



West Virginia Certification Board for Addiction and Prevention
Professionals

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PREVENTION SPECIALIST

Manual

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West Virginia Certification Board for Addiction and Prevention Professionals, Inc.

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Section I — Authority for Certification of Addiction and Prevention Professionals

Certification is the process by which a non-governmental agency or association grants recognition to an individual who has met certain predetermined qualifications specified by that agency or association.

The authority of the West Virginia Certification Board for Addiction and Prevention Professionals (WVCBAPP) is derived from the persons who are dedicated to service as addiction and prevention professionals and who will be most affected by certification.

Application for certification is entirely voluntary.

Individuals seeking certification choose to do so of their own free will and must agree to accept the decisions rendered by the WVCBAPP.

Value of credence of certification should be based on knowledge of the certification standards and experience with Certified Addictions and Prevention Professionals. The WVCBAPP has incorporated the standards developed by the Role Delineation Study of the IC&RC as those standards for prevention professionals in West Virginia will meet in order to attain the highest level of certification.

The credibility of the certification process results from standards which are maintained and upgraded. The WVCBAPP's major role is to assure that professional competence and integrity are attained and maintained.

As a member of the IC&RC, the West Virginia Certification Board for Addiction and Prevention Professionals adheres to the IC&RC's minimal standards and meets their quality improvement guidelines.

Section II — Purpose for Certification

Establishing consistent standards to measure the quality of services along with a system of voluntary, professional certification of prevention professionals is intended to assure quality services to the consumer and to help define, communicate and promote the profession.

The purpose of the certification of prevention professionals:

- To establish and recognize basic standards for professional competence in the field;
- To establish the credibility of the prevention profession with consumers, employers and funding sources; and
- To provide standards for the evaluation of persons seeking employment in the prevention field.

Certification as a Prevention Specialist is heavily based on both knowledge and demonstrated competency. An applicant is required to demonstrate competency as defined in this manual.

Prevention Specialist I: Prevention Specialist I (PSI) is granted to professionals whose primary duties are to provide direct services to the consumer (e.g., delivering school prevention programs, facilitating youth and community groups, etc.)

A Prevention Specialist I is a person who has demonstrated experience in the field of prevention. This person has functioned with skilled supervision and has demonstrated the knowledge and skills

commensurate with a minimum of a two-year degree or 60 credit hours from an accredited college or university (in community health, education, or related field) approved by the WVCBAPP. Training, and/or experience in the field of prevention. At least two years must be in direct services to the consumer.

Prevention Specialist II Prevention Specialist II (PSII) is granted to professionals involved in a broad spectrum of prevention services (e.g., coordinating, advising, planning, administration, research and development, etc.) This professional is highly skilled, knowledgeable and able to function with little or no supervision. This person demonstrates a skill level commensurate with a minimum of a bachelor's degree in community health, education or a related field (approved by WVCBAPP), and 4 years of paid experience in the field.

The type of certification sought depends on the applicant's type of current work involvement, experiences in the field, educational background and knowledge base.

Section III — Criteria for the Prevention Specialist I (PSI)

Requirements— a minimum of 2 years qualifying experience that includes:

Work Experience

At least 2000 hours (1 year) of paid or volunteer work experience in which an average of 8 hours per week is devoted to planning or delivering prevention services across the 6 Domains and not just in substance abuse prevention. Volunteer work experience will not count for more than 2 years of qualifying experience.

Formal Education

A minimum of a 2-year degree from an accredited university or college in community health, health, education or related field approved by WVCBAPP.

Education/Training

At least 300 contact hours must be documented (one college credit hour represents 15 contact hours). At least 180 contact hours must be prevention specific as indicated in the course/training title or documented supportive materials. It is the applicant's responsibility to provide written documentation/verification of all education listed in this section. Contact or credit hours listed without such accompanying verification will not be considered. No more than 12 hours of CEUs will be credited for any 24-hour period.

Supervised Practical Experience

120 completed hours of supervised practical experience with a minimum of 12 hours in each of the 6 performance domains. A PS II must provide supervision.

Knowledge and Skill Base

Competence in the performance knowledge areas demonstrated by obtaining a passing score on the IC&RC CBT (Computer Based Test) Prevention examination.

Professional Code of Ethics

Applicant must subscribe to the WVCBAPP's adopted Prevention Code of Ethics (see section XI.)

Section IV — Criteria for the Prevention Specialist II (PS II)

Requirements — a minimum of 4 years of qualifying experience, which includes:

Work Experience

At least 4000 hours (2 years) of paid work experience specific to prevention.

Formal Education

A minimum of a Bachelor's Degree from an accredited university or college in community, health, education or related field approved by WVCBAPP.

Education/Training

A minimum of 360 documented clock hours of prevention education and/or training with a minimum of 240 hours specific to the 6 performance domains identified by WVCBAPP. These hours may include accredited degree work. 300 contact hours of prevention training are required, of which must be specific to addiction. of the 240 hours of addiction specific training, 6 must be in the area of addiction/prevention ethics.

One 3 credit college course equals 45 contact hours. One college credit equals 15 contact hours.

Supervised Practical Experience

120 hours of supervision must be completed during the Supervised Practical Experience with a minimum of 20 hours in each of the 6 performance domains. Supervision must be provided by a PS II.

Knowledge and Skill Base

Competence in the Prevention knowledge areas demonstrated by obtaining a passing score on the IC&RC CBT (Computer Based Test) written examination.

Professional Code of Ethics

Applicants must subscribe to the WVCBAPP's adopted Prevention Code of Ethics

Section V — Definition of Prevention and the Prevention Professional/Specialist

In establishing standards for the certification of the Prevention Professional/Specialist, it is necessary to define both the concept of Prevention as well as the role of the individual. In November 1996, the IC&RC began changing the definition from strictly *addiction* prevention to a broader based concept in the sense that the work of prevention is intended to alleviate a wide range of at-risk behaviors.

Definition of Prevention — Prevention is a pro-active process of helping individuals, families and communities to develop the resources needed to develop and maintain healthy lifestyles. Prevention focuses upon the development of innovative programs and carefully planned interventions that are implemented before the onset of physical, psychological, emotional, or social problems. Prevention is broad based in the sense that it is intended to alleviate a wide range of at-risk behaviors including, but not limited to, alcohol, tobacco, and other drug abuse, crime and delinquency, violence, vandalism, mental health problems, family conflict, parenting problems,

stress and burnout, child abuse, learning problems, school failure, school dropouts, teenage pregnancy, depression and suicide.

