

# Texas Certification Board of Addiction Professionals

1005 Congress Ave. Suite 460

Austin, TX 78701

Tel: (512) 708-0629 \* Fax: (512) 476-7297 \* Email: TCBAP@tcbap.org

## CCS Renewal Application

### APPLICANT INFORMATION

First Name	Middle Name	Last Name	Suffix	Social Security No.	Date of Birth
Mailing Address - Line 1		Mailing Address - Line 2	City	State	Zip Code
Office Telephone	Ext	Home Telephone	Fax	Email	Current Employer
Current Credentials	Counseling Lic No.	Expires	Highest Degree Earned	Ethnicity	Gender

### CERTIFICATION INFORMATION

Certification No.	Issued	Expires	Currently Inactive? <input type="checkbox"/>	Inactive Status Expires
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Are you currently under investigation for any type of disciplinary action? YES NO

Have you been subject to any disciplinary action since your last certification renewal? YES NO

If you answered YES to either question, please attach a letter of explanation.

**Certification Renewal Fee (Not including applicable late fees): \$100.00**

*If you would like a certificate from the ICRC showing that you hold a credential that is internationally reciprocal, please complete the International Certificate Application form at the end of this renewal packet. This certificate is available for the ADC, AAC, CPS, CCJP and CCS and will be mailed to you directly from ICRC after you receive your Texas certificate. There is no additional fee for the ICRC certificate.*

*I understand that certification is contingent upon my meeting the requirements and criteria established by the Board. I understand that intentionally misleading statements on this application may result in denial of my certification application or revocation of my certification. Data from my application may be used for statistical purposes. The application fees and portfolio become the property of the Texas Certification Board of Addiction Professionals. All fees are non-refundable.*

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Payment may be made by check, money order, purchase order or credit card. Mail your payment to TCBAP, 1005 Congress Ave., Suite 460, Austin, Texas 78701. In order to ensure prompt renewal of your credential, please remit payment at least fifteen (15) days prior to expiration date.

Amount Enclosed: \_\_\_\_\_ Payment Type: \_\_\_ Check \_\_\_ Money Order \_\_\_ Purchase Order \_\_\_ Credit Card

Credit Card Information: \_\_\_ AMEX \_\_\_ DISC \_\_\_ VISA \_\_\_ MC Account # \_\_\_\_\_ Exp. \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

*I authorize TCBAP to charge my credit card. I understand that my credit card statement will show charges from TAAP.*

**Please be advised that renewal of your credential is contingent upon payment of the required renewal fee. If your payment fails to fund, your credential is subject to revocation of its renewed status.**

# **CERTIFIED CLINICAL SUPERVISOR (CCS) RECERTIFICATION INFORMATION**

## **REQUIREMENTS FOR RECERTIFICATION**

The CCS certification shall be issued for a period of two (2) years, therefore requiring an individual to recertify every two (2) years on that same date. The requirements for recertification shall be as follows:

1. Currently active as a supervisor and licensed in the field addiction counseling.
2. Current certification as an ADC I, II, III , AAC or CCJP.
3. Absent of any ethical or malpractice violations.
4. Completion of forty (40) hours of AODA continuing education. Documentation of current ADC, AAC, or CCJP certification shall serve as verification of this requirement. However, six (6) of the forty (40) hours must be specific to clinical supervision. Certificates of completion must be attached to the recertification application to document this requirement.
5. Submission of an application, including a signed copy of the ethical standards for Clinical Supervisors.
6. The fee for recertification shall be \$100.00. There is a 6 month grace period for renewal of certifications. If you are renewing more than 6 months after your expiration date, there is a \$50 penalty fee in addition to the recertification fee. If you are renewing more than 12 months after your expiration date, there is a \$100 reinstatement fee in addition to the \$50 penalty fee and the recertification fee.

## **REGARDING THE ICCCS**

As a reciprocity eligible addiction counselor you are eligible to receive the ICCCS. This designation is issued by the ICRC and carries the same certification and renewal dates as your CCS. There is no fee for this certification and the form is at the back of this application.

## **SUBMISSION CHECKLIST**

Please submit the following items to recertify your credential:

- \_\_\_\_\_ Completed recertification application form
- \_\_\_\_\_ Signed Code of Ethics
- \_\_\_\_\_ Documentation of current counseling license (LCDC, LPC, LMSW-ACP, LMFT, etc.)
- \_\_\_\_\_ Documentation of current ADC, AAC, or CCJP
- \_\_\_\_\_ 6 continuing education hours pertaining to clinical supervision
- \_\_\_\_\_ Recertification fee(s)
- \_\_\_\_\_ International Certificate Application

**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  
1005 Congress Avenue, Ste. 460  
Austin, TX 78701**

## CODE OF ETHICS

The Texas Certification Board of Addiction Professionals and the Texas Association of Addiction Professionals is comprised of professional alcoholism and drug abuse counselors and clinical supervisors who, as responsible health professionals, believe in the dignity and worth of human beings. In the practice of their profession they assert the ethical principles of autonomy, beneficence and justice must guide their professional and societal expectations, obligations and conduct. As professionals dedicated to the treatment of chemical dependency clients and their families, they believe that they can effectively treat its individual and familial manifestations. Clinical supervisors dedicate themselves to promote the best interests of their society, of their clients, of their profession and of their colleagues.

