



**An association for persons with developmental disabilities and mental health needs.**

**THE NADD CERTIFICATION  
PROGRAMS: RAISING THE BAR**



# Development Partner

The Certification and Accreditation Programs were developed by NADD in association with the National Association of State Directors of Developmental Disability Services (NASDDDS)

# Credentialing & Standards for Quality



# Program Eligibility for Accreditation



- Must be located in North America
- Must provide assessment, treatment and support services for individuals with Dual Diagnosis, Intellectual and Developmental Disabilities and Mental Illness (IDD/MI)
- The Program clearly lists services provided to person with Dual Diagnoses, both direct and contracted services
- The Program provides services considered to be evidenced based and/or best practice by National Association on Dual Diagnosis (NADD) National Association of State Directors of DDS (NASDDDS) or American Association for Intellectual Disabilities (AAIDD)
- The Program must be a NADD Member to seek accreditation

# Modules/ Competency Areas

There are 18 Competency areas that fall under the NADD Accreditation, however, not all programs will be required to meet all of the Competency areas

Example: Residential and community programs will not be reviewed for the competencies that pertain to an Acute Inpatient Hospital program or programs that may be seeking accreditation for case management services.



# 18 Modules / Competency Areas

The specific modules to be reviewed will be determined by the initial application that identifies the Organization service areas and discussion between the NADD surveyors and the program

	<b>Competency Areas</b>
I	Medication Evaluation /Reconciliation
II	Holistic and Individualized approach
III	Database/outcomes
IV	Protocols for Dual Diagnosis Assessments
V	Treatment planning
VI	Basic and Routine Health Care
VII	Treatment Team- Interdisciplinary Team Members
VIII	Training -Staff/family/ person receiving services
IX	Crisis Management/Personal Safety for Individuals with Dual Diagnosis

	<b>Competency Areas</b>
X	Cultural Competency/Family Values
XI	Trauma
XII	Quality Assurance /incident management
XIII	Evidenced-based treatment practices
XIV	Ethics, Rights, Responsibilities
XVI	Interagency & cross systems collaboration
XVI	Long term living/service coordination
XVII	Advocacy / Individual / Family rights of the person being served
XVIII	Health Informatics & technology

# Components of The Survey Process

On site, virtual or hybrid visit

- Review of policies and program specific data
- Interview staff and families
- Direct observation of staff interactions with the person's being served



1) Interview



2) Clinical Chart Review



3) Policy Review



4) Consultation Service



# Four Components of The Survey Process

## **1) Interview Format**

The NADD surveyors will have face to face or virtual interviews specifically with:

- the person receiving services/supports
- treatment team members
- medical and behavioral health staff
- program administrators
- direct support staff

# Four Components of The Survey Process

## **2) Clinical Chart Review**

Review specific cases to ensure clear documentation to reflect:

- Ethical practices
- Individualized goals and progress
- Best practice responses with interventions that exhibit sound treatment planning

# Four Components of The Survey Process

## 3) Policy Review

The NADD surveyors will examine policies and procedures to ascertain if there are **program guidelines of evidence based and best practice as established by the NADD accreditation standards.**

# Four Components of The Survey Process

## **4) Consultation Service**

The NADD Surveyors will provide feedback during exit interview

- Review the positive aspects of the program
- Share specific ideas for program improvement
- Articulate the challenges identified by the program
- Recommend specific procedures and processes regarding program improvement

# Steps in the NADD Program Accreditation Survey

Time Frame	Steps	Activity	Who is involved
1-6 months before survey	Survey Preparation	<ul style="list-style-type: none"> <li>❖ Application submitted for review</li> <li>❖ Application is reviewed by NADD</li> <li>❖ Planning Conference Call Scheduled               <ul style="list-style-type: none"> <li>- Survey Team meets Program Representatives</li> <li>- Process described in depth</li> <li>- Prep assignments made</li> <li>- Survey scheduled</li> </ul> </li> </ul>	Organization with NADD support
Day of Survey	Survey	<ul style="list-style-type: none"> <li>❖ Accreditation Team assembles and plans day</li> <li>❖ Survey Occurs               <ol style="list-style-type: none"> <li>1) Interviews: treatment team members, medical and behavioral health, program administrators and direct care staff</li> <li>2) Records Review/Clinical Practice Assessment</li> <li>3) Policy Review</li> <li>4) Outcomes, Feedback and Consultation</li> </ol> </li> </ul>	NADD Survey Team and Program Team

