

Directions for APS Application

1. Attach all required documentation to support employment (i.e. letters from former employers verifying employment, if applicable, current job description, signed and dated by applicant and supervisor).
2. Sign and date the Code of Ethical Conduct.
3. Notarize the Release form.
4. Supervision form completed and signed by supervisor.
5. Fee of \$75 may be paid by check or money order (payable to PCB) or with VISA or MasterCard. This is a non-refundable fee.
6. If there are any problems with the application, applicant will be notified by mail.

Application Checklist

The following should be included in the APS Application:

- _____ 1. Application pages
- _____ 2. Documentation of education (copy of GED, high school diploma or official college transcript)
- _____ 3. Current job description and letters from previous employers
- _____ 4. Code of Ethical Conduct
- _____ 5. Notarized Release form
- _____ 6. Supervision form
- _____ 7. Fee of \$75.00

Any questions, problems, or concerns can be addressed by contacting the PCB Office.

Keep a photocopy of the entire application. Send original application, copies of certificates of attendance, attachments, and fee to:

PCB
298 S. Progress Avenue
Harrisburg, PA 17109
Phone: (717) 540-4455 Fax: (717) 540-4458
Website: pacertboard.org Email: info@pacertboard.org

APS process/requirements

Associate Prevention Specialist Level I and II can be temporary or permanent credentials.

ASSOCIATE PREVENTION SPECIALIST LEVEL I

1 year of paid alcohol, tobacco and other drug
abuse prevention employment
100 hours supervision
50 hours education/25 prevention specific
1 year expiration date
Completed application and \$75 fee

ASSOCIATE PREVENTION SPECIALIST LEVEL II

2 years employment as stated
200 hours supervision
100 hours education/50 prevention specific
2 year expiration date
Completed application and \$75 fee
To maintain: 35 hours PCB approved education
every 2 years & \$100 recertification fee

CERTIFIED PREVENTION SPECIALIST (CPS)

3 years employment if bachelor's degree is not in a behavioral science field
or
2 years employment if bachelor's degree is in a behavioral science field
300 hours supervision
150 hours education/75 prevention specific
6 hours prevention specific professional ethics and responsibilities & 6 hours HIV/AIDS
Written exam
Completed application and \$350 fee
To maintain: 40 hours PCB approved education
every 2 years including 3 in professional ethics and responsibilities & \$150 recertification fee

Information for APS

Employment

- One year (2000 hours) of alcohol, tobacco and other drug abuse prevention employment or supervision of same for APS I; or 2 years (4000 hours) for APS II. Applicant must spend at least 51% of his/her time providing paid alcohol, tobacco and other drug abuse prevention services. Employment must have been gained within the last 7 years.
- Applicant must be currently employed in an alcohol, tobacco and other drug abuse prevention position at the time application is submitted to PCB.
- If current employment is in an unlicensed facility, an agency brochure and philosophy statement as it relates to alcohol, tobacco and other drug abuse must be included.

Supervision

- 100 hours of on-the-job supervision in the 5 domains of prevention for APS I; or 200 hours for APS II.

Education

- High school diploma or GED is required.
- 50 hours of education relevant to the field of addiction, of which 25 are prevention specific for APS I; or 100 hours education relevant to the field of addiction of which 50 are prevention specific for APS II.
- Education is defined as formal, structured instruction in the form of workshops, seminars, institutes, in-services, college/university credit courses and PCB approved distance education.
- Education in CPR/First Aid and computer learning will be acceptable for a maximum of 6 hours each.
- Three college credits are equivalent to 45 hours.
- Education, as defined above, applicant provides to others may also be used.

Fees

Fee	\$75.00	Recertification Fee	\$100.00
(fee must accompany application and materials)		(due every 2 years for APS II)	

Other

- Signed and dated Code of Ethical Conduct.
- Signed, dated and notarized Release.
- Current job description dated and signed by supervisor and applicant.
- Applicant must either live or work in PA at time of application.

Certification Time Period

APS I encompasses 1 calendar year and may be renewed or upgraded to APS II; APS II encompasses 2 calendar years and may be recertified. Two dates, date of issue and valid through, will appear on the certificate along with a certification number.