### **Specific Principles**

#### **Principle 1. Non-discrimination**

The clinical supervisor must not discriminate against clients or professionals based on race, religion, age, sex, handicaps, national origin, sexual orientation or economic condition.

#### **Principle 2. Responsibility**

The clinical supervisor must espouse objectivity and integrity, and maintain the highest standards in the services the clinical supervisor offers.

- a. The clinical supervisor, as teacher, must recognize the counselor's primary obligation to help others acquire knowledge and skill in dealing with the disease of chemical dependency.
- b. The clinical supervisor, as practitioner, must accept the professional challenge and responsibility deriving from the supervisor's work.

#### **Principle 3. Competence**

The clinical supervisor must recognize that the profession is founded on national standards of competency which promote the best interests of society, of the client, of the counselor and of the profession as a whole. The supervisor must recognize the need for ongoing education as a component of professional competency.

- a. The clinical supervisor must prevent the practice of chemical dependency counseling by unqualified and/or authorized persons.
- b. The clinical supervisor who is aware of unethical conduct or of unprofessional modes of practice must report such violations to the appropriate certifying authority.
- c. The clinical supervisor must recognize boundaries and limitations of a supervisor's competencies and not offer services or use techniques outside of these professional competencies.
- d. The clinical supervisor must be willing to seek appropriate treatment for oneself or for a colleague. The supervisor must support peer assistance programs in this respect.

#### **Principle 4. Legal Standards and Moral Standards**

The clinical supervisor must uphold the legal and accepted moral codes which pertain to professional conduct, legal and accepted moral codes of our society.

- a. The clinical supervisor must not claim either directly or by implication, professional qualifications/affiliations that the supervisor does not possess.
- b. The clinical supervisor must not use the affiliation with the Texas Certification Board of Addiction Professionals and/or the Texas Association of Addiction Professionals for purposes that are not consistent with the stated purposes of the association.
- c. The clinical supervisor must not associate with or permit the supervisor's name to be used in connection with any services or products in a way that is incorrect or misleading.
- d. The clinical supervisor associated with the development or promotion of books or other products offered for commercial sale must be responsible for ensuring that such books or products are presented in a professional and factual way.
- e. The clinical supervisor must obey civil and criminal laws, and commit no act involving moral turpitude of which would bring discredit to the profession.

#### **Principle 5. Public Statements**

The clinical supervisor must respect the limits of present knowledge in public statements concerning chemical dependency.

- a. The clinical supervisor who represents the field of chemical dependency counseling to clients, other professionals, or to the general public must report fairly and accurately the appropriate information.
- b. The clinical supervisor must acknowledge and document materials and techniques used.
- c. The clinical supervisor who conducts training in chemical dependency counseling skills or techniques must indicate to the audience the requisite training/qualification required to properly perform those skills and techniques.

#### **Principle 6. Publication Credit**

The clinical supervisor must assign credit to all who have contributed to the published material and for the work upon which the publication is based.

- a. The clinical supervisor must recognize joint authorship, major contributions of professional character made by several persons to a common project. The author who has made the principle contribution to a publication must be identified as a first listed.
- b. The clinical supervisor must acknowledge in footnotes or an introductory statement minor contributions of a professional character, extensive clerical or similar assistance and other minor contributions.
- c. The clinical supervisor must acknowledge, through specific citations, unpublished, as well as published, materials that have directly influenced the research or writing.
- d. The clinical supervisor who compiles and edits for publication the contributions of others must list oneself as editor, along with the names of those others who have contributed.

### **Principle 7. Client Welfare**

The clinical supervisor must respect the integrity and protect the welfare of the person or group with whom the supervisor is working.

- a. The clinical supervisor must define for self and others the nature and direction of loyalties and responsibilities and keep all parties concerned informed of these commitments.
- b. The clinical supervisor, in the presence of professional conflict, must be concerned primarily with the welfare of the client.
- c. The clinical supervisor must terminate a counseling or consulting relationship when it is reasonably clear to the supervisor that the client is not benefiting from it.
- d. The clinical supervisor, in referral cases, must assume the responsibility for the client's welfare either by mutual agreement and/or by the client becoming engaged with another professional. In situations when a client refuses treatment, referral or recommendations, the clinical supervisor must carefully consider the welfare of the client by weighing the benefits of continued treatment or termination and must act in the best interest of the client.
- e. The clinical supervisor who asks a client to reveal personal information from other professionals or allows information to be divulged must inform the client of the nature of such transaction. The information released or obtained with informed consent must be used for expressed purposes only.
- f. The clinical supervisor must not use a client in a demonstration role in a workshop setting where such participation would potentially harm the client.
- g. The clinical supervisor must ensure the presence of an appropriate setting for clinical work to protect the client from harm, and the counselor and the profession from censure.
- h. The clinical supervisor must collaborate with other health professionals in providing a supportive environment for the client who is receiving prescribed medications.