Consistent with this change in definition of the concept, the definition of the role of Prevention Professionals also changed.

Definition of a Prevention Professional - Prevention professionals, through a combination of education, specialized training, supervised work experiences, and human service skills, help individuals, families, and communities to use their physical, intellectual, emotional, social, vocational and spiritual resources to promote personal well-being. They do this by fostering:

- awareness, knowledge, competency and skills;
- self-esteem and self-reliance;
- increased coping ability;
- support systems in families, schools, work places and the community;
- conditions for healthy lifestyles and resistance to physical and psychological illness and disease;
- environmental conditions that insure a healthy community; and
- cultural competency and awareness.

Section VI — Performance Domains of the Prevention Specialist

The professional activities of the prevention specialist will, of necessity, cover a broad range of techniques and modalities appropriate for the infinite variety (age, sex, religion, ethnicity, education, economic and social status) of groups, organizations and individuals in our communities. However, there is a set of functions common to all prevention specialists, regardless of practice settings, life experience and educational background. These functions are comprised of the following domains:

- Domain I. Planning and Evaluation
- Domain II. Prevention Education and Service Delivery
- Domain III. Communication
- Domain IV. Community Organization
- Domain V. Public Policy and Environmental Change
- Domain VI. Professional Growth and Responsibility

Section VII — Domains, Tasks, Knowledge, Skill and Attitude Statements

Examination Content

CHECK PAGE 11 OF THE FOLLOWING LINK FOR UPDATES TO THE INFORMATION BELOW. IT IS YOUR RESPONSIBILITY TO DO THIS.

<http://professionals.internationalcredentialing.org/Resources/Documents/Candidate%20Guides/PS%20candidate%20guide%201-14.pdf>

The **2013 Prevention Specialist Job Analysis** identified six performance domains for the IC&RC Prevention Specialist Examination:

Domain	Weight on Exam
1. Planning and Evaluation	30%
2. Prevention Education and Service Delivery	15%
3. Communication	13%
4. Community Organization	15%
5. Public Policy and Environmental Change	12%
6. Professional Growth and Responsibility	15%

Within each performance domain are several identified tasks that provide the basis for questions in the examination. Following is the outline of the tasks that fall under each domain.

Domain 1: Planning and Evaluation

Task 1 Determine the level of community readiness for change.

Knowledge of:

- 1 information gathering and data analysis techniques
- 2 stages of community readiness

Skill In:

- 1 collecting, organizing, and interpreting data
- 2 assessing and building community resources and readiness
- 3 identifying and engaging key stakeholders

Task 2 Identify appropriate methods to gather relevant data for prevention planning.

Knowledge of:

- 1 information gathering and data analysis techniques
- 2 prevention program evaluation instruments/models
- 3 validity and reliability of evaluation instruments/models

Skill In:

- 1 collecting, organizing, and interpreting data
- 2 assessing and building community resources and readiness

Task 3 Identify existing resources available to address the community needs.

Knowledge of:

- 1 information gathering and data analysis techniques
- 2 financial, human, and organizational resources

Skill In:

- 1 assessing and building community resources and readiness
- 2 collecting, organizing, and interpreting data
- 3 capacity building
- 4 community engagement

Task 4 Identify gaps in resources based on the assessment of community conditions.

Knowledge of:

- 1 logic models as a planning and evaluation tool

- 2 information gathering and data analysis techniques
- 3 financial, human, and organizational resources

Skill In:

- 1 assessing and building community resources and readiness
- 2 collecting, organizing, and interpreting data

Task 5 Identify the target audience.

Knowledge of:

- 1 continuum of care
- 2 Risk and Protective Factor Theory and other theories relevant to prevention
- 3 community characteristics

Skill In:

- 1 collecting, organizing, and interpreting data
- 2 cultural responsiveness

Task 6 Identify factors that place persons in the target audience at greater risk for the identified problem.

Knowledge of:

- 1 continuum of care
- 2 Risk and Protective Factor Theory and other theories relevant to prevention
- 3 community characteristics

Skill In:

- 1 information gathering and data analysis
- 2 cultural responsiveness

Task 7 Identify factors that provide protection or resilience for the target audience.

Knowledge of:

- 1 continuum of care
- 2 Risk and Protective Factor Theory and other theories relevant to prevention
- 3 community characteristics

Skill In:

- 1 information gathering and data analysis
- 2 cultural responsiveness

Task 8 Determine priorities based on comprehensive community assessment.

Knowledge of:

- 1 strategies to build community capacity
- 2 logic models as a planning and evaluation tool
- 3 Theory of Change concepts
- 4 problem prioritization strategies

Skill In:

- 1 collecting, organizing, and interpreting data

Task 9 Develop a prevention plan based on research and theory that addresses community needs and desired outcomes.

Knowledge of:

- 1 logic models as a planning and evaluation tool
- 2 Risk and Protective Factor Theory and other theories relevant to prevention
- 3 evidence-based prevention interventions in behavioral health
- 4 components of effective prevention program planning
- 5 community characteristics

Skill In:

- 1 developing and implementing effective, outcome focused prevention programming
- 2 interpreting and applying prevention program evaluation activities
- 3 collecting, organizing, and interpreting data

Task 10 Select prevention strategies, programs, and best practices to meet the identified needs of the community.

Knowledge of:

- 1 Risk and Protective Factor Theory and other theories relevant to prevention
- 2 strategies to build community capacity
- 3 problem prioritization strategies
- 4 evidence-based prevention interventions in behavioral health
- 5 components of effective prevention program planning
- 6 community characteristics

Skill In:

- 1 implementing effective, outcome focused prevention programming
- 2 collecting, organizing, and interpreting data
- 3 cultural responsiveness

Task 11 Implement a strategic planning process that results in the development and implementation of a quality strategic plan.

Knowledge of:

- 1 assessment, capacity building, planning, implementation, and evaluation methods
- 2 sustainability strategies
- 3 cultural diversity

Skill In:

- 1 conducting activities consistent with strategic prevention planning models
- 2 implementing effective, outcome focused prevention programming
- 3 cultural responsiveness

Task 12 Identify appropriate prevention program evaluation strategies.