Appeal Process

The purpose of appeal is to determine if PCB accurately, adequately and fairly reviewed applicant's file. A letter requesting an appeal must be sent to the board in writing within 30 days of the notification of the board's action. A person shall be considered notified 3 days after the relevant date of mailing. The written appeal will be sent to the Executive Committee who in turn will thoroughly review the entire application and materials to determine whether or not applicant should have been denied approval. Applicant will be notified in writing as to the findings of the Executive Committee.

Recertification

To maintain the high standards of this professional practice and to assure continuing awareness of new knowledge in the field, PCB requires recertification every 2 years. All certified professionals should review the recertification application well in advance of the expiration date.

To be recertified as an APS II, an individual must:

1. Hold a current and valid certificate issued by PCB;
2. 40 PCB approved hours of education received within the 2 year recertification cycle including 3 in professional ethics and responsibilities (PCB approved education listed on pacertboard.org);
3. Endorse by signature and uphold by practice the PCB Code of Ethical Conduct for professional behavior;

4. Complete an application, notarized and signed by applicant and pay recertification fee.

Lapsed Certification

The APS II credential is valid for a 2 year period. To maintain the credential individuals must recertify every 2 years prior to the expiration date.

There is no grace period, so if the recertification is not completed by the expiration date, the individual will no longer hold an active credential. No claim of an active credential is permitted until the individual has recertified. A Reinstatement Fee of \$100 is due if the recertification is between 1 day and 12 months late.

Recertification applications may be sent to PCB months early to avoid having your credential become inactive and not in good standing. This also helps in case there are problems that need to be resolved.

International Certification & Reciprocity Consortium/Alcohol and Other Drug Abuse, Inc. (IC&RC/AODA)

The purpose of the IC&RC is:

- to promote uniform professional standards and quality for the alcohol and other drug abuse profession and to give the profession greater visibility throughout the United States and other countries;
- to negotiate reciprocity agreements for alcohol and other drug abuse professionals with certification bodies throughout the United States and other countries;
- to provide support services, including consultation and training to all states in all areas of certification, such as establishment of standards, evaluation of competence, establishment and training of boards and committees;
- to provide information on certification and certification activities throughout the United States and other countries;
- to provide an International Certificate (ICPS) for prevention specialists meeting specified qualifications certified by individual IC&RC member certification boards. Any IC&RC certified prevention specialist is eligible. ICPS applications can be obtained from IC&RC or from individual certification boards;
- to promote uniform professional standards in AODA specialty disciplines.

Certified professionals (CPS) in the state of Pennsylvania have reciprocity with many certifying bodies throughout the United States and other countries as well as the US Air Force, Marines and Navy. For reciprocity process and/or a listing of member boards, please call the PCB Office.

Application for APS

PLEASE TYPE OR PRINT NEATLY

PLEASE CIRCLE: Level I or Level II

DATE: _____

NAME: _____

HOME ADDRESS: _____

(city)

(state)

(zip)

COUNTY: _____

GENDER: (Please circle) Male Female

HOME PHONE: () _____

SOCIAL SECURITY NUMBER: _____

EMAIL: _____

DATE OF BIRTH: _____

EMPLOYER: _____

EMPLOYER ADDRESS: _____

COUNTY: _____

EMPLOYER PHONE: () _____

POSITION/TITLE: _____

DATE EMPLOYED: from _____ to _____

HOURS OF WORK PER WEEK: _____

IMMEDIATE SUPERVISOR: _____

TITLE: _____

PHONE: () _____

I hereby attest that the applicant is working in a position where a minimum of 51% of his/her time is spent providing direct, primary alcohol, tobacco and other drug abuse prevention activities/services OR that the applicant is working in a position where a minimum of 51% of his/her time is spent providing supervision of prevention activities/services.

SUPERVISOR'S SIGNATURE

Have you ever received any disciplinary action from another certification or licensing authority? ____ Yes ____ No

If yes, please explain in full on a separate sheet.

