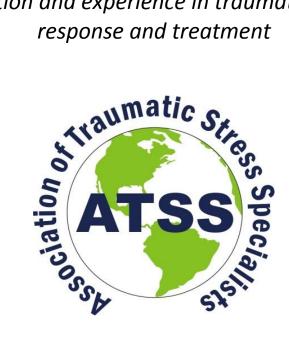
Association of Traumatic Stress Specialists

Providing international recognition and certification for training, education and experience in traumatic stress services, response and treatment



Instructions and Application

Certified Trauma Treatment Specialist (CTTS) Certification

Association of Traumatic Stress Specialists

5000 Old Buncombe Road, Suite 27-11, Greenville, South Carolina 29617 ● USA E-mail: admin@atss.info ● Website: www.atss.info ● December 2019

Certified Trauma Treatment Specialist Application Information

Who qualifies as a Certified Trauma Treatment Specialist?

The CTTS designation is appropriate for counselors and treatment specialists, facilitators of trauma recovery groups, hypnotherapists, art or drama therapists, individuals who provide Thought Field Therapy, Traumatic Incident Reduction, EMDR, meridian based therapies, individual, group and/or family counseling to trauma survivors. The applicant must have a Masters or Doctorate degree in a mental health field **or** a clinical license to practice, or a current practice permit registration.

ATSS membership requirement. Applicants are required to obtain membership with the Association of Traumatic Stress Specialists (ATSS) before applying for certification. Please make sure that your membership is current. Your membership will be verified before your certification is awarded. Your certification becomes void if membership lapses.

Note: For international candidates and others with special circumstances, the ATSS Certification Board may determine whether an applicant's education is substantially equivalent toward awarding the CTTS certification recognition.

Those who have earned and maintained the CTS (Certified Trauma Treatment) certification prior to September 2015 will be grandfathered under the previous requirements. The standards for education are detailed in the application. You should review the criteria with your sponsor to ensure you meet the minimum requirements.

Required Documentation for CTTS Certification

1. CTTS Application form submitted. You must fully complete the CTTS application form. Please type or print neatly. You must include your sponsor's name on the form. Your sponsor must be a Certified Trauma Treatment Specialist (CTTS) in good standing with the ATSS.

2. Sponsor assignment and sponsor letter.

When you have completely reviewed the application and are certain you are going to proceed with the application process, contact ATSS headquarters and our administrator will assign you a sponsor who will help guide you through the application process. Your sponsor must be a Certified Trauma Treatment Specialist (CTTS) in good standing with ATSS. Contact Jayne Crisp at admin@atss.info for assignment of a sponsor. Since our members are located all over the world, sponsors do not need to be in the same location of the applicant and can meet and review electronically via email and phone.

Sponsors will provide the following:

- Consultation regarding application process
- Confirmation that experience and training meets CTTS criteria for certification
- __Initial review of application
- __Final review of application with sponsor letter recommending you be approved as CTTS

3. Documentation of experience

A minimum of 500 hours experience in counseling, specific to psychological trauma. Please complete the *Experience Form* in the application. You may also use a separate sheet of paper with "Experience" as the title and the applicant's name. Only 500 hours *specific* to traumatic stress treatment/services need to be documented.

Example:

| Employer | Dates | Trauma Populations | Hours |
|--|-----------|-----------------------|-------|
| VA, Lyons, NJ | 2016-2018 | Vietnam Veterans | 250 |
| Shelter Our Sisters, (DV shelter), PA | 2011-2013 | Domestic Violence | 250 |
| TOTAL | | | 500 |

4. Documentation of education and training

A minimum of 190 hours of trauma specific education and training must be listed on the application in the *Education and Training* section. **ATSS** will recognize the training and education you have <u>already completed in your lifetime</u> as a student or as a participant in continuing educational courses, if it meets the educational criteria for your specific certification recognition.

The following documents will satisfy 90 hours of the 190 educational/training hours that require documentation and verification.

