



# IOWA BOARD OF CERTIFICATION

Handbook  
*Certified Clinical  
Supervisor  
(CCS)*

*Updated March 2025*



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# ABOUT



## **Mission Statement**

*The Iowa Board of Certification credentials prevention and treatment professionals in addiction and other behavioral health fields by promoting adherence to competency and ethical standards.*

## **Who is Iowa Board of Certification?**

*The Iowa Board of Certification (IBC) is a private, non-profit organization that promotes standards for professionals in the addictions and other behavioral health fields. IBC accomplishes this by writing and publishing standards, evaluating the experience, supervision, education of applicants, and reviewing each application that is received.*

*IBC also promotes high ethical standards for all credentialed professionals. IBC has established a Code of Ethics for its professionals, investigates, and may take disciplinary action on reports of ethical violations.*





## PURPOSES OF CERTIFICATION



### For the Person Served

*To assure competent, professional alcohol and drug abuse services to persons suffering from chemical dependency; to improve the quality of service being provided to the client and family members.*



### For the Public

*To assure professional competency that will meet standards required for licensing, accreditation and third-party payers.*



### For the Alcohol and Drug Abuse Professional

*To provide a respected, marketable credential of professional competency; to enhance the role of the addiction professional in alcohol and drug abuse treatment.*



### For the Profession

*To provide a method whereby the highest professional standards can be established, maintained and updated.*



Iowa Board  
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# Certification Criteria



## CERTIFICATION CRITERIA

This credential is for the alcohol and other drug abuse clinical supervisor, and is an international credential that is recognized throughout the world via reciprocity. The Iowa Board of Certification is a member of the International Certification and Reciprocity Consortium (IC&RC), and allows for reciprocity into and out of the State of Iowa for other CCS-certified professionals.

A clinical supervisor is directly involved with staff development dealing with the clinical skills and competencies of persons providing counseling. The format for supervision is commonly one-on-one and/or small groups on a regular basis. Methods for review often include case review and discussion, utilizing direct and indirect observations of a counselor's clinical work.

Applicants **must** hold a current and valid IADC, IAADC, CCJP, or CCDP **OR** hold a specialty substance abuse credential in another professional discipline in the human services field at the **master's level or higher** to be eligible to apply for the Certified Clinical Supervisor (CCS).

## RESIDENCY REQUIREMENT

The applicant must physically live and/or work in Iowa at least 51% of the time at the time of application for initial certification, recertification or reactivation.

## APPLICATION HANDBOOK

This Application Handbook contains information you will not only need to become certified but also will be very useful after the certification process. Please keep this handbook to use as a referral source. You can also find continually updated versions of this handbook on our web site, free for printing yourself.



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# Application Process





## APPLICATION PROCESS

Read all certification requirements to determine that you meet requirements for CCS. All applications may be found on the IBC website. **The application and its forms will expire one (1) year from the date any portion of the application is received in the IBC office.** The letter accompanying the application will walk the applicant through the process.

**To complete the application, follow these steps:**

1. Applicants begin the application process by completing the application. The applicant is required to meet all education, supervision and experience requirements indicated for the credential; this is indicated within the application.
2. The applicant is required to complete the application online, print it and mail it to the IBC office along with all required documentation and the non-refundable fee which includes the application review fee, one exam fee and first two years of certification. Should the applicant not pass the exam, or not show for the exam, the test fee will have to be paid for each subsequent exam that needs to be taken.
3. When the application and fee is received, the IBC office will notify the applicant to let them know if anything further is needed; if it's complete, the applicant will be pre-registered for the exam.
4. The applicant will take and pass the IC&RC exam. Exams are administered via computer.
5. The applicant will be notified of approval or denial of certification once exam scores are received in the IBC office. A two-year certificate will be emailed to the applicant after the exam is passed. Certification starts the first day of the following month of passing the exam.

## HOW TO APPLY

- A. Go to the IBC website at [www.iowabc.org](http://www.iowabc.org), click on "Certifications," then "Certified Clinical Supervisor" to find the appropriate application. Applications should be completed online, saved to the applicant's computer then mailed back to the IBC office with required documentation and the non-refundable fee. Applications will not be reviewed until the full fee is also received.
- B. Complete all portions of the application and have your supervisor sign/date Form 05 and 06. Attach additional documentation as directed. Include a written job description.
- C. Contact all colleges/universities you attended to request that they send an original transcript to the IBC office via email to [iowaBC@gmail.com](mailto:iowaBC@gmail.com) or U.S. Mail. We will not accept student-issued transcripts. We must be able to verify a master's degree or higher through your transcript.
- D. Mail the completed application with original signatures, the non-refundable fee and applicable documents to the IBC office; the fee may be paid with check (mailed to IBC address) or online on our website. APPLICANTS SHOULD KEEP A COPY OF THEIR APPLICATION FOR THEIR RECORDS; IBC will not send copies to you.
- E. Questions? Contact the IBC office at 515-965-5509 or email at [info@iowabc.org](mailto:info@iowabc.org).



## EDUCATION REQUIREMENTS

- A master's degree or higher in substance abuse or human services field.
- Thirty (30) hours of education specific to the IC&RC clinical supervision domains with a minimum of five (5) hours in each domain. In addition, 3 hours of racial/ethnic training is required.
- Education is defined as formal, structured instruction in the form of workshops, seminars, institutes, in-services, college/university credit courses and IBC approved distance education.
- Three (3) college credits are equivalent to 45 hours.

## EXPERIENCE REQUIREMENTS

- Applicants must hold a current and valid IADC, IAADC, CCJP or CCDP OR hold a specialty substance abuse credential in another professional discipline in the human services field at the master's level or higher to be eligible to apply for the Certified Clinical Supervisor (CCS).
- 10,000 hours (5 years full-time) of alcohol and drug counseling specific work experience PLUS 4,000 hours of alcohol and drug counseling supervisor work experience. **Note:** these 4,000 hours may be included in the 10,000 experience hours and must include 200 hours of face-to-face clinical supervision.
- An associate's degree in behavioral science may substitute for 1,000 hours, a bachelor's degree in behavioral science may substitute for 2,000 hours, and a master's degree in a behavioral science may substitute for 4,000 hours.
- Applicants must be currently employed in a clinical supervisory position at the time application is submitted to IBC.
- Acceptable employment is defined as a specific aspect of staff development dealing with the clinical skills and competencies for persons providing counseling. The format for supervision is commonly one-on-one and/or small groups on a regular basis. Methods for review often include case review and discussion and utilizing direct and indirect observation of a counselor's clinical work.

## SUPERVISION

200 hours of on-the-job supervision in providing clinical supervision in the CCS domains. Of these 200 hours, 100 hours may be performed electronically in real time.

## EXAM

### Format and Length

The questions on the examination are multiple-choice with three or four options. There is only one correct or best answer for each question. Candidates should carefully read each question and choose the single best answer. It is advisable to answer every question since the number of questions answered correctly will determine the final score. There is no penalty for guessing.

Number of Scored Items: 125

Number of Pre-test Items: 25  
Total Number of Items: 150  
Length of Administration: 3 hours

### Format and Length

The Job Analysis identified several performance domains. Several tasks have been identified within each performance domain. These tasks and the needed knowledge or skills for their completion are the basis of examination questions.

Domains	% of weight per domain
1. Counselor Development	23%
2. Professional and Ethical Standards	23%
3. Program Development and Quality Assurance	15%
4. Assessing Counselor Competencies and Performance	23%
5. Treatment Knowledge	16%

The questions on the examination are multiple-choice with three or four options. There is only one correct or best answer for each question. Candidates should carefully read each question and choose the single best answer. It is advisable to answer every question since the number of questions answered correctly will determine the final score. There is no penalty for guessing.

Number of Scored Items: 50  
Number of Pre-test Items: 10  
Total Number of Items: 60  
Length of Administration: 90 minutes

### Content

The Job Analysis identified several performance domains. Several tasks have been identified within each performance domain. These tasks and the needed knowledge or skills for their completion are the basis of examination questions.

Domains	Weight on Exam
1. Dynamics of Addiction and Criminal Behavior	14%
2. The Criminal Justice System and Processes	36%
3. Screening, Assessment, and Treatment Planning	22%
4. Case Management and Counseling	28%

Exam scores are accessed weekly, and applicants are then notified of their exam score. Exams may be taken every 90 days.

