ADDITION COUNSELING AND PREVENTION

GRADUATE STUDENT HANDBOOK

2020-2021

Offering a curriculum approved by:
IC&RC (International Certification and Reciprocity Consortium)
South Dakota Board of Addiction and Prevention Professionals
ACKNOWLEDGMENT

The information contained within this document is informational only and is not contractual in nature. The handbook information is the most accurate available at the time of publication, but changes may become effective before the next handbook is printed. It is ultimately the student’s responsibility to stay abreast of current requirements. Further, the University reserves the right, as approved by the Board of Regents, to modify requirements, curricula offerings, and charges, and to add, alter, or delete courses and programs through appropriate procedures. While reasonable efforts will be made to publicize such changes, the student must seek current information.

The University of South Dakota (USD) is an equal education/equal opportunity institution, committed to providing all qualified students the opportunity to obtain a university education without regard to their race, color, creed, religion, national origin, ancestry, citizenship, gender, sexual orientation, age, or disability. The University of South Dakota does not discriminate in employment, in the recruitment or admission of students, or in the operation of any program or services. For information contact:

Jean Merkle. Office of Equal Opportunity
Slagle Hall, Room 205
Telephone: 605-658-3665
Jean.Merkle@usd.edu
http://www.usd.edu/human-resources/equal-opportunity.cfm

Disability Accommodation

Any student who feels they may need academic accommodations or access accommodations based on the impact of a documented disability should contact and register with Disability Services during the first week of class or as soon as possible after the diagnosis of a disability. Disability Services is the official office to assist students through the process of disability verification and coordination of appropriate and reasonable accommodations. Students currently registered with Disability Services must obtain a new accommodation memo each semester.

Please note: if your home institution is not the University of South Dakota but one of the other South Dakota Board of Regents system institutions (e.g., SDSU, SDSMT, BHSU, NSU, DSU), you should work with the disability services coordinator at your home institution.

Disability Services, North Complex Commons 116
Phone: (605) 658-3745; Fax: (605) 677-3172
Web Site: www.usd.edu/ds  Email: disabilityservices@usd.edu

The Addiction Counseling and Prevention Department is one of a few addiction-specific higher education curricula that has met the standards of, and has been fully accredited by, the National Addiction Counseling and Prevention Accreditation Commission (NASAC). The ACP Department online, on-
campus, and correspondence faculty all hold graduate degrees and are credentialed in addiction counseling or as a prevention specialist.

**Accessibility Statement**

The University of South Dakota strives to ensure that physical resources, as well as information and communication technologies, are accessible to users in order to provide equal access to all. If you encounter any accessibility issues, you are encouraged to immediately contact the instructor of the course and the Office of Disability Services, which will work to resolve the issue as quickly as possible.

**Multicultural Perspective**

The Addiction Counseling and Prevention Department began as an American Indian alcohol training program from a grant funded by the National Institute of Alcohol Abuse and Alcoholism.

Since the department’s inception they have continued to value, respect, and celebrate students from diverse backgrounds. The faculty and staff are involved in the Native American Cultural Center and the Office of Institutional Diversity on the campus of USD, which involves mentoring Native students, attending Native student events, and being involved with various cultural events in the larger Vermillion community. Faculty are also involved in respectfully working with Native groups on joint research endeavors, utilizing the World Health Organization protocols regarding those research endeavors.

The department has a strong underpinning in cultural understanding and sensitivity giving students the ability to appreciate – and respond to – cultural and community influences on addiction and recovery.

**Diversity & Inclusiveness**

The University of South Dakota strives to foster a globally inclusive learning environment where opportunities are provided for diversity to be recognized and respected. To learn more about USD's diversity and inclusiveness initiatives, please visit the website for the Office for Diversity.

Diversity and inclusiveness, hallmarks of a twenty-first century institution of higher education, are essential elements of the University of South Dakota's future. Members of diverse groups possess gifts, talents, experiences, histories, and cultures that allow them to make valuable contributions to the educational mission of the institution and to all those associated with the institution. A rich mixture of cultures contributes to a positive and vibrant campus climate that benefits all students. Furthermore, diversity and inclusiveness are assets that can be utilized to help prepare all students for living and working in an increasingly complex and global society. Accordingly, gender, race/ethnicity, socioeconomic status, sexual orientation, religion, disability, veteran's status, first-generation status, nationality, citizenship, age, and other personal and social dimensions are respected and also highly-valued at USD, where we continue working to ensure that diversity and inclusiveness pervade every level of the University.
Acknowledging and paying particular attention to our strong historical and cultural Native American roots, USD is committed to strengthening existing relationships and developing new relationships with Native American tribes, organizations, and communities within the state, the region, and the nation.

USD is also committed to graduating globally-aware students who are leaders in working with people from diverse backgrounds. An extremely important element of this commitment is USD’s international focus. USD continues to provide and build international-focused opportunities such as study abroad and student exchange, while, also continuing to recruit and retain an increasingly-large and culturally-diverse group of international students who contribute to a vibrant and diverse campus community where everyone belongs.

USD is committed to a systematic, intentional, comprehensive, and holistic approach to diversity and inclusiveness.

Approved by Executive Committee on March 14, 2013

**Freedom in Learning**

Freedom in learning. Under Board of Regents and University policy student academic performance may be evaluated solely on an academic basis, not on opinions or conduct in matters unrelated to academic standards. Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled. Students who believe that an academic evaluation reflects prejudiced or capricious consideration of student opinions or conduct unrelated to academic standards should contact the dean of the college that offers the class to initiate a review of the evaluation.

**Integrity**

No credit can be given for a dishonest assignment. A student found to have engaged in any form of academic dishonesty may, at the discretion of the instructor, be:

- Given a zero for that assignment.
- Allowed to rewrite and resubmit the assignment for credit.
- Assigned a reduced grade for the course.
- Dropped from the course.
- Failed in the course
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Welcome

Welcome to The University of South Dakota and to the Department of Addiction Counseling and Prevention. We hope that the future will be a stimulating and fulfilling experience for you. Your program of study is a short period in your lifetime, but this specific time could be the most important in your life. The energy that you devote to conscientious study will have a direct relationship to the rewards you receive. Study hard, but also meet new friends and have fun. We hope you will become an integral part of this academic community.

“So what does history tell us about how to conduct one’s professional life in this most unusual profession? I think the lessons from those who have gone before us are very simple ones. Respect the struggles of those who have delivered the profession into your hands. Respect yourself and your limits. Respect the addiction patients and family members who seek your help. Respect the emerging addiction science (perhaps with a hopeful yet healthy skepticism). And respect the power of forces you cannot fully understand to be present in the treatment process. Above all, recognize that what addiction professionals have done for more than a century and a half is to create a setting and an opening in which the addicted can transform their identity and redefine every relationship in their life, including their relationship with alcohol and other drugs. What we are professionally responsible for is creating a milieu of opportunity, choice and hope. What happens with that opportunity is up to the patient. We can own neither the addiction nor the recovery, only the clarity of the presented choice, the best clinical technology we can muster, and our belief in the potential for human resiliency”.
(p. 342, Slaying the Dragon, William White)

“The clarity of the presented choice, the best clinical technology we can muster, and our belief in the potential for human resiliency” also captures the work with prevention efforts.
This student handbook has been compiled by the ACP faculty to provide you with information pertinent to the USD Addiction Counseling and Prevention Department. This handbook should be used as a supplement to the USD Student Handbook, the USD Undergraduate, and Graduate Catalogs. The intent of this handbook is to provide a guideline for the student, as a supportive document that will also ensure that the student will have a good experience by having before them a clear and focused pathway for their academic journey. The document is also intended to provide a framework for resolution of disputed issues that may arise and by provision of said framework in writing, the student is assured that actions taken are not arbitrary and capricious, but rather follow the established guidelines.

YOU, THE STUDENT, ARE THE MOST IMPORTANT PART OF THE PROGRAM OF STUDY.
WELCOME TO THE UNIVERSITY OF SOUTH DAKOTA ADDICTION COUNSELING AND PREVENTION DEPARTMENT

As a student enrolled in the Department of Addiction Counseling and Prevention, you are an integral part of The University with rights and responsibilities published in:
• The University of South Dakota ACP Department Student Handbook
• The University of South Dakota Catalog of Undergraduate and Graduate Programs:
http://catalog.usd.edu/index.php
The University of South Dakota Addiction Counseling and Prevention Department has full status approval by IC&RC: South Dakota Certification Board for Alcohol/Drug Professionals and is accredited by NASAC (National Addiction Counseling and Prevention Accreditation Commission).

The history of accreditation of College and Universities which taught Addiction Counseling and Prevention was initiated by INCASE in 1990. In 2011, after urging from federal agencies, INCASE joined with NAADAC and other invested groups to evolve the INCASE Accreditation into the National Addiction Counseling and Prevention Accreditation Commission (NASAC).


Addiction Counseling and Prevention Department
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Fax: (605) 677-6591

https://www.usd.edu/acp
SECTION 1:

PROGRAM INFORMATION
HISTORY OF THE UNIVERSITY OF SOUTH DAKOTA

Founded in 1862, The University of South Dakota is designated as the only public liberal arts university in the state and is home to a comprehensive College of Arts and Sciences, School of Education, School of Health Sciences, the state's only School of Law, School of Medicine, the accredited Beacom School of Business and the College of Fine Arts. It has an enrollment of approximately 9,200 students taught by 400 faculty members.

The University of South Dakota, the first public university established in the Dakota Territory and the flagship university within the South Dakota system of higher education, highly values excellence in teaching and learning, advancement of knowledge, public service, freedom of thought and expression, and personal responsibility and development. USD provides a strong liberal arts education and an array of regionally and nationally recognized professional and graduate programs. Undergraduate programs provide a solid foundation for entry-level careers and for graduate and professional degrees at USD or other institutions of higher education. Graduate and professional programs at USD prepare students to contribute to their disciplines and professions as well as to their communities through scholarship, leadership, and service. The University provides students an intellectually stimulating educational experience, in and out of the classroom, within a supportive and diverse community of active learners. The students’ academic and personal growth is assured through an innovative curriculum that integrates excellence in teaching with research and service.

At USD, students are inspired to become lifelong learners who will make significant contributions through leadership and service as citizens of the state, the nation, and the world. USD is accredited by the North Central Association of Colleges and Schools. USD relies on strategic planning, program review, and assessment activities to refine its vision and measure its success in achieving its goal to be the best small, public flagship university in the nation built upon a liberal arts foundation.

HISTORY OF THE DEPARTMENT OF ADDICTION COUNSELING AND PREVENTION

The Department of Addiction Counseling and Prevention at The University of South Dakota is the only addiction-specific program in the region to offer a four-year undergraduate degree and a Master of Arts, and one of only a handful of such departments in the nation. The ACP Department combines a strong academic foundation with a real-world experience in counseling and prevention.

The Department has its origins in a National Institute of Alcohol Abuse and Alcoholism (NIAAA) federal grant awarded in May, 1973. That first year twenty alcohol-related mini-courses were taught. The courses required no formal University admission and focused specifically on issues related to alcohol among the Native American population. The Department continues to have a strong relationship with many reservation programs and remains committed to serving reservation sites and Native students. In 1977, the program received full status as a University department, with attendant funding and approval by the Board of Regents. The Department offered off-campus courses from 1982 through 1997, funded by an annual grant through the South Dakota Division of Alcohol and Drug Abuse.
Today, the department continues its outreach efforts through courses that are offered online as well as at other sites throughout the State, in addition to those taught at the University’s main campus in Vermillion. The Department continues to evolve by constantly updating its existing courses, adding new courses, incorporating technological advances into the classroom setting, and utilizing newly-available coursework delivery methods.

The Department offers a 27-credit-hour undergraduate online certificate, a BS degree on campus and online, a 15-credit-hour online graduate certificate, and an online Master’s degree.

The Department has been accredited since 2006 by INCASE (International Coalition for Addiction Counseling and Prevention Education) and most recently by the National Addiction Counseling and Prevention Accreditation Commission (NASAC).

The Department is the only USD program approved by the International Certification & Reciprocity Consortium (IC&RC): South Dakota Board of Addiction and Prevention Professionals (SD BAPP) to meet the alcohol and drug specific academic requirements for state and international credentialing.

In 2018, the Department changed its name from Addiction Counseling and Prevention to Addiction Counseling and Prevention to more accurately describe the mission of preparing students for the addiction field to become either a Licensed Addiction Counselor, Certified Addiction Counselor or a Certified Prevention Specialist.
MISSION STATEMENTS

The University of South Dakota:
The University of South Dakota offers undergraduate, graduate and professional programs within the South Dakota System of Higher Education. As the oldest university in the state, the University of South Dakota serves as the flagship and the only public liberal arts university in the state.

Notice of Nondiscriminatory Policy
In accordance with the South Dakota Board of Regents Policy 1:19, the institutions under the jurisdiction of the Board of Regents shall offer equal opportunities in employment and for access to and participation in educational, extension and other institutional services to all persons qualified by academic preparation, experience, and ability for the various levels of employment or academic program or other institutional service, without discrimination based on sex, race, color, creed, national origin, ancestry, citizenship, gender, gender identification, transgender, sexual orientation, religion, age, disability, genetic information or veteran status or any other status that may become protected under law against discrimination. The Board reaffirms its commitment to the objectives of affirmative action, equal opportunity and non-discrimination in accordance with state and federal law. Redress for alleged violations of those laws may be pursued at law or through the procedures established by the provisions of 1:18 of this policy. For additional information, please contact the Director, Equal Opportunity and Chief Title IX Coordinator, Jean Merkle, 205 Slagle Hall, Vermillion, SD 605-658-3665 Jean.Merkle@usd.edu

Admission decisions are made without regard to disabilities. All prospective students are expected to present academic credentials at or above the minimum standards for admission and meet any technical standards that may be required for admission to a specific program. If you are a prospective student with a disability and need assistance or accommodations during the admission/application process, please contact the Director of Disability Services, Karen Gerety, The Commons, Room 116, USD, Vermillion, SD 57069.

Phone:605-658-3745 Fax:605-677-3172 E-Mail: disabilityservices@usd.edu

Federal Law prohibits discrimination on the basis of disability (Section 504 of the Rehabilitation Act of 1973, The Americans with Disabilities Act of 1990), and the Americans with Disabilities Act Amendment Act of 2009. The University has designated Cheryl Tiahrt, Chief Information Officer, as the Coordinator to monitor compliance with these statutes. This obligates USD and Ms. Tiahrt to provide equal access for all persons with disabilities.

Health Affairs:
The mission of the Health Affairs at The University of South Dakota is to provide high quality education, research, and service to South Dakota, the region, and beyond through programs in medicine, health sciences, and human services.

School of Health Sciences:
The School of Health Sciences develops scholars, practitioners, and leaders in health and human services, meeting the workforce needs of South Dakota, the region, and beyond.

Addiction Counseling and Prevention:
The mission of the USD Department of ACP is to provide quality student-focused addiction education. To accomplish this mission:

- The ACP Department is accessible to students from across the state, region, and beyond.
- Students, in partnership with faculty, become a community of active learners.
- The learning environment promotes critical thinking.

