

CAADAC

CALIFORNIA ASSOCIATION OF ALCOHOLISM & DRUG ABUSE COUNSELORS

MISSION:

CAADAC'S mission is to unify addiction focused professionals interested in achieving excellence through the attainment of the highest levels of advocacy, competency and ethics.

June 29, 2007

State of California
Little Hoover Commission
925 L Street, Suite 805
Sacramento, CA 95814

Re: Public Hearing, June 28, 2007

Dear Mr. Mitchell,

On behalf of the California Association of Alcoholism and Drug Abuse Counselors (CAADAC) I would like to thank you and the commission for your tireless efforts! Our Immediate Past President, Warren Daniel's, and our Executive Director, Rhonda Messamore', were particularly impressed with the critical questions that the Commissioners asked of the State Department of Alcohol and Drug Program Administration (ADP) on June 28, 2007.

CAADAC represents thousands of Certified Counselors in the State of California and are represented in the majority of the ADP committees, councils and task forces. We are very determined advocates for addiction professionals who treat the life-threatening disease of addiction.

As part of the privilege and honor of representing our members, when misinformation presents itself, we are obligated to do what we can to clarify. CAADAC believes the ADP reported many items to the Commission that require further elucidation.

1. The State Department of Alcohol and Drug Program Administration directly reported that they "certify counselors." This is not completely accurate. The state did enact certification regulations under direction from the Governor and with input from many stakeholders (including CAADAC) and eventually the regulations were devised and enacted. The state regulations identify (10) approved certifying organizations throughout the state. All ten are autonomous certification organizations and are not in any way directly connected to the ADP. In addition, and much to the disappointment of CAADAC, the requirements for certification in California through the regulations (in comparison to the national certification standards) are by far substandard.

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2. The commission noted many concerns regarding Proposition 36 and the outcomes of treatment. Specifically, it was noted that the completion rates are "very low." It is our position that the outcomes would largely improve if there were higher standards of education and experience required of the counselors who are treating the patients through Proposition 36. The state certification regulations require the equivalent of only three college courses and one year of experience to treat this life-threatening disease. This "accomplishment" of promulgating certification standards that ADP reported is misleading the public, consumers and taxpayers. The requirements for treating this disease are less than that of someone who obtains licensure to become a hairstylist. Additionally, Proposition 36 clearly identifies the levels of treatment indicated and sanctions involved, but do not identify counselor education, experience or certification requirements.

3. The state department also reported that all alcohol/drug treatment providers are currently receiving trauma training through the state "to learn how to appropriately deal with it." This is, at minimum, *very* concerning. Alcohol/drug counselors' scope of practice indicates that co-occurring mental illness should be recognized and referred to the appropriate professional (e.g. psychiatrist, psychologist or therapist). Substance abuse counselors treating a co-occurring mental illness without the necessary education, training and experience is clearly dangerous for the patient and can result in serious harm.

CAADAC has been the "squeaky wheel" regarding higher standards for counselors in this state and consider our efforts to be in line with the recommendations the Commission made to the ADP back in 2003. In that spirit, CAADAC would like to request a meeting with you to further discuss the information in this letter and how we can collaborate our efforts in ensuring consumers who seek addiction treatment services in California receive treatment from competent professionals. Thank you, again, for all your efforts in this endeavor.

Respectfully,

 BA, CADC II, ICADC

Bob Tyler, BA, CADC II, ICADC
CAADAC President



Rhonda Messamore, CADC II, ICADC
Executive Director