Fee of \$75 can be paid using one of the following:

Check or Money Order to PCB

() Check /MO \$ _____

Credit Card _____ - _____ - _____ - _____

() VISA/Mastercard \$ _____

3-Digit security code: _____ Exp Date: _____ / _____

Name on card

Previous Employment, if applicable

NAME OF EMPLOYER: _____

ADDRESS: _____

YOUR TITLE: _____

HOURS OF WORK PER WEEK: _____ DATES EMPLOYED: from _____ to _____

IMMEDIATE SUPERVISOR: _____

YOUR PRIMARY DUTIES/RESPONSIBILITIES: _____

NAME OF EMPLOYER: _____

ADDRESS: _____

YOUR TITLE: _____

HOURS OF WORK PER WEEK: _____ DATES EMPLOYED: from _____ to _____

IMMEDIATE SUPERVISOR: _____

YOUR PRIMARY DUTIES/RESPONSIBILITIES: _____

NAME OF EMPLOYER: _____

ADDRESS: _____

YOUR TITLE: _____

HOURS OF WORK PER WEEK: _____ DATES EMPLOYED: from _____ to _____

IMMEDIATE SUPERVISOR: _____

YOUR PRIMARY DUTIES/RESPONSIBILITIES: _____

Supervision

To Supervisor: Please complete this form indicating applicant's on-the-job supervision. This form is not intended to document applicant's total number of hours worked but rather the hours of on-the-job supervision you have provided the applicant.

Applicant's Name _____

I hereby attest that a minimum of 100 or 200 hours of supervision in the prevention domains have been attained by the above-named applicant.

DOMAINS

OF HOURS RECEIVED IN EACH

- | | |
|---|-------|
| 1. Planning and Evaluation | _____ |
| 2. Education and Skill Development | _____ |
| 3. Community Organization | _____ |
| 4. Public Policy and Environmental Change | _____ |
| 5. Professional Growth and Responsibility | _____ |
| 6. Other | _____ |

**TOTAL MUST BE AT LEAST
100 HOURS FOR APS I OR
200 HOURS FOR APS II**

Supervisor's Signature

Date

Code of Ethical Conduct

UNLAWFUL CONDUCT

Rule 1.1 Once certified, a certified professional shall not be convicted for any misdemeanor or felony relating to the individual's ability to provide substance abuse and other behavioral health services as determined by PCB.

Rule 1.2 A certified professional shall not be convicted of any crime that involves the use of any controlled or psychoactive substance.

SEXUAL MISCONDUCT

Rule 2.1 A certified professional shall, under no circumstances, engage in sexual activities or sexual contact with clients, whether such contact is consensual or forced.

Rule 2.2 A certified professional shall not engage in sexual activities or sexual contact with clients' relatives or other individuals with whom clients maintain a close personal relationship when there is a risk of exploitation or potential harm to the client.

Rule 2.3 A certified professional shall not engage in sexual activities or sexual contact with former clients because of the potential harm to the client.

Rule 2.4 A certified professional shall not provide clinical services to individuals with whom they have had a prior sexual relationship.

FRAUD-RELATED CONDUCT

Rule 3.1 A certified professional shall not:

1. present or cause to be presented a false or fraudulent claim, or any proof in support of such claim, to be paid under any contract or certificate of insurance;
2. prepare, make, or subscribe to a false or fraudulent account, certificate, affidavit, proof of loss, or other document or writing, with knowledge that the same may be presented or used in support of a claim for payment under a policy of insurance; or
3. present or cause to be presented a false or fraudulent claim or benefit application, or any false or fraudulent proof in support of such a claim or benefit application, or false or fraudulent information, which would affect a future claim or benefit application, or be paid under any employee benefit program;
4. seek to have an employee commit fraud or assist in an act of commission or omission to aid fraud related behavior.

Rule 3.2 An individual shall not use misrepresentation in the procurement of certification or recertification, or assist another in the preparation or procurement of certification or recertification through misrepresentation. The term "misrepresentation" includes but is not limited to the misrepresentation of professional qualifications, education, certification, accreditation, affiliations, employment experience, the plagiarism of application and recertification materials, or the falsification of references.