**STUDENT MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS**

All students are strongly encouraged to become a member of USD’s Coalition of Addiction Students and Professionals Pursuing Advocacy (CASPPA), South Dakota Association of Addiction and Prevention Professionals (SDAAPP), and the National Association of Alcohol and Drug Abuse Counselors (NAADAC), which are the professional organizations for ACP students. The faculty believes that participation in these organizations assists students in the process of assimilation into their profession. Participation in these organizations also allows the students an opportunity to have a voice in shaping changes.

**COALITION OF ADDICTION STUDENTS AND PROFESSIONALS PURSUING ADVOCACY**

Mission Statement:

**CASPPA** is the University of South Dakota's student organization dedicated to educate and unite all professionals about the importance of addiction treatment and prevention legislation.

Goals:

- To raise awareness about the University community about the Addiction Counseling and Prevention department.
- To participate in legislative advocacy pertaining to the addiction profession on a state and national level.
- To educate and unite all professionals about the importance of substance abuse treatment and prevention legislation.
- This organization will function through student, staff, and other professional's involvement in group collaborations.
- This organization exists for the University community, ACP students, and staff.
- This organization will benefit the ACP Department, students and faculty, the community, and the future addiction professionals of South Dakota.

**SOUTH DAKOTA ASSOCIATION OF ADDICTION AND PREVENTION PROFESSIONALS**

**SDAAPP** has the following stated Values of Service:

- We value the special skills and competencies of our profession.
- We value education, training, experience and continued professional development.
- We value all citizens of South Dakota and believe they deserve the best of addiction and prevention services.
We value our unique cultures in South Dakota. Rural and also urban. We are European-American, Native American, and also have an emerging diversity of cultures.

We value a holistic approach that includes spirituality as an element of wellness.

SDAAPP has the following Beliefs:

- Parity for Chemical Dependency professional will be the benchmark for the future.
- Addiction is a preventable and treatable disease.
- CD Counseling and Prevention are distinct professions and the SDCDA provides leaders for those fields.
- Prevention does work and has a positive impact on our communities.
- Recovery from addiction helps the individual, the family, and the community at large.

SDAAPP has the following services:

- Bi-annual conferences with continuing education opportunity.
- Advocacy for counselors, prevention professionals and programs.
- Peer assistance.
- Information for legislators, law enforcement, schools, other professionals and the public.

Contact SDAAPP:
SD Association of Addiction & Prevention Professionals
PO Box 179
Blunt, SD 57522
Phone: 605-962-6134
Fax: 605-962-6135
E-Mail: sdaapp@venturecomm.net
Website: https://sites.google.com/site/sdaapp

NATIONAL ASSOCIATION FOR ADDICTION AND DRUG ABUSE COUNSELORS

NAADAC, The Association for Addiction Professionals, is the largest membership organization serving addiction counselors, educators and other addiction-focused health care professionals, who specialize in addiction prevention, treatment, recovery support and education. With 10,000 members and forty-six state affiliates, NAADAC's network of addiction services and professionals spans the United States and the world. NAADAC's members work to create healthier individuals, families and communities through prevention, intervention, quality treatment and recovery support.

Mission Statement:

"NAADAC's Mission is to lead, unify and empower addiction focused professionals to achieve excellence through education, advocacy, and knowledge, standards of practice, ethics, professional development and research." Adopted 1998

Vision Statement:
"NAADAC is the premier global organization of addiction focused professionals who enhance the health and recovery of individuals, families and communities." - NAADAC Vision Statement adopted 1998

Founded in 1972 as the National Association of Alcoholism Counselors and Trainers (NAACT), the organization's primary objective was to develop a field of professional counselors with professional qualifications and backgrounds. The organization evolved and became the National Association for Alcoholism and Drug Abuse Counselors (NAADAC) in 1982, uniting professionals who worked for positive outcomes in alcohol and drug services. NAADAC's new name – NAADAC: The Association for Addiction Professionals - reflects the increasing variety of addiction services professionals: counselors, administrators, social workers and others, who are active in counseling, prevention, intervention, treatment, education and research.

NAADAC's members provide services in a variety of settings: private and public treatment centers, hospitals, private practice and community-based behavioral health agencies.

Science has shown that addiction is a brain disease that responds well to treatment. Research is providing a better understanding of how drugs, alcohol, tobacco and other chemical substances affect the brain. NAADAC supports continued research and is a powerful advocate for policies improving the understanding of - and financial support for - prevention and treatment of addiction.

NAADAC promotes excellence in care by advocating for the highest quality and most up-to-date, science-based services for clients, families and communities. NAADAC does this by providing education, clinical training and certification. NAADAC has credentialed more than 15,000 counselors, playing an important role in sustaining quality health services and protecting the wellbeing of the public.

Website: http://www.naadac.org

GRADUATE AND PROFESSIONAL STUDENT ASSOCIATION

The GPSA (Graduate and Professional Student Association) is devoted to building a sense of community and representing the policy and administrative interests of this student population. Contact gpsa@usd.edu for more information.

RIGHTS AND RESPONSIBILITIES FOR STUDENTS
1. Students should be encouraged to develop the capacity for critical judgment and engage in a sustained and independent search for truth.

2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom: students should exercise their freedom in a responsible manner.
   a. Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.
   b. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions publicly and privately.

3. Each institution has a duty to develop policies and procedures which provide and safeguard the students’ freedom to learn.

4. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, creed, gender, color, sexual orientation, national origin, disability, or marital status.

5. Students should have protection through orderly procedures against prejudiced or capricious academic evaluation, but they are responsible for maintaining standards of academic performance established for each course in which they are enrolled.

6. Information about student views, beliefs, political ideation, recovery status, or sexual orientation which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of student, and should not be used as a basis for evaluation.

7. Students should be allowed to invite and to hear any person of their own choosing within the Institution’s acceptable realm, thereby taking the responsibility of furthering their education.

8. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, e.g., through a faculty-student council, student membership, or representation on faculty committees.

9. The Department has an obligation to clarify professional standards of behavior which it considers essential to the Department mission, internship site, and eventual career placement.

10. Students should access professional help if course materials trigger emotional responses. The faculty members are academic advisors; however, they may assist students in seeking professional help. Students should develop a personal compassion fatigue plan as they move through the curriculum into their careers.

11. University Procedure: If a student has any complaint about grades, they should follow the standard University appeal procedure. This procedure is outlined in the current Student Handbook, available online at [http://www.usd.edu](http://www.usd.edu) (login to your MyUSD portal page, mouse over the ‘Campus Life’ tab and click on ‘Student Policies’). As citizens and members of an academic community, students are subject to the obligations which accrue to them by virtue of this membership and shall enjoy the same freedoms of citizenship.

12. Dress code should be established with student shadowing contact and internship site preceptor supervisor input, in conjunction with the faculty, so the highest professional standards are maintained.
FACULTY RESPONSIBILITIES

1. Faculty will continue to maintain their professional addiction/prevention credentials.
2. Faculty will continue to keep abreast of the profession by attendance at conferences.
3. Faculty will present at professional conferences, serve on professional boards, and be involved in grant writing.
4. Faculty will keep abreast of the latest teaching pedagogy strategies.
5. Faculty are the content experts for the course materials.
6. Faculty serve as academic advisors. In this capacity, academic advising is considered a two-way process.

ACADEMIC ADVISING

Academic advising is a two-way process that requires the serious involvement of both student and advisor. Academic advisors help students make informed choices about courses, majors, and careers. With the assistance of academic advisors, students are encouraged to explore the many opportunities for intellectual, personal, and professional growth at The University of South Dakota.

Advisees are expected to:
1. Know and understand the general education, college or school, major and minor requirements necessary for their graduation.
2. Arrive on time for scheduled advising appointments.
3. Prepare a preliminary schedule prior to their advising appointment.
4. Be honest and forthcoming about their academic progress and performance in their coursework.
5. Be honest and forthcoming about legal issues that may occur as a student, and/or after the initial criminal background check.
6. Monitor and keep informed about their progress toward the completion of graduation requirements. (Proofing senior audits at 75 credits and again the semester of graduation).

Advisors are expected to:
1. Know and understand the general education, college or school, major and minor requirements for students in their department and/or college or school.
2. Understand that students may be subject to the requirements under different catalogs and know how to access relevant information.
3. Ask students about their academic progress and plans for the future.
4. Be familiar with campus resources to answer non-academic questions as well as questions regarding career options.

The Department is expected to:
1. Facilitate faculty training to ensure accurate advising and the broader mentoring of students.
2. Disseminate information to students regarding internships, scholarships, campus organizations, and other opportunities for intellectual growth.
3. Provide students with clear methods of tracking their progress toward graduation.
4. Design and implement a mechanism by which to inform students about advising appointments.

Parents and Students

Faculty members can coach parents on how to guide their young adult on solving academic-related issues by:

- Suggesting to the parent how their student can resolve the issue on their own (example: 1) encourage the student to make an appointment with their instructor; or 2) visit the campus tutoring center).
- Emphasizing that federal law (FERPA) – not instructor practice or campus policy – prevents faculty from revealing grades to anyone but the students.
- Explaining when and how grades become available so the parent knows when to ask their student for the information.
- Putting the discussion between the parent and the student.

THE HIGHER LEARNING COMMISSION GUIDANCE ON DETERMINING QUALIFIED FACULTY

The ACP Department follows the Higher Learning Commission Guidance on determining qualified faculty. The Commission’s Handbook (Third Edition) states that a “qualified faculty” consists of “people who by formal education and tested experience know what students must learn.” It goes on to say that such faculty “create the curricular pathways through which students gain the competencies and skills they need."

Knowing What Students Must Learn

- Within the ACP discipline, “knowing what students must learn” refers to a faculty member’s ability to understand and convey the essentials of the ACP curriculum that a student should master at various course and program levels. Qualified faculty are able to engage professionally with colleagues in determining the specific, stated learning objectives for all graduates of the degree, as well as the full scope of the knowledge, skills, and dispositions appropriate to the degree awarded.
- In addition to knowing what students should learn within ACP, qualified faculty also know the broad learning objectives of the college or university for all of its students. An organization should create an academic environment that promotes “inquiry, creativity, practice, and social responsibility in ways consistent with its mission,” The Commission expects that, through the higher education curricula that faculty develop, students gain “a breadth of knowledge and skills and the exercise of intellectual inquiry.” Further, qualified faculty are able to determine “the usefulness of curricula to students who live and work in a global, diverse, and technological society.”
- Qualified faculty not only know what students should learn but whether and how much they learn, since an organization should be able to provide “evidence of student learning and teaching effectiveness that demonstrates it is fulfilling its educational mission.”
Using Credentials or Degrees Earned as a Basis for Determining Qualified Faculty

- Faculty credentials generally refer to the degrees faculty have earned at certain levels that provide a foundation for knowing what students should learn in ACP. Over the years, some hallmarks and common expectations for faculty credentials have emerged within the higher education community, such as:
  - Faculty teaching in ACP have completed their doctorate degrees or are completing it.
- Qualified faculty are identified in part by credentials, but there are limitations to considering only the degrees earned. For example:
  - Besides credentials, other vital attributes are necessary to qualify someone to teach, such as being able to design curricula, to develop and implement effective pedagogy and andragogy, and to appreciate the breadth of knowledge so vital in quality undergraduate and graduate education.
  - Knowledge of a specific discipline as indicated by the credential is not all that is required, since faculty carry other significant responsibilities, such as conducting research, advising students, participating in co-curricular activities, and contributing to shared governance.
  - An earned degree does not necessarily attest to a faculty member’s ongoing professional development in the profession. Knowing what students should know is dependent upon the discovery of new knowledge and “keeping up in the field.”
  - Academic disciplines, degree programs, and curricula are not static. Because of changing academic, societal and workforce needs, the School of Health Sciences has developed interdisciplinary and other non-traditional programs that require faculty to think beyond their own disciplines and traditional academic programs to determine what students should know and to design curricula accordingly;
  - In some cases, such as in practice-oriented health sciences programs, tested experience in the field may be needed as much or more than formal educational preparation at a prescribed level in determining what students should know to practice. The ACP Department requires a shadow experience as well as an intensive internship and two intensive counseling laboratory courses.

Using “Tested Experience” as a Basis for Determining Qualified Faculty

- The value of using tested experience to determine faculty qualifications is largely dependent upon the relevance of the experience both to the degree level and to the specific content of the course(s) for which the faculty member is responsible. Tested experience implies that some objective measure ensures that the individual’s knowledge and expertise are sufficient for determining what students must learn and have learned. For example:
  - All ACP faculty will maintain their addiction counseling or prevention specialist credentials.
  - All ACP faculty will continue to attend relevant conferences.

Following Good Practices in Determining Qualified Faculty

- The overall mix of the faculty, within ACP, does establish a foundation for maintaining and strengthening educational quality. In short, colleges and universities will value in each individual member credentials and/or experience, but the most important consideration is
whether all of the members of the faculty together represent the breadth of skills, talents, and knowledge needed by the institution and the program.

- Higher education organizations typically establish and periodically review the minimum qualifications and expectations of faculty teaching in different disciplines and at different levels. Policies and practices are codified and widely shared to ensure consistency and diligence in any review of qualifications for making hiring, tenure, and promotion decisions. An organization’s policies should make clear how educational preparation and professional experience are validated and weighed in determining faculty qualifications. While policies might differ among colleges, they should be clearly tied to how each institution determines “who by formal education and tested experience knows what students should learn.”

- Generally, the same guidelines and principles should be used for employing part-time, adjunct, temporary, and/or non-tenure track faculty as are used in employing full-time tenure-track or tenured faculty, whose primary responsibility is teaching. Although some institutions place a heavy reliance on adjunct faculty, or give graduate teaching assistants the primary responsibility for instruction in many course sections, an organization committed to effective teaching and learning in all courses and programs will be able to demonstrate consistent procedures and careful consideration of qualifications for all instructional faculty.

- A college or university should assist a productive member of the faculty in implementing a useful program of professional development. For a faculty member with minimal credentials but considerable tested experience, that program might well involve completion of degrees, particularly graduate degrees, appropriate to that faculty member’s work. As U.S. higher education addresses the call for the academy to provide education that prepares graduates for demands of the workplace, it is possible that appropriate professional development might include internships or other opportunities to practice in the profession. Within the ACP Department, faculty maintains their addiction/prevention credential by attending 40 clock hours of continuing education every two years. Within the School of Health Sciences, faculty are encouraged to practice clinical work, or to provide clinical skills training as part of their service mandate.

The Commission does not dictate hiring standards to be applied to each member of the faculty. In providing this guidance, the Commission reflects its long-standing understanding that it is the responsibility of ACP to establish and implement its own policies regarding faculty qualifications. The Commission’s concern is about the overall capacity of the faculty to achieve the educational goals of the institution, and to do that, the faculty must be made up of “people who by formal education and tested experience know what students must learn.”

