

PENNSYLVANIA
CERTIFICATION BOARD

CFRS
Application

Certified Family Recovery
Specialist

A credential for drug and alcohol family peers.

ROLE OF THE CERTIFIED FAMILY RECOVERY SPECIALIST (CFRS)

Family recovery is a highly-individualized journey that provides a unique perspective regarding the recovery process. A CFRS understands the stigma associated with substance use disorder and its impact on the family. This recovery journey is a voluntarily maintained lifestyle that includes the pursuit of spiritual, emotional, mental and physical well-being that is often supported by others but is not contingent upon the recovery of a loved one(s).

The CFRS credential is for adults who have been directly impacted by another person's substance use disorder. The CFRS shares their lived experience with other families to provide recovery support services.

CFRS's are trained to help families move into and through the recovery process. As a CFRS, an individual accepts and agrees that his/her experience will be known by their colleagues, persons served, and others with whom he/she may share that they have achieved this credential. Additionally, a CFRS will follow the Code of Ethical Conduct.

REQUIREMENTS FOR CFRS

EDUCATION: 60 hours of training/education including: 24 hours in Family Recovery and Wellness; 12 hours in Advocacy and Support; 6 hours in Professional Ethics; 6 hours in Confidentiality; and 12 hours specific to substance use disorder.

- Minimum High School Diploma/GED
- There is no time limit on when training was acquired for initial certification

LETTERS OF REFERENCE/CHARACTER: Applicants must submit three (3) letters of reference/character. Letters may not be from family members. Letters should show the impact the applicant has made to the field. They should also include how the applicant practices self-care, how they have developed boundaries and how they work with other families. The letters of reference/character must be from each of the following areas:

- Personal (1)
- Professional/volunteer (1)
- Within recovery support services (1)

STATEMENT OF LIVED EXPERIENCE: Applicants must submit a written statement describing their experience navigating multiple systems; describing how their experience informs their work with other families, what resources they have accessed, and what family recovery means to them. Applicants should also describe how long they have considered themselves in recovery. Written statements must be a minimum of 1000 words.

OTHER:

- Signed attestation (page 3).
- Signed, dated and notarized Application Acknowledgements (page 10).
- Applicant must either live or work in PA at time of application.

DOMAINS:

1. Communication
2. Family Recovery and Wellness
3. Advocacy and Support
4. Crisis and Safety Planning
5. Ethical Responsibilities, Confidentiality and Professional Skills

FEE: \$125 (*fee must accompany application and materials*)

PCB APPLICATION FOR CFRS

Please type or print only.

Date: _____ Date of Birth: _____ Male Female

Name: _____ SSN: _____
Please print your name as it should appear on your certificate

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Email: _____
(required)

College/University: _____ Name on Transcript: _____

Employer: _____ Position/Title: _____

Employer City: _____ Employer Zip: _____

Work Phone: _____ Ext: _____

Hire Date: _____ Hours per Week: _____

Immediate Supervisor: _____ Title: _____

Phone: _____ Email: _____

I attest that I have been directly impacted by another person's substance use disorder and share lived experience with other families to provide recovery support services.

Signature

1. Have you ever received any disciplinary action from another certification or licensing authority? Yes No
If yes, provide full details on a separate sheet.
2. Have you ever been convicted of a felony violation in any state or federal law? Yes No
If yes, please explain in full on a separate sheet.
3. I understand that if I wish to change my application to a different credential offered by PCB there will be a \$50 change/review fee required. Yes No

Why are you pursuing certification? _____

Race (check all that apply): American Indian or Alaska Native Black or African American Asian
 Native Hawaiian or Other Pacific Islander Latino Hispanic Caucasian Other: _____

What best describes your employment plans for the next 12 months (select one)? Increase hours Decrease hours
 Retire No change Seek career advancement Move to a different career Unknown

Fee of \$125 can be paid using one of the following:

Payment (circle one): Check Money Order VISA MasterCard Discover
Checks & Money Orders made payable to PCB

Number: _____ - _____ - _____ - _____

3-digit code: _____ Exp. Date: _____ Name on Card: _____

Billing address: _____
(If different than Home Address)

Email address for receipt *(if paying by credit card only)*: _____

TO SUBMIT YOUR APPLICATION, CHOOSE ONE OF THE FOLLOWING:

Mail:
PCB
298 S. Progress Avenue
Harrisburg, PA 17109

Email:
info@pacertboard.org

Fax:
717-540-4458

Please allow 5-10 business days for review and processing of your application.
To confirm receipt of your application, or check on the status you must email info@pacertboard.org.