Should a candidate fail to pass the exam after 4 tries, a Remedial Action Plan is in place and must be met before the candidate can test for a 5<sup>th</sup> time:

- The candidate will need to develop a work plan with a certified mentor/supervisor who holds the same credential (or higher) that the candidate is applying for. This plan will need to be signed by both the candidate and the mentor/supervisor and will be sent to the IBC office. The work plan will include:
  1. Documented direct supervision by the mentor/supervisor for at least 4 hours of supervision with a minimum of one hour supervision per Domain.

2. 12 hours of continuing education with at least 3 hours per Domain. These hours may come from either in-person or online trainings, and must be mentor/supervisor approved.
3. Before the candidate will be allowed to test for a 5<sup>th</sup> time, the candidate will need to send to IBC certificates of completion for the 12 hours of training attended as well as a signed narrative by their mentor/supervisor which will describe the hours spent in supervision and topics discussed/supervised.

## PERFORMANCE DOMAINS FOR CS

Within each domain there are several identified tasks, which provide the basis for questions in the examination. Following is a listing of those domains, associated task statements, and the number of questions on the exam which are associated with each.

- Domain 1: Counselor Development -- 23% of the Exam
- Domain 2: Professional and Ethical Standards -- 23% of the Exam
- Domain 3: Program Development and Quality Assurance -- 15% of the Exam
- Domain 4: Assessing Counselor Competencies & Performance -- 23% of the Exam
- Domain 5: Treatment Knowledge -- 16% of the Exam

## PROCESSING APPLICATIONS

Read all certification requirements to determine that you meet requirements for CCS. All applications may be found on the IBC website. **The application and its forms will expire one (1) year from the date any portion of the application is received in the IBC office.** The letter accompanying the application will walk the applicant through the process.

**To complete the application, follow these steps:**

1. Applicants begin the application process by completing the application. The applicant is required to meet all education, supervision and experience requirements indicated for the credential; this is indicated within the application.
2. The applicant is required to complete the application online, print it and mail it to the IBC office along with all required documentation and the non-refundable fee which includes the application review fee, one exam fee and first two years of certification. Should the applicant not pass the exam, or not show for the exam, the test fee will have to be paid for each subsequent exam that needs to be taken.
3. When the application and fee is received, the IBC office will notify the applicant to let them know if anything further is needed; if it's complete, the applicant will be pre-registered for the exam.
4. The applicant will take and pass the IC&RC exam. Exams are administered via computer.
5. The applicant will be notified of approval or denial of certification once exam scores are received in the IBC office. A two-year certificate will be emailed to the applicant after the exam is passed. Certification starts the first day of the following month of passing the exam.

## CERTIFICATION APPEAL PROCEDURES

**Appeal of the Denial for Certification.** Every applicant shall be provided with the opportunity to appeal the decision of the Board regarding the applicant's certification to the Ethics and Appeals Committee. The IC&RC test is the property of the IC&RC and are psychometrically sound and legally defensible. Only under extraordinary circumstances can an appeal be submitted for the denial of the IC&RC test.

If the applicant desires to appeal the decision of the Board regarding certification, the applicant shall send a written request for an appeal review meeting within thirty (30) days of receipt of the certified notice of denial of certification. The response shall be addressed to:

Iowa Board of Certification  
2600 Grand Ave, Ste 114  
Des Moines, IA 50312

**Appeal Review Meeting.** An appeal review meeting shall be held at a time and place fixed by the chairperson of the Ethics and Appeals Committee.

- A. All appeal review meetings of the Ethics and Appeals Committee shall be closed to the public. Only committee members, those invited by the committee to testify, and staff members shall be in attendance.
- B. There shall be no contact prior to the appeal review meeting between the applicant and any member of the Ethics and Appeals Committee for the purpose of discussing the appeal.
- C. The Ethics and Appeals Committee shall review with the applicant the reasons for denial of certification and the applicant may present any information he or she feels is relevant.
- D. The Ethics and Appeals Committee may not consider additional materials presented by the applicant for the purposes of correcting deficiencies in the oral interview or test.
- E. The Ethics and Appeals Committee shall make a determination to:
  - 1. Recommend that the Board uphold the decision regarding certification.
  - 2. Recommend that the Board overturn the decision regarding certification.
  - 3. Recommend that the Board remand the application to the Committee on Credentialing for re-review.
- F. If an applicant who has requested an appeal review meeting, and upon whom proper notice of the meeting has been served, fails to appear for the meeting, the Committee shall proceed with the conduct of the review and the applicant shall be bound by the results to the same extent as if the applicant had been present.
- G. The Board shall, at its next regular scheduled meeting, vote to accept or reject the recommendations of the Ethics and Appeals Committee.
- H. The applicant shall be notified by certified mail within two weeks of the decision of the Board concerning the appeal.

## CERTIFICATION PERIOD

The Iowa certification period encompasses two calendar years, commencing from the first day of the month that follows approval by the Iowa Board of Certification. Dates of validation are printed on the professional's certificate. It is the CCJP's responsibility to keep track of certification dates; no reminders for recertification will be sent.

## DUAL CERTIFICATION

To support those professionals who wish to carry more than one IBC credential, the certification fee of the second credential shall be 25% less than the certification fee for the second credential.

Similarly, those holding more than one IBC credential shall receive a 25% decrease in the recertification fees as long as both credentials are maintained.

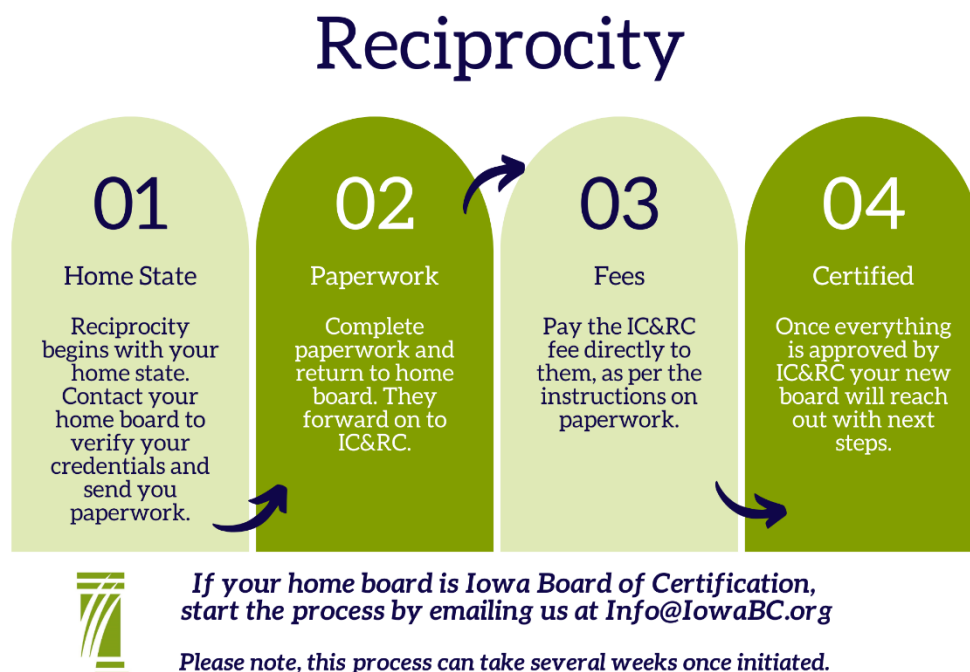
## RECIPROCITY

Iowa professionals who are certified as a CCS may apply for reciprocity to any certification board that is a member of the International Certification and Reciprocity Consortium/Alcohol and Other Drug Abuse (IC&RC).

Please note: “reciprocity” does not necessarily mean “right to practice” in some states, as follows:

- **Reciprocity into Iowa:** Professionals certified by an IC&RC member board who relocate into Iowa may transfer their credential to Iowa using the reciprocity process. No additional requirements will have to be met by the certified professional using this process to transfer their credential to Iowa.
- **Reciprocity out of Iowa:** Professionals certified by IBC who relocate to another state, country or nation may transfer their credential to the new jurisdiction using the reciprocity process only if the new jurisdiction is an IC&RC member board. Reciprocity to a non-IC&RC member board is not permitted. Additional requirements may be imposed upon the certified professional depending upon the laws and regulations governing the practice of services in the new jurisdiction. **Therefore, certified professionals are strongly encouraged to contact the IC&RC member board in the new jurisdiction to determine if any additional requirements must be met.**

Applications for reciprocity may be obtained from the IBC office and shall be sent to the IBC office along with the required fee.





