



IC&RC

Leading the World in Credentialing
Prevention, Addiction Treatment and Recovery Professionals

CANDIDATE GUIDE

for the

IC&RC Prevention Specialists

Examination

Based on the 2013 Prevention Specialist Job Analysis

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Setting Global Standards for Addiction Professionals

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Purpose of the Candidate Guide

The IC&RC Prevention Specialist Examination is the first examination to test knowledge and skills about the provision of prevention services on an international level. It has been developed by IC&RC through the cooperation of its Member Boards and their strong desire to have an exam that is based on current practice in the field.

The purpose of this Candidate Guide is to provide you with guidance for the IC&RC examination process. By providing you with background information on examination development, administration, and content; your preparation for the IC&RC Prevention Specialist Examination can be enhanced.

Professional Testing Company

It is the policy of IC&RC to administer valid, reliable, legally defensible, and psychometrically sound examinations. To assist in this process, IC&RC has contracted with Schroeder Measurement Technologies (SMT) to develop, administer, and score all examinations.

SMT is an established, full-service, international testing company. SMT serves the needs of licensing and credentialing agencies with a wide range of test development and administration services.

Examinations are administered through a division of SMT called ISO-Quality Testing, Inc. (IQT). IQT provides secure, user-friendly, high-quality, examination administration around the world.

You can find out more information at their websites: www.smttest.com and isoqualitytesting.com

Examination Development

The development of a valid examination begins with a clear and concise definition of the tasks, knowledge, skills, and abilities needed for competent job performance. Using interviews, surveys, observation, and group discussions, IC&RC works with Subject Matter Experts (SMEs) in the field to delineate critical job components. The knowledge and skill bases for the questions in the examination are derived from the actual provision of services in the field.

Examination questions are written by certified individuals or those otherwise deemed as SMEs in the field. SMEs are trained in item writing best practices and assisted by IC&RC's professional testing company when writing questions. All examination questions are written in a multiple choice format with four response options. One of these options represents the **BEST** response and credit is granted only for selection of this response.

Exam Eligibility Requirements and Registration

IC&RC examinations are administered exclusively by IC&RC Member Boards. Eligibility requirements and registration processes are determined by your Member Board. Candidates interested in taking an IC&RC examination must do so through an IC&RC Member Board. Contact your local board for information. Contact information for all IC&RC Member Boards can be found at our website www.internationalcredentialing.org.

Exam Administration

Examinations are administered via paper and pencil and Computer Based Testing (CBT). Not all forms of administration are offered by all IC&RC Member Boards. Please consult your local board in order to determine your testing options.

Candidates taking CBT examinations will be required to test at a designated IQT center. On the day of testing, candidates are required to bring a valid, government issued photo ID and their Candidate Admission Letter to the testing center. Candidates are highly encouraged to read the Candidate Admission Letter in its entirety to be aware of all IQT testing policies and procedures.

A list of all IQT testing centers can be found at this link: <http://www.isoqualitytesting.com/mlocations.aspx> or by calling IQT toll free at +1-866-773-1114.

CBT exams begin with a brief tutorial and end with a brief survey. Extra time is allotted to complete the tutorial and survey. A demonstration of the CBT examination format can be found at <https://www.iqttesting.com/Default.aspx?Function=SampleExam&Exam=8>.

Examination Dates

Paper and Pencil Examinations are administered four times a year in March, June, September, and December. Please consult your IC&RC Member Board for the exact date, time, and location of the examination administrations in your area, as well as registration information. The examination will be given only on the date and time posted by an IC&RC Member Board.

Computer Based Testing (CBT) is offered on-demand based on the availability of your desired testing center. Once you have met the eligibility requirements of your IC&RC Member Board to sit for the examination, your IC&RC Member Board will pre-register you for the examination through IC&RC's on-line test database. You will receive an e-mail with further instructions on scheduling your exam date, time, and location.

Rescheduling, Cancelling, and Missed Exams

Paper and Pencil Exams:

Paper and Pencil Examinations are only administered four times a year. If an emergency arises, and you are unable to take the examination as scheduled, you should contact your IC&RC Member Board as soon as possible to see if rescheduling is possible before the close of the administration window. If you are unable to reschedule within the designated administration window, you will not be able to test until the next paper and pencil administration date.