CFRS CODE OF ETHICAL CONDUCT

PREAMBLE

The Pennsylvania Certification Board (referred to herein as "the Board" or "PCB") provides voluntary certification for substance abuse and other behavioral health professionals as a way of assuring competence to clients, to the public, and to employers. PCB is dedicated to the principle that individuals in the field of substance abuse and other behavioral health services must be held to the highest standards of ethical practice. To that end, the PCB has adopted this Code of Ethical Conduct, to be applied to all professionals certified by or seeking certification by the Board. Individuals are subject to this Code from the date of application to PCB by the applicant. The Code of Ethical Conduct exists for the protection of clients.

The Board is committed to investigate and sanction those who breach this Code. Certified professionals are, therefore, encouraged to thoroughly familiarize themselves with the Code and to guide their behavior according to the Rules set forth below.

Transparency or being visible about your professional behavior is paramount to maintaining the high standards set by PCB's code of ethical conduct and that is expected of certified professionals. Transparency is not an ethical principle in itself but a pro-ethical condition. Transparency is about information and it embodies honesty and open communication. You must be willing to share information when it is uncomfortable to do so. Transparency is an individual being honest with him/herself about the actions they are taking. It means keeping your actions aboveboard. A commitment to transparency demonstrates to the community, the agency, and the client that there is nothing to hide.

All certified professionals will eventually be faced with ethical dilemmas that are difficult to resolve and offer challenges to their professional practice. Ethical resolution is a critical process and all certified professionals are expected to engage in ethical decision-making that includes the evaluation of context of the situation, meaningful values, the appropriate ethical standards, is consultative in nature and includes a credible model for ethical decision-making. PCB, through its Ethics Committee, is available and willing to act in a consultative fashion to answer any questions pertaining to ethical conduct or dilemmas faced by certified professionals.

RULES OF CONDUCT

The following Rules of Conduct, adopted by the PCB, set forth the minimum standards of conduct which all certified professionals are expected to honor. Failure to comply with an obligation or prohibition set forth in the rules may result in discipline by the PCB.

UNLAWFUL CONDUCT

Rule 1.1: Once certified, a certified professional shall not be cited, arrested, or convicted for any summary offense, misdemeanor, or felony relating to the individual's ability to provide substance abuse and other behavioral health services or that reflects conduct unbecoming a certified professional as determined by PCB.

ROMANTIC/SEXUAL MISCONDUCT

Rule 2.1 A certified professional shall, under no circumstances, engage in romantic/sexual activities or romantic/sexual contact with recovery support service (RSS) recipients, whether such contact is consensual or forced. This prohibition applies to both in person and electronic interactions or relationships.

Rule 2.2 A certified professional shall not engage in romantic/sexual activities or romantic/sexual contact with RSS recipients' relatives or other individuals with whom RSS recipients maintain a close personal relationship when there is a risk of exploitation for potential harm to the recovery support service (RSS) recipient. This prohibition applies to both in person and electronic interactions or relationships.

Rule 2.3 A certified professional shall not engage in romantic/sexual activities or romantic/sexual contact with former clients because of the potential harm to the client. This prohibition applies to both in person and electronic interactions or relationships.

Rule 2.4 A certified professional shall not provide recovery services to individuals with whom they have had a prior romantic/sexual relationship. This prohibition applies to both in person and electronic interactions or relationships.

FRAUD-RELATED CONDUCT

Rule 3.1 An individual shall not use misrepresentation in the procurement of certification or recertification, or assist another in the preparation or procurement of certification or recertification through misrepresentation. The term "misrepresentation" includes but is not limited to the misrepresentation of professional qualifications, education, certification, accreditation, affiliations, employment experience, the plagiarism of application and recertification materials, or the falsification of references.

Rule 3.2 An individual shall not use a title designation, credential or license, firm name, letterhead, publication, term, title, or document which states or implies an ability, relationship, or qualification that does not exist and to which they are not entitled.