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## Recertification



## RECERTIFICATION

### HOW TO RENEW CERTIFICATION

Certification must be renewed every two years. Dates of validation are printed on the certificate. Recertification is a continuous process which involves earning continuing education credit on an ongoing basis, as well as submission of the actual recertification application.

Recertification applications can be found on IBC's web site at [www.iowabc.org](http://www.iowabc.org), and may be completed online. In addition, counselors may check their recertification expiration date on the website. **Please note: It is the responsibility of the certified professional to keep track of recertification dates and to make timely application for recertification.** Recertification reminders will not be sent. Recertification applications need to be completed just prior to recertifying to ensure that the most up-to-date version is being used.

An application for recertification shall include the following:

1. Completion of both pages of the "Application for Recertification." This form can be found on the IBC website and needs to be completed online and submitted to the IBC office.
2. **All continuing education hours must be completed within the validation dates shown on the certificate. While certificates of completion do not need to be included with the recertification application, it is advised that these be retained by the applicant in case the applicant's recertification is audited and the applicant is required to then submit them to the IBC office.**
3. Submission of the recertification fee, as well as applicable CEU processing fees and the late penalty fee, if applicable. Fees may be paid by check (mailed to the IBC office) or paid online. IBC does not accept credit card numbers over the phone or directly in the office.

### RECERTIFICATION REQUIREMENTS

Certified CCS professionals must obtain six (6) clock hours of continuing education during the two-year certification period to qualify for recertification. The six hours may be a part of the 40 hours obtained for the IADC, IAADC, or CCJP.

- Three (3) of the clock hours must be in ethics.
- The remaining hours must be relevant to the certified professional's field.

No more than three (3) clock hours may be earned through distance learning for each certification period.

To receive college credit for clock hours a minimum grade of "C" is required. One semester hour equals 15 clock hours. One quarter hour equals 10 clock hours. If college courses are being used, an original transcript must be sent from the college to the IBC office.

### GENERAL GUIDELINES FOR RECERTIFICATION

The following general guidelines apply to Continuing Education:

- A. The content of all courses on continuing education must be relevant to the Domains and as listed in the Application Handbook.
  1. The following is an example of continuing education that will not receive IBC credit.



2. Parenting or other programs that are designed for lay people.
  3. Basic living skills.
- B. Orientation programs, i.e. a specific series of activities designed to familiarize employees with the policies and procedures of an institution.
- C. Continuing education hours exclude non-program time such as coffee breaks, social hours, and time allocated for meals.
- D. The six (6) clock hours must be obtained within each certification period; that is, between the validation dates of certification shown on the certificate. Therefore, hours earned before the last application was submitted will not be accepted.
- E. Continuing education hours are not cumulative. Therefore, additional hours earned during one certification period and before the recertification application was submitted will not be accepted for the next period.
- F. One approved college or university semester hour credit is the equivalent of fifteen (15) clock hours and one approved college or university quarter hour credit is the equivalent of ten clock hours. In order to give IBC credit for college coursework, an original transcript will need to be sent to the IBC office from the college via U.S. Mail or to [lowaBC@gmail.com](mailto:lowaBC@gmail.com).
- G. Certified professionals cannot repeat an identical training within his or her recertification period.
- H. The minimum acceptable unit of credit for any single experience is one clock hour.
- I. It is the responsibility of each counselor to maintain records of continuing education credit for submission with the Application for Recertification. IBC does not keep records of a counselor's credits.
- J. Recertification applications will be audited; if chosen for an audit, the applicant will be required to submit copies of his/her certificates of completion to the IBC office within 30 days of notification of audit. Applicants should keep a copy of their recertification application.

### **VOLUNTARY INACTIVE STATUS**

Inactive certification status is for the certified professional who is currently not working as a clinical supervisor yet plans to someday return to this position. Not having earned enough continuing education hours or an employer not requiring IBC certification are inadequate reasons to be granted inactive status.

In addition to the professional not working in the field, the Iowa Board of Certification may grant inactive status under the following circumstances:

1. Behavior-Medical problems
2. Maternity, paternity, or family
3. Education
4. Military service
5. Other valid reasons

**Instructions.** Certified individuals desiring inactive status complete the “Request for Inactive Status” form found on the IBC website. This form can be emailed or mailed back to the IBC office with the applicable fee.

This letter of request and the inactive fee must be postmarked on or before the date of expiration of either certification or the prior inactive time period.

**Fees.** To maintain inactive status, a letter of request, as described above, and the appropriate fee must be sent on or before the annual expiration date or the late fee will be assessed. The 45-day penalty period and late fees apply.

To restore to active certification, the application for recertification must be submitted along with the applicable recertification fee.

**Rights, Limitations, and Responsibilities.**

1. While on inactive status, an individual shall continue to receive communications from IBC.
2. A counselor on inactive status may not use the initials of a certified professional or indicate in any way that they are certified.
3. Individuals on inactive status are not eligible for reciprocity.
4. Inactive individuals must adhere to applicable aspects of the IBC Code of Ethics.
5. **The inactive individual must notify IBC immediately upon returning to work in the field.** Failure to notify the Board within 30 days of returning to such employment will constitute a violation of the IBC Code of Ethics and will result in referral to the Board for investigation, in accordance with the procedures outlined in the Code of Ethics. The inactive individual must successfully reactivate certification within 90 days of returning to employment.

**Reactivation.** Individuals requesting reactivation of their certification status shall follow the recertification process and meet residency requirements. Current recertification forms will be available on the IBC web site. At least 3 of the 6 clock hours must have been earned within two years of the reactivation application.

**LATE PENALTIES**

1. The application and fee for CCS recertification must be emailed or postmarked on or before the certification expiration date, or the late penalty will be imposed beginning on the day following the certification expiration date.
2. A forty-five (45) day penalty period following the certification expiration date shall be allowed.
3. During the penalty period of the certification, the professional may choose to do one of the following:
  - a. Renew the certification by completing and submitting the application for recertification (on the IBC website), the recertification fee, and the penalty fee; or
  - b. Apply for voluntary inactive status, if applicable (see Inactive guidelines); or

- c. Allow the certification to lapse. Certification will lapse on the 46th day. If certification is lapsed, the professional may again apply for certification whenever he/she believes that the criteria can be met. At that time, the professional may complete a new application packet and begin the application process anew.



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## Code of Ethics



## CODE OF ETHICS

### CERTIFIED CLINICAL SUPERVISORS

#### INTRODUCTION

**All certified professionals must subscribe to the IBC Code of Ethics upon application for certification.**

This Code of Ethics is adopted to aid in the delivery of the highest quality of professional care to persons seeking chemical dependency services. It is hoped that these standards will assist the counselor to determine the propriety of his or her conduct in relationships with clients, colleagues, members of allied professions, and the public.

The Board is committed to investigate and sanction those who breach this Code of Ethics. Clinical supervisors, therefore, are encouraged to thoroughly familiarize themselves with the Code of Ethics and to guide their behavior according to the principles set forth below.

Violation of the IBC Code of Ethics shall be deemed as grounds for discipline. Engaging in unethical conduct includes, in addition to violation of the Principles enumerated herein, any other violation that is harmful or detrimental to the profession or to the public.

#### SUBSCRIPTION TO CODE OF ETHICS

**Persons applying for certification must subscribe to the Iowa Board of Certification's Code of Ethics for Clinical Supervisors and do so indicate by signing Form 02.** This subscription will be in effect until their certification is no longer valid. In the event the applicant did not successfully complete the certification process, the subscription shall be in effect until the application period expires. IBC can provide specific information regarding these timeframes.

#### SPECIFIC PRINCIPLES

**PRINCIPLE I. Responsibility to clients.** IBC certified professionals respect the rights of those persons seeking their assistance and make reasonable efforts to ensure that their services are used appropriately.

- A. IBC certified professionals do not discriminate against or refuse professional service to anyone on the basis of race, gender, religion, national origin or sexual orientation.
  - 1. IBC certified professionals avoid bringing personal or professional issues into the counseling relationship. Through an awareness of the impact of stereotyping and discrimination, the counselor guards the individual rights and personal dignity of clients.
  - 2. IBC certified professionals are knowledgeable about disabling conditions, demonstrate empathy and personal emotional comfort in interactions with clients with disabilities, and make available physical, sensory, and cognitive accommodations that allow clients with disabilities to receive services.
- B. IBC certified professionals do not use their professional relationships with clients to further their own interests, including but not limited to increasing sessions to meet quotas or postponing discharge.
- C. IBC certified professionals respect the right of clients to make decisions and help them to understand the consequences of these decisions.