Knowledge of:

- 1 components of effective prevention program planning
- 2 prevention program evaluation instruments/models
- 3 validity and reliability of evaluation instruments/models

Skill In:

- 1 implementing effective, outcome focused prevention programming
- 2 collecting, organizing, and interpreting data
- 3 interpreting and applying prevention program evaluation findings

Task 13 Administer surveys/pre/posttests at work plan activities.

Knowledge of:

- 1 information gathering and data analysis techniques
- 2 prevention program evaluation instruments/models
- 3 validity and reliability of evaluation instruments/models

Skill In:

- 1 collecting, organizing, and interpreting data

Task 14 Conduct evaluation activities to document program fidelity.

Knowledge of:

- 1 information gathering and data analysis techniques

Skill In:

- 1 collecting, organizing, and interpreting data

Task 15 Collect evaluation documentation for process and outcome measures.

Knowledge of:

- 1 information gathering and data analysis techniques
- 2 prevention program evaluation instruments/models
- 3 validity and reliability of evaluation instruments/models

Skill In:

- 1 collecting, organizing, and interpreting data

Task 16 Evaluate activities and identify opportunities to improve outcomes.

Knowledge of:

- 1 guidelines for program adaptation
- 2 prevention program evaluation instruments/models
- 3 information gathering and data analysis techniques

Skill In:

- 1 collecting, organizing, and interpreting data
- 2 interpreting and applying prevention program evaluation findings

Task 17 Utilize evaluation to enhance sustainability of prevention activities.

Knowledge of:

- 1 strategies needed to build community capacity
- 2 evidence-based prevention interventions in behavioral health
- 3 sustainability strategies
- 4 validity and reliability of evaluation instruments/models

Skill In:

- 1 interpreting and applying prevention program evaluation findings
- 2 collecting, organizing, and interpreting data

Task 18 Provide applicable workgroups with prevention information and other support to meet prevention outcomes.

Knowledge of:

- 1 financial, human, and organizational resources
- 2 strategies to build community capacity
- 3 logic models as planning and evaluation tools
- 4 Risk and Protective Factor Theory and other theories relevant to prevention

Skill In:

- 1 conducting strategic planning activities
- 2 collecting, organizing, and interpreting data

Task 19 Incorporate cultural responsiveness into all planning and evaluation activities.

Knowledge of:

- 1 guidelines for program adaptation
- 2 components of effective prevention program planning
- 3 prevention program evaluation instruments/models
- 4 validity and reliability of evaluation instruments/models

Skill In:

- 1 selecting culturally relevant evaluation instruments/models
- 2 interpreting and applying prevention program evaluation findings

Task 20 Prepare and maintain reports, records, and documents pertaining to funding sources.

Knowledge of:

- 1 financial, human, and organizational resources
- 2 information gathering and data analysis techniques
- 3 best practices in documentation

Skill In:

- 1 collecting, organizing, and interpreting data
- 2 interpreting and applying prevention program evaluation findings

Domain 2: Prevention Education and Service Delivery

Task 1 Coordinate prevention activities.

Knowledge of:

- 1 group processes
- 2 training and group facilitation techniques
- 3 interagency dynamics and/or power relationships
- 4 prevention program best practices and models
- 5 target audience
- 6 financial, human, and organizational resources

- 7 appropriate evaluation instruments and delivery
- 8 culturally appropriate materials for the target audience

Skill In:

- 1 effective written and interpersonal communication
- 2 facilitating group processes
- 3 working within existing organizational and community structures
- 4 working with diverse populations
- 5 following a work plan

Task 2 Implement prevention education and skill development activities appropriate for the target audience.

Knowledge of:

- 1 cultural diversity
- 2 prevention program best practices
- 3 learning styles, instructional strategies, and presentation methods
- 4 Risk and Protective Factor Theory and other theories relevant to prevention
- 5 guidelines for program adaptation
- 6 training and group facilitation techniques
- 7 culturally appropriate materials for the target audience

Skill In:

- 1 demonstrating cultural competence and sensitivity
- 2 obtaining copyright permission prior to implementing copyrighted materials/content
- 3 effective written and interpersonal communication
- 4 facilitating group processes
- 5 working with diverse populations

Task 3 Provide prevention education and skill development programs that contain accurate, relevant, and timely content.

Knowledge of:

- 1 information gathering techniques and data sources
- 2 training evaluation models, instruments, and processes
- 3 cultural diversity
- 4 prevention program best practices
- 5 learning styles, instructional strategies, and presentation methods
- 6 Risk and Protective Factor Theory and other theories relevant to prevention
- 7 guidelines for program adaptation
- 8 training and group facilitation techniques
- 9 current behavioral health trends and research

Skill In:

- 1 collecting, organizing, and interpreting data
- 2 synthesizing prevention theories and models

- 3 interpreting evaluation data and revising programming as necessary
- 4 demonstrating cultural competence and sensitivity
- 5 obtaining copyright permission prior to implementing copyrighted materials/content
- 6 effective written and interpersonal communication
- 7 facilitating group processes
- 8 working with diverse populations
- 9 working within the context of the organizational culture

Task 4 Maintain program fidelity when implementing evidence-based practices.

Knowledge of:

- 1 principles and guidelines of fidelity and adaptation
- 2 prevention intervention protocols

Skill In:

- 1 modifying and implementing instructional materials
- 2 maintaining core components when modifying evidence-based programs

Task 5 Serve as a resource to community members and organizations regarding prevention strategies and best practices.

Knowledge of:

- 1 policies, procedures, and legal/programmatic limitations that guide the practice of related professions
- 2 current evidence-based strategies and best practices
- 3 prevention resources for instructional programming
- 4 current behavioral health trends and research
- 5 Risk and Protective Factor Theory and other theories relevant to prevention
- 6 assessment, capacity building, planning, implementation, and evaluation methods

Skill In:

- 1 implementing evidence-based practices
- 2 networking and outreach to community stakeholders
- 3 providing technical assistance
- 4 effective written and interpersonal communication

Domain 3: Communication

Task 1 Promote programs, services, and activities, and maintain good public relations.

Knowledge of:

- 1 policies, procedures, regulations, and ethical codes that guide interactions with the media and public
- 2 learning styles, instructional strategies, and presentation methods
- 3 cultural diversity and social justice
- 4 media literacy and advocacy

- 5 effective communication methods
- 6 behavioral health promotion
- 7 current behavioral health trends
- 8 media outlets

Skill In:

- 1 developing, modifying, and implementing culturally appropriate materials
- 2 developing and implementing media strategies
- 3 identifying target audience
- 4 advocacy and public health promotion
- 5 effective written and interpersonal communication
- 6 utilizing media outlets
- 7 evaluating effectiveness of media campaign

Task 2 Participate in public awareness campaigns and projects relating to health promotion across continuum of care.