Rule 3.3 A certified professional shall not sign or issue, in their professional capacity, a document or a statement that the professional knows or should have known to contain a false or misleading statement.

Rule 3.4 A certified professional shall not produce, publish, create, or participate in the creation of any false, fraudulent, deceptive, or misleading advertisement.

Rule 3.5 A certified professional who participates in the writing, editing, or publication of professional papers, media resources, brochures or books must act to preserve the integrity of the profession by acknowledging and documenting any materials and/or techniques or people (i.e. co-authors, researchers, etc.) used in creating their opinions/papers, books, etc.

DUAL RELATIONSHIPS/EXPLOITATION OF RECOVERY SUPPORT SERVICE RECIPIENTS

Rule 4.1 A certified professional shall not initiate, develop, and/or maintain dual or exploitative relationships with RSS recipients and/or family members of RSS recipients.

Rule 4.2 A certified professional shall not misappropriate property from RSS recipients and/or family members of RSS recipients.

Rule 4.3 A certified professional shall not enter into or maintain a financial dual relationship that results in financial gain to the certified professional, client or a third party.

Rule 4.4 A certified professional shall not promote to a RSS recipient for their personal gain any treatment, procedure, product, or service.

Rule 4.5 A certified professional shall not ask for nor accept gifts or favors from RSS recipients and/or family members of RSS recipients.

Rule 4.6 A certified professional shall not offer, give, or receive commissions, rebates, or any other forms of remuneration for a RSS recipient referral.

PROFESSIONAL STANDARDS

- Rule 5.1** A certified professional shall not in any way participate in discrimination on the basis of race, ethnicity, gender, sexual orientation, age, religion, national origin, socio-economic status, political belief, psychiatric or psychological impairment, physical disability, or pathway to recovery.
- Rule 5.2** A certified professional who fails to seek therapy for any psychoactive substance abuse or dependence, psychiatric or psychological impairment, emotional distress, or for any other physical health related adversity that interferes with their professional functioning shall be in violation of this rule. Where any such conditions exist and impede their ability to function competently, a certified professional must request inactive status of their PCB credential for medical reasons for as long as necessary.
- Rule 5.3** A certified professional shall meet and comply with all terms, conditions, or limitations of a certification or license.
- Rule 5.4** A certified professional shall not perform services outside of their area of training, expertise, competence or scope of practice.
- Rule 5.5** A certified professional shall not reveal confidential information obtained as the result of a professional relationship, without the prior written consent from the recipient of services, except as authorized or required by law.
- Rule 5.6** The certified professional shall not permit publication of photographs, disclosure of RSS recipient names or records, or the nature of services being provided without securing all requisite releases from the RSS recipient, or parents or legal guardians of the RSS recipients.
- Rule 5.7** The certified professional shall not discontinue professional services to a RSS recipient nor shall they abandon the RSS recipient without facilitating an appropriate closure of professional services for the RSS recipient.
- Rule 5.8** A certified professional shall not fail to obtain an appropriate consultation or make an appropriate referral when the RSS recipient's problem is beyond their area of training, expertise, competence or scope of practice.

SAFETY & WELFARE

- Rule 6.1** A certified professional shall not administer to himself or herself any psychoactive substance to the extent or in such manner as to be dangerous or injurious to a recipient of services, to any other person, or to the extent that such use of any psychoactive substance impairs the ability of the professional to safely and competently provide services.
- Rule 6.2** All certified professionals are mandated child abuse reporters.

RECORD KEEPING

- Rule 7.1** A certified professional shall not falsify, amend, or knowingly make incorrect entries or fail to make timely essential entries into the RSS recipient record.

ASSISTING UNQUALIFIED/UNLICENSED PRACTICE

Rule 8.1 A certified professional shall not refer a RSS recipient to a person that he/she knows or should have known is not qualified by training, experience, certification, or license to perform the delegated professional responsibility.

DISCIPLINE IN OTHER JURISDICTIONS

Rule 9.1 A certified professional holding a certification, license, or other authorization to practice issued by any certification authority or any state, province, territory, tribe, or federal government whose certification or license has been suspended, revoked, placed on probation, or other restriction or discipline shall promptly alert the Board of such disciplinary action.