Rule 3.3 An individual shall not use a title designation, credential or license, firm name, letterhead, publication, term, title, or document which states or implies an ability, relationship, or qualification that does not exist and to which they are not entitled.

Rule 3.4 A certified professional shall not provide service under a false name or a name other than the name under which his or her certification or license is held.

Rule 3.5 A certified professional shall not sign or issue, in their professional capacity, a document or a statement that the professional knows or should have known to contain a false or misleading statement.

Rule 3.6 A certified professional shall not produce, publish, create, or partake in the creation of any false, fraudulent, deceptive, or misleading advertisement.

Rule 3.7 A certified professional who participates in the writing, editing, or publication of professional papers, videos/films, pamphlets or books must act to preserve the integrity of the profession by acknowledging and documenting any materials and/or techniques or people (i.e. co-authors, researchers, etc.) used in creating their opinions/papers, books, etc. Additionally, any work that is photocopied prior to receipt of approval by the author is discouraged. Whenever and wherever possible, the certified professional should seek permission from the author/creator of such materials. The use of copyrighted materials without first receiving author approval is against the law and, therefore, in violation of the Code of Ethical Conduct.

EXPLOITATION OF CLIENTS

Rule 4.1 A certified professional shall not develop, implement, or maintain exploitative relationships with clients and/or family members of clients.

Rule 4.2 A certified professional shall not misappropriate property from clients and/or family members of clients.

Rule 4.3 A certified professional shall not enter into a relationship with a client which involves financial gain to the certified professional or a third party resulting from the promotion or the sale of services unrelated to the provision of services or of goods, property, or any psychoactive substance.

Rule 4.4 A certified professional shall not promote to a client for their personal gain any treatment, procedure, product, or service.

Rule 4.5 A certified professional shall not ask for nor accept gifts or favors from clients and/or family members of client.

Rule 4.6 A certified professional shall not offer, give, or receive commissions, rebates, or any other forms of remuneration for a client referral.

Rule 4.7 A certified professional shall not accept fees or gratuities for professional work from a person who is entitled to such services through an institution and/or agency by which the certified professional is employed.

PROFESSIONAL STANDARDS

Rule 5.1 A certified professional shall not in any way participate in discrimination on the basis of race, color, sex, sexual orientation, age, religion, national origin, socio-economic status, political belief, psychiatric or psychological impairment, or physical disability.

Rule 5.2 A certified professional who fails to seek therapy for any psychoactive substance abuse or dependence, psychiatric or psychological impairment, emotional distress, or for any other physical health related adversity that interferes with their professional functioning shall be in violation of this rule. Where any such conditions exist and impede their ability to function competently, a certified professional must request inactive status of their PCB credential for medical reasons for as long as necessary.

Rule 5.3 A certified professional shall meet and comply with all terms, conditions, or limitations of a certification or license.

Rule 5.4 A certified professional shall not engage in conduct that does not meet the generally accepted standards of practice.

Rule 5.5 A certified professional shall not perform services outside of their area of training, expertise, competence, or scope of practice.

Rule 5.6 A certified professional shall not reveal confidential information obtained as the result of a professional relationship, without the prior written consent from the recipient of services, except as authorized or required by law.

Rule 5.7 The certified professional shall not permit publication of photographs, disclosure of client names or records, or the nature of services being provided without securing all requisite releases from the client, or parents or legal guardians of the clients.

Rule 5.8 The certified professional shall not discontinue professional services to a client nor shall they abandon the client without facilitating an appropriate closure of professional services for the client.

Rule 5.9 A certified professional shall not fail to obtain an appropriate consultation or make an appropriate referral when the client's problem is beyond their area of training, expertise, competence, or scope of service.

SAFETY & WELFARE

Rule 6.1 A certified professional shall not administer to himself or herself any psychoactive substance to the extent or in such manner as to be dangerous or injurious to a recipient of services, to any other person, or to the extent that such use of any psychoactive substance impairs the ability of the professional to safely and competently provide services.

Rule 6.2 All certified professionals are mandated child abuse reporters.

RECORD KEEPING

Rule 7.1 A certified professional shall not falsify, amend, or knowingly make incorrect entries or fail to make timely essential entries into the client record.