Knowledge of:

- 1 public health models
- 2 information gathering and data analysis techniques
- 3 logic models as planning and evaluation tools
- 4 continuum of care
- 5 community engagement
- 6 behavioral health promotion
- 7 shared risk and protective factors between physical health, substance use, and other behavioral health disorders
- 8 prevention interventions to reduce the factors between physical health disorders such as depression, substance use, and conduct disorders
- 9 current behavioral health trends and research
- 10 local, state, and national behavioral health systems and their strategic goals
- 11 policies, procedures, regulations, and ethical codes that guide interactions with the media and public
- 12 media and advocacy resources
- 13 copyright laws and reference procedures

Skill In:

- 1 identifying target populations
- 2 identifying change agents
- 3 collaboration
- 4 networking
- 5 advocacy and public health promotion
- 6 integrating behavioral and physical health
- 7 effective written and interpersonal communication
- 8 cultural responsiveness

- 9 conducting evaluation methods

Task 3 Identify marketing techniques for prevention programs.

Knowledge of:

- 1 effective marketing strategies
- 2 cultural diversity
- 3 target audience
- 4 media literacy and advocacy
- 5 communication models
- 6 financial, human, and organizational resources
- 7 current trends in media marketing

Skill In:

- 1 collecting, organizing, and interpreting data
- 2 effective written and interpersonal communication
- 3 facilitating focus groups
- 4 engaging the media
- 5 building sustainable relationships and alliances
- 6 creative processes
- 7 involving target audience in all stages of the marketing campaign
- 8 planning a media campaign

Task 4 Apply principles of effective listening.

Knowledge of:

- 1 principles of ethics
- 2 rules/laws related to mandated reporting
- 3 target audience
- 4 interviewing techniques

Skill In:

- 1 effective written and interpersonal communication
- 2 demonstrating cultural competence and sensitivity
- 3 active listening

Task 5 Apply principles of public speaking.

Knowledge of:

- 1 audience characteristics
- 2 culturally appropriate materials for the target audience
- 3 subject matter
- 4 desired outcomes

Skill In:

- 1 effective written and interpersonal communication
- 2 researching topic materials
- 3 organizing presentation logically
- 4 story telling
- 5 leading discussion

- 6 handling unexpected issues
- 7 seeking and utilizing feedback
- 8 identifying appropriate visual aids
- 9 utilizing technological resources in presentation delivery
- 10 building rapport

Task 6 Employ effective facilitation skills.

Knowledge of:

- 1 audience characteristics
- 2 learning styles, instructional strategies, and presentation methods
- 3 subject matter
- 4 meeting agenda
- 5 communication models

Skills in:

- 1 modeling appropriate behaviors and communication skills
- 2 ensuring outcome-based decisions
- 3 creating comfortable environments
- 4 encouraging participation
- 5 preventing and managing conflict
- 6 listening and observation
- 7 facilitating group processes
- 8 ensuring quality decisions
- 9 time management

Task 7 Communicate effectively with various audiences.

Knowledge of:

- 1 group processes
- 2 training and group facilitation techniques
- 3 learning styles, instructional strategies, and presentation methods
- 4 subject matter
- 5 interagency dynamics and/or power relationships
- 6 federal and local confidentiality laws
- 7 audience characteristics
- 8 communication models

Skills In:

- 1 effective written and interpersonal communication
- 2 facilitating group processes
- 3 working within existing community structures and norms
- 4 demonstrating cultural competence and sensitivity
- 5 synthesizing prevention theory and models
- 6 active listening
- 7 seeking and utilizing feedback

Task 8 Demonstrate interpersonal communication competency.

Knowledge of:

- 1 basic communication theories
- 2 learning styles, instructional strategies, and presentation methods

Skill In:

- 1 effective written and interpersonal communication
- 2 networking and outreach to community partners
- 3 facilitating group processes
- 4 cultural competence and sensitivity
- 5 active listening

Domain 4: Community Organization

Task 1 Identify the community demographics and norms.

Knowledge of:

- 1 information gathering techniques and data analysis techniques
- 2 basic terms in epidemiology

Skill In:

- 1 collecting, organizing, and interpreting data
- 2 effective written and interpersonal communication

Task 2 Identify a diverse group of stakeholders to include in prevention programming activities.

Knowledge of:

- 1 cultural diversity
- 2 strategies for engaging community members
- 3 community characteristics
- 4 community sector representatives

Skill In:

- 1 implementing capacity-building strategies among diverse groups
- 2 demonstrating cultural competence and sensitivity
- 3 identifying current and emerging community leaders

Task 3 Build community ownership of prevention programs by collaborating with stakeholders when planning, implementing, and evaluating prevention activities.

Knowledge of:

- 1 capacity-building strategies
- 2 engagement strategies
- 3 effective written and interpersonal communication
- 4 role of community ownership

Skill In:

- 1 identifying current and emerging community leaders
- 2 facilitating group processes
- 3 providing community training
- 4 working with existing organizational and community structures

- 5 fostering shared leadership
- Task 4 Offer guidance to stakeholders and community members in mobilizing for community change.**
- Knowledge of:**
 - 1 training and group facilitation techniques
 - 2 level of community readiness
 - 3 assessment, capacity building, planning, implementation, and evaluation methods
 - 4 intercommunity organizational structures and patterns of communication
 - 5 strategies for moving leaders to higher levels of readiness
 - 6 advocacy strategies
- Skill In:**
 - 1 transferring ownership of prevention programs to the community
 - 2 increasing level of involvement of local and state organizations and cultural groups
 - 3 training, mentoring, and organizing community groups, volunteers, and other stakeholders
 - 4 effective written and interpersonal communication
- Task 5 Participate in creating and sustaining community-based coalitions.**
- Knowledge of:**
 - 1 group processes
 - 2 cultural diversity
 - 3 identifying current and emerging community leaders
 - 4 intercommunity organizational structures and patterns of communication
 - 5 interagency dynamics and/or power relationships
 - 6 financial, human, and organizational resources
 - 7 strategies for engaging community members
 - 8 assessment, capacity building, planning, implementation, and evaluation methods
- Skill In:**
 - 1 training, mentoring, and organizing community groups and volunteers
 - 2 facilitating group processes
 - 3 effective written and interpersonal communication
 - 4 cultural responsiveness
 - 5 conducting strategic planning activities
- Task 6 Develop or assist in developing content and materials for meetings and other related activities.**
- Knowledge of:**
 - 1 prevention principles
 - 2 evidence-based practices

- 3 Risk and Protective Factor Theory and other theories relevant to prevention
- 4 prevention program evaluation instruments/models
- 5 logic models as a planning tool
- 6 current behavioral health trends and research
- 7 learning styles, instructional strategies, and presentation methods
- 8 resources for education, training, and professional development related to prevention
- 9 culturally appropriate materials for the target audience

Skill In:

- 1 effective written and interpersonal communication
- 2 collecting, organizing, and analyzing data
- 3 developing, modifying, and implementing materials for the target audience

Task 7 Develop strategic alliances with other service providers within the community.