NASAC is the ACP accrediting body that is sanctioned by the Higher Learning Commission.
PROFESSIONAL CODE OF ETHICS

NADAAC Code of Ethics: [https://www.naadac.org/code-of-ethics](https://www.naadac.org/code-of-ethics)

CODE OF ACADEMIC AND CLINICAL CONDUCT

Students of ACP have a responsibility to society in learning the academic theory and clinical skills needed to provide quality care. The clinical setting presents unique challenges and responsibilities while caring for human beings in a variety of treatment and prevention settings.

The Code of Academic and Clinical Conduct is based on an understanding that to practice alcohol and drug counseling or prevention services as a student is an agreement to uphold the trust which society has placed in us. The statements of the Code provide guidance for the student in the personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment, but can assist in the holistic development of the student as a person.

A CODE FOR ACP STUDENTS

As students are involved in the clinical and academic environments, we believe that ethical principles are a necessary guide to professional development. Therefore, within these environments, we:

1. Advocate for the rights of all clients.
2. Maintain client confidentiality with knowledge of CFR-42 and HIPAA.
3. Manage “digital footprint” such as electing privacy settings on social networking sites and performing periodic web searches on oneself. Online posting at social networking sites can reflect negatively on professionalism or jeopardize careers.
4. Take appropriate action to ensure the safety of clients, self and others.
5. Provide care for the client in a timely, compassionate and professional manner.
6. Communicate client care in a truthful, timely and accurate manner.
7. Sharing patient stories that are de-identified and respectful, as addiction professionals might do on personal blogs, can encourage reflection, empathy and understanding. However, content may risk violation of patient privacy, even without using names or other identifiers. Safeguarding patient identities is crucial and mandated by federal law, CFR-42.
8. Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.
9. Promote excellence in the profession by encouraging lifelong learning and professional development.
10. Treat others with respect and promote an environment that respects human rights, values, and choice of cultural and spiritual beliefs.
11. Collaborate in every reasonable manner with the academic faculty and internship supervisors to ensure the highest quality of client care.
12. Use every opportunity to improve faculty and internship supervisor understanding of our learning needs.
13. Encourage faculty, internship supervisors, and peers to mentor us.
14. Refrain from performing any technique or procedure for which we have not been adequately trained.
15. Refrain from any deliberate act or omission of care in the academic or internship setting that creates unnecessary risk of injury to the client, self or others.
16. Assist in ensuring that there is full disclosure and that proper authorizations are obtained from clients regarding any form of treatment or research.
17. Abstain from the use of alcoholic beverages or any substances in the academic and internship setting that impair judgment. This includes attendance at professional conferences, presentations, workshops, or any event by which you are representing yourself or USD as a student and/or a professional. As stated in the BAPP Standards Manual(p. 2):

   “It is the expectation and position of the South Dakota Board of Addiction and Prevention Professionals that individuals working in the alcohol and drug abuse profession have a responsibility to themselves, their employer, their clientele, and the general public to provide a positive role model regarding their personal use of chemicals. A professional will adhere to the agency's policies concerning substance use, professional behavior, and related issues of conduct and appropriate ethical standards.”

   Also see the School of Health Science Addiction Policy

   The Board believes that all recognized or certified professionals under the auspices of the Board "shall have a responsibility to model and promote a healthy lifestyle and well-being by low risk or no use of alcohol, tobacco and/or other mood-altering chemicals in addition to low risk use or no use or engagement in other addictive activities" (Professional Code of Ethical Conduct for Prevention Specialists). Further, all persons under Board recognizance have a responsibility to maintain sound mental health to prevent the impairment of professional judgment and performance.” [https://dss.sd.gov/docs/licensing/standards-manual.pdf](https://dss.sd.gov/docs/licensing/standards-manual.pdf)

18. Strive to achieve and maintain an optimal level of personal health. Develop a compassion fatigue awareness plan early in our academic life and carry it into our professional life.
19. Support access to treatment and rehabilitation for students/interns/trainees who are experiencing impairments related to substance abuse and mental or physical health issues. The State of South Dakota offers assistance to chemically-impaired professionals through its Health Professionals Assistance Program. [http://nebula.wsimg.com/2b07974ad4aaf55d399035746bce7a49?AccessKeyId=C871AA7857089B26503F&disposition=0&alloworigin=1](http://nebula.wsimg.com/2b07974ad4aaf55d399035746bce7a49?AccessKeyId=C871AA7857089B26503F&disposition=0&alloworigin=1)

20. As students at USD, the Student Counseling Center services are available to us and we access those services for ourselves when appropriate.
21. Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy (see The University of South Dakota Student Handbook. Log into MyUSD portal, click on campus life, then student handbook).
SCHOLARSHIPS

Faith Fellowship Scholarship:

Please contact the department for application details or go to the department portal page for additional information.

**Deadline is March 1**st.
SECTION 2:

ADMISSION POLICIES
HEALTH AFFAIRS IMMUNIZATION POLICY

Due to regulations mandated by the South Dakota State Law, South Dakota Board of Regents and the State Health Department, ALL students whatever their classification or status must have medically signed proof of TWO (2) properly administered immunizations OR immune titers for Measles (Rubeola), Rubella and Mumps. These are required for all new, readmitted, and transferred students of all State Institutions.

Students who fail to provide the required proof of immunization will be REFUSED REGISTRATION and will not be able to attend classes until in compliance.

Those students for whom vaccination presents a threat to health/well-being and those who adhere to a religious doctrine that opposes immunizations may petition for a permanent exemption or temporary waiver as appropriate. Note: the statute does not allow for philosophical objections.

The USD School of Health Sciences requires the completion of all immunizations listed on the form provided before beginning your internship/clinical lab class. Students cannot enroll in these classes until the program has been notified of immunization compliance from the USD Student Health Office. Should a student have any one of the required immunizations expire during their internship/clinical lab experience, they will be asked to discontinue their class until they are fully immunized according to the USD School of Health Sciences Immunization policy. Students are responsible to keeping track of when any immunization may expire.

To view all guidelines, exemptions, and forms, visit: [http://www.usd.edu/student-life/student-health/immunizations](http://www.usd.edu/student-life/student-health/immunizations). The complete SHS policy can be found on the USDPortal under Health Sciences/ACP.

With your entrance into the medical field it is important for your own personal safety, as well as that of your patients, that your immunizations are up to date and documented to ensure compliance with Center for Disease Control Guidelines and the affiliation agreements with multiple clinical sites.

OUTBREAK REQUIRING CAMPUS CLOSURE

*In the event of an outbreak, students who are granted waivers and exemptions will be excluded from campus. Exclusion procedures will be determined at the point of the outbreak and will adhere to the advice of the South Dakota State Department of Health.*
Health Affairs: Health Sciences and Sanford School of Medicine

Background Checks for the Admissions Process and Continuation in the Program

This policy applies to all Health Affairs students where the program or course includes direct contact with clients or patients.

1. The educational programs of USD Health Affairs have the responsibility to assure the public that their graduates not only have the academic capabilities to apply their professional skills but also have appropriate professional characteristics. That responsibility begins with selective admissions of students who have the appropriate background and skills and attributes to serve the public. Programs whose graduates serve ill, and therefore vulnerable, individuals have a special responsibility to assure their students and graduates possess the behavioral and social attributes necessary for the care of the individual. The processes for admission to the programs of USD Health Affairs will include procedures to protect the health and welfare of individuals to be served by their graduates.

The Department of Addiction Counseling and Prevention requires its students to complete two background checks. To complete the required criminal background check at the student’s own expense please go to Verified Credentials website. To request the code please contact your advisor or the ACP department.

https://scholar.verifiedcredentials.com/?organization=usd

   i. The initial background check is due at the time of application for admission to the Department.
   ii. An updated background check will be completed before the student registers Internship.
   iii. Students who do not complete the Internship in one academic year will need to repeat the background check.

2. Admissions processes for applicants to USD Health Affairs programs must include an attempt to learn if the applicant has ever been convicted of a felony or if there is pending any criminal prosecution against the applicant which would constitute a felony, or involving health care, or any action defined as a crime of violence under South Dakota law {SDCL 22-1-2 (9)}, involve moral turpitude, {SDCL 22-1-2 (25)}, involving a sex crime as defined in SDCL 22-24B-1 or illegal trafficking in illicit or prescription drugs. Conditional acceptance is granted to applicants who are selected for admission, with a completed background check required for final acceptance or matriculation into the programs. Any applicant convicted of a “crime of violence” or convicted or disciplined for an act of “moral turpitude”, “sex crimes”, or illegal trafficking in illicit or prescription drugs may be excluded from admission to USD Health Affairs programs.

3. Each program within Health Affairs will determine whether an applicant with a felony may be further considered for acceptance. This determination will include a consideration of options for a career in that specific field.
4. The Chair or Dean of Medical Student Affairs:
   A. Will be responsible for receiving and maintaining the security and privileged confidentiality of all applicant documents and information.
   B. Will require all applicants submit a completed background check before final acceptance into the program; programs with open admissions will require students to complete a background check prior to beginning fieldwork experiences.
   C. Will develop, implement, and maintain written documentation for a system of primary verification of applicant information.
      a. Primary verification is defined as written inquires plus telephone calls and/or personal contacts with authorities and other individuals with knowledge of circumstances related to applicant information.
      b. Primary verification will occur:
         i. Whenever the Chair of a unit, or the Dean of Medical Student Affairs has reasonable cause to question the authenticity, accuracy, or completeness of submitted documents or information.
         ii. Whenever the Chair of a unit, or the Dean of Medical Student Affairs has reasonable cause to believe the applicant has been charged with a felony, a crime of violence, an act of moral turpitude, a sex offense or illegal trafficking in illicit or prescription drugs.
   D. Will communicate with, seek the advice of, and submit application process decisions to higher review by designated USD Health Affairs personnel:
      a. If upon investigation it is learned that there is evidence of a felony, act of moral turpitude, sex offense or illegal trafficking in illicit or prescription drugs, the Chair or Dean of Medical Student Affairs will report that information to the Dean of Health Sciences or the Dean of the School of Medicine. These findings may result in a request to withdraw the conditional acceptance offer for that applicant.

5. Review of applicants with felonies or misdemeanors:
   A. Applicants to programs who do not admit a felony conviction will be denied admission.
   B. Applicants to programs that may consider prospective students with felonies or with misdemeanors on the record. A review will be conducted to identify offenses by severity, frequency, and timing.
      a. Severity will be assessed in part by the penalty imposed.
      b. Frequency will be assessed by the repetition of an event or the variety of events with similar themes.
      c. Timing will be assessed to evaluate maturity and judgment.
   C. Applicants with a felony or three or more misdemeanors will be reviewed by the Chair for the Health Sciences unit, or the Dean of Medical Student Affairs for the MD and the MD/PhD programs. The Chair or Dean of Medical Student Affairs will make a decision to either uphold the offer of admission of the applicant, or refer the applicant for review to a Background Check Review committee for a recommendation.
      a. Each school (Health Sciences and Medical School) will establish a Background Check Review Committee. This committee will review applicants referred by the Chair of that Health Sciences unit, or the Dean of Medical Student Affairs. They will take into
consideration the items listed in section 5.B as well as any requirements for licensure that may apply, and other institutional policies.

b. All recommendations of the Background Check Review Committee will be reported to the either the Dean of the Health Sciences, or the Dean of the Medical School, depending upon the program involved.

c. The appropriate Dean will make a recommendation to the Chair or Dean of Medical Student Affairs to either uphold the offer of admission or to deny the offer of admission.

6. Each student in any Health Affairs program has a continual obligation to report any criminal felony or misdemeanor (including drug and/or alcohol) charges pending against him/her, which occur after the student has been granted final acceptance into the program.

A. A written explanation of the pending charges should be submitted to the Chair of the Health Sciences program, or Dean of Medical Student Affairs for the Medical School programs within 72 hours of the incident.

B. A decision regarding the student’s continued participation in clinical or patient experiences while the charges are pending will be made by the Chair of the Health Sciences program with faculty input, or by the Dean of the Medical School with Dean of Medical Student Affairs input. Classroom attendance may also be suspended.

C. The student is responsible for keeping the Chair or Dean of Medical Student Affairs informed as to the outcome of the charges with court documentation required.

D. The respective Student Progress and Conduct Committee will review the case to determine whether the student will be permitted to continue in the program or be dismissed.

E. Failure to comply with any aspect of this policy may also result in dismissal from the program.

7. Updating Policies:

A. These policies may be updated at any time if requirements for the program change, or state laws change.

B. The Appendices cited are current as of the date of adoption of the policy. Changes in state laws may result in immediate changes in the Admissions policy.
REQUIREMENTS FOR CONTINUED ENROLLMENT

The basic policy of the University and the Addiction Counseling and Prevention Department regarding student academic status and academic progression standards is described in this section. Schools and colleges may have additional scholastic requirements for their students. Academic status will be evaluated at the end of each term (fall, spring, summer) that a student is enrolled.

ACP Progression Policy

The ACP Faculty and Chair will make recommendations for progression within the Department. Continuation in the program is based upon successful scholastic achievement, satisfactory internship/laboratory competence, and personal qualifications for the practice of addiction/prevention as cited in the Code of Ethics (Appendix A). The following academic requirements are required to be met for progression in the ACP Department:

- The University of South Dakota requires at least a 3.0 cumulative GPA every semester to meet progression standards.
- No more than one third of the credit hours can be with a grade of “C” and grades of “D”, “F”, or other unsatisfactory designations are not acceptable for graduate credit.
- Grades of “D” and “F” may not be assigned to graduate students but that credit for courses in which such grades have been earned will not be counted toward a graduate degree although they are included in GPA calculations. For repeated courses at the graduate level, only the last grade is used in computing the grade point average.
- Graduate students must maintain a 3.0 GPA in their overall MA courses. If the overall 3.0 is not maintained the student will be allowed to repeat only one course. The student must continue to be in contact with their academic advisor. Repeated courses are marked with an “R” or “Repeated.”
- Graduate students who have withdrawn and/or dropped courses, or have not maintained an overall 3.0 GPA in their program will be put on probation and may be dismissed from the program.
- Failure to remediate a GPA to a minimum 3.0 may result in dismissal from the program.
- Students receiving “W” grades will have their standing reviewed by the department chair.
- Program of Study Form: A Program of Study must be filed with the Graduate School as soon as is feasible. The Program of Study is determined after a student has consulted with his/her advisor. The Program of Study presented for fulfillment of degree requirements must be comprised of all graduate work and at least 50 percent of the coursework at the 700-course level or above, unless the coursework leading to the degree has been otherwise approved by the South Dakota Board of Regents. Any substitutions or exceptions to the catalog requirements must be noted on the program of study and require pre-approval of the program head. Substitutions should not be taken lightly as degree program has been approved by the Board of Regents, and a substitution is essentially a change to the program. If more than one substitution is proposed, Graduate Dean approval is required. No more than two workshop courses may be included on a Program of Study without permission of the Graduate Dean. Approved transfer credits should be indicated on the
Program of Study. The transfer approval and official transcript must accompany the Program of Study, if not already on file in the Graduate School. Only 12 credit hours may be transferred from other institutions as part of a Program of Study. Forms are available electronically in the myU.Portal. The Graduate School cannot accept the Program of Study until the student’s advisor has approved the plan.