Computer Based Exams:

CBT exams can only be cancelled or rescheduled **5 days or more PRIOR** to your scheduled examination date. All cancellations and rescheduling must be done through your IC&RC Member Board. There will be a rescheduling/cancellation fee.

You are **unable** to reschedule or cancel an examination **less than 5 days PRIOR** to your scheduled examination. Exceptions are made only for the following four reasons: jury duty, death in immediate family¹ within **14 calendar days** of the examination date, illness or medical complication within **14 calendar days** prior to the examination date **OR** the scheduled examination date, and military deployment.

If one of these four reasons prevents you from testing, you must contact IQT directly and provide sufficient documentation of the event that has occurred. Documentation must be submitted to IQT within **14 calendar days** of your missed examination. There will be no additional fee incurred under these circumstances. IQT can be reached toll free at +1-866-773-1114.

If you fail to show up for your examination at the scheduled time, do not have the proper identification, or your Candidate Admission Letter, you will not be permitted to sit for your exam. You will be considered a “No-Show”, your examination fees will be forfeited, and you will be required to re-register and pay all fees to your IC&RC Member Board prior to sitting for the exam. Candidates who miss their scheduled examinations must reschedule with their IC&RC Member Board.

¹ The **immediate family** is a defined group of relations, used in rules or laws to determine which members of a person's [family](#) are affected by those rules. It includes a person's parents, spouses, siblings and children.

Examination Rules and Security

Failure to follow candidate instructions or conduct that results in violation of security or disruption of the administration of an examination may result in dismissal from the examination, voided examination scores, and forfeiture of examination fees.

Examples of misconduct include, but are not limited to:

- Writing on anything other than the authorized scratch paper provided at the administration site
- Looking at other candidate's examination
- Discussing examination content before, during, or after administration orally, electronically or in writing with any person or entity
- Copying or removing examination information from the testing area
- Use of cellphones or other electronic devices

Candidates may not attend the examination only to review or audit test materials. No unauthorized persons will be admitted into the testing area. All examination content is strictly confidential. Candidates may only communicate about the examination, using appropriate forms provided within the examination delivery system.

No books, papers, or other reference materials may be taken into the examination room. An area will be provided for storage of such materials.

No questions concerning the content of the examination may be asked during the examination period. The candidate should listen carefully to the directions given by the Proctor and read the examination directions carefully.

Special Accommodations

Individuals with disabilities and/or religious obligations that require modifications in test administration may request specific procedure changes, in writing, to the relevant IC&RC Member Board. With the written request, the candidate must provide official documentation of the accommodation requested. Submitted documentation must follow ADA guidelines in that psychological or psychiatric evaluations must have been conducted within the last **three years**. All medical/physical conditions require documentation of the treating physician's examination conducted within the previous **three months**. Candidates should contact their IC&RC Member Board to inquire about other necessary documentation. Contact information for all IC&RC Member Boards can be found on our website www.internationalcredentialing.org.

The IC&RC Member Board will offer appropriate modifications to its procedures when documentation supports the need. All requests for special accommodations must be submitted to your IC&RC Member Board **prior** to scheduling your examination. You will receive further information on scheduling your examination with accommodations once your board has reviewed and approved the accommodation request.

Scoring of Exams

Receiving Scores:

All scores are reported to the designated IC&RC Member Board for distribution. IC&RC does **not** have the authority to release scores. This process takes approximately four to six weeks for paper and pencil exams and two to three weeks for CBT exams. Preliminary computer based exam scores are provided to candidates immediately following completion of the exam. Candidates seeking their official scores should contact their IC&RC Member Board. Contact information for all IC&RC Member Boards can be found on our website www.internationalcredentialing.org.

Reporting Scores:

Scores are reported on a scale ranging from 200-800 with a 500 passing. The minimum scaled passing score is 500 for all examinations. Candidates are provided with official score letters that report a final scaled score and the percentages of items answered correctly in each content domain.

Scaled Scores:

Scaled scores are created when the number of questions answered correctly is mathematically transformed so that the passing score equals 500 on a scale starting at 200 and ending at 800.