Knowledge of:

- 1 group processes
- 2 cultural diversity
- 3 intercommunity organizational structures and patterns of communication
- 4 interagency dynamics and/or power relationships
- 5 financial, human, and organizational resources

Skill In:

- 1 negotiation
- 2 effective written and interpersonal communication
- 3 networking and outreach to community partners
- 4 building sustainable relationships and alliances
- 5 demonstrating cultural competence and sensitivity

Task 8 Develop collaborative agreements with other service providers within the community.

Knowledge of:

- 1 intercommunity organizational structures and patterns of communication
- 2 policies, procedures, and legal/programmatic limitations that guide the practice of related professions
- 3 key leaders of other services providers
- 4 interagency dynamics and/or power relationships
- 5 elements of formal agreements

Skill In:

- 1 working within existing community structures and norms
- 2 building sustainable relationships and alliances

- 3 effective written and interpersonal communication

Task 9 Participate in behavioral health planning and activities.

Knowledge of:

- 1 local, state, and national behavioral health systems and their strategic goals
- 2 community planning
- 3 current behavioral health trends and research
- 4 continuum of care
- 5 shared risk and protective factors between physical health, substance use, and other behavioral health disorders
- 6 prevention interventions to reduce the incidence of behavioral health disorders such as depression, substance use, and conduct disorders
- 7 behavioral health promotion

Skill In:

- 1 collaboration
- 2 integrating behavioral health and physical health
- 3 networking
- 4 advocacy and public health promotion
- 5 training, mentoring, and organizing community groups and volunteers
- 6 facilitating group processes
- 7 effective written and interpersonal communication
- 8 cultural responsiveness

Domain 5: Public Policy and Environmental Change

Task 1 Provide resources, training, and consultation to promote environmental change.

Knowledge of:

- 1 group processes
- 2 political processes
- 3 environmental change strategies
- 4 information gathering techniques and data sources
- 5 evidence-based prevention policies
- 6 community characteristics
- 7 theory of change
- 8 financial, human, and organizational resources
- 9 learning styles, instructional strategies, and presentation methods
- 10 socioecological systems theories
- 11 public health model

Skill In:

- 1 facilitating groups
- 2 collecting, organizing, and analyzing data
- 3 communicating prevention policies to decision makers

- 4 working within local political systems
- 5 implementing environmental change strategies
- 6 effective written and interpersonal communication
- 7 advocacy in public health promotion and prevention
- 8 public speaking
- 9 training, mentoring, and organizing community groups and volunteers
- 10 providing technical assistance

Task 2 Participate in enforcement initiatives to affect environmental change.

Knowledge of:

- 1 political processes
- 2 environmental change strategies
- 3 information gathering techniques and data sources
- 4 community norms and other characteristics
- 5 theory of change
- 6 financial, human, and organizational resources
- 7 law enforcement and regulatory agencies
- 8 socioecological systems theories
- 9 interagency dynamics and/or power relationships

Skill In:

- 1 collecting, organizing, and analyzing data
- 2 developing and implementing social marketing strategies
- 3 working with political, judicial, and law enforcement systems
- 4 effective written and interpersonal communication
- 5 advocacy in public health promotion and prevention
- 6 public speaking

Task 3 Participate in public policy development to affect environmental change.

Knowledge of:

- 1 political processes
- 2 environmental change strategies
- 3 information gathering techniques and data sources
- 4 community norms and other characteristics
- 5 theory of change
- 6 financial, human, and organizational resources
- 7 socioecological systems theories
- 8 interagency dynamics and/or power relationships
- 9 community characteristics
- 10 public health model
- 11 current behavioral health trends and research

Skill In:

- 1 collecting, organizing, and analyzing data

- 2 developing and implementing social marketing strategies
- 3 working with political, judicial, and law enforcement systems
- 4 effective written and interpersonal communication
- 5 advocacy in public health promotion and prevention
- 6 public speaking
- 7 technical assistance
- 8 resource sharing
- 9 networking and outreach to policy makers

Task 4 Use media strategies to support policy change efforts in the community.

Knowledge of:

- 1 political processes
- 2 media advocacy and outlets
- 3 environmental change strategies
- 4 information gathering techniques and data sources
- 5 financial, human, and organizational resources
- 6 socioecological systems theories
- 7 interagency dynamics and/or power relationships
- 8 community norms and other characteristics
- 9 current behavioral health trends and research

Skill In:

- 1 collecting, organizing, and analyzing data
- 2 developing and implementing social marketing strategies
- 3 working within local political systems
- 4 implementing environmental change strategies
- 5 effective written and interpersonal communication
- 6 advocacy in public health promotion and prevention
- 7 public speaking
- 8 engaging the media
- 9 cultural competence and sensitivity

Task 5 Collaborate with various community groups to develop and strengthen effective policies supporting prevention

Knowledge of:

- 1 group processes
- 2 environmental change strategies
- 3 information gathering techniques and data sources
- 4 evidence-based prevention policies
- 5 training, mentoring, and organizing community groups and volunteers
- 6 community characteristics
- 7 financial, human, and organizational resources
- 8 cultural competence and sensitivity

9 interagency dynamics and/or power relationships

Skill In:

- 1 facilitating groups
- 2 collecting, organizing, and analyzing data
- 3 implementing environmental change strategies
- 4 effective written and interpersonal communication
- 5 advocacy in public health promotion and prevention
- 6 cultural competence and sensitivity
- 7 networking and outreach to community stakeholders

Task 6 Advocate to bring about policy and/or environmental change.