# Steps in the NADD Program Accreditation Survey

Time Frame	Steps	Activity	Who is involved
Within 2 weeks of survey	Survey Outcome	<ul style="list-style-type: none"> <li>❖ Full written summary report of the program review including accreditation score, feedback to the organization administrators.</li> <li>❖ Certificate of NADD Accreditation sent to the organization.</li> </ul>	<p>NADD Survey Team</p> <p>NADD Staff</p>
Within 4 weeks of survey	Follow-up	<ul style="list-style-type: none"> <li>❖ Program will submit a Quality Improvement (QI) Plan including steps taken to address that NADD review recommendations as well as improvement of weakness identified in the survey.</li> </ul>	Program Administrator
Anytime	Ongoing Support	<ul style="list-style-type: none"> <li>❖ NADD is available for consultation and training to the program.</li> </ul>	NADD Expert
6 months before expiration		<ul style="list-style-type: none"> <li>❖ NADD will email organization reminding them accreditation is expiring.</li> </ul>	NADD Staff

# Accreditation Decisions

## Three Years

- A 3 year Accreditation is awarded to Programs that meet or exceed the NADD accreditation standards for support for people with Dual Diagnosis (IDD/MI) and additionally demonstrate that they meet or exceed the majority of the NADD standards.

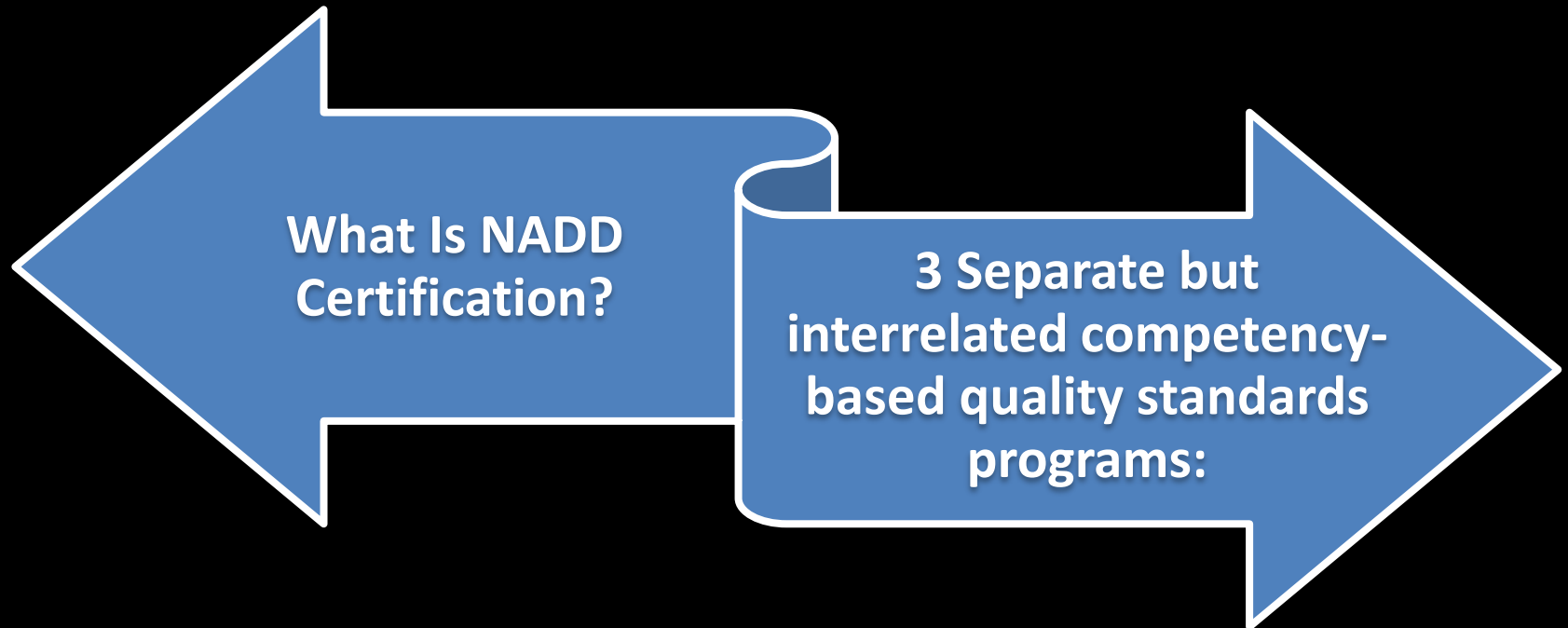
## Two Year Accreditation

- A 2-year Accreditation is awarded to Programs that meet the NADD accreditation standards for support for people with Dual Diagnosis (IDD/MI). To receive a 2-year accreditation, the Program must demonstrate substantial compliance with Best Practice standards.