- For all graduate students the assignment of an incomplete grade is at the instructor’s discretion. Once the instructor agrees to grant an incomplete grade, the instructor and student must agree on a plan to complete the coursework which does not require repeating the course. The coursework must be completed within one calendar year from the last day of the semester in which the course was taken; extensions may be granted by the Graduate Dean upon petition. If the student completes the coursework within the specified time, grades of A, B, C, D, F, S, or U may be assigned. If the student fails to complete the coursework within the specified time, the incomplete grade will remain on the student’s transcripts and the student will need to repeat the course to meet degree. Please refer to USD Graduate Catalog for further information: [http://catalog.usd.edu/](http://catalog.usd.edu/)

- If an enrolled student has been convicted of a crime, or if legal charges are pending, an investigation will be conducted. Sanctions as described in this Handbook and the USD Student Handbook may be imposed.

- Graduate students should remain in contact with their advisor and continue an on-going dialogue with their ACP advisor.

**Probation**

If a student has more than one course of unsatisfactory work and/or has not maintained a 3.0 term or cumulative graduate GPA, the academic program places the student on warning, or probation or dismisses him/her from the program in keeping with department and Graduate School policies. Degree programs and The Graduate School review the academic standing of all graduate students each term, and program leaders notify students directly of academic warning, probation or dismissal. The Graduate School is copied on all student communication. A graduate student may be dismissed from the program at any time for failure to meet the academic performance and progress standards of the degree program’s or Graduate School. The department is required to provide students a written notice of the issues and an opportunity to meet with the program director (face-to-face, teleconference, virtually) before dismissal action. To view this policy in full, visit [http://catalog.usd.edu/content.php?catoid=28&navoid=1531#acad_stan_prob](http://catalog.usd.edu/content.php?catoid=28&navoid=1531#acad_stan_prob)

**Student Retention**

Professions engaged in protection of the public health and welfare charge their members with the responsibility of monitoring potential new members. Therefore, ACP faculty believe a component of their responsibility to their students, their profession, and the eventual consumers of services provided by graduates, is the necessity to monitor student’s academic progress, which not only includes course
work but also includes the personal characteristics of students that will affect their professional performance in the addiction profession. These characteristics should be of a quality so as to enhance the student’s professionalism or helping capacity. The form can be found in the portal under registrar, forms.

**Continuous Enrollment**

Students should be continuously enrolled after matriculation. If circumstances do not allow a student to be continuously enrolled and they must stop out of their program, they may return within three semesters (including summer) without needing to reapply for admission. Stopping out of a degree program does not change the time frame for degree completion, therefore, students will be subject to the time limits discussed before the stop out occurred. Students returning after three consecutive semesters of stop out need to contact the Graduate School before re-enrolling. Students enrolled in programs that have been discontinued or inactivated must maintain continuous enrollment during the teach-out process.

**Add/Drop Period**

The drop/add period is the time during which students may adjust their academic schedule for the term without financial or academic consequences. No refund is provided for courses dropped after that time, except by administrative action. The last day of the drop/add period for a course is designated as the census date for that course and is the official date for enrollment reporting for the course. The end of the drop/add period for standard (those that conform to the regular semester schedule) and non-standard courses offered in a semester shall be the date the first 10 percent of the term ends or the day following the first class meeting, whichever is later. Students may only add courses after the drop/add period with the approval of the student’s academic dean.

**Student Academic Appeals**

Students wishing to appeal an academic decision involving such matters as course grades and dismissal from a program must use the appropriate appeal form. The form should be used only if informal discussion with the academic decision-maker does not produce a satisfactory resolution and the student wishes to pursue the matter to the next level. Before pursuing an appeal, students should consult Board of Regents Policy 2:9.

A procedure has been established for impartial review and hearing of any academic grievance. The University’s graduate academic appeal procedures can be found at [www.usd.edu/graduate-school/student-resources.cfm](http://www.usd.edu/graduate-school/student-resources.cfm). For other grievance proceedings, the student should contact the Director of Student Rights & Responsibilities (srr@usd.edu) or the Director of EEO/AA & Chief Title IX Coordinator (equalopp@usd.edu).

**Grievance Process**

*Please see Board of Regents Policy 2.9 and/or Board of Regents Policy 3.4*
SDBOR 3.4 policy [https://www.sdbor.edu/policy/Documents/3-4.pdf](https://www.sdbor.edu/policy/Documents/3-4.pdf) refers to situations involving the Student Conduct Code. SDBOR 2.9 policy [https://www.sdbor.edu/policy/documents/2-9.pdf](https://www.sdbor.edu/policy/documents/2-9.pdf) governs academic disputes involving students. Such disputes most commonly arise as a result of student dissatisfaction with assigned grades, but students may also invoke the standards and procedures provided under this policy to challenge academic responses to instances involving alleged student academic misconduct or to challenge other decisions, justified on academic grounds, that affect their participation in or completion of university academic programs. After the investigation, the Office of Student Rights & Responsibilities should provide confirmation to the Graduate School if misconduct occurred or if the charges were not valid.

For students: Academic Appeal Form (log into myU.portal): myU.portal>Academics > Academic Policies & Forms> Academic (Registrar)> Academic Appeal Form or [link.usd.edu/194](http://link.usd.edu/194).

To view this policy in full, visit: [http://www.usd.edu/registrar/forms](http://www.usd.edu/registrar/forms)

**Incomplete Grades Policy**

An incomplete provides the student with a limited amount of time to fulfill the course requirements without having to repeat the course. The student must be earning a passing grade at the time the circumstances necessitating the incomplete occur. The assignment of an incomplete is at the instructor’s discretion. Once the instructor agrees to grant an incomplete, the instructor and student must agree on a plan to complete the coursework which does not require repeating the course. The coursework must be completed within one calendar year from the last day of the semester in which the course was taken; extensions may be granted by the Graduate Dean upon petition. If the student completes the coursework within the specified time, grades of A, B, C, D, F, S, or U may be assigned. If the student fails to complete the coursework within the specified time, the incomplete grade will remain on the student’s transcripts and the student will need to repeat the course to meet degree requirements.

**ACP DEPARTMENT RESPONSIBILITY TO THE PUBLIC**

The Addiction Counseling and Prevention Department has the responsibility to assure the public that their graduates not only have the academic capabilities to apply their professional skills but also have appropriate professional characteristics. That responsibility begins with the students who have the appropriate background and skills and attributes to serve the public. Programs whose graduates serve vulnerable individuals have a special responsibility to assure their students and graduates possess the behavioral and social attributes necessary for the care of the individual. The processes for admission to the programs of USD School of Health Sciences must include procedures to protect the health and welfare of individuals to be served by their graduates.

The Addiction Counseling and Prevention Department requires an objective evaluation of the student that includes the following:

1. Submission of a graduate application, transcripts from all other universities, GPA of 2.7 (provisional) or 3.0 (full admittance) on a 4.0 scale, a statement of purpose, supplemental application, three letters of recommendation, photo ID, proof of a criminal background check, and a completed graduate application. The School of Health Sciences/ACP requires a criminal
background check for admission into the major. The background check is to be initiated by the student by going to http://scholar.verifiedcredentials.com/?organization=usd. This will be initiated after admission decision.

2. Depending on the agency, a drug screening check may be required for internship placement. In addition an agency may require proof of liability insurance or a criminal background check for shadowing.

3. If a student is concerned about personal recovery or aftercare issues regarding shadowing or internship, they should visit with their academic advisor.

4. Admissions processes for applicants to USD School of Health Sciences programs must include an attempt to learn if the applicant has ever been convicted of a felony or if there is pending any criminal prosecution against the applicant which would constitute a felony, involving health care, defined as a crime of violence under South Dakota law\(^1\), or involve moral turpitude\(^2\). Any applicant convicted of a “crime of violence” or convicted or disciplined for an act of “moral turpitude” will be excluded from admission to all USD Health Science programs.

5. The ACP Department reserves the right to evaluate students based on the best interest of the profession. Failure to disclose previous or pending convictions may lead to denial of the ACP major. Falsification will be considered grounds for dismissal from The University of South Dakota ACP Department. Graduation from the ACP Department does not guarantee obtaining a credential to practice. Credentialing requirements and subsequent procedures are the exclusive right and responsibility of the state boards regulating professional practice.

All admitted students are subject to The University of South Dakota policies. It is the student’s responsibility to be knowledgeable of all policies and requirements. Policies and requirements are found in the USD Undergraduate catalog, or the Graduate catalog.

POLICY FOR REPORTING CRIMINAL CHARGES

1. All ACP students have a continual obligation to report any pending legal charges against him/her, which occur after the student has been granted final acceptance into the Addiction Counseling and Prevention major.
2. A written explanation of the pending charges should be submitted to the department Chair within 72 hours of arrest.
3. A decision regarding the student’s continued participation will be made by the department Chair. Classroom attendance may not be affected.
4. The student cannot enroll in internship while incarcerated.
5. The student must follow the professional behavior expectations and the Code of Ethics.
6. The student may need to submit documentation from the parole board and may be required to undergo a new criminal background check.

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\(^1\) SDCL 22-1-2 (9) defines a “crime of violence” as any of the following crimes or an attempt to commit, or a conspiracy to commit, any of the same: murder, manslaughter, rape, aggravated assault, riot, robbery, burglary in the first or second degree, arson, kidnapping, felony sexual contact or any other felony in the commission of which the perpetrator used force, or was armed with a dangerous weapon, or used any explosive ordestructive device.

\(^2\) SDCL 22-1-2 (25) defines “moral turpitude” as an act done contrary to justice, honesty, principle or good morals, as well as an act of baseness, vileness or depravity in private and social duties which a person owes to his fellow man or to society in general.
7. The student will meet with the ACP faculty, department Chair, and Dean of Health Sciences before re-enrolling if legal charges occur after initial admission.

8. FERPA prevents ACP from corresponding with family members. Failure to comply with any aspect of this policy will result in immediate referral for dismissal from the program.

SECTION 3:

CURRICULUM
PHILOSOPHY

The Department of Addiction Counseling and Prevention offers the following statements of belief regarding addiction and prevention education, and the role of the degree.

**Prevention Specialist Practice**

The practice of alcohol, tobacco and other drug prevention is based on shared knowledge, skills and values of the profession. These core domains are found in the prevention emphasis area of the curriculum. The Five Domains are: (1) planning and evaluation; (2) education and skill development; (3) community organization; (4) public policy and environmental change; and (5) professional growth and responsibility.

The practice of caring is central to addiction/prevention counseling. The practice of addiction counseling integrates biopsychosocial knowledge coupled with knowledge of human behavior. Addiction counseling/prevention requires critical thinking and problem solving through the academic process. The graduate bears responsibility and accountability for practice. Addiction counselors engage in the art and science of human caring. In active partnership, the addiction professional provides care to meet the needs of clients. Authentic presence, therapeutic alliance, sensing into self and SUD recognition provide the capacity for caring and effective treatment. The profession requires political and social activities, which foster growth in the profession and enhance health care as well.

**Addiction Counseling Practice**

The need for advanced alcohol/other drug competencies is evident by recent events in the profession. Many states, including South Dakota, have established advanced degrees and require licensure to practice as a substance abuse professional. NASAC and IC&RC have begun a series of curriculum standards for colleges and universities that offer specific addiction courses or degrees. Many of these courses are far in advance of the twelve core functions that currently, and historically, have been required for practice.

Concurrent with these trends, are the expectations future employers have of the Master’s level substance abuse professional upon graduation. These employers may anticipate the Master’s prepared student to have certain qualifications not found in the Bachelor’s level graduate. Some of these employer expectations include: the need for less in-service training upon hiring; immediate assignment to a case load; acceptance of a supervisory role with knowledge of co-occurring disorders that commonly link to alcohol and other drug problems; a leadership role in translating research into practice (which will shorten the current 17 year gap between research and practice) with the opportunity for the student to be dually credentialed in addiction counseling and as a prevention specialist; and a strong knowledge base of ethics, theory, and technique when dealing with the complexity of alcohol and other drug problems, as well as co-occurring issues.
Overall, these trends and expectations clearly point to the need for a graduate degree for addiction/prevention professionals, and a curriculum of advanced core functions on which to base that degree. The profession is advancing in terms of higher levels of education and credentialing. In response to these increasing educational expectations, the MA has been developed around the seven advanced core functions for the student who now serve in a clinical, supervisory or leadership capacity.

**ACP Education**

The goal of ACP education is to prepare addiction/prevention professionals who will competently practice the agreed-upon roles of the profession. ACP education is a lived experience, accessible to students across the state, region, and beyond. The learner, an active participant, develops problem solving, critical thinking, inquiry and reasoning skills. ACP education, which supports a caring partnership between faculty and students, fosters the development of self-awareness, self-actualization, and empowerment. The ACP philosophy accepts a student not only as they are now, but for what they may become. This environment offers the development of potential while allowing the student to choose the best action for oneself at a given point in time. The learner is accountable for one’s own learning. Consideration of individual learning styles and adult learning principles assists the learner to move towards self-actualization. Learning is accomplished by moving from the familiar to the unfamiliar. ACP education is conducted in an environment of mutual value and respect. Learning is a lifelong process, apparent when there is a change in behavior, perceptions, or attitudes. The ACP curriculum is influenced by society. ACP education, which incorporates knowledge from other disciplines, involves the learning and clinical practice of the roles, functions, and skills of addiction/prevention professionals within an institution of higher learning.

**Roles of Addiction Professionals**

**Role of Addiction Counselor:** Our graduates are characterized by critical thinking, clinical competence, accountability, and a commitment to the value of caring. This practice applies to clients across the life span, with an emphasis on adults who have an alteration in substance use patterns and seek assistance. The addiction counselor is prepared to address the acute and chronic substance use needs.

The addiction counselor establishes, analyzes, and identifies substance use disorders (SUDs), diagnoses, and negotiates client-centered goals, and plans within a therapeutic alliance to achieve the goals, and evaluates outcomes. The addiction counselor is an advocate in striving to meet the needs of the client, family, significant others, and member of the health care team. The addiction counselor practices in settings where policies and procedures are specified and guidance is available.

It is essential that the addiction counselor have current knowledge in treatment concepts, principles, processes, and skills in order to make sound decisions and to practice competently. ACP faculty have identified an understanding of the 12 Core Functions, pharmacology, culture, communication, human development, teaching-learning principles, current technology, and biological, social and psychological/behavioral models as essential to practice.
**Roles of Prevention Specialist:** Health promotion and prevention are included in the ACP curriculum. The role of prevention specialists is characterized by collaboration, organization, delegation, accountability, grant-writing, advocacy, and the respect and valuing of other workers on the community team. The prevention specialist coordinates care for a group of consumers who have alterations in substance use patterns, or to provide the consumer with basic information of substances.

In organizing prevention services, the prevention specialist may delegate aspects of services to personnel commensurate with their legal scope of practice, educational preparation, and experience. The prevention specialist is accountable for services delegated to other workers and for knowledge of the legal parameters of their practice as well as their roles and responsibilities. The prevention specialist will consult with other members of the team as appropriate. The prevention specialist participates in the evaluation of the consumer care delivery system, contributes to change, and promotes an environment that fosters team relationships. The prevention specialist is manager of services in a community setting where policies and procedures are specified and guidance is available.

