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**THE RHODE ISLAND BOARD
FOR THE
CERTIFICATION OF
CHEMICAL DEPENDENCY
PROFESSIONALS**



**APPLICATION FOR CONTINUING EDUCATION
UNIT APPROVAL**

**31 Smith Ave - 3 Rear
Greenville, RI 02828**

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**RHODE ISLAND BOARD FOR THE CERTIFICATION OF
CHEMICAL DEPENDENCY PROFESSIONALS**

Continuing Education Endorsement Policy and Procedure

The RIBCCDP is responsible to evaluate and endorse continuing education offerings presented in Rhode Island for chemical dependency professionals, student assistance counselors, and prevention professionals. Training events endorsed by the RIBCCDP will be accepted as quality continuing educational activities. Participants of those endorsed offerings will be able to use the clock hours for certification or recertification of those various professional groups.

Communications for the application process should be directed to:

R.I.B.C.C.D.P.
31 Smith Avenue - 3 Rear
Greenville, RI 02828
Attention : Johanna Rylands

All trainings sponsored by RIBCCDP, DSA, DATA and RIAADAC are accepted, without submission, for approval.

Continuing education offerings which have been sponsored by the National Association of Alcoholism and Drug Abuse Counselors (NAADAC) will be accepted without submission for approval.

Deadlines for Applications

Applications for approval should be submitted at least sixty (60) days in advance of the offering to allow for prior approval of RIBCCDP. Applications postmarked later than sixty (60) days prior to the training event will not be processed.

It will take up to forty-five (45) days to process applications.

On-Site Evaluations

The endorsement process requires that the sponsoring organization/individual allow a member of the RIBCCDP to attend the educational offering for evaluation purposes. The decision to have an on-site evaluation will be based on the need to:

- 1) Validate the content areas, methods, etc, stated in the application.
- 2) Establish a base of reference for quality training events.

Post-Training Requirement

- 1) A list of names and addresses of participants who complete the training

Endorsement Fees

The application fee is a sliding scale with fees based on the student/participant fee. Offerings which are free or charge participants five dollars (\$5.00) or less will cost five dollars, the minimum charge. Offerings charging between six (\$6.00) and fifty (\$50.00) dollars will have an application fee equal to the cost of one participant. Participant costs of more than fifty dollars (\$50.00) will pay only that maximum fee for endorsement. Money generated from these fees will be used to cover postage, direct expenses, and educational events.

ONLY APPLICATIONS WHICH ARE ACCOMPANIED BY THE APPROPRIATE FEE WILL BE REVIEWED.

Accountability

The RIBCCDP will require that the receiving organization be accountable as to what they did with the money. Any monies not used for educational purposes must be returned to the RIBCCDP

Repeated Offerings

Educational offerings, which have been endorsed by the RIBCCDP are valid for as long as there are no substantial changes in content. A letter of intent must be submitted prior to repeat offerings. A resubmission is required when making significant changes in original offerings.

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The following items are to be included in the application package:

- 1) A completed Application Form,
- 2) An application fee in the form of a check or money order, payable to the RIBCCDP (See fee schedule).
- 3) A completed Skill Development Assessment.
- 4) Stated purpose of the training as it relates to the particular professional certification.
- 5) A statement of skill levels and of experience expected of participants if this training event is specific in its target population.
- 6) Objectives of the continuing education training stated in behavioral, measurable terms, reflecting an adult education approach.
- 7) Outline of content of the training. Indications of sequential learning. Time allotment for each facet of the outline.
- 8) A statement of instructional methodologies used. Include description of participant activities, audiovisual materials, ratio of trainers to students, copies of instructional material handouts, etc.
- 9) Curriculum vitae of instructional staff including content area expertise and adult education experience.
- 10) Bibliography of resource for specified content area(s).
- 11) A copy of the evaluation tool that will be used to assess the effectiveness of the training event. Subsequent to the training a copy of the roster of attendees successfully completing shall be sent to the RIBCCDP within thirty (30) days of the training. (Sponsor of event must forward a list of participants and addresses.)