## One Year / Provisional

- A 1-year Accreditation is awarded to programs who score below the majority of the NADD accreditation standards.

# Credentialing & Standards for Quality





# Purpose of Certification

- **Provide a workforce and system with a demonstrated level of expertise;**
- **Assure that public and private healthcare dollars are purchasing effective services;**
- **Assist families/advocates to make informed choices about services;**
- **Promote & advance the field of DD/ID & MH by establishing competencies to ensure the highest standard of care;**
- **Increase effectiveness of supports, diagnosis, and treatment ;**
- **Recognize programs, clinicians, specialists and support staff that achieve full certification through the NADD review process.**

# Competency-Based Clinical Credential

- Targets professionals who either provide or design clinical supports for persons with ID and MI
- Licensed mental health clinicians
- Licensed behavioral health clinicians



# Who Is Eligible

**Clinicians must have one of the following licenses in the USA or Canada: (equivalent accepted)**

- State/provincial license as a PhD, PsyD, or EdD
- State license, BCBA, or governing body recognition as an Applied Behavior Analyst;
- State license as a Physician;
- State license as a Master's level: Mental Health Counselor; Marriage & Family Counselor; Addictions Counselor
- State license as a Licensed Independent Clinical Social Worker;
- State license as a Physician's Assistant, Advanced Practice RN, or Nurse Practitioner (or clinical equivalent);
- Other similar credentialing

# Required Experience

- The applicant will have 5 years experience in support of persons with intellectual disabilities and mental health/addiction issues
- This can include internships and externships
- With Master's Level professionals or RNs, 7 years is required

# Stages of Clinical Certification Process

**Application & Clinical Portfolio Submission**

**Submission of work sample**

**Interview regarding work sample**

**Case vignette email 24-48 hours before 2<sup>nd</sup> interview**

**Interview response to case vignette**

# Application Process

- 3 letters of reference about the applicant's clinical skills, ethics, and experience with ID/MI persons
- Copy of Required License
- Resume
- Application Fee: \$375
- NADD membership requirement

# Application Process, continued



The submitted information  
is reviewed

If accepted, the applicant will then be  
required to submit work sample of  
clinical supports designed/provided by  
the applicant

**Possible  
Information  
Included in  
Work  
Sample**

- Diagnosis
- Multi-modal or biopsychosocial approach
- Positive Supports
- Modification of the Environment
- Therapy
- Psychopharmacology
- Lifespan issues



# Work Sample, continued



If the work sample is accepted, the candidate will participate in an interview with 2 NADD Examiners

This interview shall include resolution of any remaining questions from the work sample.

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# Vignette

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- Prior to the 2<sup>nd</sup> Interview, the applicant will be presented a case vignette
- The applicant will be required to verbally present a case formulation and treatment plan

# Vignette Format

- Presenting problem & goals
- Social history
- Family psychiatric history
- Mental health history
- Current diagnosis
- Mental health conditions
- Addiction conditions
- Other co-morbid conditions
- Medical history
- Current medications, psychiatric medications and side effects
- Legal involvement, if any
- Person-centered description
- Mental status description

# Areas of Consideration

- Ethics
- Lifespan
- Positive environment/behavior support
- Psychopharmacology
- Ruling out medical issues
- Substance use
- Assessment/Diagnosis
- Therapy



# Receiving & Maintaining Clinical Certification

- If an applicant completes all stages successfully, NADD Clinical Certification is granted.
- All applicants shall attest to following the ethical standards of their profession as well as state, province, or country ethics and regulations.