Knowledge of:

- 1 political processes
- 2 information gathering techniques and data sources
- 3 evidence-based environmental strategies
- 4 theory of change
- 5 community norms and other characteristics
- 6 financial, human, and organizational resources
- 7 current behavioral health trends and research
- 8 media outlets and resources
- 9 the difference between lobbying and advocacy

Skill In:

- 1 facilitating groups
- 2 collecting, organizing, and analyzing data
- 3 developing and implementing social marketing strategies
- 4 communicating prevention policies to decision makers
- 5 working within local political systems
- 6 implementing environmental change strategies
- 7 effective written and interpersonal communication
- 8 advocacy in public health promotion and prevention
- 9 public speaking
- 10 identifying and engaging change agents and policy makers
- 11 negotiating
- 12 networking and outreach to community stakeholders

Domain 6: Professional Growth and Responsibility

Task 1 Demonstrate knowledge of current prevention theory and practice.

Knowledge of:

- 1 assessment, capacity building, planning, implementation, and evaluation methods
- 2 components of effective prevention program planning
- 3 continuum of care
- 4 cultural diversity

- 5 current behavioral health trends and research
- 6 current evidence-based prevention interventions in behavioral health
- 7 financial, human, and organizational resources
- 8 group processes
- 9 guidelines for program fidelity and adaptation
- 10 personal biases, beliefs, limitations, and cultural assumptions
- 11 professional associations and organizations related to behavioral health
- 12 professional codes of conduct/ethics related to the prevention profession
- 13 public health model
- 14 Risk and Protective Factor Theory and other theories related to prevention
- 15 shared risk and protective factors between physical health, substance use, and other behavioral health disorders
- 16 sustainability strategies
- 17 the process of addiction, its effect on the brain, developmental processes and family systems
- 18 theory of change

Skill In:

- 1 applying current prevention theory and evidence-based practice to prevention work
- 2 conducting comprehensive strategic planning activities
- 3 demonstrating cultural competence and sensitivity
- 4 effective written and interpersonal communication
- 5 facilitating group processes
- 6 following a work plan
- 7 maintaining fidelity when adapting evidence-based programs
- 8 working collaboratively within the public health system

Task 2 Adhere to all legal, professional, and ethical principles.

Knowledge of:

- 1 principles of ethics
- 2 professional codes of conduct/ethics related to the prevention profession
- 3 advocacy guidelines
- 4 basic budget requirements set by funders
- 5 federal and local confidentiality laws
- 6 laws related to the reporting of abuse and neglect
- 7 personal biases, beliefs, limitations, and cultural assumptions
- 8 policies, procedures, and legal/programmatic limitations that guide the practice of related professions
- 9 recipient rights and informed consent
- 10 copyright laws and reference procedures

Skill In:

- 1 applying current prevention theory and evidence-based practice to prevention work
- 2 applying federal and local mandates regarding confidentiality and reporting of suspected abuse and neglect of service recipients
- 3 demonstrating cultural competence and sensitivity
- 4 demonstrating ethical decision-making in prevention work
- 5 demonstrating personal use of strategies for healthy living
- 6 obtaining informed consent of participants
- 7 continuing professional development through education, self-evaluation, supervision, and consultation to maintain competence and enhance professional effectiveness
- 8 implementing strategies to ensure the safety of program participants

Task 3 Demonstrate cultural responsiveness as a prevention professional.

Knowledge of:

- 1 creative and adaptive uses of community resources
- 2 cultural characteristics that influence attitudes, behaviors, and perceptions that relate to substance use and mental health
- 3 culturally appropriate materials for the target audience
- 4 personal biases, beliefs, limitations, and cultural assumptions
- 5 professional codes of conduct/ethics related to the prevention profession
- 6 health disparities that impact diverse communities
- 7 importance of diverse representation in planning

Skill In:

- 1 active listening
- 2 modeling cultural competence and sensitivity
- 3 developing, modifying, and implementing culturally appropriate materials
- 4 effective written and interpersonal communication and facilitation skills
- 5 encouraging multiple perspectives
- 6 networking and relationship building
- 7 working with diverse populations
- 8 working within existing organizational and community structures

Task 4 Demonstrate self-care consistent with prevention messages.

Knowledge of:

- 1 organization and community resources that support health and well-being
- 2 healthy living strategies
- 3 personal biases, beliefs, limitations, and cultural assumptions
- 4 professional codes of conduct/ethics related to the prevention profession
- 5 resources for education, training, and professional development related to prevention
- 6 conflict resolution strategies

Skill In:

- 1 demonstrating personal use of strategies for healthy living
- 2 modeling appropriate behaviors and communication skills
- 3 preventing and managing conflict
- 4 seeking and utilizing feedback from peers
- 5 recognizing personal limitations and seeking assistance when needed

Task 5 Recognize importance of participation in professional associations locally, statewide, and nationally.

Knowledge of:

- 1 advocacy strategies
- 2 current behavioral health systems of care
- 3 elements of formal agreements
- 4 financial, human, and organizational resources
- 5 organizational dynamics and characteristics
- 6 interagency dynamics and/or power relationships
- 7 local, state, and national stakeholders
- 8 local, state, and national behavioral health systems and their strategic goals
- 9 policies, procedures, and legal/programmatic processes that guide the practice of related professions
- 10 professional associations and organizations related to behavioral health
- 11 working within the context of the organizational culture
- 12 intercommunity organizational structures and patterns of communication

Skill In:

- 1 public health advocacy
- 2 training, mentoring, and organizing community groups and volunteers
- 3 working collaboratively within the public health system
- 4 working within local political systems
- 5 effective written and interpersonal communication and facilitation
- 6 networking and relationship building

Task 6 Demonstrate responsible and ethical use of public and private funds.

Knowledge of:

- 1 advocacy strategies
- 2 basic budget requirements/guidelines set by funders and organizational policy
- 3 regulations and practices regarding ethical fundraising
- 4 professional codes of conduct/ethics related to the prevention profession
- 5 elements of formal agreements
- 6 conflicts of interest

Skill In:

- 1 collecting, organizing, analyzing, and reporting funding data

- 2 demonstrating ethical decision-making in prevention work
- 3 following a work plan
- 4 adhering to budget requirements/guidelines
- 5 applying professional codes of conduct/ethics related to the prevention profession

Task 7 Advocate for health promotion and prevention across the life span.