### **Principle 8. Confidentiality**

The clinical supervisor must embrace, as primary obligation, the duty of protecting the privacy of clients and must not disclose confidential information acquired in teaching, practice or investigation.

- a. The clinical supervisor must inform the client and obtain agreement in areas likely to affect the client's participation including the recording of an interview, the use of interview material for training purposes and the observation of an interview by another person.
- b. The clinical supervisor must make provisions for the maintenance of confidentiality and the ultimate disposition of confidential records.
- c. The clinical supervisor must reveal information received in confidence only when there is a clear and imminent danger to the client or to other persons, and then only to appropriate professional workers or public authorities.
- d. The clinical supervisor must discuss the information obtained in clinical or consulting relationships only in appropriate settings, and only for professional purposes clearly concerned with the case. Written and oral reports must present only data germane to the purpose of the evaluation and every effort must be made to avoid invasion of privacy,
- e. The clinical supervisor must use clinical and other material in classroom teaching and writing only when the identity of the persons involved is adequately disguised.

### **Principle 9. Client Relationships**

The clinical supervisor must inform the prospective client of the important aspects of a potential relationship.

- a. The clinical supervisor must inform the client and obtain the client's agreement in areas likely to affect the client's participation including the recording of an interview, the use of the interview material for training purposes and/or observation of an interview by another counselor.
- b. The clinical supervisor must inform the designated guardian or responsible person of circumstances which may influence the relationship, when the client is a minor or incompetent.
- c. The clinical supervisor must not enter into a professional relationship with members of one's own family, intimate friends or close associates, or others whose welfare might be jeopardized by such a dual relationship.
- d. The clinical supervisor must not engage in any type of sexual activity with a client.

### **Principle 10. Responsibility to Students, Employees, and Supervisors**

The clinical supervisor must not exploit the trust and dependency of students, employees, and supervisors.

- a. The clinical supervisor are aware of their influential position with respect to students, employees, and supervises, and they must avoid exploiting the trust and dependency of such persons. Clinical supervisors, therefore make every effort to avoid dual relationships that could impair professional judgment or increase the risk of exploitation. When a dual relationship cannot be avoided, clinical supervisors take appropriate professional precautions to ensure judgment is not impaired and no exploitation occurs. Examples of such dual relationships include, but are not limited to, business or close personal relationships with students, employees, or supervisors. Provision of counseling to students, employees, or supervisors s prohibited.
- b. The clinical supervisor must not engage in sexual intimacy with students or supervisors.
- c. The clinical supervisor must not permit students, employees, supervisors o perform or to hold themselves out as competent to perform professional services beyond their training, level of experience, and competence.
- d. The clinical supervisor must not disclose a supervisors confidences except:
  1. as mandated by law;
  2. 2. to prevent clear and immediate danger to a person or persons;

3. where the clinical supervisor is a defendant in a civil, criminal, or disciplinary action arising from the supervision (in which case supervisors confidences may be disclosed only in the course of that action);

4. in educational or training settings where they are multiple supervisors, and then only to other professional colleagues who share responsibility for the training of the supervisors; or

5. if there is a waiver previously obtained in writing, and then such information may be revealed only in accordance with the terms of the waiver.

**Principle 11. Interprofessional Relationships**

The clinical supervisor must treat colleagues with respect, courtesy and fairness, and must afford the same professional courtesy to other professionals.

a. The clinical supervisor must not offer professional services to a client in counseling with another professional except with the knowledge of the other professional or after the termination of the client's relationship with the other professionals.

b. The clinical supervisor must cooperate with duly constituted professional ethics committees and promptly supply necessary information unless constrained by the demands of confidentiality.

**Principle 12. Remuneration**

The clinical supervisor must establish financial arrangements in professional practice and in accord with the professional standards that safeguard the best interests of the client, of the counselor, and of the profession.

a. The clinical supervisor must consider carefully the ability of the client to meet the financial cost in establishing rates for professional services.

b. The clinical supervisor must not send or receive any commission or rebate or any other form of remuneration for referral of clients for professional services. The counselor must not engage in fee splitting.

c. The clinical supervisor in clinical or counseling practice must not use one's relationship with clients to promote personal gains or the profit of an agency or commercial enterprise of any kind.

d. The clinical supervisor must not accept a private fee or any gift or gratuity for professional work with a person who is entitled to such services through an institution or agency. The policy of a particular agency may make explicit provisions for private work with its clients by members of its staff, and in such instances the client must be fully apprised of all policies affecting the client.

**Principle 13. Societal Obligations**

The clinical supervisor must advocate changes in public and legislation to afford opportunity and choice for all persons whose lives are impaired by the disease of chemical dependency. The supervisor must inform the public through active civic and professional participation in community affairs of the effects of chemical dependency and must act to guarantee that all persons especially the needy and disadvantaged, have access to the necessary resources and services. The clinical supervisor must adopt a personal and professional stance which promotes the well-being of all human beings.

**I have read, understand and commit to the preceding Ethical Standards.**

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