- D. IBC certified professionals continue therapeutic relationships only as long as it is reasonably clear that clients are benefiting from the relationship.
- E. IBC certified professionals assist persons in obtaining other therapeutic services if the counselor is unable or unwilling to provide professional help.
- F. IBC certified professionals do not willfully terminate the therapeutic relationship without making reasonable arrangements for the continuation of such treatment.
- G. IBC certified professionals obtain written, informed consent from clients before videotaping, audio recording, or permitting third-party observation.
- H. IBC certified professionals respect the integrity and protect the welfare of the client. The counselor, in the presence of professional conflict, is concerned primarily with the welfare of the client.
- I. IBC certified professionals ensure the presence of an appropriate setting for clinical work to protect the client from harm and the counselor and professional from censure.
- J. IBC certified professionals do not continue to practice while having a physical or mental disability which renders the counselor unable to practice the occupation or profession with reasonable skill or which may endanger the health and safety of the persons under the counselor's care.
- K. IBC certified professionals do not engage in the conduct of one's practice while suffering from a contagious disease involving risk to the client's or public's health without taking adequate precautions including, but not limited to, informed consent, protective gear or cessation of practice.

## **PRINCIPLE II. Dual relationships.**

- A. IBC certified professionals are aware of their influential position with respect to clients, and they avoid exploiting the trust and dependency of such persons. Counselors, therefore, make every effort to avoid dual relationships with clients that could impair professional judgment or increase the risk of exploitation. When a dual relationship cannot be avoided, counselors take appropriate professional precautions to ensure judgment is not impaired and no exploitation occurs, and consults with a supervisor or certified counselor prior to entering into a dual relationship.

Examples of such dual relationships include, but are not limited to, business or close personal relationships with clients and/or their family members, contact with clients on personal time, or knowingly entering into a personal/business relationship with a client.

- 1. Soliciting and/or engaging in personal relationships, including but not limited to romantic/sexual contact with clients and/or their natural supports is prohibited; this includes the five years following the termination of services. This prohibition applies to both in-person and electronic interactions or relationships (including social media).
- 2. IBC certified professionals never accept as clients their personal family members, close friends or anyone with whom they have engaged in romantic/sexual conduct. This

prohibition applies to both in-person and electronic interactions or relationships.

3. IBC certified professionals are aware of their professionalism and healthy boundaries with clients when it comes to social networking for at least a period of five years following the termination of services.
  - a. In instances where a relationship is initiated through the workplace, relationships on social media should not be initiated for at least five years after the client is discharged. IBC certified professionals do not provide their personal social media names or handles, or interact with their clients past or present, on social media.
  - b. IBC certified professionals do not provide their personal contact information to clients, i.e. home/personal cell phone number, personal email, etc. nor engage in communication with clients through these mediums except in cases of agency/professional business.

**PRINCIPLE III. Confidentiality.** IBC certified professionals embrace, as primary obligation, the duty of protecting the privacy of clients and do not disclose confidential information acquired in teaching, practice or investigation without appropriately executed consent. Any exception to this would adhere to Federal, State and local laws.

- A. IBC certified professionals make appropriate provisions for the maintenance of confidentiality and the ultimate disposition of confidential records. Counselors ensure that data obtained, including any form of electronic communication, are secured by the available security methodology. Data shall be limited to information that is necessary to and appropriate to the services being provided and be accessible only to appropriate personnel.
- B. IBC certified professionals discuss the information obtained in clinical, consulting, or observational relationships only in the appropriate settings for professional purposes that are in the client's best interest. Written and oral reports present only data germane and pursuant to the purpose of evaluation, diagnosis, progress, and compliance. Every effort is made to avoid undue invasion of privacy.
- C. IBC certified professionals reveal information received in confidence only when there is a clear and imminent danger to the client or other persons, or in situations requiring mandatory reporting, and then only to appropriate workers and/or public authorities.

**PRINCIPLE IV. Professional competence and integrity.** IBC certified professionals maintain high standards of professional competence and integrity.

- A. IBC certified professionals seek appropriate professional assistance for their personal problems or conflicts that may impair work performance or clinical judgment.
- B. IBC certified professionals, as teachers, supervisors, and researchers, are dedicated to high standards of scholarship and present accurate information.
- C. IBC certified professionals do not engage in sexual or other harassment or exploitation of clients, family of clients, students, trainees, supervisees, employees, colleagues, or research subjects.
- D. IBC certified professionals do not engage in conduct which does not meet the generally



accepted standards of practice for the alcohol and drug profession including, but not limited to, incompetence, negligence or malpractice, including but not limited to:

1. Falsifying or making incorrect essential entries or failing to make essential entries of client record.
  2. A substantial deviation from the standards of skill ordinarily possessed and applied by professional peers in the state of Iowa acting in the same or similar circumstances, either knowingly or unknowingly.
  3. Acting in such a manner as to present a danger to public health or safety, or to any client including, but not limited to, impaired behavior, incompetence, negligence or malpractice.
  4. Failing to comply with a term, condition or limitation on a certification or license.
  5. Diagnosing, treating, or advising on problems outside the recognized boundaries of their competence.
  6. Failing to obtain an appropriate consultation or make an appropriate referral when the problem of the client is beyond the alcohol and drug counselor's training, experience or competence.
  7. Failing to notify IBC of a suspension, revocation, probation or other restrictions on any professional certification or licensure imposed by any state or jurisdiction, unless such action has been satisfied and/or reversed.
  8. Administering to oneself any controlled substance in a way other than as prescribed, or using any drug or alcoholic beverage to the extent or in such manner as to be dangerous or injurious to self or others, or to the extent that such use impairs the ability of such person to safely provide professional services.
  9. Using alcohol or any dangerous drug or controlled substance while providing professional services.
  10. Aiding and abetting the use of any unprescribed controlled substance by another person.
  11. Providing alcohol for a client or anyone who cannot legally use alcohol.
  12. Refusing to seek evaluation and follow through with the recommended treatment for chemical dependency or a mental health problem which impairs professional performance.
- E. IBC certified professionals who provide services via electronic media shall inform the client/patient of the limitations and risks associated with such services and shall document in the client/patient case record that such notice has been provided.
- F. IBC certified professionals use professional and ethical judgment when including photos and/or comments on social media sites.

**PRINCIPLE V. Responsibility to students, employees, and supervisees.** IBC certified professionals do not exploit the trust and dependency of students, employees, and supervisees. IBC certified professionals

are aware of their influential position with respect to students, employees, and supervisees, and they avoid exploiting the trust and dependency of such persons. Counselors, 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, counselors 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 supervisees

- A. IBC certified professionals do not permit students, employees, or supervisees to perform or to hold themselves out as competent to perform professional services beyond their training, level of experience and competence.
- B. IBC certified professionals who supervise others accept the obligation to facilitate further professional development of these individuals by providing accurate and current information, timely evaluations, and constructive consultation.
- C. Provision of therapy to students, employees, or supervisees is prohibited until a minimum of one year after the professional relationship/obligation is terminated.
- D. Sexual conduct with students or supervisees is prohibited until a minimum of one year after the professional relationship/obligation is terminated.

**PRINCIPLE VI. Responsibility to the profession.** Counselors respect the rights and responsibilities of professional colleagues.

- A. Counselors treat others with respect, courtesy, and fairness.
  - 1. IBC certified professionals do 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 professional.
  - 2. IBC certified professionals cooperate with duly constituted professional ethics committees and promptly supply necessary information unless constrained by the demands of confidentiality.
  - 3. IBC certified professionals report the unethical conduct or practice of others in the profession to the appropriate certifying authority.
  - 4. IBC certified professionals do not knowingly file a false report against another professional concerning an ethics violation.
- B. As employees or members of organizations, IBC certified professionals refuse to knowingly participate in an employer's practices which are inconsistent with the ethical standards enumerated in this Code, and have a duty to report said practices to the appropriate licensure or accreditation body.
- C. IBC certified professionals assign publication credit to those who have contributed to a publication as appropriate.
- D. IBC certified professionals who are the authors of books or other materials that are published

or distributed cite persons to whom credit for original ideas is due.

**PRINCIPLE VII. Financial arrangements.** IBC certified professionals make financial arrangements for services with clients and third-party payers that are reasonably understandable and conform to accepted professional practices.