Knowledge of:

- 1 advocacy strategies
- 2 behavioral health promotion
- 3 health disparities that impact diverse communities
- 4 current behavioral health systems of care, theory, and practice
- 5 current behavioral health trends and research
- 6 effective communication methods
- 7 environmental change strategies
- 8 healthy living strategies
- 9 collecting, organizing, analyzing, and reporting data and information
- 10 media and advocacy resources
- 11 political processes
- 12 professional associations and organizations related to behavioral health
- 13 resources for education, training, and professional development related to prevention

Skill In:

- 1 advocacy in public health promotion and prevention
- 2 collecting, organizing, and analyzing data
- 3 communicating health disparities that impact diverse communities
- 4 demonstrating personal use of strategies for healthy living
- 5 effective written and interpersonal communication
- 6 engaging the media
- 7 facilitating group processes
- 8 identifying target audience
- 9 implementing environmental change strategies
- 10 networking and relationship building
- 11 identifying change agents

Task 8 Advocate for healthy and safe communities.

Knowledge of:

- 1 advocacy strategies
- 2 behavioral health promotion
- 3 health disparities that impact diverse communities
- 4 current behavioral health systems of care, theory, and practice
- 5 current behavioral health trends and research
- 6 effective communication methods

- 7 environmental change strategies
- 8 healthy living strategies
- 9 collecting, organizing, analyzing, and reporting data and information
- 10 media and advocacy resources
- 11 political processes
- 12 professional associations and organizations related to behavioral health
- 13 resources for education, training, and professional development related to prevention
- 14 community based processes
- 15 federal and local confidentiality laws

Skill In:

- 1 advocacy in public health promotion and prevention
- 2 collecting, organizing, and analyzing data
- 3 communicating health disparities that impact diverse communities
- 4 demonstrating personal use of strategies for healthy living
- 5 effective written and interpersonal communication
- 6 engaging the media
- 7 facilitating group processes
- 8 identifying target audience
- 9 implementing environmental change strategies
- 10 networking and relationship building
- 11 identifying change agents
- 12 working with diverse populations

Task 9 Demonstrate knowledge of current issues of addiction.

Knowledge of:

- 1 health disparities that impact diverse communities
- 2 current behavioral health systems of care, theory, and practice
- 3 biases, beliefs, and cultural assumptions related to addictions
- 4 signs, symptoms, and progressive stages of addiction
- 5 addicted family dynamics
- 6 effects of drugs on the brain and the body
- 7 health promotion and prevention within the continuum of care
- 8 prevention within a Recovery Oriented System of Care (ROSC)
- 9 co-occurring disorders

Skill In:

- 1 applying current prevention theory and evidence-based practice to prevention work
- 2 demonstrating cultural competence and sensitivity
- 3 working collaboratively within the public health system
- 4 identifying signs, symptoms, and progressive stages of addiction
- 5 brief intervention and referral

Task 10 Demonstrate knowledge of current issues of mental, emotional, and behavioral health.

Knowledge of:

- 1 the effects of mental, emotional, and behavioral health on the family
- 2 co-occurring disorders
- 3 biases, beliefs, and cultural assumptions related to addictions
- 4 healthy living strategies and wellness promotion
- 5 health disparities that impact diverse communities
- 6 current behavioral health systems of care, theory, and practice
- 7 evidence-based environmental strategies

Skill In:

- 1 applying current prevention theory and evidence-based practice to prevention work
- 2 working collaboratively within the public health system
- 3 demonstrating cultural competence and sensitivity
- 4 public health advocacy
- 5 identifying signs and symptoms of mental, emotional, and behavioral health issues
- 6 brief intervention and referral

Section VIII - Recertification

Every individual who has attained certification (at either of the two credentialing levels) must seek recertification by the end of the two-year certification period, in order to maintain an active credential.

STEPS TO RECERTIFICATION:

1. Complete the required application form. The recertification application must be postmarked by August 30th. Applications are available on the WVCBAPP website; wvcbapp.org, under the resources tab. It remains the responsibility to the certified professional to obtain, complete and submit recertification documents in a timely manner.
2. Payment of required fee.
3. Complete 40 hours of continuing education which includes 6 hours specific to addiction and 6 hours of addiction or prevention ethics.
4. At least 50% of all continuing education hours must be face-to-face in person training. Online coursework for college/university classes are exempt from this rule. Webinars can only comprise of 50% of required continuing education units.

OBTAINING APPROVED STATUS FOR TRAINING:

Certification Board approval for continuing education hours/events may be gained in a variety of ways:

- a. By the sponsoring agent: The individual, agency or institution sponsoring the training submits an application and fee to the Certification Board. The Board reviews the materials and, if appropriate, approves a set number of contact hours.
- b. By the individual attending the training: The individual attending the training submits an application and fee to the Certification Board. The Board reviews the materials and, if appropriate, approves a set number of contact hours.
- c. By the trainer or faculty member: The person teaching the course or workshop submits an application and fee to the Certification Board. The Board reviews the materials and, if appropriate, approves a set number of contact hours.

Procedures and applications for these processes may be obtained from the Certification Board.

LATE FEE:

A late fee of \$75.00 is charged to any re-certification applicant if the application has not been postmarked by August 30th.

INACTIVE STATUS:

Once a certified professional fails to submit the re-certification packet by August 30th of the year in which he/she is supposed to re-certify, the credential is considered to be “inactive” and may not be used until re-certification is obtained. The individual may not identify him/herself as a Prevention Specialist (PSI or PSII), Alcohol and Drug Counselor (ADC), Advanced Alcohol and Drug Counselor (AADC), Certified Clinical Supervisor (CCS), or Certified Criminal Justice Addiction Professional (CCJP) and must notify his/her employer of the inactive status of the credential in question. Since the Certified Clinical Supervisor (CCS) credential requires that the individual holds an active ADC/AADC credential, one’s CCS will also become inactive if the ADC/AADC credential becomes inactive.

The individual can regain his/her credential up to 90 days past the expiration date by completing the re-certification process and paying all late fees (\$75.) After the 90 day period, your certification will be null and void and the individual will have to re-apply, complete all certification paperwork and take all tests in order to be re-credentialed.

Section IX — Upgrade of Certification Level

Those persons who have been granted certification at the Prevention Specialist I (PS I) level by the WVCBAPP and who have maintained such certification may apply for an upgraded level when appropriate criteria for the Prevention Specialist II (PS II) have been met. Use the PS application, which is online, to document your achievement of the criteria required for the PS II.

