



California SUD Counselor Certification

Initial Registration Application

Required Registration

Regulations adopted by the California Department of Health Care Services. (DHCS), as effective April 1, 2005, require individuals who are not licensed professionals or who have not been previously certified, as specified in the regulations, to register with one of the designated certifying organizations listed on DHCS website.

Applicants for registration are required to complete a 9-hour orientation class prior to registration, consisting of 3 hours of SUD Ethics, 3 hours of SUD Confidentiality and 3 hours of SUD Professional Boundaries. This can be done in a single combined class on the three subjects. Submit official proof of attendance with this application.

Please note that the regulations allow employers to determine which of the certifying organization certifications they will accept. Potential registrants are advised to check with their employer, if any, before registering.

Registration is not equivalent to and is not an alternative to certification. Once you are registered you must complete the requirements for certification within five years. Your application will be cross referenced with other certifying organizations, if you are/were previously registered elsewhere, please indicate so on the application.

Certification

CADTP'S Substance Use Disorder Certified Counselor (SUDCC) credentials are designed to ensure a satisfactory level of competence for counselors working in SUD treatment programs. The Substance Use Disorder Certified Counselor certification has been developed to assess the knowledge and skills directly related to providing substance use disorder counseling services. SUDCC certification demonstrates that the certificant has the skills and experience needed to serve their clients and provides competency assurance to employers and the public.

Details of certification procedures, education, experience, and testing requirements as well as application forms can be found on the CADTP.ORG website.

Please submit the attached application, leaving nothing out and no blanks to become registered. Allow 2-3 weeks for processing. Incomplete applications will be returned and must be resubmitted.



CADTP

1026 W. El Norte Pkwy PMB 143

Escondido CA 92026

Phone: (800) 464-3597 Fax: (866) 621-2286

Email: info@cadtp.org Website: www.cadtp.org

Like us on Facebook and Follow us at @CADTP





Initial Registration Application

DO NOT FAX THIS APPLICATION

This completed form, the documentation required for registration and a check, money order or the completed credit card information below in the amount of seventy-five dollars (\$75) should be mailed or emailed to the address below.

Please include the following in your registration application:

- Payment of \$75
- Official Certificate – 9 Hour Orientation Course
- 2” x 2” passport style photograph of applicant
- Copy of official ID (Driver’s license)
- Uniform Code of Conduct; CADTP Code of Ethics - signed, dated and each page initialed; (Separate form)
- I was/am registered with* _____ On _____

Please type or print legibly:

First name: _____ Middle Name: _____ Last Name: _____

FULL mailing address: _____
Street number and name, City, State, and Zip Code are required

Last 4 of SSN (required): _____ Driver’s License #: _____ Phone: _____

E-Mail: _____

Employer (If Any): _____

Employer address: _____

I certify that this is my initial application for registration to become a Certified Substance Use Disorder counselor in the State of California pursuant to Section 13035 (f), Chapter 8, Division 4, Title 9, California Code of Regulations, and that I have not previously applied for registration by any other Certifying Organization approved by the State of California Department of Health Care Services.

By signing below, I am confirming that I have not been suspended or revoked by any other certifying organization or the Department of Health Care Services*. Further, I understand that I am obligated to report any suspension or revocation by another certifying organization to CADTP. I also acknowledge having received a copy of the current Department of Health Care Services (DHCS) Uniform Code of Conduct and the CADTP Code of Ethics and agree to adhere to both. I have enclosed a signed copy with this application.

Your Signature: _____ Date: _____

Required

*Will be verified



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CREDIT CARD INFORMATION (Master Card or Visa Only)

The information below will be shredded after your card has been charged; we do not keep your credit card information on file.

Please type or print legibly:

Full Name (as it appears on the card): _____

Company Name (If using company card): _____

Complete Billing address: _____
Street number and name, City, State and Zip Code are required

Credit Card Number: _____

Expiration Date: _____ Card ID Number*: _____
*Card ID Number appears on the reverse side of the card as the last 3 numbers near the signature

Total Amount to be charged: \$ _____

Authorized Signature: _____

Daytime Phone Number (in case there is a question): _____





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STANDARD UNIFORM CALIFORNIA AOD COUNSELOR CODE OF CONDUCT

Adopted May 2012

The current California Regulations governing registrants and certified alcohol and other drug (AOD) counselors require each certifying organization (CO) to develop a code of conduct which establishes “minimum” standards that are designed to safeguard the rights of clients in SUD programs and facilities. CO’s may impose more stringent standards that do not conflict with the standards contained within this Uniform Code of Conduct.