This transformation is very similar to converting inches to centimeters. For example, a 10 inch ribbon is also 25.4 centimeters long. The length of the ribbon has not been changed, only the units of measurement to describe its length.

The use of scaled scores allows for direct comparison of exam scores from one form of the examination to another. For security purposes, IC&RC keeps multiple forms of each examination in circulation at all times. Candidates are randomly assigned a form. The use of scaled scores allows IC&RC to report scores for every form of an examination using the same scale of 200-800 with a 500 passing.

The use of scaled scores does not influence whether a candidate passes or fails an examination. The passing of an IC&RC examination is always incumbent on achieving the minimum passing score as it is determined in the process below.

Determining a Passing Score:

Passing scores for IC&RC exams are not based on a percentage of questions answered correctly. Instead, IC&RC uses a Modified Angoff Study to determine a cut score for each examination. The Angoff method uses a systematic and documented approach to establish accurate, reliable, and legally defensible pass/fail scores.

Cut scores are determined by a panel of Subject Matter Experts (SMEs) that are working in and have demonstrated expertise in the field. SMEs work with our professional testing company to discuss the specific knowledge, skills, and abilities needed to demonstrate minimum competence.

The SMEs evaluate and rate the difficulty of each question. These ratings are then combined to determine the final cut score for the exam. The final cut score is subsequently transformed to an equivalent scaled score. All examination questions are weighted equally.

Use of Multiple Exam Forms:

For every IC&RC exam, there are multiple forms of the same examination. Each form will use different questions but test the same content. Examination forms are updated and replaced on a continuous basis to ensure the security and integrity of the examination.

The use of multiple forms for the same exam will not make it easier or more difficult for candidates to pass one form of the examination. IC&RC's testing company uses statistical data on each test question to evaluate the difficulty of each examination form. The examinations are constructed in order to minimize variations in difficulty from one form to another. The passing scores for each examination form are adjusted accordingly to account for any differences in form difficulty.

Use of Pretesting Items:

On each IC&RC exam, there are unweighted items that do not influence final scores. Unweighted items are also called pretest items. Pretest items are not identified on exams and appear randomly on all exam forms. Pretest items do not influence final scores or pass/fail status. IC&RC uses pretest items to pilot newly written questions to ensure item quality prior to its addition to an examination as a weighted question.

Pretesting provides verification that the items are relevant to competency, measure proficiency and helps ensure the quality of future examinations. Pretest items do not influence a candidate's score and protect candidates against poorly-performing items.

Failing Scores:

Candidates who do not pass their examination are provided with percentages of correctly answered items in each content domain to better focus future study efforts. For security reasons, candidates will not be provided with their raw score (total number of questions answered correctly), total percentage of questions answered correctly, or a copy of the examination to review.

It is important to note that because the number of questions contained within each domain of the examination varies, adding or averaging the percentage correct scores in each domain will NOT be an accurate reflection of a candidate's overall examination score.

Appeals, Examination Grievances, Test Disclosure, and Retakes

Appeals:

All examination scores are final. Examination scores cannot be appealed. Candidates may request a second verification of their examination score within 30 calendar days of taking their exam. To initiate this process, complete the Hand Score Request Form found in Appendix A and return it to IC&RC.

IC&RC's testing company will hand score the examination against the master key and send the results directly to candidates. There is a fee for this service.

Examination Grievances:

Candidates who believe an unusual event or condition related to the administration of their examination caused a significant adverse effect on their performance during their examination may submit a grievance regarding the exam administration to IC&RC for investigation.

Grievances must be submitted to IC&RC within **14 calendar days** of the examination. Grievance statements must be submitted in writing, dated, and signed. Grievance statements must be accompanied by the **IC&RC Exam Administration Grievance Form** found in Appendix B. Information to include in the grievance statement should include, but is not limited to:

- Title of exam
- Examination date
- Name and location of testing center
- Name of proctor on duty (if known)
- Detailed explanation of the situation
- Impact the situation had on exam performance

IC&RC will then investigate the specifics of the testing situation. When warranted, candidates will be offered a free retake. An exam grievance will not challenge the design or content of an examination nor overturn a failing score. There is a fee for this service. Candidates that are offered free retakes will be refunded their grievance fee.