- A. IBC certified professionals do not offer, give or receive commissions, rebates or other forms of compensation for the referral of clients.
- B. IBC certified professionals do not charge excessive fees for services based upon current local rates.
- C. IBC certified professionals disclose their fees to clients prior to the delivery of services.
- D. IBC certified professionals do not enter into personal financial arrangements with clients.
- E. IBC certified professionals represent facts truthfully to clients and third-party payers, regarding services rendered.
- F. IBC certified professionals do not accept a private fee or any other gift or gratuity for professional work.
- G. IBC certified professionals do not accept gifts from clients except in cases where refusal of such gifts would be damaging to the therapeutic relationship. When possible, consultation with a supervisor or certified counselor should be sought prior to accepting a gift.

**PRINCIPLE VIII. Advertising.** IBC certified professionals engage in appropriate informational activities, including those that enable lay persons to choose professional services on an informed basis.

- A. IBC certified professionals accurately represent their credential, competence, education, training, and experience.
- B. IBC certified professionals do not use a firm name, letterhead, publication, term, title designation or document which states or implies an ability, relationship or qualification which the counselor does not have.
- C. IBC certified professionals do not use any professional identification (such as a business card, office sign, letterhead, or telephone or association directory listing) if it includes a statement or claim that is false, fraudulent, misleading, or deceptive. A statement is false, fraudulent, misleading, or deceptive if it:
  - 1. contains a material misrepresentation of fact which is likely to create an unrealistic expectation; or
  - 2. omits pertinent facts.

**PRINCIPLE IX. Legal and Conduct Standards of Behavior.** IBC certified professionals uphold the law and have high standards in both professional and personal conduct.

**Grounds for discipline** under this principle include, but are not limited to, the following:

1. Conviction of any felony or misdemeanor, excluding minor traffic offenses, whether or not the case is pending an appeal. A plea or verdict of guilty or a conviction following an Alford Plea, or any other plea which is treated by the court as a plea of guilty and all the proceedings in which the sentence was deferred or suspended, or the conviction expunged shall be deemed a conviction within the meaning of this section.
2. Permitting, aiding, abetting, assisting, hiring or conspiring with an individual to violate or circumvent any of the laws relating to licensure or certification under any licensing or certification act.
3. Fraud-related conduct under this principle includes, but is not limited to, the following:
  1. Publishing or causing to be published any advertisement that is false, fraudulent, deceptive or misleading.
  2. Engaging in fraud, misrepresentation, deception or concealment of material fact in applying for certification or certification renewal.
  3. Failing to cooperate with a board investigation in any material respect which includes but is not limited to:
    - i. interfering with an investigation or disciplinary proceeding by willful misrepresentation of facts before the disciplining authority or its authorized representatives;
    - ii. by use of threats or harassment against, or inducement to any patient, client or witness to prevent them from providing evidence in a disciplinary proceeding
    - iii. by use of threats or harassment against any person to prevent or attempt to prevent a disciplinary proceeding or other legal action from being filed, prosecuted or completed.
- a. Committing a fraudulent insurance act.
- b. Signing or issuing, in the certified alcohol and drug counselor's capacity, a document or statement that the counselor knows, or ought to know, contains a false or misleading statement.
- c. Practicing the profession under a false name or name other than the name under which the certification is held.
- d. Impersonating any certified professional or representing oneself as a certified professional for which one has no current certification.
- e. Charging a client or a third party payer for a service not performed, or submitting an account or charge for services that is false or misleading. This does not apply to charging for an unkept appointment by a client.
- f. Offering, giving or promising anything of value or benefit to any federal, state, or local employee or official for the purpose of influencing that employee or official to circumvent federal, state, or local law, regulation or ordinance governing the certified counselor or the alcohol and drug profession.

4. Engaging in sexual conduct, as defined in the Iowa Code, with a client during a period of time in which a professional relationship exists and for five years after that period of time.

### Definitions

See Glossary of Terms for definitions.

### ETHICS INVESTIGATIONS

**Complaint Procedure.** Any individual may file a complaint against a certified professional by submitting a completed “Ethics Violation Allegation Worksheet” (available on IBC’s web site at [www.iowabc.org](http://www.iowabc.org)).

1. The Ethics Violation Allegation Worksheet shall be submitted to:  
Executive Director  
Iowa Board of Certification  
2600 Grand Ave, Ste 114  
Des Moines, IA 50312
2. A copy of the Worksheet is forwarded to the Ethics & Appeals Committee chairperson.
3. The Ethics Committee, at their next monthly meeting, determines which principle(s) may have been violated.
4. If a potential violation has been determined, an investigator is assigned and the investigation is started.
5. If, in committee review, the allegation does not warrant assignment of an investigation, the complainant and the person who is alleged to have violated the principle will be notified of that decision. The allegation worksheet will be maintained in a committee file.
6. The Executive Director sends a certified letter to the respondent, notifying him/her that a complaint has been received, that an investigation has begun, and that he/she will be sent correspondence by the investigator. **Note: not cooperating with an investigation can result in a violation of Principle VI-A-2.**
7. The Executive Director shall send a certified letter to the complainant stating that the investigation has begun and that the investigator may be in contact with him/her.
8. When the investigation is completed, the investigator will report to the Ethics Committee. The committee shall review the information and make one of the following recommendations to the hearing panel:
  - a. Disciplinary hearing be held, or
  - b. Dismiss the complaint
9. Following the hearing, the respondent and complainant are notified in writing of the actions taken by the Board.

Should further violations be uncovered in the course of an investigation, these would comprise an additional complaint by the Committee on Ethics and Appeals.

If a complaint has been filed, the Ethics Committee may, at its discretion, proceed with an investigation even if the complainant subsequently requests that the complaint be withdrawn.

## HEARING PROCEDURES

**Order for Hearing.** Upon recommendation of the Committee on Ethics and Appeals, the IBC Board shall approve the date, time and place for an ethics hearing and shall appoint a hearing panel for the proceedings. A written notice of hearing will be sent to the complainant and the respondent at least 21 days prior to the hearing date.

- A. The hearing panel shall be comprised of three directors of the Board, excluding any member having a conflict of interest in the matter. At least one of the three members of the hearing panel shall be a certified professional.
- B. Both the respondent and complainant will be provided with a copy of the investigator's report and the hearing procedures.
- C. The notice of the hearing shall state:
  - 1. The date, time, and location of the hearing; and
  - 2. The respondent may, at his or her expense, be represented by legal counsel at the hearing; and
  - 3. The rules by which the hearing shall be governed.

A hearing may only be postponed at the discretion of the hearing panel chair and/or the IBC Executive Director.

**Conduct of Hearing.** The hearing shall be conducted in compliance with the following rules:

- A. The hearing shall be conducted by the hearing chair as assigned by the Executive Director, an impartial administrative law judge, attorney, or other person designated by the Board.
- B. The investigator, IBC's Executive Director or a designated representative shall present evidence in support of the Committee's recommendation before the hearing panel. The complainant and the respondent shall be allowed the opportunity to participate in the hearing. Witnesses will be called when appropriate, but shall only be present in the hearing during their testimony. The hearing shall be closed to the public.
- C. The hearing panel shall not be bound by common law or statutory rules of evidence, and may consider all evidence having probative value.
- D. No discovery shall be permitted and no access to Board files shall be allowed by the respondent except as specifically provided for herein. The Board shall keep all files in permanent form and confidential, unless otherwise provided or directed in writing by the President of the Board or the President's designee, for disciplinary purposes or by a specific rule of the IBC Board.
- E. After completion of the investigation and prior to the commencement of the hearing, members of the Board and hearing panel shall not discuss the case with either the complainant or the respondent in order to maintain neutrality and impartiality. The Executive Director may act as a source of general information to all parties.

- F. Members of the hearing panel may inquire and/or conduct relevant fact-finding to obtain the information necessary to make an accurate determination of the facts of the case. If additional violations are discovered during the hearing, it may result in additional sanctions.
- G. Board members and committee members who are not serving in an official capacity during the hearing shall not be present unless all parties present agree to such circumstances.
- H. A member of the IBC staff shall be responsible for record keeping at the hearing.
- I. The hearing shall be recorded.

**Failure by Respondent to Appear.** If a respondent, upon whom proper notice of hearing has been served, fails to appear either in person or represented by counsel at the hearing or otherwise respond to the complaint, the respondent shall be deemed to be at default and bound by the results of the hearing to the same extent as if the respondent had been present.