- 1. Resume
- 2. *Final Transcripts* with coursework related to a mental health field at the Masters or Doctoral level, **OR**
- **3.** A <u>current</u> State Mental Health License <u>or</u> current Practice Permit Registration, <u>and</u> Malpractice Insurance verification.
- Intake/Initial Assessment/Psychosocial (12 hours)
- Differential Diagnosis/Dual Diagnosis (12 hours)
- Treatment Planning/Case Management; (12 hours)
- Counseling Individual, Family and Group (36 hours)
- Community (12 hours)
- Ethics/Legal Issues (6 hours)

State your graduate degree (MSA, MA, PhD, EdD, MSW, etc.) in any of these areas.

Additional hours from transcripts may satisfy other educational hours. Applicants can use doctoral credits to satisfy the other areas if they use their Master's to satisfy the 90 hours. A three (3) credit class is 45 hours. Applicants just need to submit the transcript for the doctoral program for those sections.

Be specific in the description of course work to satisfy the Education and Training hours. Please list and attach the documentation and evidence of coursework in the same order as they are listed. The following is an example of how to compile the documentation in the Education and Training section of the application.

Online courses may be used for documentation of training and education. See our www.atss.info website for an additional list of courses on the *Training and Education* link. You are not limited to these courses. However, you must provide attendance verification from whatever online course or courses you select. If the education/training hours are satisfied while attending college, the professor's name is not necessary provided the college's name is listed as the Educational Provider.

Example:

| Title of | Date(s) of Training | Educational | Number of |
|-----------------------|---------------------|------------------------|-----------|
| Class/Workshop | | Provider/Trainer | Hours |
| Community | Spring, 2019 | University of Texas at | 15 |
| "Developing | | Austin | |
| Collaborative | | | |
| Partnerships" | | | |
| · | | | |
| <u>Electives</u> | October, 2018 | National Organization | 6 |
| Death & Dying | | for Victim Assistance | |
| Working with Families | | (NOVA) | |
| of Homicide Victims: | | | |
| Complicated | | | |
| Bereavement | | | |

Details on the required courses are on the *Minimum Standards Training and Education Form*. If more room is needed, attach a separate sheet of paper that includes "Education and Training" as the title with the applicant's name at the top of each page. The 190 hours must be supported with official transcripts, certificates of attendance, CEUs and letters from supervisors or workshop providers.

Please include only the <u>required</u> documentation. All unnecessary documents will be discarded. You can split hours from one workshop, seminar, or class into two or more areas. Be sure the total number of hours listed does not exceed the total number of hours of the workshop or class. Example: Course or seminar "Responding to Trauma Victims (16 hours). Topics included in the "Responding to Trauma Victims" can include:

| Acute trauma reactions | 4 hours |
|---------------------------------|---------|
| Post-Traumatic Stress Reactions | 4 hours |
| Crisis Intervention | 6 hours |
| Electives | 2 hours |

ORGANIZATION of Materials:

The easier it is for our board to review your application, the faster we can get back to you with comments and/or the decision! Please list your specific coursework after each educational section. For example, Crisis Intervention courses should be listed behind the *Crisis Intervention* section, etc. etc.

5. Three letters of recommendation

- i. Each letter should be on **letterhead** stationary or state professional occupation of the writer, as well as give a phone number and email address.
- ii. State how long and in what **capacity** the writer of the letter of recommendation knows the applicant
- iii. Specifically address the **skills** of the applicant as a trauma treatment provider. The referral source must also state they are recommending the applicant for certification as a CTTS.
- iv. Specifically address the **ethical conduct** and standards of the applicant in the provision of trauma services, etc.

General letters of recommendation will not be accepted.

6. Resume. A current resume/vitae must be included which documents the above mentioned information and *emphasizes your experience providing trauma treatment in the work/employment related area.* (6 pages max.)

7. Membership and Certification fees

- Your ATSS membership must be current. Documentation of your membership should accompany your certification application. You may pay for membership on the ATSS website at: www.atss.info/membership. Go to the "*Pay Now*" button at the bottom of the page for a menu of options
- The certification fee must accompany the application or may be paid on line at www.atss.info/certification.

Current ATSS member certification fee: \$250.00

Current ATSS member who is a full-time student or senior citizen (65+ years): \$200.00 To be considered for student and senior discounted rates please send a copy of valid student identification or (for Seniors), a copy of an official government issued document with your date of birth. To pay by credit card on our ATSS.info website, complete the credit card information on the Certification link and page on the www.atss.info/certification website and submit payment.