The addiction counselor/prevention specialist possesses knowledge and skills necessary to make decisions regarding priorities of care, to delegate some aspects of care and direct others, to efficiently use time and resources, and to know when to seek additional assistance, collaboration or referral. An understanding of the principles of client case management, communication and delegation, legal parameters of addiction/prevention practice, and roles and responsibilities of members of the interdisciplinary team supports this knowledge.

**Role as a member within the discipline/profession:** The addiction professional/prevention specialist values and is committed to professional growth, life-long learning, and self-development in the process of moving toward self-actualization. The professional assumes responsibility for personal development to promote high standards of practice within the ethical and legal framework of the addiction treatment and prevention profession. (See “Code of Ethics” in this document).

As a member within the discipline, the professional contributes to the improvement of practice through participation on committees of the employing institution or within the community, attendance at conferences, and membership in professional organizations. The professional provides safe and competent care within the standards of the addiction treatment and prevention profession. It is essential that the addiction/prevention professional understand ethical standards and the legal framework for practice; the importance of science-based research; rules and regulations governing the practice of the profession; roles of the professional organizations; political, economic and societal forces affecting practice; and lines of authority and communication within the work setting.
PROGRAM EDUCATIONAL OBJECTIVES

Upon completion of the program at The University of South Dakota, the graduate working as an addiction counselor will be responsible for the Four Professional Domains, and will also be responsible for putting into practice the 7 Advanced Functions. The MA prepared graduate working as a prevention specialist will practice within the Five Domains.

Four Performance Domains

The 2013 IC&RC Alcohol and Drug Counselor Job Analysis identified four performance domains for the IC&RC Alcohol and Drug Counselor Examination. Within each performance domain are several identified tasks that provide the basis for questions in the examination.

<table>
<thead>
<tr>
<th>Domains</th>
<th>Weight on the exam</th>
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<tbody>
<tr>
<td>Domain I: Screening, Assessment, and</td>
<td>23%</td>
</tr>
<tr>
<td>Engagement</td>
<td></td>
</tr>
<tr>
<td>Domain II: Treatment Planning,</td>
<td>27%</td>
</tr>
<tr>
<td>Collaboration, and Referral</td>
<td></td>
</tr>
<tr>
<td>Domain III: Counseling</td>
<td>28%</td>
</tr>
<tr>
<td>Domain IV: Professional and Ethical</td>
<td>22%</td>
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<tr>
<td>Responsibilities</td>
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</tbody>
</table>

Domain I: Screening, Assessment, and Engagement

Task 1: Demonstrate verbal and non-verbal communication to establish rapport and promote engagement.

Task 2: Discuss with the client the rationale, purpose, and procedures associated with the screening and assessment process to facilitate client understanding and cooperation.

Task 3: Assess client’s immediate needs by evaluating observed behavior and other relevant information including signs and symptoms of intoxication and withdrawal.

Task 4: Administer appropriate evidence-based screening and assessment instruments specific to clients to determine their strengths and needs.

Task 5: Obtain relevant history and related information from the client and other pertinent sources to establish eligibility and appropriateness of services.

Task 6: Screen for physical needs, medical conditions, and co-occurring mental health disorders that might require additional assessment and referral.
Task 7: Interpret results of screening and assessment and integrate all available information to formulate diagnostic impression, and determine an appropriate course of action.

Task 8: Develop a written summary of the results of the screening and assessment to document and support the diagnostic impressions and treatment recommendations.

**Domain II: Treatment Planning, Collaboration, and Referral**

Task 1: Formulate and discuss diagnostic assessment and recommendations with the client and concerned others to initiate an individualized treatment plan that incorporates client’s strengths, needs, abilities, and preferences.

Task 2: Use ongoing assessment and collaboration with the client and concerned others to review and modify the treatment plan to address treatment needs.

Task 3: Match client needs with community resources to facilitate positive client outcomes.

Task 4: Discuss rationale for a referral with the client.

Task 5: Communicate with community resources regarding needs of the client.

Task 6: Advocate for the client in areas of identified needs to facilitate continuity of care.

Task 7: Evaluate the effectiveness of case management activities to ensure quality service coordination.

Task 8: Develop a plan with the client to strengthen ongoing recovery outside of primary treatment.

Task 9: Document treatment progress, outcomes, and continuing care plans.

Task 10: Utilize multiple pathways of recovery in treatment planning and referral.

**Domain III: Counseling**

Task 1: Develop a therapeutic relationship with clients, families, and concerned others to facilitate transition into the recovery process.

Task 2: Provide information to the client regarding the structure, expectations, and purpose of the counseling process.

Task 3: Continually evaluate the client’s safety, relapse potential, and the need for crisis intervention.

Task 4: Apply evidence-based, culturally competent counseling strategies and modalities to facilitate progress towards completion of treatment objectives.

Task 5: Assist families and concerned others in understanding substance use disorders and engage them in the recovery process.
Task 6: Document counseling activity and progress towards treatment goals and objectives.

Task 7: Provide information on issues of identity, ethnic background, age, sexual orientation, and gender as it relates to substance use, prevention and recovery.

Task 8: Provide information about the disease of addiction and the related health and psychosocial consequences.

**Domain IV: Professional and Ethical Responsibilities**

Task 1: Adhere to established professional codes of ethics and standards of practice to uphold client rights while promoting best interests of the client and profession.

Task 2: Recognize diversity and client demographics, culture and other factors influencing behavior to provide services that are sensitive to the uniqueness of the individual.

Task 3: Continue professional development through education, self-evaluation, clinical supervision, and consultation to maintain competence and enhance professional effectiveness.

Task 4: Identify and evaluate client needs that are outside of the counselor's ethical scope of practice and refer to other professionals as appropriate.

Task 5: Uphold client's rights to privacy and confidentiality according to best practices in preparation and handling of records.

Task 6: Obtain written consent to release information from the client and/or legal guardian, according to best practices.

Task 7: Prepare concise, clinically accurate, and objective reports and records.

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**The Seven Advanced Core Functions of a Masters Level Addiction/Prevention Professional**

1. **Develop a proficiency to understand research and apply research findings to substance abuse counseling.**

   a. Therapists have an ethical obligation to be familiar with the research literature in whatever disorders they are treating.

   b. Not to be versed in the latest information is to risk spending already inadequate treatment dollars on unsubstantiated treatment methods which are based on spurious data.

   c. The substance abuse practitioner should be able to know how research is executed, and how that knowledge is communicated and applied.
d. Today’s practicing therapist rarely uses the abundant amount of research data that are available. This can be detrimental not only to the counselor, but also to the client who does not receive the best quality treatment based on the latest data.

e. Planned instruction geared toward the usefulness of research data can encourage individuals to read more journals and gain a favorable view and attitude toward research.

f. Knowledge in the research area should encourage the ability to discriminate among the basic type of research. This includes the survey method, the quasi-experimental and the experimental forms of research.

g. Knowledge about research should also include a working knowledge of statistics, and be able to understand why a particular statistical method was used and what the results mean.

h. The masters-level student should have a multidimensional approach in their work, and be able to augment treatment strategies with relevant information. The student needs to become a conscious consumer of research, and emphasis placed on the critical approach to data, that is, thinking a process through and generating additional ideas and questions.

2. Develop a comprehensive client-assessment competency.
   a. The Institute of Medicine indicated that an important predictor of treatment outcomes is the accuracy and quality of the initial assessment, diagnosis, and matching with the treatment options and components.
   b. Assessment at the advanced core level will use not only the personal interview format, but incorporates relevant test instruments, plus other consultations to substantiate information from the interview phase.
   c. The assessment should be able to clearly discriminate an individual who has substance abuse related problems from someone who does not, and from those who may be at risk.
   d. The advanced level counselor will be able to differentiate those clients who meet diagnostic criteria (DSM-IV-TR or the International Classification of Diseases) from those at risk who exhibit mild to moderate levels of substance abuse symptomology.
   e. Diversity and complexity are key elements in the assessment process. The field has discovered a number of co-morbid issues associated with chemical dependency, as well as, multiple forms of addictions.
   f. The master’s level substance abuse counselor must have knowledge of standardized tests and measurements, and be able to use appropriate interview procedures.

3. Match clients to selected treatment with precision.
   a. The MA - degree substance abuse counselor will need skills that include strong attention to testing, interviewing techniques and assessment practices, critical thinking, counseling theory, a monitored practicum or internship, as well as a firm knowledge of treatment outcome research.

4. Evaluate substance abuse treatment and program effectiveness.
   a. In this day and age of managed care and accountability, treatment outcome is becoming more essential. The accountability that is being demanded of the field needs to have an empirical base. Many programs have begun to conduct their own research by internal means or through the use of independent consultations. The masters-level student who has been versed in
research design and the sweep of the latest literature is in a prime position to conduct this needed task.

b. Data collected and analyzed will contribute to the effectiveness of the substance field and the individual with substance problems. The masters-level substance abuse counselor should have the ability to pose research questions and problems, be able to examine the range of available modes of inquiry, define a sample population, identify a data collection strategy, analyze and interpret data, draw conclusions from data, and write research reports.

c. The advanced level MA student should be exposed to academic skills that address research design/methods, statistics, and critical thinking, if not grant writing.

   a. Supervision can be defined as: An intervention that is provided by a senior member of a profession to junior members of the same profession. It is a relationship that is evaluative, extends over time, and monitors and enhances the professional quality of the junior member. The masters-level substance abuse professional is in the position to do such supervision because of exposure to ideas and literature in supervisory theory practice. Additional skills in ethics, public speaking, critical thinking, and records and record keeping are vital.

6. Provide leadership and involvement in community activities: network and collaborate with professional organizations.
   a. The work of the masters-level counselor extends not only to providing leadership in the facility in which they work, but to his or her community and the field in general. Skill areas would include a working knowledge of sociology, political science, public administration, and community development.
   b. Masters-level professionals will be involved in issues of national health care, certification and licensing topics, managed care concerns, and lobbying for substance abuse clients.
   c. Masters-level professionals can contribute actively to the field by writing reports, submitting articles to magazines, journals, and writing book manuscripts.

7. Develop a personal ethical code based on the integration of self-knowledge, professional skills and professional growth.
   a. Masters-level preparation students should take time to focus on interpersonal and intrapersonal development through self-reflection, active solicitation of feedback from colleagues and supervisors, as well as maintain an open attitude toward self-growth.

The Five Domains (Prevention Specialists)

The prevention specialist will practice within the Five Domains:

Domain 1: Planning and Evaluation
- Use needs assessment strategies to gather relevant data for Alcohol, Tobacco, Other Drugs (ATOD) prevention planning.
- Identify gaps and prioritize needs based on the assessment of community conditions.
Select prevention strategies, programs, and best practices to meet the identified needs of the community.

Develop an ATOD prevention plan based on research and theory that addresses community needs and desired outcomes.

Identify resources to sustain prevention activities.

Identify appropriate ATOD prevention program evaluation strategies.

Conduct evaluation activities to document program implementation and effectiveness.

Use evaluation findings to determine whether and how to adapt ATOD prevention strategies.

Domain 2: Education and Skill Development

- Develop ATOD prevention education and skill development activities based on target audience analysis.
- Connect prevention theory and practice to implement effective prevention education and skill development activities.
- Maintain program fidelity when implementing evidence-based programs.
- Assure that ATOD education and skill activities are appropriate to the culture of the community being served.
- Use appropriate instructional strategies to meet the needs of the target audience.
- Ensure all ATOD prevention education and skill development programs provide accurate, relevant, timely, and appropriate content information.
- Identify, adapt, or develop instructor and participant materials for use when implementing ATOD prevention information.
- Provide technical assistance to community members and organizations regarding ATOD prevention strategies and best practices.

Domain 3: Community Organization

- Identify the community’s demographic characteristics and core values.
- Identify key community leaders to ensure diverse representation in ATOD prevention programming activities.
- Build community ownership of ATOD prevention programs by collaborating with key community leaders/members when planning, implementing and evaluating prevention activities.
- Provide technical assistance to community members/leaders in implementing ATOD prevention activities.
- Develop capacity within the community by recruiting, training, and mentoring ATOD prevention-focused volunteers.
- Assist in creating and sustaining community-based coalition.

Domain 4: Public Policy and Environmental Change

- Examine the community’s public policies and norms to determine environmental change needs.
- Make recommendations to policy makers/stakeholders that will positively influence the community’s public policies and norms.
- Provide technical assistance, training, and consultation that promote environmental change.
- Participate in public policy development and enforcement initiatives to affect environmental change.
- Use media strategies to enhance prevention efforts in the community.

**Domain 5: Professional Growth and Responsibility**
- Maintain personal knowledge, skills, and abilities related to current ATOD prevention theory and practice.
- Network with others to develop personal and professional relationships.
- Adhere to all legal, professional, and ethical standards.
- Build skills necessary for effectively working within the cultural context of the community.
- Demonstrate self-care consistent with ATOD prevention messages.

**PROGRAM OUTCOMES**

Upon completion of the ACP Program at The University of South Dakota:

- Graduates will complete a clinical internship.
- Graduates will be prepared to practice as a prevention specialist with knowledge of the Five Domains, or
- Graduates will meet or exceed the national pass rate for IC&RC national alcohol/drug counselor or prevention specialist exam.
- Graduates will be prepared to practice the advanced functions of the Masters level profession.

**ACP DEPARTMENTAL REQUIREMENTS**

**PROGRAM OF STUDY FOR THE ONLINE M.A. ADVANCED TRACK**

The M.A. in Addiction Counseling and Prevention program offers professionals courses leading to an advanced level of competency. Graduates will be eligible for the highest level of addiction/prevention credentialing in South Dakota. We do not know if this program is structured to lead to licensure in other states. Individuals outside South Dakota should contact their state chemical dependency credentialing board if not within South Dakota to ensure courses meet their requirements which may differ by state.

Advanced Track is not available to all students. To be eligible for advanced track, students need to have completed an undergraduate degree in addictions or be Alcohol/Drug credentialed in their state of residence.

