



Renewal pack for registration as an Alcohol and Other Drug Practitioner

For your application, you need:

Completed
(tick)

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| <ol style="list-style-type: none"> 1. Renewal form (see page 2) 2. Disclosure of convictions or complaints (see page 3) 3. Assessment report from supervisor (see page 4 & 5) 4. Form from your line manager supporting your application for renewal (see page 6) 5. Verification of Continuing Education Programme points (see page 7) 6. Payment of fee for \$238.00
Please make cheque payable to Dapaanz. You may pay by direct credit (Kiwibank: 38-9001-0625548-01). You must put your membership number or name in the reference box. If the fee is being paid by your employer, please specify. Receipt and membership certificate will be issued. | <table border="1" style="border-collapse: collapse; width: 50px; height: 300px;"> <tr><td style="height: 30px;"></td></tr> <tr><td style="height: 30px;"></td></tr> <tr><td style="height: 30px;"></td></tr> <tr><td style="height: 30px;"></td></tr> <tr><td style="height: 30px;"></td></tr> <tr><td style="height: 30px;"></td></tr> </table> | | | | | | |
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Incomplete documentation will lead to delays in processing your application. Processing commences upon the receipt of your fee.

**Post to: Dapaanz, PO Box 25056, Panama Street, Wellington 6146
Courier to: Dapaanz, Level 6, Aviation House, 12 Johnston Street, Wellington 6011**



Renewal of registration as an Alcohol and Other Drug Practitioner

1. Name:
2. Membership number:
3. Name you wish to go on Certificate:
4. Address for correspondence: home / work (please circle)

5. Daytime contact phone number:
 Mobile number:
 E-mail address:
6. Organisation name and town/city:
7. Job title:

8. Name of your line manager:
9. His/her daytime contact phone number, organisation and address:

10. In the last year, did you have at least six months working in addictions treatment with a minimum 100 hours:

yes / no

11. Are you currently working in addictions treatment and completed at least 75 hours of direct and supervised client contact:

yes / no

Signed: **Date:**



Disclosure of convictions or complaints since last disclosure

In order to provide as much protection as we can to the public and to protect the integrity and accountability of dapaanz as a professional association, applicants for renewal of registration as an Alcohol and Other Drug Practitioner will be required to disclose any offences committed for which they have been convicted in a court of law; and any complaints against their practice which have been upheld.

All applicants must answer the following questions. Please circle your answer:

1. Have you been convicted of a criminal offence since your last disclosure?

yes / no

2. Have there been any complaints against your practice upheld since your last disclosure?

yes / no

Sign below and attach the form to your application. If yes, then give year offence(s) committed, nature of offences, charges laid and the outcome and attach on a separate sheet.

Note:

- 1. You may be asked to clarify any matters arising from the disclosure.
- 2. If an applicant is declined registration on grounds of the disclosure, the normal appeal procedure will apply.

Name:

Signature:

Date:



Assessment report from Supervisor

Name of Applicant:

By completing this form, you support your supervisee's application for renewal of their registration as an Alcohol and Other Drug Practitioner.

This form will be presented as part of the applicant's portfolio.

The Executive will decide on whether to approve renewal or to refer the applicant back for further development. The applicant, if successful, will be registered for 12 months.

The applicant for renewal of registration demonstrates understanding, skill and an ability to work competently without direction. He/she is still under supervision, clinically experienced, able to provide clinical leadership and is capable of assessing and managing complex clinical presentations. He/she can, where appropriate:

- Undertake basic research skills in their discipline
- Practice independently and apply skills in a complex, variable and specialised range of contexts
- Understand, and have their practice reflect, issues of social equity
- Analyse, apply, evaluate and transform information for a wide range of activities including the assessment of treatment needs and the formulation of treatment responses
- Formulate and manage appropriate treatment processes
- Plan, resource and manage processes
- Work competently within broad parameters and functions
- Be completely responsible and accountable for determining, achieving, and evaluating outcomes

A registered Alcohol and Other Drug Practitioner is able to work in non-routine contexts and to practise beyond the areas they have been specifically trained for using self-directed and ongoing learning processes.

- They have the skills and capability to refer to frameworks and other resources to look up and find solutions to specific problems they are uncertain about or unfamiliar with and incorporate these solutions into their practice. For example, they might sense the presence of a psychotic process and competently look up the issue in a textbook or journal (in other words undertake some basic research) and then be able to incorporate the finding competently and appropriately into their assessment and intervention planning.
- Also, they are able to evaluate the meaning of current research findings and other sources of new knowledge and incorporate these into their own practice.
- They might involve the ability to assess and case-manage (i.e. organise the appropriate treatment) for a person with medical complications, or with depression or agoraphobia and take responsibility for the incorporation of these issues into the

management plan as well as being involved in their monitoring. This may not necessarily mean doing the interventions, but building into the management plan the need to further investigate them and taking responsibility for referring on appropriately.

Assessment and intervention planning involves not just the analysis of data and the recommendations of interventions the practitioner has learnt fit with these problems, but the transformation of this data.

This will be seen by the registered Practitioner's ability to understand how all the various causal factors fit together to lead to and sustain the person's life problems or lack of wellness, including their addiction.

This includes a wide range of potential causal and maintaining factors such as other mental health problems, low self-esteem, early attachment problems, poor social skills, genetic vulnerability, whanau and family interaction, drug using peer relationships, arthritis and pain.

As a result, the intervention plan is personalised, is based on this "transformed data", and not just the application of fixed responses that fit with certain diagnoses or problems. In other words: the applicant is able to individualise a comprehensive intervention plan based on their "transformed" understanding as above.

Overall, therefore, the registered Practitioner can treat the whole person, takes a wellness approach, understand the person and many aspects of their lives and is able to competently formulate appropriate care for all the person's problems/barriers to wellness.

In accordance with your observation of the applicant's work, would you assess the applicant as routinely working at a registered Alcohol and Other Drug Practitioner level?

I assess the applicant, (print name)
as competent in routinely working at a registered Alcohol and Other Drug Practitioner level, within the dapaanz Code of Ethics and in the context of the Addiction Intervention Competency Framework (dapaanz 2011).

I am aware that this statement will form an important part of the assessment of the competency of the applicant and I understand the ethical implications with regard to the applicant's ability to take up an appropriate role as a registered Alcohol and Other Drug Practitioner.

Signed:

Name (please print):

Date:



Support by Line Manager for application for renewal of registration as an Alcohol and Other Drug Practitioner

..... is an experienced Alcohol and Other Drug Practitioner whose standards of practice demonstrates competency, and adherence to ethical standards. I therefore support this application for renewal of registration as an Alcohol and Other Drug Practitioner.

I confirm that :

- (a) has completed more than 6 months of working in addictions treatment, of at least 100 hours, in the last year.
- (b) is currently working in addictions treatment and has completed more than 75 hours of direct and supervised client contact.

I support this application in general.

Signed by:

Name (please print):

Organisation:

Date:

Note: *For self employed Practitioners only, this form can be completed by their Supervisor.*



Verification of Continuing Education Programme points earned in the last year

100 points are required for registration as an Alcohol and Other Drug Practitioner.

Refer to website: www.dapaanz.org.nz for Continuing Education Programme

List details of activities:

Points claimed

Total	

Please include reflective journal (if done) with your renewal.

Signed by Practitioner: **Date:**

I verify that the above activities were undertaken by the Practitioner in the last year.

Signed by Line Manager: **Date:**

- Note:** 1) *Self employed practitioners can have the verification signed by their Supervisor*
 2) There will be an audit of 5% of practitioner renewals.