Go to the "*Pay Now*" button at the bottom of the page for a menu of options. Certification fees are non-refundable.

To pay by check, attach a US check or money order made payable to Association of Traumatic Stress Specialists or ATSS for the non-refundable fee stated above.

Certification Review Timeline

The ATSS Certification Board meets throughout the year. Your application will be reviewed when it is received. Allow a *minimum* of 45 days after the review for notice of certification status. The review may take longer due to holidays, or other seasonal conflicts. All supporting certification documents and the certification fee must accompany your application. *Incomplete applications will be held by the ATSS administrator and not sent to the board for review until all documentation is received.*

Questions about appropriate experience and education or about your qualifications for certification should first be directed to your sponsor. If your sponsor is not available, contact Jayne Crisp at admin@atss.info . To receive additional forms, please check out the ATSS website: www.atss.info for additional ATSS forms and applications.

Preparing Your Application

In order to expedite the review of our applications, we scan and e-mail the applications to our Certification Board. Please:

- Do not make two-sided copies.
- Do not use paper clips or staples.
- Do not send us duplicates (extra copies) of your application.
- Do not attach more than 6 pages of a resume or vitae
- Do not attach any documentation that is not requested in the application.
- You may scan the entire document and send the entire document as an attachment to an email. However, do not send us emails with each page scanned as a separate attachment.
- Make sure your ATSS membership is current!

Re-certification

Your certification is valid for three (3) years. A recertification application can be found on our www.atss.info/certification website. The requirements for re-certification are as follows:

- a) Verification of 30 hours of education or training in a trauma specific field.
- b) \$175 regular re-certification fee or \$75.00 discounted re-certification fee for full-time students and seniors (65+). To be considered for student and senior discounted rates, please send a copy of valid student identification and for seniors, a copy of an official government issued document with your date of birth.
- c) Proof of current ATSS membership (membership renewal letter or notice, copy of dues invoice, etc.)
- d) Thirty (30) hours of training/education must be accrued during the time you are certified and the time your certification expires.
- e) Re-certification forms are available on the www.atss.info website Certification page.

Educational Course Explanations and Required Hours

The following is an explanation of the eleven areas of required education. Please organize your education and training hours using this format. Use the certification application pages provided to list specific courses or training under each numbered area. Attach documentation after each section.

| Certified Trauma Treatment Specialist (CTTS) | Total Hours Required |
|---|----------------------|
| 1. Post-Traumatic Stress Reactions - Assessment and Diagnosis. The assessment, diagnosis, and treatment of all types of reactions that occur after a trauma, including Post Traumatic Stress Disorder. Only training that is specific to post trauma reactions and treatment can be included in the required 24 hours. Some courses of workshops on diagnosis and treatment of psychological problems do include trauma, but only the hours that are specifically about trauma can be counted toward the required 24 hours. Examples of courses that include but are not totally about diagnosis and treatment of trauma reactions are EMDR, TFT, TIR, hypnosis, crisis management, neurobiology of trauma, mindfulness, or psychiatric illnesses. | 24 |
| *2. Intake/Initial Assessment/Psychological Training in a number of areas: Simple-Complex PTSD; Cross-Cultural, Multicultural factors (sensitivity to cultural influences); Rural/Urban/Developing regions factors (sensitivity to cultural influences); Suicidality (risk assessment and theory); Vocational Assessment; Differences in Populations (availability of services); Grief; Research Literacy (basic understanding of research process); and Addictions | 12 |
| *3. Differential Diagnosis/Dual Diagnosis – This covers issues of Simple-Complex PTSD; the role of the DSM-V; Cross-Cultural or Multicultural factors; Rural/Urban/Developing regions factors; Psychopharmacology; Self Care (self-other); Research Literacy; Addiction; and Mental Illness. | 12 |
| 4. Treatment Planning/Case Management This covers Vocational Planning & Assessment; Psychopharmacology; Referrals; Managing Comprehensive Trauma Centers; Addictions; Development Issues; and Follow-ups & Completion; Mental Illness | 12 |