<table>
<thead>
<tr>
<th>Course No.</th>
<th>Course Title</th>
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</thead>
<tbody>
<tr>
<td>ACP 700</td>
<td>Advanced Legal &amp; Ethical Issues</td>
</tr>
<tr>
<td>ACP 715</td>
<td>Wellness, Recovery, &amp; Maintenance</td>
</tr>
<tr>
<td>ACP 720</td>
<td>Addiction Counseling</td>
</tr>
<tr>
<td>ACP 730</td>
<td>Research Methods in Addiction</td>
</tr>
<tr>
<td>ACP 753</td>
<td>Addiction Profession Supervision</td>
</tr>
</tbody>
</table>
PROGRAM OF STUDY FOR THE ONLINE M.A. – STANDARD TRACK
REQUIRED COURSES (45 credit hours)

All courses are 3 credit hour courses

Course/No.  Course Title
ACP 520  Comprehensive Substance use and Addiction Education
ACP 522I  Substance Use and Addiction Treatment Continuum
ACP 524  Psychopharmacology of Addiction
ACP 552  Addiction and Substance Use Counseling Theories
ACP 700  Adv. Legal/Ethical Issues & the Addiction Profession
ACP 730  Research Methods in Addiction
ACP 753  Addiction Profession Supervision
ACP 755  Case Management & Assessment of Co-Occurring Disorders
ACP 794  Internship

STANDARD TRACK ELECTIVE COURSES
Select 15 credit hours from the following or pre-approved elective

All courses are 3 credit hour courses

Course/No.  Course Title
ACP 510  Addictive Family Systems and Family Counseling
ACP 512  Substance Use and Addiction in Diverse Populations
ACP 515  Native Americans and Substance Use & Addiction
ACP 521  Foundations of Substance Use and Addiction Prevention
ACP 526  Theory and Practice of Substance Use and Addiction Prevention in Communities
ACP 528  Gambling and Process Addictions
ACP 715  Wellness, Recovery, & Maintenance
ACP 720  Addiction Counseling
ACP 745  Psychopathology
ACP 754  Public Policy & Addiction
ACP 756......................History and Culture of Addiction
ACP 757......................Relapse Prevention
ACP 760......................Co-Occurring Trauma and Addiction
ACP 770......................Advanced Rural Telehealth
ACP 792......................Special Topics (1-3 credits)
ACP 794......................Internship
Optional Co-Occurring Specialization 6 hours (Available with Standard Track only)
ACP 745......................Psychopathology and Addictions
ACP 757......................Relapse Prevention

GRADUATE CURRICULUM COURSES

To view ACP curriculum and course descriptions go to the following link:
SECTION 4:

STUDENT POLICIES
ATTENDANCE POLICY:
All graduate level courses are offered online please refer to your course syllabus for course specific attendance policy. **Attendance in ACP 794 are mandatory.** All internship absences or failures must be made up.

Course and internship attendance will be monitored by the instructors.

CLASS:
- The learner is responsible for his/her own learning and is accountable for his/her own behavior.
- The learner is responsible for notifying the appropriate instructor if he/she will be absent. Absence from an exam without prior notification will result in a zero for that exam.
- The learner is responsible for rescheduling any missed assignments/experiences.
- The learner’s grade may be affected by class absences. See course syllabi.
- Each course will have an attendance policy. Points will be deducted depending on each individual course syllabus.

INTERNSHIP:
Internships are required for M.A. students. See your advisor for designated internship sites and prior approval of that site. Absence from internship without prior notification may result in an unsatisfactory supervisor evaluation, and a make-up day will be scheduled.
- Internship are graded by the internship site preceptor supervisor and/or faculty supervisor.
- It is extremely important for the potential addiction/prevention professional to receive equitable and meaningful clinical experience.
- To use the clinical time to the student’s advantage, the ACP Department has developed a network of internship sites that will allow the student to accomplish this objective.
- All internship sites are required to be accredited and meet IC&RC addiction/prevention approval.
- The internship faculty supervisor, student advisor, and an on-site preceptor supervisor are available to the student intern. In a caring partnership, respect for time is important. Please make an appointment if you would like any assistance or need to discuss a matter of concern.
- Site visits will be mutually planned during the semester.
- Students may be expected to complete a drug test prior to or during the internship as a requirement of the host site. Any positive results will require the student to follow the USD Health Affairs Program Substance Use Disorder Policy.

CLASSROOM DISTURBANCE
Classroom disturbances can take many forms and exist for many reasons, even in classes online. The rights of fellow students and your instructors take precedence over any individual’s involvement in a situation that disturbs the learning environment whether intentional or unintentional. The instructor can take immediate action to end a classroom disturbance, up to removing all elements and persons involved in the disturbing situation. Such time will be counted as an unexcused absence, and if the severity warrants, may result in further disciplinary action.
Classroom disturbances can also serve to create an unfair academic advantage for oneself or disadvantage for another member of the academic community. Some examples of classroom disturbance include:

- Interference with the course of instruction or exam policies to the detriment of other students.
- Disruptions of classes or discussion forums in an attempt to stifle academic freedom of speech.
- Failure to comply with the instructions or directives.

Students are expected to act in a professional manner, meet deadlines, solve problems, cooperate with classmates, and generally contribute to the class in a positive way. Teamwork, listening, empathy, enthusiasm, emotional maturity, and consideration of other people’s concerns are all essential to success. Please bring these qualities and values with you to class. It is as important to practice these interpersonal skills as it is to learn new content. Students may be evaluated by their professional demeanor in some classes.

PROCEDURAL POLICY STATEMENTS

ADDRESS CHANGE
When a student changes his/her address or phone number after being admitted to the Department of ACP, it is the student’s responsibility to notify the Department. The student must also notify the Registrar’s Office by completing the online form found at http://www.usd.edu/accounts/address/. You will be asked to login with your MyUSD username and password.

NAME CHANGE
When a student changes his/her name after being admitted to the Department of ACP, it is the student’s responsibility to notify the Department and the Office of the Registrar in order to ensure record accuracy. The student can complete the online form found at: https://www.usd.edu/registrar/forms

CELL PHONES
Students’ cell phones are not allowed during tests in the classroom/proctoring site, or at the internship sites. Students may have their cell phones on the vibrator mode when in the classroom setting.

HIPAA CERTIFICATION
The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is federal legislation for the protection and confidentiality of health information.

- All students are required to complete the HIPAA training in ACP 700 courses by USD School of Health Sciences and past the post-test with 70% before he/she will be allowed to commence an internship.
- Internship sites may require site-specific training in addition to the USD training.
- Prior to beginning the required internship, the student must submit to the ACP Department a copy of the certificate indicating successful completion of the HIPAA training they received in ACP 700.
- Documentation of HIPAA certification will be retained in the student’s file as a permanent part of the student’s record.
Family Educational Rights & Privacy ACT (FERPA) Release of Information for References
The University of South Dakota will disclose information from a student’s education records only with the written consent of the student. A student’s consent to release information from his/her education record to a third party, when required, must be submitted in writing to the custodian of the record, office of the dean of the school or college in which the student is enrolled, or in the case of unclassified students, to the University Registrar. Such written consent must; 1) specify the records to be released; 2) state the purpose of the disclosure; 3) identify the party or class of parties to whom disclosure may be made; and 4) be signed and dated by the student. The written request may be submitted by fax or scanned email attachment but not solely by email. Due to these FERPA requirements all students who are interested in having members of the ACP faculty provide a student reference for a job, internship, or the like must fill out the FERPA release of information form: [http://www.usd.edu/registrar/forms](http://www.usd.edu/registrar/forms)
This form should be filled out and sent back to the ACP Department only after formally requesting the faculty if they would agree to provide a reference on your behalf. The completed FERPA form will be maintained in the student’s file.

LIABILITY INSURANCE for Internship
All USD ACP students are required to participate in the liability, life, and disability insurance offered through the USD School of Medicine and School of Health Sciences, when registered for internship. Charges for this insurance will be automatically added to the students’ tuition and fees when registered for ACP 794. Upon site agencies’ request, proof of coverage will be forwarded to the field agency.

Insurance coverage is for the academic year the student is enrolled in ACP 794. Students extending their internship beyond the year in which they have registered will be required to purchase their own liability insurance until such time that the internship is complete and a grade has been issued.

COURSE EXAMINATIONS
Make-up examinations in courses are offered at the discretion of the course instructor.

IMMUNITY FROM LIABILITY
Students must sign the Immunity from Liability Agreement prior to participation in ACP 794 (Appendix E).

PERMISSION TO UTILIZE STUDENT WORK
A student must sign a permission form (Appendix F) in order for faculty to use student work for classes, displays, future use, etc.
CONDUCT – RULES AND REGULATIONS

Institutions shall have the responsibility and the authority to develop and implement policies and procedures which are consistent with this chapter, other Board policies, applicable state and federal laws and which are deemed necessary and appropriate to manage the institution. In developing such policies, institutions shall consult student representatives through established consultative mechanisms. A copy of all campus policies shall be filed with the Executive Director. Each institution shall ensure that its students are reasonably informed through routine publications, such as student handbooks, or other means of distributing policies and procedures which affect their presence on campus.

To view all B.O.R. Student Affairs Policies, visit https://www.sdbor.edu/policy/Pages/Section-3-Student-Affairs.aspx

At the discretion of the instructor, a student who is found to be cheating or plagiarizing may be:

a. Given a zero for that assignment
b. Allowed to rewrite and resubmit the assignment for credit
c. Assigned a reduced grade for the course
d. Dropped from the course
e. Failed in the course

Please refer to the Graduate School Policies at http://catalog.usd.edu/content.php?catoid=30&navoid=1724

STUDENT WITH DETRIMENTAL CIRCUMSTANCES POLICY

1. At the time the student is identified at risk to himself/herself or others, he/she will be removed from the internship experience courses. Classroom attendance may/may not be affected.
2. Written documentation of behavior and subsequent action shall be filed in the student’s file on the campus where they are enrolled.
3. An appropriate referral will be made.
4. The student shall remain out of the lab/internship setting until a fitness clearance has been obtained.
5. If the student refuses assessment by a counselor or treatment after the assessment recommendation, the student will be dismissed from the program.
6. Students who have been identified by faculty to be at risk will follow these steps to progress in the program:
   a. Assessment by a certified counselor
   b. Attendance in a program of treatment
   c. Documentation from the counselor per student to the advisor regarding program compliance and plan and continued attendance
7. Non-compliance with treatment plan will result in dismissal from the program
If a student continues in counseling at time of graduation, with a release of information, the SD BAPP may be notified.

HEALTH POLICY
Health Affairs Student Insurance Policy

Students enrolled in Health Affairs graduate professional programs are required to carry health insurance coverage that meets or exceeds the minimum standards outlined below. These students must provide proof of credible coverage meeting minimum coverage standards at the beginning of each academic year. Students enrolled in Health Affairs undergraduate professional programs are required to carry health insurance coverage that meets or exceeds the minimum standards outlined below, at the beginning of the semester in which they will engage in clinical experiences. Health insurance coverage is a requirement of the Affordable Care Act, each academic program’s accreditation standards, and through affiliation agreements with clinical rotation sites. Students who are unable to provide or have not provided sufficient proof of credible coverage meeting minimum standards will not be allowed to participate in clinical rotations or internship experiences.

If required by the student’s specific academic program, other insurances (ie. Life, disability and malpractice) are purchased as a part of the student tuition and fees.

Minimum coverage requirements are:

- Nationwide coverage
- Insurance must contain provisions for mental health and chemical dependency coverage.
- Insurance not have a deductible higher than $7500 or out of pocket maximum of $7500.

NOTE: Exceptions to the minimum requirements may be temporarily granted on an individual basis with the approval of the Dean of Medical Student Affairs or the appropriate Health Sciences Department Chair.

Examples of acceptable coverage may include but are not limited to:

- Group plans where student is a dependent of a parent or spouse.
- Tricare
- Medicaid
- Coverage through the HealthCare.gov marketplace. South Dakota companies participating in the marketplace include Avera Health Plans, Sanford Health Plan

All ACP students have a responsibility to follow good health practices for their own protection, and for the protection of their clients. All students are required to have health insurance and provide a copy (front and back) to your academic advisor at time of admission. A status update on your coverage will be completed before allowed out on internship.
IMMUNIZATIONS AND TESTING

The University of South Dakota Health Affairs Immunization policy requires any student having contact with clients to have updated immunizations. These immunization requirements can take up to 6 months to complete, so it is imperative these are completed well in advance of registering for the internship class.

Please read Immunization Policy (in the portal), and submit the required Immunization Form, and a Release of Information for Sanford Health. Follow all policies and directions regarding the completion of these requirements, and also, draw your attention specifically to the hepatitis B and TB requirements.

Hepatitis B immunization. ALL students are required to receive HBV vaccination (3 doses at 0, 1 and 6 months). The first two doses of the three dose series are required prior to the start of classes. A positive Hep B titer without proof of vaccine dates is accepted if unable to obtain immunization dates.

The area that has caused the most confusion is the TB requirement. Everyone must have a 2-step TB skin test. If you have previously had a 2-step and consecutive annual tests you will only need a single TB skin test. However, if at any time following the 2-step you have missed an annual test, you will need to redo the 2-step test prior to beginning class.

The ACP Department must have official documentation verifying all of your immunizations are up to date prior to registering for the Internship class. Students should start this process two semesters prior to registering for this class to ensure you can participate in a clinical setting with face to face client contact. However, in some instances an agency may require additional immunizations beyond those listed in this policy to minimize health risks between you and the client.

Locations for immunization services at reasonable prices can be found by contacting your local community health agency or https://www.anylabtestnow.com/

Email all completed forms to (Keep a copy for your records.): Usd.immunizations@SanfordHealth.org Attn: Patty Waage. Copy Amy.Orr@usd.edu in that email (so the department is aware of the date sent to student health). Complete and submit prior to registration for labs and field experience.

SOCIAL MEDIA POLICY

Social media are internet-based applications which support and promote the exchange of user-developed content.

Posting personal images, experiences, and information on these kinds of public sites poses a set of unique challenges for all members of the addiction community, including: employees, faculty,
volunteers, and students (collectively “Personnel”). All personnel have responsibility to the institution regardless of where or when they post something that may reflect poorly on The University of South Dakota Addiction Counseling and Prevention department or on the Addiction community.

The University of South Dakota Addiction Counseling and Prevention Department is committed to supporting your right to interact knowledgeably and socially; however these electronic interactions have a potential impact on patients, colleagues, and future employers’ opinions of you. The principal aim of this guideline is to describe your responsibilities to The University of South Dakota Addiction Counseling and Prevention department in relation to social media and to help you represent yourself and The University of South Dakota Addiction Counseling and Prevention Department in a responsible and professional manner.

Guidelines

The following guidelines outline appropriate standards of conduct related to all electronic information (text, image or auditory) that is created or posted externally on social media sites by Personnel affiliated with The University of South Dakota Addiction Counseling and Prevention Department.

Examples include, but are not limited to:

- Text messages
- Media messaging service (MMS)
- Twitter®
- Facebook®
- Snapchat®
- Instagram®
- Linked-In®
- YouTube®
- All other social networks, personal and organizational websites, blogs, wikis, and similar entities.

This guideline applies to future media with similar implications. It also applies whether Personnel are posting to:

- The University of South Dakota-hosted sites
- Social media in which one’s affiliation is known, identified, or presumed
- A self-hosted site, where the views and opinions expressed are not intended to represent the official views of The University of South Dakota Program.

Best Practices

Everyone who participates in social media activities should understand and follow these simple but important Best Practices:
1. Take Responsibility and Use Good Judgment. You are responsible for the material you post on personal blogs or other social media. Be courteous, respectful, and thoughtful about how other Personnel may perceive or be affected by postings. Incomplete, inaccurate, inappropriate, threatening, harassing or poorly worded postings may be harmful to others. They may damage relationships, undermine The University of South Dakota Addiction Counseling and Prevention department’s reputation, discourage teamwork, and negatively impact the program’s commitment to patient care, education, research, and community service.

2. Think Before You Post. Anything you post is highly likely to be permanently connected to you and your reputation through Internet and email archives. Future employers can often access this information and may use it to evaluate you. Take great care and be thoughtful before placing your identifiable comments in the public domain.