Please be sure that all eleven (11) items are included in the application.

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Attached are three (3) different Skill Development Assessment forms for the various certification processes: Chemical Dependency Professionals, Student Assistance Counselor, and Prevention Professional.

These forms detail specific skills pertinent to each of the RIBCCDP's certification processes.

Please indicate how many clock hours (60 minutes) of this educational offering will focus on developing competency in these areas.

If training targets skills in more than one area, approximate the number of hours for each.

The total for all items should equal the number of clock hours of the training event. Clock hours indicated in this targeted skills area must be clearly supported in the goals and objectives statement of this application.

The definitive assignment of the skills area will ultimately be determined by the RIBCCDP. You are responsible for distributing the RIBCCDP's approved targeted skills area assignments to the training participants.

WORKSHOP TITLE: _____

CHEMICAL DEPENDENCY PROFESSIONAL

SKILL DEVELOPMENT AREAS

- 1) Client intake process _____
- 2) Initial and on-going evaluation _____
- 3) Client orientation to and motivation for treatment _____
- 4) Establishing treatment goals and plan with client _____
- 5) Consulting with other professionals and/or making appropriate referrals _____
- 6) Alcohol/Drug information _____
- 7) Individual counseling _____
- 8) Methods of group counseling _____
- 9) Counseling family and significant others _____
- 10) Coordinating multiple treatment activities for clients _____
- 11) Writing reports and maintaining records _____
- 12) Utilization of client support system _____
- 13) Aftercare, referral and follow-up _____
- 14) Crisis intervention and emergency situations _____
- 15) Other (specifically define the competency that this training will provide for Chemical Dependency Professionals) _____

Total Number of Clock Hours _____

Sponsor: _____ Date: _____

WORKSHOP TITLE: _____

STUDENT ASSISTANCE COUNSELOR
SKILL DEVELOPMENT AREAS

- 1) Individual Assessment _____
- 2) Clinical Intervention Skills _____
- 3) Establishing clinical goals and plan with clients _____
- 4) Short term individual, family, and group work _____
- 5) Referral Skills _____
- 6) Case Management Skills _____
- 7) School based training _____
- 8) Prevention programming _____
- 9) Resource development _____
- 10) Networking _____
- 11) Record keeping/monitoring _____
- 12) Social policy impact _____
- 13) Program planning _____
- 14) Program delivery _____
- 15) Program evaluation _____
- 16) Alcohol/other drug information _____
- 17) Working with special populations/cultural diversity/children of substance abusers _____
- 18) Relapse Prevention _____
- 19) HIV/AIDS _____
- 20) Ethics _____
- 21) Confidentiality _____
- 22) Working effectively with schools and community _____
- 23) Other: (specifically define the competency that this training will provide for student assistance counselors)
 - a. _____
 - b. _____
 - c. _____

Total Number of Clock Hours: _____

SPONSOR: _____

DATE: _____

WORKSHOP TITLE: _____

**PREVENTION PROFESSIONAL
SKILL DEVELOPMENT AREAS**

- 1) Community needs assessment _____
- 2) Program design _____
- 3) Curriculum development _____
- 4) Program delivery _____
- 5) Community organizing _____
- 6) Networking _____
- 7) Record keeping/monitoring _____
- 8) Social policy impact _____
- 9) Program evaluation _____
- 10) Resource development/Community resources _____
- 11) Early identification and referral _____
- 12) Alcohol/other drug information _____
- 13) Working with at risk, special, culturally diverse
populations _____
- 14) HIV/AIDS _____
- 15) Ethics _____
- 16) Confidentiality _____
- 17) Program planning _____
- 18) Individual Assessment _____
(i.e., risk factors, developmental)
- 19) Other: (specifically define the competency that this
training will provide for prevention professionals)
 - a. _____
 - b. _____
 - c. _____
- Total Number of Clock Hours: _____