Principle 1:

Registrants and Certified AOD Counselors shall conduct themselves in an honest, forthright and professional manner. Registrants and Counselors are prohibited from engaging in the commission of any dishonest, corrupt, or fraudulent act substantially related to the qualifications, functions or duties of a registrant or counselor including but not limited to the following:

- a. Securing a registration, certification or renewal by fraud, deceit or misrepresentation on any application or material in support of any application for registration certification or renewal;
- b. Misrepresenting the type or status of registration or certification held by the person, or otherwise misrepresenting or permitting misrepresentation of his or her education, professional qualifications or professional affiliations to any person, program or entity;
- c. Refusal or failure to provide proper identifying registration, credential, certification or license where appropriate or required (e.g., when offering or providing AOD counseling services, on business cards, on informational or marketing materials, etc.);
- d. Advertising, marketing or promoting programs, services, training, education or experience in a false and misleading manner, as set forth in Business and Professions Code sections 17200, et seq.

Principle 2:

Registrants and Certified AOD counselors shall maintain professionally appropriate boundaries with clients and family members of clients and shall conduct themselves in a professional, non-exploitive and lawful manner, and are prohibited from:

- e. Engaging in inappropriate social relationships, sexual relations or soliciting sexual relations with a client or with a former client within two years from the termination date of the counseling relationship;
- f. Committing an act of sexual abuse, misconduct or an act punishable as a sexually related crime;
- g. Engaging in a business relationship with clients, patients, program participants, residents and/or other persons significant to them within one year from the termination of the counseling relationship;

Initial Here: _____

- h. Physically, verbally, sexually harassing, threatening or abusing other staff members, clients, patients, program participants, residents and/or other persons significant to any of the above;
- i. Unlawfully administering to himself or herself any controlled substance as defined in Section 4021 of the California Business and Professions Code (B&P), or using any of the dangerous drugs or devices specified in Section 4022 of the B&P, or using any alcoholic beverage to the extent, or in a manner, as to be dangerous or injurious to the person holding or applying for a registration, certification or license or to any other person, or to the public.

Principle 3:

Registrants and Certified AOD counselors shall comply with all Federal and State Laws and Regulations that pertain to patient/client confidentiality, mandated reporting exceptions, record keeping requirements and patient/client records access. Registrants and Certified AOD counselors are prohibited from:

- a. Violating client/patient confidentiality except as required or permitted by law including, but not limited to, Title 42 Code of Federal Regulations Part 2, Child Abuse, Elder Abuse and Public Safety laws and Regulations;
- b. Failing to maintain records consistent with the nature of the services being rendered;
- c. Refusing or denying patient/client access to charts and records as required by law;
- d. Violating, attempting to violate or conspiring to violate any law or regulation governing AOD registrants, certified or licensed AOD counselor.

¹ California Code of Regulations (CCR) Title 9, Division 4, Chapter 8, Sections 13000, et seq., as enacted April 1, 2005.

² CCR Title 9, Div. 4, Chap. 8, Section 13060.

³ CCR Title 9, Div. 4, Chap. 8, Section 13060(f).

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CADTP CODE OF ETHICS

FOR REGISTERED AND CERTIFIED SUBSTANCE USE DISORDER COUNSELOR

Adopted: September 1, 2009

Revised: November 13, 2017

This Code of Ethics shall prohibit all CADTP registrants and certified alcohol and other drug (AOD) counselors from violating any of the standards contained in the Uniform California. Counselor Code of Conduct (May 2012), as well as the following Code of Ethics established by CADTP (May 1, 2012)

1. I shall comply with the Standard Uniform California AOD Counselor Code of Conduct and CADTP's Code of Ethics and any additional standards or code of ethics which have been duly adopted by any agency I am employed by, as long as such additional standards do not supersede or conflict with the Standard Uniform California AOD Counselor Code of Conduct and CADTP's Code of Ethics.
2. I understand this Code of Ethics shall prohibit me from securing a certification or registration by fraud, deceit, or misrepresentation on any application submitted by me to a certifying organization for certification or registration whether engaged in by an applicant for certification or registration or in support of any application for certification or registration.
3. I am prohibited from providing counseling services, attending any program services or activities, or being present on program premises while under the influence of any amount of alcohol or illicit drugs. As used in this subsection, "illicit drugs" means any substance defined as a drug in Section 11014, Chapter 1, Division 10, Health and Safety Code, except:
 - A. Drugs or medications prescribed by a physician or other person authorized to prescribe drugs in accordance with Section 4036, Chapter 9, Division 2, Business and Professions Code, and used in the dosage and frequency prescribed; or
 - B. Over-the-counter drugs or medications used in the dosage and frequency described on the box, bottle, or package insert.
4. Gross negligence or incompetence in the performance of alcohol and other drug counseling.
5. I am prohibited from discriminating against program participants, patients, residents, or other staff members based on race, religion, age, gender, disability, national ancestry, sexual orientation, or economic condition.