3. Protect Patient Privacy. Disclosing information about patients without written permission, including photographs or any potentially identifiable information is strictly prohibited. These rules also apply to deceased patients and to posts in the secure sections of your social media pages that are accessible only by approved friends.

4. Protect Your Own Privacy. Make sure you understand how the privacy policies and security features work on the sites where you are posting material.

5. Respect Work Commitments. Ensure that your blogging, social networking, and other external media activities do not interfere with your educational commitments.

6. Identify Yourself. If you communicate in social media about The University of South Dakota Addiction Counseling and Prevention department, disclose your connection with The University of South Dakota and your role in the program. Use good judgment and strive for accuracy in your communications. False and unsubstantiated claims and inaccurate or inflammatory postings may create legal or professional liability for you.

7. Use a Disclaimer. Where your connection to The University of South Dakota is apparent, make it clear that you are speaking for yourself and not on behalf of The University of South Dakota Addiction Counseling and Prevention department. A disclaimer, such as, "The views expressed on this [blog; website] are my own and do not reflect the views of The University of South Dakota or The University of South Dakota Addiction Counseling and Prevention department," may be appropriate.

8. Respect Copyright and Fair Use Laws. For The University of South Dakota’s protection as well as your own, it is critical that you show proper respect for the laws governing copyright and fair use of copyrighted material owned by others, including The University of South Dakota’s own copyrights and logo brands.
9. Protect Proprietary Information. Do not share confidential or proprietary information that may compromise The University of South Dakota Addiction Counseling and Prevention department’s practices or security. Similarly, do not share information in violation of any laws or regulations.

10. Seek Expert Guidance. Consult with the Addiction Counseling and Prevention department Chair if you have any questions about the appropriateness of materials you plan to publish or if you require clarification on whether specific information has been publicly disclosed before you disclose it publicly. Social media may generate interest from the press. If you are contacted by a member of the media about a University of South Dakota related blog posting or Program information of any kind, contact the Addiction Counseling and Prevention department Chair before disclosing information to the media.

Examples:
The following are fictional use-case examples of social media and blogging activities and an explanation of their appropriateness as per The University of South Dakota Addiction Counseling and Prevention Department Social Media Guideline:

1. A patient attempts to “friend” a fellow addiction counselor or student on Facebook. This is almost always inappropriate. Even after the provider-patient relationship has ended, it would be inappropriate to discuss health-related information. (Best Practice 3).

2. A patient comments on a faculty or student blog and discloses protected health information with the expectation that The University of South Dakota Addiction Counseling and Prevention department faculty or student will continue the discussion. Any health-related discussions by email with patients require a written consent. Similarly, social media discussion with a patient should not directly address health concerns of individual patients. (Best Practice 3).

3. An Addiction Counseling and Prevention student “tweets” that he just finished a counseling session with a patient and describes the diagnosis or condition of that patient. It is difficult to be certain that information disclosed in the Twitter® post is not identifiable to that particular patient. The best type of posting would include very general information. Other posts by the same student could indicate his/her school and current worksite location, leading to circumstances that indirectly identify the patient, such as by naming a very specific condition or behavior. (Best Practice 3).

4. An Addiction Counseling and Prevention student writes in a blog, naming a faculty member or prospector supervisor at an internship site who did minimal teaching or displayed minimal leadership, and recommends that other students not take classes from, or work for, that particular faculty member or worksite. Legitimate critique of an educational activity is appropriate, so long as professionalism is maintained. There are more effective and less public mechanisms for relaying this type of information. (Best Practices 1, 2).
5. An Addiction Counseling and Prevention student posts to his “wall” on Facebook that half of the class was sleeping during Dr. X’s lecture, or that someone was “ranting” during a lab class. This is very similar to the use case above. (Best Practices 1, 2).

6. A student interning and/or working at a treatment facility posts (on their personal Facebook wall) a picture of a person who was just discharged from care, expressing joy, best wishes, and congratulating everyone involved in this excellent patient outcome. Without written patient/representative consent, this is a clear violation of patient confidentiality, even if the patient is not named. (Best Practice 3)

7. A student blogs that the clinical facility he is working in should have been updated years ago and is outdated. The public disclosure of such information increases the liability for the facility and The University of South Dakota Addiction Counseling and Prevention Program, and is clearly unprofessional. There are legitimate and confidential mechanisms for improving quality. (Best Practices 1, 2)

8. An Addiction Counseling and Prevention student wearing a University of South Dakota Addiction Counseling and Prevention department t-shirt is tagged in a photo taken at a local bar and posted on a friend’s Facebook page. The student is clearly inebriated. The two issues are that:
   a. The University of South Dakota Addiction Counseling and Prevention Program logo identifies the affiliation to the institution; and
   b. The unprofessional behavior of the student is available for all to see, including future employers and patients.
   Although the student did not post the photo, they should do everything possible to have the photo removed and remove the tagging link to the student’s own Facebook page. (Best Practices 2, 4)

9. A student blogs that their fellow student/co-worker wears too much perfume or cologne, has terrible taste in clothes, and takes a long time to complete their work. This is an inappropriate forum and set of comments and demonstrates unprofessional behavior. There are legitimate and confidential mechanisms for addressing valid concerns in the classroom. (Best Practices 1, 2)

10. An Addiction Counseling and Prevention student creates a social media website to discuss professional knowledge (e.g., "Addiction Counseling and Prevention Interest Group" on Facebook®) This is a learning community environment, in which professional knowledge is exchanged, shared and discussed. While the goal is laudable, there are still risks. A disclaimer is necessary, since postings may be incorrect, taken out of context, or improperly referenced. The moderator should take precautions to prevent the posting of information or photographs that are potentially identifiable to a particular patient or facility. (Best Practices 1, 3, 6, 7)

11. During class, a student instant messages a group of classmates about a fellow student or faculty member’s manner of speaking or dress. Using information technology in the classroom for a non-educational purpose demonstrates unprofessional behavior. Additionally, this interferes with
others ability to learn and concentrate and is disparaging towards the faculty member or student -- not to mention is insensitive. (Best Practices 1,5,6)

12. Following a test, a student blogs that a particular faculty member is “out of touch with reality” and is “insane”. One student replies that the faculty member “isn’t human”, while another posts “are you <expletive> kidding me? I can’t take this anymore – I’m quitting this joke of a program.” Using information technology in the classroom for a non-educational purpose demonstrates unprofessional behavior. Additionally, this is an inappropriate forum and set of comments and demonstrates unprofessional behavior. There are legitimate mechanisms for addressing valid concerns in the classroom. False and unsubstantiated claims and inaccurate or inflammatory postings may create liability for you. (Best Practices 1, 2, 5, and 6).

The University of South Dakota Addiction Counseling and Prevention Department takes its obligation to students, patients/clients, and the addiction profession seriously. Failure to abide the aforementioned best practices will be considered a breach of appropriate professional behavior, and can result in disciplinary actions.
SECTION 5:

PROGRESSION POLICY
INTERNSHIP FAILURE POLICY

1. An internship failure is given whenever a student shows unsatisfactory competency in one or more of the Domains.
2. Students who have not provided proof of liability insurance, criminal background check, HIPAA certificate, and immunization records will not be registered to do an internship.
3. All internship absences must be made up according to the direction of the on-site preceptor supervisor.
4. The student will receive written documentation of the reasons for the internship failure on the Anecdotal Record of Student Performance form. This form will become a permanent part of the student’s cumulative record.

ANECDOTAL RECORD OF STUDENT PERFORMANCE PROCEDURE (Appendix G)

1. The Anecdotal Record of Student Performance can be initiated by any faculty, adjunct faculty, or staff member from the USD Department of ACP.
2. Anecdotal records are used to document situations in which a student fulfilled/violated professional performance standards or earned a laboratory/internship failure. It should include specific objective observations of the behavior observed, along with the date of the incident.
3. The student will be required to meet with the advisor/faculty supervisor or the on-site preceptor supervisor and/or the staff member making the referral, to review and sign the Anecdotal Record.
4. The Anecdotal Record of Student Performance Form will become a permanent part of the student’s cumulative record.
5. After receiving two negative Anecdotal Records for violations of professional performance, the student will be placed on professional warning. The ACP Department Chairperson will provide written notification to the student. After three negative Anecdotal Records for violations of the professional performance standards, the student may be referred for help. It may be determined that dismissal from the Program is warranted.
6. The laboratory failure policy and the internship failure policy indicate the procedure for handling laboratory/internship failures documented on the Anecdotal Record.

READMISSION POLICY

1. Graduate students seeking readmission to the ACP Department, after failing or dropping ACP 794, must be in contact with their academic advisor, professor, faculty supervisor, and on-site preceptor supervisor for collaborative recommendations regarding readmission.
2. The decision on readmission will be made by the ACP Department based on the student’s request, advisor recommendations, and the Department’s overall decision.
3. Students seeking readmission may be required to update their knowledge and validate their skills. This may result in additional coursework. Refer to Progression Policy (page 37)
4. The decision for student dismissal rests with the student, the advisor, and the Department Chair.
STUDENT-INSTRUCTOR CONFLICT RESOLUTION

Ideally, academic issues are solved at the lowest level possible. In the event that a student has an issue with an ACP professor, the student should initiate the process of conflict resolution by making an appointment to discuss the situation in person with their professor.

Prior to the appointment, the student will write a brief description of the issue and offer a possible solution. One written statement per issue is required. If satisfactory resolution of the conflict is not reached between the student and the professor, the next step would be for the student to contact their academic advisor with a written brief description of the issue and their possible solution.

The advisor, the professor, and the student will work together in an attempt to reach a satisfactory resolution of the dispute within ten business days of receipt of written notice of the dispute. The advisor and the professor shall both issue a written statement to the student, either separately or jointly, within ten business days of receipt of the notice.

If the issue is not satisfactorily resolved within ten business days at this level, the student shall contact the Department Chair in writing within ten business days with a full description of the issue, possible solution, and the attempts made by the student to resolve the issue.

The Department Chair will review the student’s statement, the advisor’s statement, and the professor’s statement to assist in a resolution. Or, will facilitate a dialogue among the parties to reach a solution that is satisfactory to all parties, within ten business days and only within the current semester.

For the convenience of the student, the student may utilize the optional “Student-Instructor Conflict Resolution Form” (Appendix H) to begin the dispute resolution process. Students reserve the right to an academic appeal of departmental decisions.

GRADUATE ACADEMIC STANDING, PROBATION, DISMISSAL AND APPEAL

If a student has more than one course of unsatisfactory work and/or has not maintained a 3.0 term or cumulative graduate GPA, the academic program places the student on warning or probation, or dismisses him/her from the program in keeping with department policies. Degree programs and The Graduate School review the academic standing of all graduate students each term, and program leaders notify students directly of academic warning, probation or dismissal. The Graduate School is copied on all student communication. A graduate student may be dismissed from the program at any time for failure to meet the academic performance and progress standards of the degree program’s or The Graduate School. The department is required to provide students a written notice of the issues and an opportunity to meet with the program director (face-to-face, teleconference, virtually) beforehand.
It is the policy of The Graduate School that any academic graduate department, through due process, may deny a graduate student continued enrollment in a program in accordance with department policies. The reasons for dismissal include: (1) academic performance that does not meet the standards of the department and The Graduate School, or (2) conduct in violation or unfavorable of the ethical or professional standards of the degree program or discipline involved. Helpful link: http://catalog.usd.edu/content.php?catoid=30&navoid=1724#grad_acad_appe

Academic appeals are handled through the Graduate Academic Appeal Policy. SDBOR 2.9 describes this procedure for dismissal detailing the specific process. Appeal form: https://www.sdbor.edu/policy/Documents/2-9.pdf

IC&RC STATE CREDENTIALING

Admission or graduation from the USD Department of Addiction Counseling and Prevention does not guarantee obtaining a credential to practice as a chemical dependency counselor or prevention specialist.

Certification/licensure requirements and the subsequent procedures are the exclusive right and responsibility of the individual state; in the State of South Dakota, the responsible body is the South Dakota Board of Addiction and Prevention Professionals (SD BAPP). Students must satisfy the requirements of the appropriate Board in which they seek certification. The graduate must successfully pass the examination and meet the requirements of their state board (in the State of South Dakota, the SD BAPP), independently of any academic requirements for graduation.

All graduates who desire to practice in the State of South Dakota must meet the legal requirements of the state certification Board (SD BAPP). After completion of the graduation requirements and the required clinical hours have been met (see BAPP regulations), the student is eligible to sit for an examination of certification.

The graduate must successfully pass this examination and meet the requirements of the respective state agency (SD BAPP) to become a licensed chemical dependency counselor or prevention specialist.

Any intern/trainee who is in violation of the SD BAPP rules and regulations regarding addiction/prevention practice while enrolled as a USD student will be reported to the Board in the respective state.

SOUTH DAKOTA BOARD OF ADDICTION AND PREVENTION PROFESSIONALS

In 1982, the South Dakota Board of Addiction and Prevention Professionals (SD BAPP) was established by state government to protect the public by overseeing and ensuring the safe practice of addiction/prevention counseling. The BAPP achieves this mission by establishing the standards for competent practice by certifying and licensing professionals.
Individuals who serve on the BAPP are appointed to their position by the Governor of South Dakota. State law dictates the membership of the BAPP, which includes credentialed professionals, an attorney, and lay persons/consumers. Together, they meet several times a year to oversee BAPP activities and to take disciplinary action on professionals as necessary.

http://dss.sd.gov/licensingboards/bapp.aspx

VIOLATIONS

The grounds for discipline include:

1. Participating in, condoning or being an accessory to dishonesty, fraud, deceit or misrepresentation in the procurement of certification or maintenance of certification; including misrepresentation on your own or another’s application and providing intentional false or misleading statements or omissions.

2. Misrepresentation of professional qualifications, certifications, accreditation, affiliations and employment experiences.

3. Participation in any illegal acts, to include, but not limited to:
   a. Violation of federal or state discrimination statutes.
   b. Violation of federal or state confidentiality statutes.
   c. An act resulting in being convicted or pleading guilty or nolo contendere (no-contest) before a court in this state or any other state, or before any federal court for any offense punishable as a Class I misdemeanor or felony or like sanction. A Class I misdemeanor or felony offense shall mean any offense which constitutes a Class I misdemeanor or felony under the laws of the state where the offense was committed, whether alcohol or other drug related or not.
   d. An act resulting in being convicted or pleading guilty or nolo contendere (no-contest) before a court in this or any other state, or before any federal court, of any offense involving crimes of moral turpitude, theft or malfeasance.
   e. An act that is a violation of any administrative rule promulgated by the South Dakota BAPP or by the Division of Social Services/Behavioral Health Services, State of South Dakota, or other professional licensing or certification boards.
   f. An act resulting in being convicted by a military tribunal or court martial for an offense equal to a Class I misdemeanor or felony or like sanction.