# Continuing Certification

- All Board-Certified members shall obtain 10 hours of CE/CME activity every 2 years in ID/MH
  - This may be obtained in any format recognized by the individual's profession
  - Attending conferences, special training sessions, and online learning are all acceptable
  - Published scholarly activity in ID/MH and training others in ID/MH is accepted.
- The member must retain these records for 5 years as the Certification Committee will conduct random checks of members each year
- Certification Renewal every 2 years

# Testimonial

“The NADD competency-based clinical certification has provided me with an avenue to verify a dual diagnosis specialty. My ability to provide clinical supports to individuals supported both by medical assistance and private insurances has been expanded by allowing me to gain access to closed insurance networks. These networks had been closed to me prior to receiving this certification, allowing this population to remain largely unserved outside of community mental health centers.”

– *Alyse Kerr, MS, NCC, LPC, NADD-CC*



# Competency-Based Direct Support Professional Certification



Develop certification for Direct Support Professionals working with individuals who have IDD/MI;



Identify competencies to evaluate the DSP's knowledge, values, skill, and ability working with people with IDD/MI;



Increase the capacity of DSPs to work with individuals with IDD/MI;



Acknowledge the importance of the DSP in providing treatment and support to people with IDD/MI.





## Cost

- Initial application/exam fee  
\$60
- Renewal (every 2 years)  
\$30
- NADD Member or Employee  
Member Organization

# DSP Considerations

## Workforce

- Age / Education / Background
- Earnings
- Turnover
- Variability in Experience

## Credential

- Affordable
- Achievable
- Comprehensive
- Meaningful



# Certification Process Prerequisite Criteria

- Employment history
  - Completed 1000 hours of work with individual(s) with IDD or MI (either paid or unpaid).
  - Must have worked for at least one full calendar year
  
- Is an employee in good standing
  - in compliance with all agency and state/provincial requirements
  - completed required pre-service / pre-employment trainings
  - not under disciplinary review or employee probation

# On-line Application

- Summary of experience
- Summary of education/continuing education coursework;
- Letter of recommendation from supervisor
- Letter of recommendation from a person supported or the person's representative

# Code of Ethics

## **Agree to abide by the NADSP Code of Ethics:**

- Person-Centered Supports
- Promoting Physical and Emotional Well-Being
- Integrity and Responsibility
- Confidentiality
- Justice, Fairness, Equity
- Respect
- Relationships
- Self-Determination
- Advocacy

# Online Examination

**Applicants will be given 5 case scenarios related to individuals with IDD/MI and asked to respond to 25 multiple choice questions (5 each)**

Questions have been designed to address:

- values and ethics;
- knowledge of key indicators;
- practical application of knowledge;
- skill in the competency areas.



# Skills & Key Indicators

- Acknowledge diverse backgrounds
- Person-centered language
- Self-directed supports
- Agency/state or province policies & guidelines
- Elements of critical thinking & communication in each area

# Competency Standards in Five Areas



Assessment and Observation



Behavior Supports



Crisis Prevention and  
Intervention



Health and Wellness



Community Collaboration and  
Teamwork



# Assessment and Observation

- Knowledge and assessment of the observation process
- Use of assessment and observational tools
- Behavior assessment
- Documentation and communication related to assessment and observation

# Behavior Support



Knowledge and assessment of the causes and functions of challenging behavior.



Maintaining a supportive physical and social environment.



Responding to challenging behavior.



Teaching new behaviors and skills.

# Crisis Prevention and Intervention

- Knowledge and use of crisis prevention strategies
- Knowledge and use of crisis intervention strategies
- Documentation and communication related to crisis situations
- Managing stress and burnout.



# Health and Wellness

- Knowledge of health and wellness
- Knowledge of intellectual and developmental disabilities, mental health/addiction and co-occurring disorders
- Use and implications of medication
- Illness management and recovery
- Documentation and communication related to health and wellness



# Community Collaboration and Teamwork

**Knowledge of Service Systems**

**Communication Across Systems**

**Building Positive and Cooperative  
Relationships**

**Promoting Person-Centered  
Support, Informed Consent &  
Advocacy**

# Certification Process

## Prerequisite Criteria

### Employment History

- Completed 1000 hours of work with individual(s) with IDD or MI (either paid or unpaid).
- Must have worked for at least one full calendar year

### Employee in Good Standing

- in compliance with all agency and state/provincial requirements
- completed required pre-service /pre-employment trainings
- not under disciplinary review or employee probation

# Renewing Certification

- Maintain membership (individual or organizational)
- Renewal every two years
- Requires eight hours of continuing education related to wellness and mental health of people with IDD

# Testimonial

“I remember how humbling it was to receive the recommendation from one of my clients. It helped me realize what we were working on was making a difference in his life. To have my training and work validated when I passed the test was very rewarding. To explain to other what my letters (NADD-DSP) meant and why I got them let others know that there are people out there who are dedicated to working with this population so much that they are willing to go through a process like this in order to provide the best care possible. That kind of feedback helped to strengthen my belief and pride in what we do.”