Test Disclosure:

Candidates should be aware that IC&RC exam security and item banking procedures do not permit candidates access to exam questions, answer keys, or other secure materials related to the examination. Candidates that have questions or comments about a specific examination question should request a **Comment Form** from their examination proctor during a paper and pencil exam or click the **Comment On This Question** button for CBT exams. Candidate comments will be reviewed by IC&RC for consideration. Candidates will not be contacted regarding their comments.

Retakes:

Candidates interested in retaking an exam must wait 60 days after their original exam. To schedule a retake, candidates should contact their local IC&RC Member Board. Contact information for all IC&RC Member Boards can be found on our website www.internationalcredentialing.org.

The mandatory **60 day** waiting period cannot be waived under any circumstances.

Examination Content

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

1. Planning and Evaluation
2. Prevention Education and Service Delivery
3. Communication
4. Community Organization
5. Public Policy and Environmental Change
6. Professional Growth and Responsibility

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

Weight on Exam: 30%

Associated Tasks:

- Determine the level of community readiness for change.
- Identify appropriate methods to gather relevant data for prevention planning.
- Identify existing resources available to address the community needs.
- Identify gaps in resources based on the assessment of community conditions.
- Identify the target audience.
- Identify factors that place persons in the target audience at greater risk for the identified problem.
- Identify factors that provide protection or resilience for the target audience.
- Determine priorities based on comprehensive community assessment.
- Develop a prevention plan based on research and theory that addresses community needs and desired outcomes.
- Select prevention strategies, programs, and best practices to meet the identified needs of the community.
- Implement a strategic planning process that results in the development and implementation of a quality strategic plan.
- Identify appropriate prevention program evaluation strategies.
- Administer surveys/pre/posttests at work plan activities.
- Conduct evaluation activities to document program fidelity.
- Collect evaluation documentation for process and outcome measures.
- Evaluate activities and identify opportunities to improve outcomes.
- Utilize evaluation to enhance sustainability of prevention activities.
- Provide applicable workgroups with prevention information and other support to meet prevention outcomes.
- Incorporate cultural responsiveness into all planning and evaluation activities.
- Prepare and maintain reports, records, and documents pertaining to funding sources.

Domain 2: Prevention Education and Service Delivery

Weight on Exam: 15%

Associated Tasks:

- Coordinate prevention activities.
- Implement prevention education and skill development activities appropriate for the target audience.
- Provide prevention education and skill development programs that contain accurate, relevant, and timely content.

- Maintain program fidelity when implementing evidence-based practices.
- Serve as a resource to community members and organizations regarding prevention strategies and best practices.

Domain 3: Communication

Weight on Exam: 13%

Associated Tasks:

- Promote programs, services, activities, and maintain good public relations.
- Participate in public awareness campaigns and projects relating to health promotion across the continuum of care.
- Identify marketing techniques for prevention programs.
- Apply principles of effective listening.
- Apply principles of public speaking.
- Employ effective facilitation skills.
- Communicate effectively with various audiences.
- Demonstrate interpersonal communication competency.

Domain 4: Community Organization

Weight on Exam: 15%

Associated Tasks:

- Identify the community demographics and norms.
- Identify a diverse group of stakeholders to include in prevention programming activities.
- Build community ownership of prevention programs by collaborating with stakeholders when planning, implementing, and evaluating prevention activities.
- Offer guidance to stakeholders and community members in mobilizing for community change.
- Participate in creating and sustaining community-based coalitions.
- Develop or assist in developing content and materials for meetings and other related activities.
- Develop strategic alliances with other service providers within the community.
- Develop collaborative agreements with other service providers within the community.
- Participate in behavioral health planning and activities.

Domain 5: Public Policy and Environmental Change

Weight on Exam: 12%

Associated Tasks:

- Provide resources, trainings, and consultations that promote environmental change.
- Participate in enforcement initiatives to affect environmental change.
- Participate in public policy development to affect environmental change.

- Use media strategies to support policy change efforts in the community.
- Collaborate with various community groups to develop and strengthen effective policy.
- Advocate to bring about policy and/or environmental change.

