

Code of Ethical Conduct for Prevention Professionals

Adapted from Prevention Think Tank, Inc. - Revised September 2003

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.

Prevention Specialist Certification Board of Washington (PSCBW) is a member board of the International Certification and Reciprocity Consortium/Alcohol and Other Drug Abuse, Inc. (IC&RC)

Application, February 29, 2008 Revision

Code of Ethical Conduct for Prevention Professionals (continued)

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, understood and agree to adhere to and honor, to the best of my ability, the above stated principles as a Code of Ethical Conduct.



Signature of Applicant

Date

Prevention Specialist Certification Board of Washington (PSCBW) is a member board of the International Certification and Reciprocity Consortium/Alcohol and Other Drug Abuse, Inc. (IC&RC)

Application, February 29, 2008 Revision

Registration for the Prevention Specialist Written Certification Examination

© Copyright 1994, IC&RC, current revision.

Applicant's Full Legal Name:	
Please check the one box below to indicate which examination session you would like to take the exam:	
Examination Date Requested	Complete Candidate Portfolio must have been postmarked by date below
<input type="checkbox"/> June 14, 2008 (Saturday)	March 12, 2008
<input type="checkbox"/> September 12, 2008 (Friday)	June 11, 2008
<input type="checkbox"/> December 13, 2008 (Saturday)	Sept. 10, 2008
<input type="checkbox"/> March 13, 2009 (Friday)	December 10, 2008
Statistical Data:	
GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> No Comment	
EDUCATION LEVEL (check all boxes that apply)	
<input type="checkbox"/> No High School Diploma	
<input type="checkbox"/> High School Diploma or GED	
<input type="checkbox"/> Vocational Certification	
<input type="checkbox"/> Associates Degree	
<input type="checkbox"/> Bachelors degree	
<input type="checkbox"/> Masters Degree	
<input type="checkbox"/> Doctorate	
<input type="checkbox"/> No Comment	
RACE/ETHNICITY	
<input type="checkbox"/> Caucasian	
<input type="checkbox"/> African-American	
<input type="checkbox"/> Native American or Alaskan Native	
<input type="checkbox"/> Asian	
<input type="checkbox"/> Hispanic	
<input type="checkbox"/> Native Hawaiian	
<input type="checkbox"/> Pacific Islander (Non-native Hawaiian)	
<input type="checkbox"/> Other	
<input type="checkbox"/> No Comment	
Do you require any special testing procedures to accommodate a documented disability?	
<input type="checkbox"/> NO <input type="checkbox"/> YES (If YES, please request additional forms from PSCBW)	
Check the box below to indicate the region of the State where you prefer to take this examination.	
<input type="checkbox"/> Eastern Washington <input type="checkbox"/> Western Washington <input type="checkbox"/> Central Washington	

Prevention Specialist Certification Board of Washington (PSCBW) is a member board of the International Certification and Reciprocity Consortium/Alcohol and Other Drug Abuse, Inc. (IC&RC)

Application, February 29, 2008 Revision

Applicant Checklist for Candidate Portfolio

Applicant Name: _____

Applicant Registration Form:

- Registration form completed in full with applicant signature
- \$200 application and testing fee enclosed
- Photocopy of applicant's current photo identification enclosed

Verification of QUANTITATIVE Prevention Experience:

- 2,000 hours minimum of documented prevention experience (verifying signature)
- 10 hours minimum planning & evaluation (domain 1)
- 10 hours minimum education and skill development (domain 2)
- 10 hours minimum community organization (domain 3)
- 10 hours minimum public policy and environmental change (domain 4)
- 10 hours minimum professional growth & responsibility (domain 5)

Verification of QUALITATIVE Experiential Learning:

- 120 hours minimum of supervised experiential learning (verifying signature)
- Evaluation Form completed in full including dates of supervision
- Ratings for domains I through V with evaluating supervisor initials on each page

Prevention Educational Prerequisites (Education/Training Hours with Attached Documentation):

- 14 hours minimum ATOD training/education (e.g. drug 101, alcohol 101, marijuana, etc.)
- 50 hours minimum ATOD prevention training/education (e.g. Project Alert, PFDY, etc.)
- 10 hours minimum risk/protective factor training/education
- 6 hours minimum prevention-specific ethics training/education
- 70 hours minimum general prevention training/education (violence, HIV, etc.)

Code of Ethical Conduct for Prevention Professionals:

- Applicant signed and dated the form to indicate agreement to the principles as a Code of Ethical Conduct

Criminal History Background Check:

- Enclosed results of Criminal History background check (within one year of application date)

Registration for the Prevention Specialist Written Certification Examination:

- Registration for examination form completed

Submittal of Application:

- Submit an original of the completed candidate portfolio/application AND three (3) copies (on white paper with no staples or binding) to:

Prevention Specialist Certification Board of Washington

*Prevention Specialist Certification Board of Washington (PSCBW) is a member board of the
International Certification and Reciprocity Consortium/Alcohol and Other Drug Abuse, Inc. (IC&RC)*

Application, February 29, 2008 Revision

P.O. Box 1217
Moses Lake WA 98837

File Copy:

- Keep a copy of your completed candidate portfolio/application.