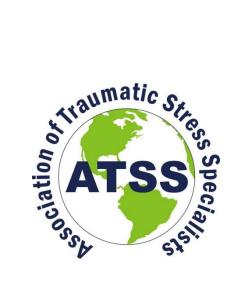
| 5. Counseling – Individual (12); Family (12); Group (12) – Various topics include Systems Theory; Spirituality or Belief-Based Treatment Models (e.g. Christian, Indigenous peoples, Metaphysical); Psychological Theory-based Models (e.g. Cognitive, Gestalt, Psychodynamic, Grief; Self Care and Skills | 36 |
|--|----|
| 6. Special Populations - Various populations often require culturally-sensitive approaches. Contexts for assessment, treatment, management, may vary for ethnic/racial minorities; LGBT/GLBT; multi or cross-cultural populations; religious populations; Native Americans; Indigenous peoples; individuals with disabilities; children, adolescents; elders, etc. | 18 |
| 7. Community -Topics include Systems Theory; Community resources/ referral; Social Justice; Advocacy; Addictions; Vocational Resources; Spiritual Systems; Victim Services and Resources; Developing Collaborative Partnerships; Training/Supervision; Making appropriate referrals; Victims' compensation programs, knowledge of private and public programs and resources, ; knowledge of community, state and federal programs supporting trauma victims and survivors. | 12 |
| 8. Crisis Intervention – Contents include: Models of Crisis Response (e.g. CISM, NOVA, Process Oriented, Red Cross); Suicide Risk of Clients; Supportive Listening; Crisis Communication; Communicating with People in Crisis; Group Crisis Intervention; knowledge of crisis response programs and services, etc. Other interventions used for acute trauma and stress. | 12 |
| 9. Community Crises, Major Disasters, Traumatic Incidents Issues involved are: Comprehensive Trauma Centers; Command & Control Centers; Protocols of Local/Regional/Federal/International Agencies or Organizations; Access by to Internal/External Providers; Responding to natural and/or man-made disasters, acts of terrorism, acts of criminal violence and other critical incidents and disasters with mass casualties. | 8 |

| *10. Ethics/Legal Issues – Topics include: Research | 6 |
|---|----|
| Competency/Literacy (understanding implications as well as | |
| knowledge of good research practices); Psychopharmacology | |
| (Philosophy & Practice); Computer Literacy; Ongoing | |
| Supervision/Consults; Referrals; Decisions regarding level of | |
| intervention, care and referral. (When to let go or do less); Follow- | |
| up & Accountability; Self Care; Suicide/Homicide Risks of Clients; | |
| Advocacy | |
| | |
| | 38 |
| 11. Electives | |

Special Populations – These topics are focused on special populations such as children, families or groups; homicide victims; family members of suicide; individuals with addictions, individuals with disabilities, crime victims and survivors, trauma victims and any individual or group that requires special knowledge, expertise or support.

Techniques and Therapies – Various techniques could include Pharmacology; Supervision/Consults; Hypnosis; Treatment Modalities; e.g. TRI, TFT, EMDR; Mobile or Comprehensive Trauma Center; Skills; Counseling; Advocacy

| TOTAL | * Covered by License/Malpractice Insurance | 190 |
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| Board | member: | |

Certified Trauma Treatment Specialist (CTTS) Application Please print.

| □Name: |
|--|
| Print your name as you would like it to appear on your CTSS certificate. |
| Membership number: |
| □ Address #1 |
| (Include: Street, State/Province, Country, Zip/Postal Code) |
| □ Address #2: |
| (Include: Street, State/Province, Country, Zip/Postal Code) Work phone: |
| □Cell/Mobile phone: |
| □Email #1: |
| □Email #2: |
| Sponsor's name: |
| Sponsor's email: |
| Your ATSS membership #Date |

If you would like to appear in our website directory, please place a check in the box next to the contact information you prefer to use for the directory listing.

Experience working with victims and survivors

List your experience in working with victims and survivors of trauma. This should match your resume.

| Employer | Dates | Trauma Population | Number of Hours |
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Education Documentation (Please attach documentation behind each section).