Domain 6: Professional Growth and Responsibility

Weight on Exam: 15%

Associated Tasks:

- Demonstrate knowledge of current prevention theory and practice.
- Adhere to all legal, professional, and ethical principles.
- Demonstrate cultural responsiveness as a prevention professional.
- Demonstrate self-care consistent with prevention messages.
- Recognize importance of participation in professional associations locally, statewide, and nationally.
- Demonstrate responsible and ethical use of public and private funds.
- Advocate for health promotion across the life span.
- Advocate for healthy and safe communities.
- Demonstrate knowledge of current issues of addiction.
- Demonstrate knowledge of current issues of mental, emotional, and behavioral health.

Total number of examination questions: 150

Total Number of pretest question: 25

Total time to complete the examination, Paper & Pencil: 3 ½ hours

Total time to complete the examination, Computer Based: 3 hours

Sample Questions

The questions on the IC&RC Prevention Specialist Examination were developed from the tasks identified in the 2013 Prevention Specialist Job Analysis. Multiple sources were utilized in the development of questions for the exam. Each question is linked to one of the job analysis task statements as listed above.

The questions on the examination are multiple-choice with four (4) choices: A, B, C, and D. There is only one correct or best answer for each question. Carefully read each question and all the choices before making a selection. Choose the single best answer. Mark only one answer for each question. You will not be given credit for any question for which you indicate more than one answer. It is advisable to answer every question since the number of questions answered correctly will determine your final score. There is no penalty for guessing.

The following are **sample** questions that are similar to those you will find in the exam.

1. A community coalition is advocating for an ordinance to ban the sale of alcohol at the annual fall family festival. This is an example of:

- A. an alternative activity strategy.
- B. a family intervention strategy.
- C. an environmental strategy.
- D. an enforcement strategy.

Domain: Public Policy and Environmental Change

2. There was an underage drinking problem in the community. Enforcement of minimum-purchase-age laws against selling alcohol and tobacco to minors through the use of undercover buying operations was utilized to address the underage drinking problem. What type of prevention strategy was used?

- A. Alternatives to drug use
- B. Dissemination of information
- C. Prevention education
- D. Environmental approach

Domain: Public Policy and Environmental Change

3. A prevention specialist's agency conducts a school-based indicated intervention for youth who have been identified as experimenting with alcohol and other drugs. A guidance counselor calls the prevention specialist and requests information about a group participant. Disclosing this information would violate which principle in the prevention code of ethics?

- A. Nature of services
- B. Integrity
- C. Nondiscrimination
- D. Confidentiality

Domain: Professional Growth and Responsibility

4. Which of the following is categorized as a depressant drug?

- A. Alcohol
- B. Oxycodone
- C. Marijuana
- D. Methamphetamine

Domain: Prevention Education and Service Delivery

5. A prevention specialist provides life skills classes at a local school. They are asked by the principal to lead group therapy sessions for children of alcoholics while the guidance counselor is on leave. The prevention specialist should:

- A. respectfully refuse.
- B. accept the challenge.
- C. volunteer to co-facilitate.
- D. accept but provide life skills classes instead of therapy.

Domain: Professional Growth and Responsibility

6. Qualitative data is often collected through key informant interviews, focus groups, listening sessions, and:

- A. town hall meetings.
- B. newspaper articles.
- C. arrest reports.
- D. hospital records.

Domain: Planning and Evaluation

7. A person who has been designated by group members to be caretaker of the meeting process is known as the:

- A. president.
- B. boss.
- C. facilitator.
- D. advocate.

Domain: Community Organization

8. An example of a selective intervention is:

- A. a classroom-based prevention program for all seventh graders in a school district in a high risk community.
- B. a skills-based program for youth from military families who have experienced many transitions.
- C. a parenting program open to all residents in a rural town hosted by a local church.
- D. a media campaign targeting Latino youth in a big city.

Domain: Prevention Education and Service Delivery

9. The first step in developing community prevention strategies is:

- A. assessment.
- B. capacity building.
- C. planning.
- D. implementation.

Domain: Community Organization

10. A prevention specialist who is facilitating a Community Prevention Coalition must tailor their facilitation style to the group's blend of bylaws, ground rules, people, and:

- A. consultants.
- B. funding.
- C. history.
- D. strategies.