ASSISTING UNQUALIFIED/UNLICENSED PRACTICE

Rule 8.1 A certified professional shall not refer a client to a person that he/she knows or should have known is not qualified by training, experience, certification, or license to perform the delegated professional responsibility.

DISCIPLINE IN OTHER JURISDICTIONS

Rule 9.1 A certified professional holding a certification, license, or other authorization to practice issued by any certification authority or any state, province, territory, tribe, or federal government whose certification or license has been suspended, revoked, placed on probation, or other restriction or discipline shall promptly alert the Board of such disciplinary action.

COOPERATION WITH THE BOARD

Rule 10.1 A certified professional shall cooperate in any investigation conducted pursuant to this Code of Ethical Conduct and shall not interfere with an investigation or a disciplinary proceeding or attempt to prevent a disciplinary proceeding or other legal action from being filed, prosecuted, or completed. Interference attempts may include but are not limited to:

1. the willful misrepresentation of facts before the disciplining authority or its authorized representative;
2. the use of threats or harassment against, or an inducement to, any client or witness in an effort to prevent them from providing evidence in a disciplinary proceeding or any other legal action;
3. the use of threats or harassment against, or an inducement to, any person in an effort to prevent or

- attempt to prevent a disciplinary proceeding or other legal action from being filed, prosecuted or completed;
4. refusing to accept and/or respond to a letter of complaint, allowing a credential to lapse while an ethics complaint is pending, or attempting to resign a credential while an ethics complaint is pending. Violation of this rule under these circumstances will result in the immediate and indefinite suspension of the certified professional's credential until the ethical complaint is resolved.

Rule 10.2 A certified professional shall:

1. not make a false statement to the PCB or any other disciplinary authority;
2. promptly alert colleagues informally to potentially unethical behavior so said colleague could take corrective action;
3. report violations of professional conduct of other certified professionals to the appropriate licensing/disciplinary authority when he/she knows or should have known that another certified professional has violated ethical standards and has failed to take corrective action after informal intervention.

Rule 10.3 A certified professional shall report any uncorrected violation of the Code of Ethical Conduct within 90 days of alleged violation. Failure to report a violation may be grounds for discipline.

Rule 10.4 A certified professional with firsthand knowledge of the actions of a respondent or a complainant shall cooperate with the PCB investigation or disciplinary proceeding. Failure or an unwillingness to cooperate in the PCB investigation or disciplinary proceeding shall be grounds for disciplinary action.

Rule 10.5 A certified professional shall not file a complaint or provide information to the PCB, which he/she knows or should have known, is false or misleading.

Rule 10.6 In submitting information to PCB, a certified professional shall comply with any requirements pertaining to the disclosure of client information established by the federal or state government.

Signature: _____ Date: _____

Release (must be notarized below)

I hereby request that the Pennsylvania Certification Board grant the credential to me based on the following assurances and documentation:

I subscribe to and commit myself to professional conduct in keeping with the PCB Code of Ethical Conduct;

I hereby certify that the information given herein is true and complete to the best of my knowledge and belief. I also authorize any necessary investigation and the release of manuscripts and other personal information relative to my certification. Falsification of any records or documents in my application will nullify this application and will result in denial or revocation of certification;

I consent to the release of information contained in my application and any other pertinent data submitted to or collected by PCB to officers, members, and staff of the aforementioned Board;

I consent to authorize PCB to gather information from third parties regarding continuing education and employment and understand that such communication shall be treated as confidential;

Allegations of ethical misconduct reported to PCB before, during, or after application for certification is made will be investigated by PCB and could result in the nullification of the application or denial or revocation of certification.

Signature: _____

Date: _____

Please print your name as it should appear on your certificate:

On this the _____ day of _____, 200____, by me _____

a notary public, the undersigned officer, personally appeared: _____,

known to me or satisfactorily proven to be the person whose name is subscribed to the within instrument and acknowledged that she/he executed the same for the purposes therein contained. In witness whereof, I hereby set my hand and official seal.

Sworn and subscribed before me this _____ day of _____, 200_____.

SEAL:

Notary Public