1. Post-Traumatic Stress Reactions - Assessment & Diagnosis

The assessment, diagnosis, and treatment of all types of reactions that occur after a trauma, including posttraumatic stress disorder. Only training that is specific to post trauma reactions and treatment can be included in the required 24 hours. Some courses of workshops on diagnosis and treatment of psychological problems do include trauma, but only the hours that are specifically about trauma can be counted toward the required 24 hours. Examples of courses that include, but are totally about diagnosis and treatment of trauma reactions are EMDR, TFT, TIR, hypnosis, crisis management, neurobiology of trauma, mindfulness, or psychiatric illnesses.

| crisis management, neurobiology of trauma, mindfulness, or psychiatric illnesses. | | | | |
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| Total Post Traumatic Stress R | eactions (24 Regu | ired) | | |
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2. Intake/Initial Assessment/ Psychosocial

Training in a number of areas: Simple-Complex PTSD; Cross cultural or Multicultural factors (sensitivity to cultural influences); Rural/Urban/Developing regions factors (sensitivity to cultural influences); Suicide (risk assessment and theory); Vocational Assessment; Differences in Populations (availability of services); Grief; Research Literacy (basis understanding of research process); Addictions. Documentation of this category can be satisfied by a copy of your transcript for a Master's or higher degree in a counseling field **or** a copy of a current state license in a mental health field **and** proof of malpractice insurance.

| Title of Class/Workshop | Date(s) of Training | Educational Provider/Trainer | Number of Hours |
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| Total Intake/Initial Assessme | nt/Psychological | Hours (12 Required) | |

3. Differential Diagnosis/Dual Diagnosis

Issues of Simple-Complex PTSD; the role of the DSM-V; Cross-cultural or Multicultural factors; Rural/Urban/Developing regions factors; Psychopharmacology; Self Care, Research, Literacy; Addiction. Documentation of this category can be satisfied by a copy of your transcript for a Master's or higher degree in a counseling field <u>OR</u> a copy of a current state license in a mental health field <u>and</u> proof of malpractice insurance.

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| tal Differential Diagnosis/ | Dual Diagnosis Ho | ours (12 Required) | |

4. Treatment Planning/ Case Management

This covers Vocational Planning & Assessment; Grief; Psychopharmacology; Referrals; Managing Comprehensive Trauma Centers; Addiction; Developmental Issues; and Follow-ups and Completion. Documentation of this category can be satisfied by a copy of your transcript for a Master's or higher degree in a counseling field <u>OR</u> a copy of a current state license in a mental health field <u>and</u> proof of malpractice insurance.

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| Total Treatment Planning/Ca | ise Management | Hours (12 Required) | |

5. Counseling: Individual, Family, Group

Various topics include Systems Theory; Spirituality or Belief-based Treatment Models (e.g. Christian, Native American, Metaphysical) Psychological Theory-based Models (e.g. Cognitive, Gestalt, Psychodynamic, Grief; Self Care and Skills. *Documentation of this category can be satisfied by a copy of your transcript for a Master's or higher degree in a counseling field <u>OR</u> a copy of a current state license in a mental health field <u>and</u> proof of malpractice insurance.*

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6. Special Populations

Various populations often require culturally-sensitive approaches. Contexts for assessment, treatment, management, may vary for Various populations often require culturally-sensitive approaches. Contexts for assessment, treatment, management, may vary for ethnic/racial minorities; LGBT/GLBT; multi or cross-cultural populations; religious populations; Native Americans; Indigenous peoples; individuals with disabilities; children, adolescents; elders, etc.

| Title of Class/Workshop | Date(s) of Training | Educational Provider/Trainer | Number of Hours |
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| Total Special Populations Ho | urs (18 Required) | <u> </u> | |
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7. Community

Topics include System Theory; Addiction; Vocational resources; Spiritual System/Resources; Knowledge of community; Training/Supervision; Computer Literacy; Making appropriate referrals; Social Justice, Advocacy; Comprehensive Trauma Centers; and basic support.

Documentation of this category can be satisfied by a copy of your transcript for a Master's or higher degree in a counseling field <u>or</u> a copy of a current state license in a mental health field <u>and</u> proof of malpractice insurance.