Domain: Communication

11. When facilitating a Community Prevention Coalition planning group, a prevention specialist should not:

- A. listen and observe.
- B. prevent and manage conflict.
- C. encourage participation.
- D. insert personal opinions.

Domain: Communication

12. Strategies that aim to enhance individuals' ability to develop competence, a positive sense of self-esteem, mastery, well-being, social inclusion, and strengthen their ability to cope with adversity are:

- A. mental health promotion interventions.
- B. universal preventive interventions.
- C. selective preventive interventions.
- D. indicated preventive interventions.

Domain: Professional Growth and Responsibility

Answer Key			
1.	C	7.	C
2.	D	8.	B
3.	D	9.	A
4.	A	10.	C
5.	A	11.	D
6.	A	12.	A

Examination Reference List

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

1. Academy for Educational Development. (2005). *Facilitating Meetings: A Guide for Community Planning Groups*. Retrieved from http://www.cdc.gov/hiv/topics/cba/resources/guidelines/Facilitating%20Meetings%20Version_2005.pdf.
2. Babor, T., Caetano, R., Casswell, S., Edwards, G., Giesbrecht, N., Graham, K., et al. (2010). *Alcohol: No Ordinary Commodity*. Research and Public Policy (2nd ed.). Oxford: Oxford University Press.
3. Benard, B. (2004). *Resiliency: What We Have Learned* (1st ed.). San Francisco: WestED.
4. Center for Substance Abuse Prevention. (2009). *Identifying and Selecting Evidence-Based Interventions Revised Guidance Document for the Strategic Prevention Framework State Incentive Grant Program*. HHS Pub. No. (SMA) 09-4205. Rockville, MD: Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration. Retrieved from http://www.ncspfsig.org/Project_Docs/2009%20Evidence-based%20guidance%20document.pdf.
5. Community Anti-Drug Coalitions of America, National Community Anti-Drug Coalition Institute. *Primer Series*. Retrieved from <http://www.cadca.org/resources/series/Primer>
 - **Assessment Primer:** Analyzing the Community, Identifying Problems and Setting Goals. (2010). Retrieved from <http://www.cadca.org/resources/detail/assessment-primer>.
 - **Capacity Primer:** Building Membership, Structure and Leadership. (2010). Retrieved from <http://www.cadca.org/resources/detail/capacity-primer>
 - **Cultural Competence Primer:** Incorporating Cultural Competence into Your Comprehensive Plan. (2012). Retrieved from <http://www.cadca.org/resources/detail/cultural-competence>
 - **Evaluation Primer:** Setting the Context for a Drug-Free Communities Coalition Evaluation. (2010). Retrieved from <http://www.cadca.org/resources/detail/evaluation-primer>
 - **Implementation Primer:** Putting Your Plan into Action. (2012). Retrieved from <http://www.cadca.org/resources/detail/implementation-primer>
 - **Planning Primer:** Developing a Theory of Change, Logic Models and Strategic and Action Plans. (2010). Retrieved from <http://www.cadca.org/resources/detail/planning-primer>

- **Sustainability Primer: Fostering Long-Term Change to Create Drug-Free Communities.** (2012). Retrieved from <http://www.cadca.org/resources/detail/sustainability-primer>

6. Community Anti-Drug Coalitions of America, National Community Anti-Drug Coalition Institute. *Beyond the Basics Series*. Retrieved from <http://www.cadca.org/resources/series/Beyond+the+Basics>

- **People Power: Mobilizing Communities for Policy Change.** (2012). Retrieved from <http://www.cadca.org/resources/detail/people-power-mobilizing-communities-policy-change>
- **Telling the Coalition Story: Comprehensive Communication Strategies.** (2009). Retrieved from <http://www.cadca.org/resources/detail/telling-coalition-story-comprehensive-communication-strategies>
- **The Coalition Impact: Environmental Prevention Strategies.** (2009). Retrieved from <http://www.cadca.org/resources/detail/coalition-impact-environmental-prevention-strategies>

7. Community Anti-Drug Coalitions of America, National Community Anti-Drug Coalition Institute. (2010). *Research Support for Comprehensive Community Interventions to Reduce Youth Alcohol, Tobacco and Drug Use and Abuse*. Retrieved from <http://www.cadca.org/resources/detail/research-support-comprehensive-community-interventions>.