SPONSOR: _____

DATE: _____

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SOURCE E – RESEARCH PAPER/PROFESSIONAL PUBLICATION

This source of educational credit makes available to experienced, credentialed counselors in the field of substance abuse treatment, a very individualized form of education, recognizing the advanced status of those clinicians. The purpose is to allow for creative and innovative learning events for experienced counselors thus promoting continued professional growth. These Independent Study Activities must be approved in advance by the RIBCCDP in order to be accepted as recertification credits in Rhode Island.

GUIDELINES

- 1) Must be pre-approved by the RIBCCDP a minimum of two (2) months in advance.
- 2) Approval is limited to a one (1) year basis, unless an exception is granted by the RIBCCDP.
- 3) Approval is only given to addiction/substance abuse research papers.
- 4) Credits from this source may be used in Rhode Island only for recertification.
- 5) There is a maximal limit of 30 clock hours for two year recertifications, from this particular educational source.
- 6) Flat review fee of \$20.00 for each research paper/professional publication.

REVIEW FEE MUST ACCOMPANY PACKET AND IS NON-REFUNDABLE.

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SOURCE C – INDEPENDENT STUDY

This source of educational credit makes available to experienced, credentialed counselors in the field of substance abuse treatment, a very individualized form of education, recognizing the advanced status of those clinicians. The purpose is to allow for creative and innovative learning events for experienced counselors thus promoting continued professional growth. These Independent Study Activities must be approved in advance by the RIBCCDP in order to be accepted as recertification credits in Rhode Island.

GUIDELINES

- 1) Must be pre-approved by the RIBCCDP a minimum of two (2) months in advance.
- 2) Approval is limited to a one (1) year basis, unless an exception is granted by the RIBCCDP.
- 3) Approval is only given to addiction/substance abuse learning events.
- 4) Credits from this source may be used in Rhode Island only for recertification.
- 5) There is a maximal limit of 30 clock hours for two year recertifications, from this particular educational source.
- 6) Documentation: A "Certificate of Completion" or "Certificate of Attendance" must be presented as proof of educational involvement for recertification credit. This "Certificate" should include: Name of participant, social security number, name of the educational sponsor(s) and/or instructor(s), date of completion, and the total number of clock hours of training pre-approved by the RIBCCDP. (In the absence of a "Certificate", an official letter from the educational sponsor(s) and/or instructor(s) will suffice). Documentation should also specifically mention that this training event has been approved as Continuing Educational Clock Hour Credit.
- 7) The independent study activity must be followed-up with a method of evaluation or measure of the "content/subject matter" to be learned. This process of evaluating the "learning" that has resulted from the independent study must be approved by the RIBCCDP.
- 8) The total number of clock hour credits to be awarded for the "independent study" activity will be determined by the RIBCCDP, upon specific recommendations of the sponsor/instructor.

9) Applications for pre-approved credit from the sponsor/instructor shall include:

- * Application form;
- * Summary of the "content" of the proposed independent study project;
- * Summary of the teaching methodology/ structure of the proposed independent study project;
- * Summary of the proposed method of evaluating and measuring (e.g. through post-test) that which was learned;
- * Curriculum vitae or resume of the instructor, trainer, seminar leader, etc. (when applicable)
- * Upon termination of the independent study project, the sponsor(s)/instructor(s) must forward a list of all participants who have successfully completed the project. This list should include the following: Name of participant, social security number, date of awarded credit, total clock hours of credit awarded, and state of the participant.

10) Training in this category would not necessarily need face-to-face instructional methodology, but could be accomplished in a less direct, yet closely monitored, way.

11) Flat review fee of \$20.00 for each independent Study .

REVIEW FEE MUST ACCOMPANY PACKET AND IS NON-REFUNDABLE.