COOPERATION WITH THE BOARD

Rule 10.1 A certified professional shall cooperate in any investigation conducted pursuant to this Code of Ethical Conduct and shall not interfere with an investigation or a disciplinary proceeding or attempt to prevent a disciplinary proceeding or other legal action from being filed, prosecuted, or completed. Interference attempts may include but are not limited to:

1. the willful misrepresentation of facts before the disciplining authority or its authorized representative;
2. the use of threats or harassment against, or an inducement to, any RSS recipient or witness in an effort to prevent them from providing evidence in a disciplinary proceeding or any other legal action;
3. the use of threats or harassment against, or an inducement to, any person in an effort to prevent or attempt to prevent a disciplinary proceeding or other legal action from being filed, prosecuted or completed;
4. refusing to accept and/or respond to a letter of complaint, allowing a credential to lapse while an ethics complaint is pending, or attempting to resign a credential while an ethics complaint is pending.

Violation of this rule under these circumstances will result in the immediate and indefinite suspension of the certified professional's credential until the ethical complaint is resolved.

Rule 10.2 A certified professional shall:

1. not make a false statement to the PCB or any other disciplinary authority;
2. promptly alert colleagues informally to potentially unethical behavior so said colleague could take corrective action;
3. report violations of professional conduct of other certified professionals to the appropriate licensing/disciplinary authority when he/she knows or should have known that another certified professional has violated ethical standards and has failed to take corrective action after informal intervention.

Rule 10.3 A certified professional shall report any uncorrected violation of the Code of Ethical Conduct within 90 days of alleged violation. Failure to report a violation may be grounds for discipline.

Rule 10.4 A certified professional with firsthand knowledge of the actions of a respondent or a complainant shall cooperate with the PCB investigation or disciplinary proceeding. Failure or an unwillingness to cooperate in the PCB investigation or disciplinary proceeding shall be grounds for disciplinary action.

Rule 10.5 A certified professional shall not file a complaint or provide information to the PCB, which he/she knows or should have known, is false or misleading.

Rule 10.6 In submitting information to PCB, a certified professional shall comply with any requirements pertaining to the disclosure of RSS recipient information established by the federal or state government.

CFRS APPLICATION ACKNOWLEDGEMENTS

This page must be completed and notarized and submitted with the application.

Please initial each statement below:

- ___ I have read, and understood the PCB Application Guide for Certification – Non-Reciprocal.
- ___ I have read, and understood the PCB CFRS Code of Ethics.
- ___ I either live or work in Pennsylvania at least 51% of the time.
- ___ I understand that one-half of fee is refundable if application is denied.
- ___ I understand that my application is open for a period of one year after the date of review. If I fail to fulfill all certification requirements within that year, the application will be closed and no refund will be issued.
- ___ I understand that if I request to have my application re-reviewed for another credential PCB offers prior to testing, or after an unsuccessful attempt at the exam I will incur a \$50 application change/review fee.

I hereby request that PCB grant the credential to me based on the following assurances and documentation:

- ___ I subscribe to and commit myself to professional conduct in keeping with the PCB Code of Ethical Conduct;
- ___ I hereby certify that the information given herein is true and complete to the best of my knowledge and belief. I also authorize any necessary investigation and the release of information relative to my certification. Falsification of any records or documents in my application will nullify this application and will result in denial or revocation of certification;
- ___ I consent to the release of information contained in my application and any other pertinent data submitted to or collected by PCB to officers, members, and staff of the aforementioned Board;
- ___ I consent to authorize PCB to gather information from third parties regarding continuing education and employment and understand that such communication shall be treated as confidential;
- ___ Allegations of ethical misconduct reported to PCB before, during, or after application for certification is made will be investigated by PCB and could result in the nullification of the application or denial or revocation of certification.

Applicant Signature: _____ **Date:** _____

On this the ___ day of _____, 201_, by me _____
 a notary public, the undersigned officer, personally appeared: _____,
 known to me or satisfactorily proven to be the person whose name is subscribed to the within instrument and
 acknowledged that she/he executed the same for the purposes therein contained. In witness whereof, I hereby set my
 hand and official seal. Sworn and subscribed before me this ___ day of _____, 201_.

 Notary Public **SEAL:**