8. Compton, M. (2010). *Clinical Manual of Prevention in Mental Health*. Washington, DC: American Psychiatric Publishing, Inc.

9. Corey, G., Corey, M. S., & Callanan, P. (2011). *Issues and Ethics in the Helping Professions* (8th ed.). Belmont: Brooks/Cole.

10. National Institute of Drug Abuse. (2008). *Drugs, Brains, and Behavior-The Science of Addiction*. Retrieved from <http://www.drugabuse.gov/publications/science-addiction>.

11. National Research Council and Institute of Medicine. (2009). *Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities*. Washington, DC: The National Academies Press. Retrieved from http://books.nap.edu/openbook.php?record_id=12480.

12. Substance Abuse and Mental Health Services Administration. (2005). *Focus on Prevention*. Retrieved from <http://store.samhsa.gov/product/Focus-on-Prevention/SMA10-4120>.

13. White, W. L., & Popovits, R. M. (2001). *Critical Incidents: Ethical Issues in the Prevention and Treatment of Addiction* (2nd ed.). Bloomington: Lighthouse Institute.

About IC&RC

IC&RC is the global leader in the credentialing of prevention, addiction treatment, and recovery professionals. Organized in 1981, it provides standards and examinations to certification and licensing boards in 24 countries, 47 states and territories, five Native American regions, and all branches of the U.S. military.

Quality and integrity are the foundation of IC&RC's work. IC&RC's credentials use the latest research on evidence-based practices, and they are updated every five years and subjected to an extensive process of peer review. IC&RC examinations are based on formal Job Analyses, written by subject matter experts, and supported by current references. Member boards are audited regularly to ensure compliance with international standards.

With more than 45,000 professionals in prevention, alcohol and drug counseling, clinical supervision, criminal justice addictions, and co-occurring disorders, IC&RC represents up to half of all substance abuse professionals in the U.S.



IC&RC EXAM ADMINISTRATION GRIEVANCE PROCESS

Examination Grievances:

Candidates who believe an unusual event or condition related to the administration of their examination caused a significant adverse effect on their performance during their examination may submit a grievance regarding the exam administration to IC&RC for investigation.

Grievances must be submitted to IC&RC within **14 calendar days** of the examination. Grievance statements must be submitted in writing, dated, and signed. Grievance statements must be accompanied by the **IC&RC Exam Administration Grievance Form** found below. Information to include in the grievance statement should include, but is not limited to:

- Title of exam
- Examination date
- Name and location of testing center
- Name of proctor on duty (if known)
- Detailed explanation of the situation
- Impact the situation had on exam performance

IC&RC will then investigate the specifics of the testing situation. When warranted, candidates will be offered a free retake. An exam grievance will not challenge the design or content of an examination nor overturn a failing score. There is a fee for this service. Candidates that are offered free retakes will be refunded their grievance fee.

Return grievance statements and forms to IC&RC.

Mail:

IC&RC
298 S. Progress Ave.
Harrisburg, PA 17109

Fax:

+1(717)540-4458

Email:

info@internationalcredentialing.org

T: +1 717.540.4457 • F: +1 717.540.4458 • InternationalCredentialing.org

Setting Global Standards for Addiction Professionals

IC&RC EXAM ADMINISTRATION GRIEVANCE FORM



Complete this form and return it to IC&RC with a grievance statement as described above at:

Mail: IC&RC
298 S. Progress Ave.
Harrisburg, PA 17109

Fax: +1(717)540-4458

Email: info@internationalcredentialing.org

Fee: \$60.00 Payable to IC&RC by Check, Money Order, Visa or MasterCard

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Requests for Exam Administration Grievance must be submitted to the IC&RC Office no later than **14 calendar days** after your examination administration.

Name (print): _____ **Date of Exam:** _____

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Name of IC&RC Member Board: _____

Name and location of testing center: _____

Name of proctor on duty (if known): _____

- Exam:** Counselor Advanced Counselor Clinical Supervisor Prevention Specialist
 Criminal Justice Co-Occurring Disorders Co-Occurring Disorders Diplomate Peer Recovery

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