4. Professional Incompetence
   a. Gross incompetence or unprofessional or dishonorable conduct or any act, which constitutes a substantial deviation from the standards of skill ordinarily possessed by professional peers acting in the same or similar circumstances.
   b. Refusal to seek treatment for chemical abuse or dependency or mental health problems that impair professional judgment and performance.
   c. Negligently, willfully or intentionally acting in a manner inconsistent with the health or safety of persons in your professional care.
d. The inability to perform or the consistent unsatisfactory performance of the expected functions of an alcohol and drug abuse professional.

e. Failing to recognize the personal boundaries and limitations of one's own professional competencies demonstrated by offering services or using techniques beyond the scope of the professional’s personal competencies or expertise.

5. Exploitation of Client/Recipient or Professional Relationship

a. Entering into a professional relationship with members of one's own family, intimate friends, close associates or others whose welfare might be jeopardized by such a dual relationship.

b. Participating in or soliciting sexual relationships with a client or recipient.

c. Entering into personal financial arrangements with a client or recipient, which exploits clients (BAPP Standards Manual) or recipients.

d. Using a relationship with a client or recipient to promote personal gain or the profit of an agency or commercial enterprise of any kind.

e. Offering professional services to a client or recipient who is under the care of another professional, except with the knowledge of the other professional or after termination of the client/recipient relationship with another professional.

f. Sending or receiving a commission or rebate or any other form of payment for referral of clients or recipients for professional services.

g. Engaging in fee splitting.

h. Accepting a private fee or gratuity or any other gift other than a one-time gift for professional work with a person who is entitled to the services through the professional employer.

6. Unethical Conduct.

a. Engaging in unethical conduct includes, in addition to the violations enumerated herein, any other substantial violation of any of the Board promulgated or adopted Professional Code of Ethics, which is detrimental to the profession or to the public.

MAKING A COMPLAINT

Complaints against Credentialed/Licensed Professionals, Trainees, or those seeking credentialing shall be made through a formal procedure described herein. Disciplinary action may also be initiated by a majority vote of the Board of Directors of the Board of Addiction and Prevention Professionals (BAPP). The Administrative Officer with consultation of the Board Chair may initiate complaints based on information presented to the Board by an applicant or supervisor during the course of the certification, recertification, upgrade, or recognition application process.

All complaints must be in writing and include the full name and address of the complainant. The complaint should outline the facts, which clearly and accurately describe the allegations against the respondent.

All complaints other than those generated by the Board or Administrative Officer should be sent by first class mail to:
Upon receipt of a formal written complaint, the Administrative Officer will forward the complaint to the Ethics Committee for review and consideration if the complainant is identified as an individual under the cognizance of the Board. The Ethics Committee shall operate under the authority of the Board Policies and Procedures as outlined in the effective South Dakota BAPP Standards Manual (including changes approved by the Board) and/or statutory regulations and/or rules and/or Policies and Procedures Manual.

Committee members who have a conflict of interest will disqualify themselves from participating in a disciplinary procedure or appeal and may do so without comment.

The following relationships may constitute a conflict of interest:
- Past or present family or "significant other."
- Past working relationship within the same agency or presently employed by the same agency.
- A present or former client or recipient of professional services.
- Any other special circumstances that may make objectivity difficult.

Upon receipt and review of the complaint, the BAPP Ethics Committee will determine whether or not the complaint warrants investigation. The committee may, in its sole discretion, dismiss the complaint for any reason. If the Committee finds that the complaint has no merit, the complainant shall be notified in writing of the decision.

Communication from the Board office will be accomplished through registered and/or certified mail.

The committee may:
- Ask for further information or clarification from the complainant
- Review and investigate alleged acts or omissions that the committee believes constitute cause for disciplinary sanctions
- Forward a copy of the complaint to the respondent and ask the respondent to reply to the complaint in written form
- Move to a hearing

Upon review of all information and pertinent documentation, the Ethics Committee may schedule a hearing to receive and review testimony, evidence and question the complainant(s), the respondent(s), and witnesses.

The Board may use its own staff or employ Licensed/Credentialed Chemical Dependency Counselors, Credentialed Prevention Specialists, agents, or investigators to assist in the enforcement of any
violation of the codes or of the statute designating the Board or any rule promulgated by the Board. Any person violating the provisions of the statute may be enjoined from further violations by an action brought by the state's attorney of the county where the violations occurred or by an action brought by any citizen in the state.

The Board, the Attorney General or the relevant state’s attorney may apply to the circuit court for the county in which a violation is alleged to have occurred for an order enjoining or restraining the commission or continuance of the acts.

The Board may authorize a hearing examiner to conduct the hearing required to determine a violation of this Act. [https://dss.sd.gov/docs/licensing/bapp/complaintprocedures.pdf](https://dss.sd.gov/docs/licensing/bapp/complaintprocedures.pdf)
SECTION 6:

APPENDICES
APPENDIX A

CODE OF ETHICS

PROFESSIONAL CODE OF ETHICS

NADAAC Code of Ethics: https://www.naadac.org/code-of-ethics
APPENDIX B

PROFESSIONAL STANDARDS OF CONDUCT AND CONFIDENTIALITY AGREEMENT

As an addiction professional, the addiction counselor/prevention specialist must be sensitive to the value of human dignity. This value is manifested in behaviors which demonstrate sensitivity to the well-being of others and honesty in all endeavors. Specific behaviors which support these values include maintenance of confidentiality and honesty concerning personal, academic and client information, and the demonstration of respect for the psychological welfare of others.

Students enrolled in the USD Addiction Counseling and Prevention Department are ambassadors of The University of South Dakota and their profession must demonstrate behaviors consistent with this tenet in all areas of their personal and professional life.

Professional conduct expected of students is evidenced in behaviors which represent:

- ethical conduct
- integrity and honesty
- respect for oneself, others and the rights of privacy and confidentiality
- appearance and communication consistent with a clinical professional
- respectful behavior in interpersonal relationships with peers, superiors, clients, and their families
- punctual attendance at all program scheduled activities and adherence to deadlines set by the faculty

I agree to keep all information, including names, conditions, and other references to client identities strictly confidential. In addition, I agree to treat all client information that I may witness, as a result of my clinical experiences, lectures, conferences, etc., with the same confidentiality. I agree to not disclose such information to anyone other than those involved in that person’s care. (Note: You may be required to sign additional individual confidentiality agreements with clinical agencies and attend clinical agency-specific HIPAA training.) I have submitted my HIPAA certificate to the ACP Department. A breach of confidentiality may result in dismissal from The University of South Dakota Department of Addiction Counseling and Prevention.

As a student intern I will adhere to the IC&RC Professional Code of Ethics, have signed the Code as found in Appendix A, and have submitted a signed copy to the Internship Supervisor prior to internship.

I have been provided with the USD ACP Student Handbook and understand that I, as a USD ACP student, must comply with these policies.
APPENDIX C

IMMUNIZATION FORM

The SHS Health Affairs immunization form can be found at the following link from the Portal:

https://my.usd.edu/uPortal/f/home/p/health-sciences.n107/max/render.uP?tab=academics/health-sciences/addiction-studies
APPENDIX D - Occupational Exposure to Blood borne Pathogens Report Form

University of South Dakota School of Health Sciences

OCCUPATIONAL EXPOSURE TO BLOODBORNE PATHOGENS REPORT FORM

Student __________________________________________ Course & Campus __________________________
Student’s phone number ____________________________ Student ID __________________________
Program: Addiction Counseling and Prevention □ Dental Hygiene □ Clinical Lab Science □
Medicine □ Nursing □ Physical Therapy □ Physician Assistant □ Occupational Therapy □
Social Work □
Date of report ___________ Date of exposure ___________ Time of exposure ________
Hospital/Clinic site where exposure occurred ________________________________
City ____________________________ Supervisor/Faculty ________________________________

**Details of Exposure**

Details of the procedure being performed; including where and how the exposure occurred
______________________________________________________________________________

Type of exposure: puncture □ cut □ scratch □ bite □ non-intact skin □
Splash to mucous membrane of: eye □ nose □ mouth □
□ other type of exposure (describe) ________________________________

Extent and location of exposure (type and amount of blood/body fluid/material, severity of exposure
including depth and whether fluid was injected, etc.) ________________________________
PPE (personal protective equipment) worn: gloves □ gown □ mask □ protective eyewear □
face shield□
□ other PPE (describe): ________________________________

Sharp device involved: suture needle □ injection needle □ IV needle □ scalpel □
instrument □
□ other sharp device (describe): ________________________________

Decontamination/first aid administered (i.e. hand washing, flushing mucous membrane eye, nose,
mouth, etc.) ________________________________
______________________________________________________________________________

Post exposure follow-up: Medical Facility: ________________________________
Date: ________________

Student's signature: ____________________________ Date: ________________

**For Office Use Only:**

Date report received ________________
Program Director: ____________________________
Occupational Exposure to Blood borne Pathogens Protocol

1. **Decontamination:** Follow good **first aid** techniques including thorough flushing of mucous membranes and eyes, wound care if appropriate and thorough handwashing. There is no benefit from expressing blood at the site of the injury or application of caustic agents such as bleach.

2. **Notification:** It is the student’s responsibility to report all suspected exposure incidents:
   a. **Immediately to Faculty Member/Supervisor.**
   b. **Immediately to Employee Health/Infection Control Personnel** in the clinical site where the exposure occurred. (If the clinical site does not provide post-exposure evaluation for students contact your faculty.)
   c. **After initial management, return report form** to the appropriate contact person within your program department as soon as possible.

3. **Documentation:** The student is required to report the following essential information to Employee Health/Infection Control Personnel and complete the University of South Dakota Health Affairs Occupational Exposure to Bloodborne Pathogens Report Form (see #4).
   a. Procedure being performed, including where and how the exposure occurred.
   b. Type of exposure: puncture, scratch, bite, mucous membrane of the eye, nose, or mouth, or other.
   c. Extent of exposure: type and amount of blood/body fluid/material, severity of exposure including depth and whether fluid was injected, etc.
   d. PPE (personal protective equipment) worn at the time of exposure: gloves, gown, mask, protective eyewear, face shield, etc.
   e. If related to a sharp device, description of the sharp including the band name.
   f. Decontamination: handwashing, flushing mucous membrane of eye, nose, mouth, etc.
   g. First aid administered.
   h. Student’s hepatitis B immunity status, last tetanus booster, etc.
   i. Source patient: known or unknown.
   j. Is it possible the patient was exposed to your blood?

  **University of South Dakota Health Affairs Occupational Exposure to Bloodborne Pathogens Form:**

This form may be downloaded from the portal. Do not delay seeking post-exposure evaluation for the purpose of retrieving the report form. However, it is the student’s responsibility to complete the student section of the form (first page). Medical students are responsible for seeing that the medical professional doing the evaluation completes and signs the second page of the form and/or brings a copy of the post-exposure evaluation and follow-up written opinion from the facility where this occurred. The student is required to
bring the form to the contact person for his/her program as soon as possible. Note this form is in addition to any forms required by the facility where the incident occurred. 

**Questions/Concerns:** Contact your supervising faculty and program/course director as indicated. *If post-exposure prophylaxis is indicated please be aware there is the PEPline (The National Clinician’s Post-Exposure Prophylaxis Hotline):*  
[http://nccc.ucsf.edu/clinical-resources/pep-resources/pep-quick-guide/](http://nccc.ucsf.edu/clinical-resources/pep-resources/pep-quick-guide/)

4. **Billing for Testing:** Responsibility for payment differs by program, check with your program to see if the student or the program is responsible for payment.
APPENDIX F

PERMISSION TO UTILIZE STUDENT’S WORK

I, (print name) __________________________________________________, hereby give permission for the faculty of The University of South Dakota Department of ACP to make use of my work for future classes, displays, etc.

Signature: ________________________________________________________

Student ID #: ______________________________________________________

Date: ______________________________________________________________
APPENDIX G

ANECDOTAL RECORD OF STUDENT PERFORMANCE

Student Name: ________________________________ Date: ______________

Internship Failure:

As determined by on-site preceptor supervisor, faculty supervisor and student intern:
Due to excessive missed work days, ethical/behavioral breach in professionalism, or lack of knowledge in core competencies/domains.

Professional Performance:

As determined by on-site preceptor supervisor, faculty supervisor and student intern:
Due to failure to uphold Student Rights and Responsibilities, ACP Code of Academic and Clinical Conduct, Attendance Policy, has met the detrimental circumstances policy, and/or failure to meet the signed Professional Code of Ethics (Appendix A).

DOCUMENTATION

Faculty Supervisor: ________________________________ Date: ______________

Student: ________________________________ Date: ______________

On-site preceptor supervisor: ________________________________ Date: ______________
APPENDIX H

STUDENT-INSTRUCTOR CONFLICT RESOLUTION FORM

Name: ________________________________ Student ID#: __________
Date: __________________ Email: ________________________________
Class: ________________________________
Instructor: ________________________________
My concern: ________________________________

Explain: (Please be specific with your narrative.)

Possible solution(s):

Professor/Advisor/Mentor/Administrator Recommendation:

________________________________________
Date: ____/____/_____
Advisor/Professor/Facilitator

Department Chair Recommendation:

Department Chair___________________________
Date: ____/____/_____

Action/Follow-up:
APPENDIX I:

RIGHTS AND RESPONSIBILITIES FOR STUDENTS
UNIVERSITY OF SOUTH DAKOTA DEPARTMENT OF ADDICTION COUNSELING AND PREVENTION

I, _______________________________________________________, verify that I have read and clearly understand the Addiction Counseling and Prevention Rights and Responsibilities for Students policy, and understand the terms and conditions within.

Signed: _______________________________________________________

(First Name, MI, Last Name)

USD Student ID #: ___________________________________________________

Date: _____________________________________________________________
APPENDIX J:

CODE OF ACADEMIC AND CLINICAL CONDUCT
UNIVERSITY OF SOUTH DAKOTA
DEPARTMENT OF ADDICTION COUNSELING AND PREVENTION

I, _______________________________________________________, verify that I have read and clearly understand the Addiction Counseling and Prevention Code of Academic and Clinical Conduct, and understand the terms and conditions within. I understand that breach of Academic and Clinical Conduct etiquette can jeopardize student and/or patient confidentiality, compromise the quality of learning for myself and my classmates, and can be detrimental to the reputation of the University of South Dakota Addiction Counseling and Prevention program and the Addiction profession. I recognize that disciplinary action can be taken if the Code of Academic and Clinical Conduct policy is violated.

Signed: _______________________________________________________

(First Name, MI, Last Name)

USD Student ID #: __________________________

Date: __________________________
APPENDIX K:

SOCIAL MEDIA POLICY
USD ADDICTION COUNSELING AND PREVENTION

I, _______________________________________________________, verify that I have read
(print name clearly)

and clearly understand the Addiction Counseling and Prevention Social Media Policy, and understand
the terms and conditions within. I understand that breach of the Addiction Counseling and Prevention
Social Media Policy can jeopardize student and patient confidentiality, compromise the quality of
learning for myself and my classmates, and can be detrimental to the reputation of the University of
South Dakota Addiction Counseling and Prevention program and the Addiction profession. I recognize
that disciplinary action can be taken if the Social Media Policy is violated.

Signed: _________________________________
(First Name, MI, Last Name)

USD Student ID #: _______________________________

Date: _________________________________