— *-Erin Paul BS, OBHP, NADD-DSP, Meridian Services Corp*



# Competency-Based Dual Diagnosis Specialist Certification



## Who is Eligible?

A Dual Diagnosis Specialist is:

Someone who delivers; manages; trains or supervises services for persons with intellectual/developmental disabilities and mental illness/addiction.

# Dual Diagnosis Specialist

Examples of roles considered for application for the NADD-DDS

Staff working in  
county, state or  
provincial  
government

QIDPs

Program directors

Program  
supervisors

Case/care  
managers

Program specialists

Supports  
coordinators

Peer specialists

Trainers





## Education & Experience

Professionals who have a combination of education and experience in the field are preferred;

- Experience can include volunteering, internships and externships in addition to employment.

A post secondary degree is not necessary;

Other types of accreditation & certifications are acceptable.

# Application

I. Personal Information

II. Education and/or  
Credential

III. Experience

IV Ethical Behavior

# Requirements

## Presentation Outline

- Ability communicate effectively;
- Understanding of programmatic issues having an impact on individuals with dual diagnosis;
- Understanding of inter-systems issues and how differences can be resolved.

## Interview

- 7 behaviorally oriented questions
- Demonstration of 6 competency areas

## Letters of recommendation

# Competencies

Multimodal Bio-  
Psycho-Social  
Approach

Application of  
emerging best  
practices

Knowledge of  
therapeutic  
constructs

Respectful and  
effective  
communication

Knowledge of dual  
role service delivery  
& fiduciary  
responsibilities

Ability to apply  
administrative  
critical thinking

# Multimodal Bio-Psycho-Social Approach

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- Familiarity with the bio-psycho-social/multi-modal approach
- Able to incorporate recovery and resiliency
- Identify the inter-relationships among a person's biological, social, and psychological domains
- Apply a holistic approach
- Formulate information to enable delivery of accurate/relevant medical, psychological, psychiatric, behavioral information to others
- Appreciate the environmental contextual and individual learning styles
- Utilization of the above model to guide all service/treatment planning



# Application of emerging best practices

- Overall understanding of assessments, their purpose, when they may be needed and how to obtain them
- Knowledge of effective tools for this population
- Ability to add to this toolbox when warranted

# Knowledge of therapeutic constructs

- An understanding of trauma and how it affects the brain and body
- An appreciation of neurosensory issues
- An understanding of genetic underpinning and advances to guide treatment
- Knowledge of psychotherapeutic skills that can be useful

# Respectful and effective communication in rapport building

- Assure that the person is “in the driver’s seat;”
- Understand the importance of communication between stakeholders and supporters that is relevant to the person’s care and well being.

# **Knowledge of dual role of service delivery/fiduciary responsibility**

Report on progress in respect to therapeutic goals and outcomes;

- Identify the connection between funding & good care;
- Ability to work with others if outcomes are not being achieved.

# Ability to apply administrative critical thinking

- Recognition of training needs for DSPs/teams/families to implement treatment/support plans
- Ability to assess and resource effective strategies in meeting persons wants and needs
- Ability to signal that behavior plans may be too complicated to be implemented
- Ability to signal that behavior plan may not meet the needs of the person.

# Testimonial

“Overall [the process] was a very good experience in two ways. The first was the opportunity it gave me to connect with my references and discuss my work with them in a way that I had not done before. This was particularly true with the family reference.... The writing of the work sample required me to also think in a different way (e.g., about communication, programmatic, and inter-system issues) as they applied to a particular area. This provided me with a fresh perspective on work that I had been doing for a number of years.... I feel quite proud of this.”

— Susan Morris, MSW, RSW, NADD-DDS  
Ontario, Canada

**THANK  
YOU!**

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