevention Specialists. When this is not available, Prevention Specialists should seek peer supervision or mentoring from other competent prevention professionals.

h. When a Prevention Specialist has knowledge of unethical conduct or practice on the part of an agency or Prevention Specialist, he/she has an ethical responsibility to report the conduct or practices to appropriate funding or regulatory bodies or to the public.

i. A Prevention Specialist should recognize the effect of impairment on professional performance and should be willing to seek appropriate treatment for her/himself.

PRINCIPLE 3: Integrity

To maintain and broaden public confidence, Prevention Specialists 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. Each Prevention Specialist should document and assign credit to all contributing sources used in published material or public statements.

b. Prevention Specialists 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, a Prevention Specialist should be supportive of assistance or treatment.

d. A Prevention Specialist should not be associated directly or indirectly with any service, products, individuals, and organization in a way that is misleading.

PRINCIPLE 4: Nature of Services

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

a. Services should be provided in a way which preserves the protective factors inherent in each culture and individual.

b. Prevention Specialists 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, the Prevention Specialist shall report the evidence to the appropriate agency and follow up to ensure that appropriate action has been taken.

PRINCIPLE 5: 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 the confidentiality regulations relevant to their prevention specialty.

PRINCIPLE 6: Ethical Obligations for Community and Society

According to their consciences, Prevention Specialists 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 Specialists to educate the general public and policy makers. Prevention Specialists should adopt a personal and professional stance that promotes health.

PLEASE READ THE "CERTIFIED PREVENTION SPECIALIST CODE OF ETHICS," AND COMPLETE THIS "CODE OF ETHICS STATEMENT" AND RETURN IT TO ADAD WITH YOUR GENERAL APPLICATION

CODE OF ETHICS STATEMENT

I HAVE RECEIVED A COPY OF, READ, AND AGREE TO ABIDE BY THE CERTIFIED PREVENTION SPECIALIST (CPS) CODE OF ETHICS (REFERENCE: HAR 11-177.1, SUBCHAPTER 3)

PRINT NAME

SIGNATURE

DATE

IC&RC Prevention Performance Domains and Job Task

Please Keep this for your record

Domain I - Planning and Evaluation

1. Determine the level of community readiness for change.
2. Identify appropriate methods to gather relevant data for prevention planning.
3. Identify existing resources available to address the community needs.
4. Identify gaps in resources based on the assessment of community conditions.
5. Identify the target audience.
6. Identify factors that place persons in the target audience at greater risk for the identified problem.
7. Identify factors that provide protection or resilience for the target audience.
8. Determine priorities based on comprehensive community assessment.
9. Develop a prevention plan based on research and theory that addresses community needs and desired outcomes.
10. Select prevention strategies, programs, and best practices to meet the identified needs of the community.
11. Implement a strategic planning process that results in the development and implementation of a quality strategic plan.
12. Identify appropriate prevention program evaluation strategies.
13. Administer surveys /pre /post tests at work plan activities.
14. Conduct evaluation activities to document program fidelity.
15. Collect evaluation documentation for process and outcome measures.
16. Evaluate activities and identify opportunities to improve outcomes.
17. Utilize evaluation to enhance sustainability of prevention activities.

18. Provide applicable workgroups with prevention information and other support to meet prevention outcomes
19. Incorporate cultural responsiveness into all planning and evaluation activities.
20. Prepare and maintain reports, records, and documents pertaining to funding sources.

Domain II - Prevention Education and Service Delivery

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

Domain III: Communication

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

Domain IV: Community Organization

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

Domain V: Public Policy and Environmental Change

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

Domain VI: Professional Growth and Responsibility

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