**Right to Waive Hearing.** At any time during the ethics investigation process, a respondent has the right to waive an ethics hearing by formal notification in written form with an original signature to IBC. ***In so doing, the respondent stipulates that the allegations of the ethics violation(s) are correct.*** As soon as practical, but no later than 90 days upon receipt of the waiver or scheduled hearing date, the Board shall determine any disciplinary sanctions. The decision of the Board shall be final and no appeal may be filed.

**Deliberation of the Hearing Panel.** Once the chairperson of the Committee on Ethics and Appeals or a representative designee has presented the case information, the complainant and the respondent have had an opportunity to speak, and the hearing panel has asked any questions, the hearing panel will meet in closed session to discuss the facts. A member of the IBC staff will be present during the deliberation. All panel deliberations will be recorded.

**Decision of the Hearing Panel.** The hearing panel shall make the determination regarding violation(s) and disciplinary sanctions as founded, substantiated, unsubstantiated or unfounded.

Upon conclusion of the hearing, the hearing panel chair shall submit a written report to the IBC office which shall include:

1. A concise statement of the findings of fact;
2. A conclusion as to whether any specific Principles have been substantiated, undetermined or unsubstantiated; and
3. The sanctions, if any, imposed by the Panel.

The hearing panel's decision and the official hearing panel report shall be sent within 30 days by certified mail to both the respondent and the complainant and include information on how an appeal may be requested.

**Discretion of the Hearing Panel.** The following factors may be considered by the hearing panel in determining the nature and severity of the disciplinary sanction to be recommended:

1. The relative seriousness of the violation as it relates to assuring the citizens of this state a high standard of professional service and care;
2. The facts of the particular violation;
3. Any extenuating circumstances or other counter-vailing considerations;
4. The number of complaints;



5. Prior violations or complaints and/or sanctions;
6. Whether the violation was self-reported;
7. Whether remedial action has previously been taken;
8. The level of cooperation from the respondent; and
9. Other factors which may reflect upon the competency, ethical standards and professional conduct of the individual.

**Method of Discipline.** The hearing panel may impose the following disciplinary sanctions:

1. Temporary revocation or permanent revocation; or
2. Suspension of certification or application privileges; or
3. Denial of an application for certification;
4. Reprimand; or
5. Other sanctions which may be deemed appropriate, such as additional education, training, supervision, competency demonstration, assessment and completion of any recommendations resulting from the assessment and/or other additional requirements in conjunction with any of the above disciplinary sanctions.

**Announcement of Decision.** At its next scheduled regular meeting, the Board shall be notified of the hearing panel's decision. The decision and the official hearing panel report shall be sent by certified mail to both the respondent and the complainant and include information on how an appeal may be requested.

**Confidentiality.** At no time prior to the release of the decision by the hearing panel shall any portion or the whole thereof of any action be made public or be distributed to any persons other than the directors of the Board, its Committee on Ethics and Appeals, and its staff.

**Publication of Decisions.** The decision in any disciplinary proceeding shall be published in whatever manner deemed appropriate by the Board. The employer, if any, shall be notified by certified mail of the final decision of the Board if a violation was founded. IBC may report a disciplinary action against certified professionals to the Iowa Department of Public Health-Division of Health Promotion, Prevention and Addictive Behaviors.

#### **Failure to Comply with Sanctions**

Failure to comply with hearing panel sanctions by the date mandated in the hearing report shall result in failure by the sanctioned individual to recertify or to apply for any of IBC's credentials after that date. Extensions for meeting sanctions will not be granted absent verifiable extenuating circumstances as determined by a hearing panel.

### **PROCEDURES AND REINSTATEMENT FOLLOWING DISCIPLINARY SANCTION(S)**

**Repossession of Certificate.** If a respondent's IBC credential has been suspended, denied, or revoked, the respondent must return his or her certificate to IBC no later than twenty-one (21) days after he or she receives notice of the suspension, denial, or revocation. The IBC certificate remains the property of IBC. Failure to return the certificate as required may result in additional sanctions.

**Reinstatement Following a Suspension.** Upon expiration of the suspension period, the Board shall authorize reinstatement of the professional's credential for the balance of his or her certification period, unless:

1. The respondent did not submit a letter of application for reinstatement or the letter did not present facts which, if established, would be sufficient to enable the Board to determine

- that the basis for sanction no longer exists;
2. Another suspension or revocation of the respondent's certification has occurred;
3. The respondent has committed another violation of the Code of Ethics;
4. The respondent has failed to remit the recertification fees or make an application for recertification in a timely manner; or
5. The respondent has failed to comply fully with the terms of his or her suspension.

**Possible Consideration Following Revocation.** It is recognized that there may be mitigating circumstances which could warrant granting permission to apply for certification following revocation. This does not apply to a permanent revocation sanction.

1. Permission to apply for certification following revocation may be considered only after two years have lapsed from the date of the Board's final decision.
2. The request for permission to apply for certification shall be initiated by the respondent. The request shall present facts which, if established, would be sufficient to enable the Board to determine that the basis for sanction no longer exists.
3. Permission to seek certification following revocation is granted solely within the discretion of the Board.

**Permanent Revocation.** Permanent revocation of certification or application privileges shall be construed as lasting a lifetime without the possibility for reinstatement.

## APPEALS OF DECISIONS OF HEARING PANEL

**Notice of Right to Appeal.** The respondent has the right to appeal the hearing panel's decision. The IBC office shall provide notice to the respondent that he or she may file an appeal of the hearing panel's decision.

**Filing of Appeal.** Appeals must be postmarked or personally delivered to IBC within thirty (30) days of receiving the certified notice of the hearing panel's decision. Appeals shall be addressed to:

Executive Director  
Iowa Board of Certification  
2600 Grand Ave, Ste 114  
Des Moines, IA 50312

**Administrative Fee for Appeals.** A non-refundable administrative fee must be submitted to IBC with the party's written appeal.

**Content of Appeal.** The appeal shall contain the following information.

1. Name, address, and telephone number of appealing party;
2. A written statement of the reasons supporting the appealing party's dissatisfaction with the hearing panel's decision;
3. A statement of the relief desired by the appealing party;
4. Copies of all relevant documents;
5. Signature of the appealing party.

**Review and Adjudication of Appeal.** The Directors of the Board, excluding any member having a conflict of interest in the matter, will review the case within 75 days of receipt of the request for appeal. The original hearing panel members may participate in the review with at least one member representing the hearing panel's decision.

Review of the appeal shall include review of the written appeal, any relevant documents submitted for purposes of the appeal, and transcripts of the hearing panel proceedings.

The Board shall make the determination to do one of the following.

1. Uphold the decision of the hearing panel;
2. Overturn or otherwise alter the decision of the hearing panel; or
3. Recommend a new hearing.

**Final Decision.** If no request for an appeal is made within the required time frame stated above, the decision of the hearing panel shall be final. Once the appeal process is completed, the decision of the Board shall be final.

Respondents who waive their right to a hearing also waive their right to appeal the sanctions determined by the board.



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# Glossary of Terms



## GLOSSARY OF TERMS

**Alcohol and Drug Counselor:** A person who has applied for certification or who is certified as an alcohol and drug counselor by the Iowa Board of Certification.

**Alcohol and Drug Specific:** Includes history, uses, and pharmacology of stimulants, depressants, psychotherapeutic drugs, alcohol, tobacco, and various other substances as well as the psychological, biological and social aspects of substance abuse. Appropriate intervention for preventing and treating substance abuse in special populations is also acceptable. In simpler terms, the training must be either about chemical substances or directly related to substance use and abuse.

**Board:** The Iowa Board of Certification.

**CEU:** Literally means a continuing education unit and is synonymous with "clock hour."

**Client:** A person who seeks or is assigned the services of an alcohol and drug counselor, regardless of the setting in which the counselor works, and for one year after the termination of services which includes aftercare, growth group and/or continuing care.

**Clock Hour:** Sixty minutes of participation in an organized learning experience. The unit of measurement for Professional Development credit for clinical supervisors.

**Complainant:** A person who has filed an official complaint pursuant to these rules.

**Continuing Education:** The variety of forms of learning experiences including, but not limited to lectures, conferences, academic studies, institutes, workshops, extension studies, and home study programs undertaken by applicants.

**Date of Application:** The date on which the Iowa Board of Certification receives the completed Application Handbook.

**Disciplinary Proceeding:** Any proceeding conducted under the authority of the Board.

**Discipline:** Any sanction the Board may impose upon a counselor for conduct which denies or threatens to deny the citizens of this state a high standard of professional care.