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6. I shall make no misrepresentation as to the type or status of certification or registration held by me, or otherwise misrepresenting or permitting misrepresentation of my education, professional qualifications, or professional affiliations to any person or entity, and failure to state appropriate certification or licensure initials, numbers and/or level of registration or certification on business cards, brochures, websites, etc.
7. I acknowledge that I am prohibited from any impersonation of another counselor, registrant, or applicant for a certification or registration, or, in the case of a counselor, allowing any other person to use my certification or registration.
8. I will not aid or abet any uncertified or unregistered person to engage in conduct for which certification or registration is required.
9. I acknowledge that this Code of Ethics prohibits me from providing services beyond the scope of my registration or certification as an AOD counselor or my professional license, if the individual is a licensed counselor as defined in §13015 of the regulations. the individual is a licensed counselor as defined in §13015 of the regulations.
10. I shall not intentionally or recklessly cause physical or emotional harm to any client.
11. I will not initiate or perpetrate the commission of any dishonest, corrupt, or fraudulent act substantially related to the qualifications, functions, or duties of a counselor or registrant.
12. I shall not engage in any form of sexual relationship with a client or with a former client within two years from the termination date of therapy with the client, soliciting sexual relations with a client, or committing an act of sexual abuse, or sexual misconduct with a client, or committing an act punishable as a sexually related crime, if that act or solicitation is substantially related to the qualifications, functions, or duties of an alcohol and other drug counselor.
13. I shall not engage in a social or business relationship with clients, program participants, patients, or residents or other persons significant to them while they are in treatment and exploiting former clients, program participants, patients, or residents, and will refrain from engaging in any such relationship for a period of two years after their treatment or services have been concluded.
14. I shall not verbally, physically, or sexually harass, threaten, or abuse any program participant, patient, resident, their family members, other persons who are significant to them, or other staff members.
15. I shall protect any program participant's, any patient's, or any resident's right to confidentiality, and I shall not fail to maintain confidentiality, except as otherwise required or permitted by law, including but not limited to the Code of Federal Regulations, Title 42, Part 2, as well as any applicable "Notice of Privacy" regulatory requirements required by the Health Insurance Portability & Accountability Act of 1996 [HIPAA].

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16. I will not participate or engage in any form of advertising that in reasonable probability, will cause an ordinarily prudent person to misunderstand or be deceived; (ii) makes a claim either of professional superiority or of performing services in a superior manner, unless that claim is relevant to the service being performed and can be substantiated with objective scientific evidence; or (iii) make a scientific claim that cannot be substantiated by reliable, peer reviewed, published scientific studies.
17. I will maintain and protect client and other confidential records consistent with sound professional judgment and within the standards of the AOD profession and the nature of services being rendered.
18. I will not willfully deny access to client records as otherwise provided by law.
19. I shall cooperate with complaint investigations and will respond to requests for information during complaint investigations as long as disclosure of such information does not violate the confidentiality requirements of Title 42 of the Code of Federal Regulations.
20. I understand that any act of gross negligence or incompetence in the performance of alcohol and other drug counseling on my part will result in appropriate sanctions [suspension or revocation] against my registration or certification.
21. I shall not attempt to provide counseling or education services, attend any other type of program activity or service, or be present on program premises while under the influence of any mood-altering substance.
22. I shall be responsible for completing the continuing education requirements for alcohol and other drug counselors prescribed in Title 9 of the California Code of Regulations and approved by CADTP and for providing proof of same as requested.

This Code of Conduct/ Code of Ethics may be amended or revised as needed. I understand and agree that it is my responsibility to inform CADTP, in writing, of any changes to my mailing address. CADTP will notify any registrants or certified counselors, in writing, via email and via CADTP's website within 60 days of any changes to the Code of Conduct/Code of Ethics.

Printed Name: _____

Signature: _____

Date: _____

IMPORTANT NOTE: After you sign and date this document, please send the original to CADTP. Keep a copy for your records and have your employer, if any, place a copy in your personnel file.