For example, the PS I requires at least 2000 hours (1 year) of work experience in prevention. The PS II requires at least 4000 hours (2 years) of work experience in prevention. So, on the application, document the additional year of prevention work experience.

Section X - Procedure for an Appeal to WVCBAPP Decision

Purpose: The appeal process will determine if a decision rendered on certification/recertification status of an application was arbitrary or capricious.

Procedures:

1. An individual desiring to appeal a decision regarding certification status must do so in writing addressed to the President of the WVCBAPP within 30 days of the postmark of the announcement of the certification status being appealed. This letter must include the following information:
 - a) The specific decision being appealed
 - b) The outcome desired
 - c) The justification for the outcome
2. The review committee will review the appeal and all appropriate data. The President will respond to the appeal letter within 30 days with a letter clearly stating the action taken by the review committee regarding the outcome. The review team will be chosen from an alphabetical listing of the board members on a rotating basis. Board members not participating in the original evaluation would compose the committee. Rotations of members will occur with each new appeal.
3. If the applicant is not satisfied with the review committee's response at this point, he/she may request a personal appearance before the Board. This appearance must be requested in writing within 30 days of the receipt of the initial appeal response from the review committee. This appearance must be held within 60 days of the written request.
4. The person of his/her choice may accompany the applicant to this personal appearance. However, it should be noted that the appeal interview is not a re-interview. It is a review to determine whether the Board acted in an arbitrary or capricious manner.
5. The applicant may present information to the Board to demonstrate that the decision rendered by the Board was arbitrary and capricious.
6. A set time allowance for presentation of information will be established prior to the beginning of the appearance.
7. The applicant will be notified in writing of the Board's decision within seven (7) days of the Board Review.

Section XI – Code of Ethical Standards

The practice of prevention work is based on shared knowledge, skills, and values. It is the purpose of the West Virginia Certification Board for Addiction and Prevention Professionals to promote at least a minimum of standards among Prevention Specialists. The following ethical standards shall govern the professional's daily involvement in prevention activities and emphasize the professional concern for the rights and interests of the consumer.

Prevention Code of Ethical Conduct

Preamble

The principles of ethics are models of exemplary professional behavior. These principles of the Prevention Think Tank Code express prevention professionals' recognition of responsibilities to the public, to service recipients, and to colleagues within and outside of the prevention field. They guide prevention professionals in the performance of their professional responsibilities and express the basic tenets of ethical and professional conduct. The principles call for honorable behavior, even at the sacrifice of personal advantage. These principles should not be regarded as limitations or restrictions, but as goals toward which prevention professionals should constantly strive. They are guided by core values and competencies that have emerged with the development of the prevention field.

Principles

I. Non-Discrimination

Prevention professionals shall not discriminate against service recipients or colleagues based on race, ethnicity, religion, national origin, sex, age, sexual orientation, education level, economic or medical condition, or physical or mental ability. Prevention professionals should broaden their understanding and acceptance of cultural and individual differences and, in so doing, render services and provide information sensitive to those differences.

II. Competence

Prevention professionals shall master their prevention specialty's body of knowledge and skill competencies, strive continually to improve personal proficiency and quality of service delivery, and discharge professional responsibility to the best of their ability. Competence includes a synthesis of education and experience combined with an understanding of the cultures within which prevention application occurs. The maintenance of competence requires continual learning and professional improvement throughout one's career.

- a. Prevention professionals should be diligent in discharging responsibilities. Diligence imposes the responsibility to render services carefully and promptly, to be thorough, and to observe applicable standards.

- b. Due care requires prevention professionals to plan and supervise adequately, and to evaluate any professional activity for which they are responsible.
- c. Prevention professionals should recognize limitations and boundaries of their own competence and not use techniques or offer services outside those boundaries. Prevention professionals are responsible for assessing the adequacy of their own competence for the responsibility to be assumed.
- d. Prevention professionals should be supervised by competent senior prevention professionals. When this is not possible, prevention professionals should seek peer supervision or mentoring from other competent prevention professionals.
- e. When prevention professionals have knowledge of unethical conduct or practice on the part of another prevention professional, they have an ethical responsibility to report the conduct or practice to funding, regulatory or other appropriate bodies.
- f. Prevention professionals should recognize the effect of impairment on professional performance and should be willing to seek appropriate treatment.

III. Integrity

To maintain and broaden public confidence, prevention professionals should perform all responsibilities with the highest sense of integrity. Personal gain and advantage should not subordinate service and the public trust. Integrity can accommodate the inadvertent error and the honest difference of opinion. It *cannot* accommodate deceit or subordination of principle.

- a. All information should be presented fairly and accurately. Prevention professionals should document and assign credit to all contributing sources used in published material or public statements.
- b. Prevention professionals should not misrepresent either directly or by implication professional qualifications or affiliations.
- c. Where there is evidence of impairment in a colleague or a service recipient, prevention professionals should be supportive of assistance or treatment.
- d. Prevention professionals should not be associated directly or indirectly with any service, product, individual, or organization in a way that is misleading.

IV. Nature of Services

Practices shall do no harm to service recipients. Services provided by prevention professionals shall be respectful and non-exploitive.

- a. Services should be provided in a way that preserves and supports the strengths and protective factors inherent in each culture and individual.
- b. Prevention professionals should use formal and informal structures to receive and incorporate input from service recipients in the development, implementation and evaluation of prevention services.

- c. Where there is suspicion of abuse of children or vulnerable adults, prevention professionals shall report the evidence to the appropriate agency.

V. *Confidentiality*

Confidential information acquired during service delivery shall be safeguarded from disclosure, including—but not limited to—verbal disclosure, unsecured maintenance of records or recording of an activity or presentation without appropriate releases. Prevention professionals are responsible for knowing and adhering to the State and Federal confidentiality regulations relevant to their prevention specialty.

VI. *Ethical Obligations for Community and Society*

According to their consciences, prevention professionals should be proactive on public policy and legislative issues. The public welfare and the individual’s right to services and personal wellness should guide the efforts of prevention professionals to educate the general public and policy makers. Prevention professionals should adopt a personal and professional stance that promotes health.

I have read and understand the Prevention Code of Ethical Principles. I will, to the best of my ability, adhere to and honor this Code in my professional and personal dealings.

Date

Signature

Printed name: _____