**Distance Learning:** Education that is obtained via Internet, home study programs, or other means in which the counselor works independently from an instructor and classroom. A limit of 20 clock hours can be earned by this method per recertification period. ICN trainings are not considered distance learning.

**Ethics:** Moral and ethical conduct as described in the IBC Code of Ethics.

**Experience:** Actual work in the field of alcohol and drug counseling. This may include practicum, volunteer, or part-time counseling, if provided under direct supervision.

**Hearing Panel:** A panel comprised of directors of the Board, which conducts a disciplinary proceeding pursuant to these rules.

**Home Study Courses:** Continuing education courses offered for individual study.

**IBC-Approved:** When a sponsor submits workshop materials to IBC demonstrating that a workshop has relevant content and requesting IBC CEU's for all participants.

**In-Service Training:** The education and training which occurs within the applicant's agency, only for agency staff and conducted only by agency staff.

**Internal Complaint:** A complaint registered against any IBC director of the Board or any of its committee members.

**Permanent Revocation:** The permanent loss of certification or application privileges.

**Racial/Ethnic:** Covers training including, but not limited to, the following categories: American Indian/Alaskan Native, Asian, African American, Native Hawaiian/Pacific Islander, and Hispanic/Latino.

**Reactivation:** The process of certification becoming active following Inactive Status. This is done by completing the recertification application which can be found on the IBC web site or by requesting the forms from the IBC office.

**Relevant Content:** Content relevant to the development and maintenance of current competency in the delivery of alcohol and drug counseling. Such course content may include, but is not limited to, the Core Functions and Knowledge and Skill Competencies as defined in the Application Handbook.

**Reprimand:** A formal written reproof or warning. Two reprimands within a two year period will result in a six month suspension.

**Residency Requirement:** IBC's policy that the applicant must live and/or work in Iowa at least 51% of the time at the time of application for initial certification, recertification, and reactivation.

**Respondent:** A person who is seeking or who has obtained certification from the Iowa Board of Certification and against whom a complaint has been filed pursuant to this Code.

**Revocation:** The loss of certification, including all related test scores.

**Sexual Conduct:** Includes kissing; touching of the clothed or unclothed inner thigh, breast, groin, buttocks, anus, pubes, or genitals; and sex acts which include intercourse, oral sex, and sexual contact with fingers, hands, objects.

**Sponsor:** An organization or presenter seeking IBC hours for all participants at a specific workshop.

**Substantiated Ethics Violation:** There is proof that the ethics complaint/allegation is true, a sanction will be imposed, and a record of the violation will be kept in the professional's certification file.

**Successful Completion:** Meeting all criteria as specified by the sponsor for continuing education course credit.

**Supervisor:** A person who meets the criteria to conduct supervision for counselor certification purposes.

**Suspension:** A time-limited loss of certification or the privilege of making application for certification.

**Undetermined Ethics Violation:** The hearing panel is unsure of proof of the ethics allegation/complaint, sanctions and recommendations may be made by the hearing panel, and a record of these sanctions/recommendations will be kept in the professionals' certification file.

**Unsubstantiated Ethics Violation:** There is no proof that the ethics allegation/complaint is true, and no record of the complaint will be kept in the professional's certification file.

**Workshop:** A systematic learning experience, at least one hour in length, which deals with and is designed for the acquisition of tasks, knowledge, skills, and information for application in client care.





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# Checklist for Application



## CHECKLIST FOR CCS

Applicants for CCS must submit a completed application, which needs to include:

- Form 01, "Applicant Information"
- Form 02, "Assurances and Release"
- Form 03, "Education Resume"  
*\*Have you requested your college(s) to send transcripts to IBC?*
- Form 04, "Workshop Documentation"
- Form 05, "Professional Experience Resume"
- Form 06, "Documentation of Core Function Experience"
- An official job description
- Full non-refundable fee of \$230.00



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## Fees



## FEES FOR CCS

Application Review, test fee, 2 years certification - non-refundable (applications will not be reviewed until fee is received)	\$230.00
Test Fee (if repeating the exam more than once)	\$135.00
CEU Processing (per workshop via distance learning or not IBC-approved for recertification)	\$ 15.00
Recertification (2 years)	\$ 75.00
Late Recertification Penalty (if not emailed/postmarked on or before expiration date)	\$ 50.00
Inactive Status (one year)	\$ 85.00
Reactivation of Certification after being Inactive	\$ 75.00
Printed Certificate	\$ 10.00
Reciprocity (paid directly to IC&RC) (contact the IBC office for reciprocity application)	\$150.00
Returned Check Fee	\$ 35.00



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## Addendum I



## ADDENDUM I

### Members of International Certification and Reciprocity Consortium (IC&RC)

Following is the current list of states/countries that carry the CCS credentials:

#### **United States**

Alabama  
Arizona  
Arkansas  
California  
Connecticut  
Delaware  
Georgia  
Hawaii  
Idaho  
Illinois  
Indiana  
Iowa  
Louisiana  
Maryland  
Massachusetts  
Michigan  
Minnesota  
Mississippi  
New Jersey  
New Mexico

North Carolina  
Ohio  
Oklahoma  
Pennsylvania  
Rhode Island  
South Carolina  
Texas  
U.S. Navy  
Utah  
Virginia  
West Virginia  
Wisconsin

#### **International**

Bermuda  
Canada  
Hong Kong, Taiwan, Macau, People's  
Republic of China  
Korea  
Puerto Rico  
Singapore



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## Addendum II



## ADDENDUM II

The Job Analysis identified several performance domains. Several tasks have been identified within each performance domain. These tasks and the needed knowledge or skills for their completion are the basis of examination questions.

Domains	Percentage of weight items per domain
1. Counselor Development	23%
2. Professional and Ethical Standards	23%
3. Program Development and Quality Assurance	15%
4. Assessing Counselor Competencies and Performance	23%
5. Treatment Knowledge	16%

### DOMAIN I: Counselor Development

**Task 1: Build a supportive and individualized supervisor alliance, teach the purpose of clinical supervision, and respect professional boundaries including:**

***Knowledge and Application of:***

1. Clinical supervision models, techniques, and modalities
2. Relationship-building models and strategies
3. Problem solving/conflict resolution theories
4. Monitoring of the core conditions to establish and maintain rapport with the supervisee
5. Adopting counseling and communications techniques for supervisory purposes
6. Establishing informed consent and expectations

**Task 2: Maintain a constructive, safe supervisory learning environment that fosters self-awareness and awareness of others including:**

***Knowledge and Application of:***

1. Motivational techniques
2. Cultural and lifestyle differences
3. Observation techniques (verbal and non-verbal)
4. Supervisees' strengths and limitations
5. Providing feedback

**Task 3: Help supervisees develop skills specific to working with culturally diverse clients including:**

***Knowledge and Application of:***

1. Cultural diversity
2. Recognizing values, attitudes, and world views towards self and others
3. Evaluating special populations for specific needs

**Task 4: Provide ongoing feedback to supervisees on their conceptualizations of client needs and appropriate therapeutic interventions including:**

***Knowledge and Application of:***

1. Case conceptualization
2. Providing feedback
3. Counseling skills
4. Observation techniques (indirect and direct)



5. Counselor job functions
6. Therapeutic modalities
7. Assessment of co-occurring, substance use, and addictive disorders
8. Using assessment tools

**Task 5: Create a professional development plan in collaboration with supervisees that includes specific, measurable goals and objectives including:**

***Knowledge and Application of:***

1. Career development strategies
2. Assessment theories, practices, and tools
3. Identifying staff training needs
4. Reviewing and updating supervisory goals

**Task 6: Direct supervisory activities to teach and develop supervisees including:**

***Knowledge and Application of:***

1. Adult learning styles
2. Supervisory techniques and modalities, including technology
3. Self-care strategies
4. Trauma-informed care and vicarious trauma
5. Adult teaching and training modalities

**Task 7: Educate supervisees regarding best practice developments including:**

***Knowledge and Application of:***

1. Trends in treating substance use and addictive disorders
2. Best practices
3. Evidence-based modalities
4. Trends in treating co-occurring disorders
5. Trends in research
6. Identifying educational resources
7. Maintaining professional development