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8. Crisis Intervention

Contents include Grief; Education/Prevention/Training; Models of Crisis Response (e.g. CISM, NOVA, Process Oriented, Red Cross, etc.); Assessing victim needs, group crisis intervention knowledge of crisis response programs and services, etc. Other interventions used for acute trauma and stress

| Title of Class/Workshop | Date(s) of Training | Educational Provider/Trainer | Number of Hours |
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| Total Crisis Intervention Hour | rs (12 Required) | | |

9. Community Crises, Major Disasters, Traumatic Incidents

Issues involved are: Comprehensive Trauma Centers; Command & Control Centers; Protocols of Local/Regional/Federal/International Agencies or Organizations; Access by to Internal/External Providers; Responding to natural and/or man-made disasters, acts of terrorism, acts of criminal violence and other critical incidents and disasters with mass casualties.

| Title of Class/Workshop | Date(s) of Training | Educational Provider/Trainer | Number of Hours |
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| Total Community/Large –Scale Disaster Hours (8 Required) | | | |

10.Ethics/ Legal Issues

Research Competency/Literacy (understanding implications as well as knowledge of good research practices); Psychopharmacology (Philosophy & Practice); Computer Literacy; Ongoing Supervision/Consults; Referrals; Decisions regarding level of intervention (when to let go or do less); Follow-up & Accountability; Self Care; Suicide/Homicide Risks of Clients; and Advocacy. Documentation of this category can be satisfied by a copy of your transcript for a Master's or higher degree in a counseling field **or** a copy of a current state license in a mental health field **and** proof of malpractice insurance.

| Title of Class/Workshop | Date(s) of Training | Educational Provider/Trainer | Number of Hours |
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| otal Ethics/Legal Issues Hou | rs (6 Required) | | |

11.Electives

A combined total of 38 hours can be taken from the following topics. Some elective hours maybe taken in the required areas of training listed from the previous sections or from the following:

- Crime Victimization
- Special victim populations
- Terrorism/Social & Political Oppression
- Sexual Assault/Family Violence
- Counter-Transference
- Domestic Violence/Family Violence
- Hostages
- Childhood Abuse
 - Sexual, Physical, Emotional
- Holocaust Survivors & Family Members
- Suicide/Homicide & Co-Victims
- Techniques, Therapies and Treatment Modalities: Pharmacology, Hypnosis, Alternative Trauma Treatments such as TIR, TFT, EMDR, somatic therapies, mindfulness, etc.

- Death, Dying and Grief, Traumatic Grief
- Workplace Violence and Trauma
- Substance Abuse
- AIDS/HIV
- Chronic Mental Illness
- Compassion Fatigue and Secondary Trauma
- School Violence and Response
- Trauma & Spiritual Issues
- Advocacy/Policy Making/Legislation
- Combat/Military Veterans
- Emergency Rescue/Fire/Law Enforcement
- Refugees/War Victims
- Secondary PTSD/Caregiver Debriefing
- PTSD & Pharmacology
- Catastrophic Injury/Illness/Physical

11. Electives Documentation

| Title of Class/Workshop | Date(s) of Training | Educational Provider/Trainer | Number of Hours |
|-------------------------|------------------------|------------------------------|-----------------|
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| Total Elective Hours | | |
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Your CTTS Application Checklist

Please include only the information that is required. All extra documents will be discarded. Keep a complete copy of your CTTS application for your own records.

Allow a minimum of 45 days after ATSS receives your documentation for the review of your application. Questions about appropriate experience and education or about your qualifications for certification should first be directed to your assigned sponsor.

Please submit your application with the documents in the following order with this list and the cover page of the application.

- 1. Membership documentation/verification.
- 2. Certification fee in U.S. funds only (or paid receipt):
- 3. A letter of support from your sponsor
- 4. Completed Experience Form
- 5. Completed Education Form

| Enclose and check any of the following if used to satisfy 90 hours of core courses of th |
|--|
| 190 required: |
| □Master's degree |
| □Doctoral degree |
| □Professional mental health or social work licensure, or current Practice Permit |
| Registration (Canadians) and malpractice insurance verification. |

6. Documentation of Education

Copies of certificates, letters or official transcripts to document attendance to conferences, seminars, workshops or class work verifying 190 education hours. Attach these behind the corresponding Education topic section.

- 7. Current resume/vitae (6 PAGE MAXIMUM)
- 8. Three (3) letters of recommendation for supporting your designation as a Certified Trauma Treatment Specialist (CTTS) from references.

| Signature: | Date: |
|------------|-------|
| oignature | Date. |

ATSS Headquarters, 5000 Old Buncombe Road, Suite 27-11, Greenville, SC. 29617

Jayne Crisp, CTTS, Administrator ● E-mail: Admin@atss.info