

Date: September 21, 2016

To: North Dakota Legislative Council
Interim Health Services Committee

From: Stephen Illing MS
Licensed Addiction Counselor

Re: Critical considerations concerning professional addiction counseling and treatment service provision and availability and maintaining the addiction counseling workforce relating to the dual licensing of Addiction Counselors and Addiction Programs in North Dakota.

North Dakota Century Code requires any person practicing Addiction Counseling in the state to be licensed by the Board of Addiction Counseling Examiners as a Licensed Addiction Counselor (LAC). It also requires any person or agency providing addiction counseling or addiction treatment services to have a current and a valid program license issued by the state Department of Human Services. In effect ND requires dual licensure before any addiction service is provided in the state by individuals or agencies/organizations. This is a burden to the counselors and agencies practically and functionally, to the addiction counseling profession as a whole and to the people of the state needing help appropriate to their situations. It also has the effect of making Addiction Counseling less attractive as a profession to those seeking one and frustrating and cumbersome to those engaged in daily practice.

The program license requirements cover all aspects of addiction counseling. This is especially limiting to an agency that could benefit from having an addiction counselor on staff part time or as a consultant. The LAC can review cases with staff and offer information or advice but the moment he visits with a client or patient of that agency, he is violating state law if he is not himself licensed as a program (with all the administrative overhead) or working for another licensed program. There are many situations where assistance and input from an LAC can be helpful to other professions and/or clients needing information or assistance engaging in services. Recovering clients also have circumstances and situations come up as they work recovery where a visit or two with an LAC could be helpful while not needing to engage in a treatment program.

It is well known in the addiction services business that the more immediately and efficiently clients can be helped, the greater likelihood they can get into recovery. In addiction care, the axiom "strike when the iron is hot" is well known and accepted. The NDDHS program license requirements include a number of required data collection items and reports and summaries that make the admission mostly a clerical process. The delay this causes gives the spark of motivation time to die and the client to be lost. or at least feel less important at this critical time.

We know that addiction is a chronic condition and clients work “recovery” lives after initially arresting the illness. Treatment programs tend to structure services within a time frame and those programs have a beginning, middle, and end. Recovery is not that way. It is an ongoing and life long process and may need the attention of a professional at various times or in certain circumstances. Clients should not be put off from getting the assistance they need because it means engaging in some kind of structured and predefined program. The program license makes providing an ongoing and flexible service that matches the nature of the illness and recovery difficult.

Addiction Counseling in North Dakota and in the nation is not a strong profession. Addiction Counselors tend to identify themselves as an employee of an agency or organization rather than professionals maintaining and practicing their chosen discipline. There is great variability from state to state regarding the qualifications and training requirements to be an addiction professional and what their scope of practice is. There are many regulations and requirements coming from government agencies that the profession seems to passively comply with. Insurance companies and other funders pick up on the government dictates and recommendations and use them in funding decisions for programs, services and even individual claims. The dual licensure situation in North Dakota appears to be close to the status quo in the nation. Unfortunately this is sad for the nation and for our state. It makes the profession unattractive to the caliber of person seeking a strong professional identity in their chosen vocation. People who do choose the profession may easily become disillusioned with the many structures and requirements of daily practice and colleagues who may be lackadaisical in their own professional identity. Our patients and clients are challenging enough. The process of service delivery and innovation should not be equally frustrating and challenging.

It is said that one should not present problems without having some answers or solutions. In this case the answers do not seem to be simple or forthcoming. A conversation with Pam Saggness of the NDDHS was helpful. The department is not blind to some of these issues and is making some moves to change. The absurd situation where the DHS operates licensed treatment programs, licenses programs, performs audits of the programs and has the power to suspend or revoke program licenses is being attended by separating the licensing duties from the service delivery duties. It is still too much for one agency to do all those things.

It is questionable whether the DHS should be in the addiction program licensure business at all. Other professions have established standards of practice and police their own membership. North Dakota has an addiction counselor’s organization and a state licensing board. Possibly the business of setting standards of practice and policing the profession should be carried by either of these entities and DHS can put all its addiction energies into serving our clientele in the most effective ways. There may be some financial savings and there certainly would be more focused

efforts in caring for our people and their needs. It may also make addiction counseling in North Dakota a more attractive profession for people to make a life in.

The actions to change the cumbersome and service limiting dual licensure of addiction services in our state will require action from all involved up to and including the legislature. It will start with acknowledging the issues and starting a concerted effort to change. I think the NDDHS is the agency to initiate the discussions and trigger change, not by doing more but by telling all involved it plans to do less and there by be less conflicted in its tasks and duties. It can simply encourage the other players to step forward and take some responsibilities.

Thank you for considering this information.

Respectfully submitted, September 21st, 2016

Stephen Illing MS, LAC