## **DOMAIN II: Professional and Ethical Standards**

**Task 1: Ensure adherence to professional codes of ethics including:**

***Knowledge and Application of:***

1. Policies governing appropriate counselor/client and supervisor/supervisee relationships
2. Ethical standards and codes
3. Professional standards and codes
4. Confidentiality standards and limitations
5. Consequences of violations of policies, standards, and codes
6. Procedures for reporting violations of policies, standards, and codes
7. Informed consent
8. Clients' rights and responsibilities
9. Jurisdictional laws and regulations
10. Role of the supervisor as gatekeeper
11. Practicing only within one's areas of clinical and supervisory competence

12. Following due process guidelines for grievances and appeals

**Task 2: Participate in Clinical Supervisor professional development including:**

***Knowledge and Application of:***

1. Currency with research and evidence-based best practice
2. Professional affiliations and workforce development
3. Professional consultation/supervision
4. Stages of Clinical Supervisor development
5. Assessing personal educational needs

**Task 3: Seek supervision and implement a professional development plan including:**

***Knowledge and Application of:***

1. Importance of ongoing supervision and consultation
2. The Clinical Supervisor's individual development plan
3. Importance of modeling appropriate clinical, professional, and personal behavior
4. Elements of a professional development plan

**Task 4: Ensure that supervisees disclose supervision practices to clients including:**

***Knowledge and Application of:***

1. The purpose and value of consultation
2. Documentation of supervision requirements
3. Regulations regarding informed consent in relation to clinical supervision

**Task 5: Use and teach supervisees ethical decision-making models and monitor their use including:**

***Knowledge and Application of:***

1. Ethical decision-making models
2. Ethical codes and guidelines, relevant laws, and regulations
3. Procedures to report ethical violations
4. Identifying ethical dilemmas and violations
5. Confronting breaches of ethical standards, laws, or regulations
6. Identifying resources for ethical consultation and scholarship
7. Addressing conflicts among personal values, legal mandates, ethical issues, and agency policies

**Task 6: Understand the risks of dual relationships including:**

***Knowledge and Application of:***

1. The impact of establishing a dual relationship
2. Technology/social media platforms and their impact on boundaries and confidentiality
3. Legal and ethical implications of dual relationships
4. Recognizing conflicts of interest
5. Recognizing transference and countertransference
6. Maintaining boundaries in counseling

**Task 7: Provide timely consultation and guidance to supervisees in situations that present moral, legal, and/or ethical dilemmas including:**

***Knowledge and Application of:***

1. Importance of addressing supervision issues in a timely manner
2. Understanding vicarious liability
3. Counselor/supervisor resistance to reporting issues
4. Confronting agency resistance to reporting issues
5. Communicating to supervisees the importance of consultation
6. Using consultation techniques
7. Explaining ethical considerations related to counseling and financial remuneration

**Task 8: Recognize and address impaired practice of self and others including:**

***Knowledge of and techniques to address:***

1. Indications of impaired practice
2. Personal impairment
3. Signs of stress and burnout
4. Signs of compassion fatigue and vicarious trauma
5. Self-care strategies
6. Utilizing agency/professional resources
7. Advocating for supportive systems and assistance

**DOMAIN III: Program Development and Quality Assurance**

**Task 1: Structure and facilitate staff education including:**

***Knowledge and Application of:***

1. Recovery management models and the use of counseling interventions
2. Alternative counseling approaches and techniques
3. Defining training needs
4. Using motivational techniques to encourage participation
5. Employing a variety of education and training techniques

**Task 2: Recognizing and understanding the limitations of evidence-based practices including:**

***Knowledge and Application of:***

1. Fidelity/adaptation reviews
2. Evidence-based practices
3. Community needs assessment and cultural norms

**Task 3: Develop strategies for enhancing client access, engagement, and retention in treatment including:**

***Knowledge and Application of:***

1. Quality improvement standards
2. Engagement strategies
3. Empathic skills
4. Determining measurement metrics and tools
5. Monitoring and measuring client engagement and outcomes
6. Understanding special population needs
7. Identifying and addressing barriers to care

**Task 4: Support and develop the agency quality assurance plan and comply with all monitoring and documenting requirements including:**

***Knowledge and Application of:***

1. The role of the quality assurance plan in the provision of quality care
2. Quality improvement standards
3. The role of accreditation bodies regarding policies and procedures
4. Documentation/recordkeeping standards
5. Reviewing client charts for internal consistency and clinical quality

**Task 5: Utilize referral sources and other community programs including:**

***Knowledge and Application of:***

1. Locating, assessing, and using community resources
2. Professional relationship building
3. Networking models and strategies
4. Ethical standards related to referrals
5. Problem-solving and conflict resolution theories
6. Consensus-building strategies
7. Advocacy for required services
8. Collaboration

**Task 6: Identify and assess program needs and develop a plan to improve clinical services including:**

***Knowledge and Application of:***

1. Program needs assessment
2. Assessment theories, practices, and tools
3. Determining metrics and measurement tools
4. Applicable professional standards and codes
5. Role delineations in a multidisciplinary team
6. Developing staff competencies
7. Formulating program plans
8. Implementing program changes
9. Performing outcome measurements

**Task 7: Perform crisis intervention and management including:**

***Knowledge and Application of:***

1. The supervisors' role and responsibilities
2. Risk management and emergency policies and procedures
3. Supervisee role in crisis intervention and management
4. Incident debriefing
5. Reporting requirements

## **DOMAIN IV: Assessing Counselor Competencies and Performance**

**Task 1: Establish counselor role expectations including:**

***Knowledge and Application of:***

1. Job duties
2. Counselor competencies and scope of practice

3. Performance indicators
4. Criteria and benchmarking used to evaluate job performance
5. Assessment tools and techniques for assessing clinical competence
6. Ethical standards
7. Gatekeeping functions of supervisors
8. Applicable policies, procedures, rules, and laws

**Task 2: Understand supervision as a bi-directional evaluative process including:**

***Knowledge and Application of:***

1. The role of the Clinical Supervisor evaluation
2. Tools for the Clinical Supervisor evaluation
3. The evaluative aspects of the supervisory working alliance
4. Giving and receiving feedback in a manner that promotes counselor development

**Task 3: Assess supervisees' motivation, professional development, cultural, and clinical competence including:**

***Knowledge and Application of:***

1. Competency assessment tools and strategies
2. Counselor developmental models
3. Assessing clinical competence
4. Assessing multicultural awareness and biases
5. Assessing supervisee motivation and suitability for the work
6. Evaluating supervisee progress on the individualized development plan

**Task 4: Participate in performance recognition, disciplinary actions, and other personnel decisions including:**

***Knowledge and Application of:***

1. Human resources policies and procedures
2. Credentialing, certification and/or licensing standards
3. Career development interventions and strategies
4. Writing job descriptions
5. Correlating job requirements to the job description

## DOMAIN V: Treatment Knowledge

**Task 1: Demonstrate an understanding of substance use disorders, co-occurring disorders, and self-help philosophy including:**

***Knowledge and Application of:***

1. Alcohol and other drugs of abuse
2. Pharmacology
3. Self-help philosophy and traditions
4. Non-substance-related addiction disorders
5. Integrated healthcare
6. Co-occurring disorders

**Task 2: Understand the principles and theories of addiction, addiction prevention and treatment, and treatment limitations including:**

***Knowledge and Application of:***

1. Prevention strategies and research
2. Treatment models and applicability
3. Progression of substance use disorders
4. Withdrawal management
5. American Society of Addiction Medicine (ASAM) patient placement criteria
6. Substance use and addiction disorders resources and research
7. Assessment of readiness for change
8. Recovery and support programs
9. Harm reduction models
10. The addiction process and recovery management
11. Diagnostic and Statistical Manual (DSM)
12. Levels of intervention
13. Relapse prevention and continuing care
14. Bioassays (drug and alcohol testing and screening)
15. The continuum of care
16. Understanding the appropriate use and limitations of assessment and evaluation tools

**Task 3: Understand the use of pharmacological interventions and interactions including:**

***Knowledge and Application of:***

1. Pharmacological interventions
2. Drug interactions
3. Neuropharmacology
4. Assessing motivation of patient for pharmacological intervention
5. Integrating pharmacological interventions into treatment
6. Providing medication education and information



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## Addendum III



## Clinical Supervisor Examination Reference List

June 2016

The following resources were compiled as suggested reading to assist candidates preparing for their examination. Consulting these and other references may be beneficial to candidates. Please note, this is not a comprehensive listing of all references and not all questions on the examination came from these references.

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17. Powell, D., & Archie, B. (2004). *Clinical Supervision in Alcohol and Drug Abuse*. San Francisco: Jossey-Bass.
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