



# **CANDIDATE GUIDE**

## **for the**

# **IC&RC Clinical Supervisor**

# **Examination**

Based on the 2008 Clinical Supervisor Job Analysis

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**Leading the World in Credentialing Prevention, Substance Use Treatment & Recovery Professionals**

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## Purpose of the Candidate Guide

The IC&RC Clinical Supervisor Examination has been developed by IC&RC through the cooperation of its Member Boards and their strong desire to have an exam that is based on current practice in the field.

The purpose of this Candidate Guide is to provide you with guidance for the IC&RC examination process. By providing you with background information on examination development, administration, and content; your preparation for the IC&RC Clinical Supervisor Examination can be enhanced.

## Professional Testing Company

It is the policy of IC&RC to administer valid, reliable, legally defensible, and psychometrically sound examinations. To assist in this process, IC&RC has contracted with Schroeder Measurement Technologies (SMT) to develop, administer, and score all examinations.

SMT is an established, full-service, international testing company. SMT serves the needs of licensing and credentialing agencies with a wide range of test development and administration services.

Examinations are administered through a division of SMT called ISO-Quality Testing, Inc. (IQT). IQT provides secure, user-friendly, high-quality, examination administration around the world.

You can find out more information at their websites: [www.smttest.com](http://www.smttest.com) and [isoqualitytesting.com](http://isoqualitytesting.com)

## Examination Development

The development of a valid examination begins with a clear and concise definition of the tasks, knowledge, skills, and abilities needed for competent job performance. Using interviews, surveys, observation, and group discussions, IC&RC works with Subject Matter Experts (SMEs) in the field to delineate critical job components. The knowledge and skill bases for the questions in the examination are derived from the actual provision of services in the field.

Examination questions are written by certified individuals or those otherwise deemed as SMEs in the field. SMEs are trained in item writing best practices and assisted by IC&RC's professional testing company when writing questions. All examination questions are written in a multiple choice format with four response options. One of these options represents the **BEST** response and credit is granted only for selection of this response.

## Exam Eligibility Requirements and Registration

IC&RC examinations are administered exclusively by IC&RC Member Boards. Eligibility requirements and registration processes are determined by your Member Board. Candidates interested in taking an IC&RC examination must do so through an IC&RC Member Board. Contact your local board for information. Contact information for all IC&RC Member Boards can be found at our website [www.internationalcredentialing.org](http://www.internationalcredentialing.org).

## Exam Administration

Examinations are administered via paper and pencil and Computer Based Testing (CBT). Not all forms of administration are offered by all IC&RC Member Boards. Please consult your local board in order to determine your testing options.

Candidates taking CBT examinations will be required to test at a designated IQT center. On the day of testing, candidates are required to bring a valid, government issued photo ID and their Candidate Admission Letter to the testing center. Candidates are highly encouraged to read the Candidate Admission Letter in its entirety to be aware of all IQT testing policies and procedures.

A list of all IQT testing centers can be found at this link:  
<http://www.isoqualitytesting.com/mlocations.aspx> or by calling IQT toll free at +1-866-773-1114.

CBT exams begin with a brief tutorial and end with a brief survey. Extra time is allotted to complete the tutorial and survey. A demonstration of the CBT examination format can be found at <https://www.iqttesting.com/Default.aspx?Function=SampleExam&Exam=8>.

## Examination Dates

Paper and Pencil Examinations are administered four times a year in March, June, September, and December. Please consult your IC&RC Member Board for the exact date, time, and location of the examination administrations in your area, as well as registration information. The examination will be given only on the date and time posted by an IC&RC Member Board.

Computer Based Testing (CBT) is offered on-demand based on the availability of your desired testing center. Once you have met the eligibility requirements of your IC&RC Member Board to sit for the examination, your IC&RC Member Board will pre-register you for the examination through IC&RC's on-line test database. You will receive an e-mail with further instructions on scheduling your exam date, time, and location.

# Rescheduling, Cancelling, and Missed Exams

## Paper and Pencil Exams:

Paper and Pencil Examinations are only administered four times a year. If an emergency arises, and you are unable to take the examination as scheduled, you should contact your IC&RC Member Board as soon as possible to see if rescheduling is possible before the close of the administration window. If you are unable to reschedule within the designated administration window, you will not be able to test until the next paper and pencil administration date.

## Computer Based Exams:

CBT exams can only be cancelled or rescheduled **5 days or more PRIOR** to your scheduled examination date. Cancelling or rescheduling an exam is done directly through IQT's website at [www.iqttesting.com](http://www.iqttesting.com).

Complete instructions for cancelling or rescheduling an examination are listed below. For technical assistance, please contact IQT at (866) 773-1114 (toll free).

1. Visit [www.iqttesting.com](http://www.iqttesting.com).
2. Select "**Exam Registration.**"
3. Log in using the username and password provided to you in your pre-registration email. If you forgot your password, click the "forgot password" link and it will be emailed to you.
4. Select "**IC&RC**" from the organization dropdown menu and click the "**Next**" button.
5. To reschedule an exam, click "**edit.**" This will cancel your current exam date and prompt you to immediately select a new date.
6. To cancel an exam, click "**cancel.**" Once your exam is cancelled, you can log on to [www.iqttesting.com](http://www.iqttesting.com) at a later date to select a new examination date. Please note, your designated testing window to take the exam will remain the same.
7. An email confirmation will be automatically sent to you when you cancel or reschedule your examination.

**You will be required to pay a rescheduling or cancellation fee to IQT before you are able to reschedule or cancel your exam. Acceptable forms of payment are Visa, Master Card or American Express.**

You are **unable** to reschedule or cancel an examination **less than 5 days PRIOR** to your scheduled examination. Exceptions are made only for the following four reasons: jury duty, death in immediate family<sup>1</sup> within **14 calendar days** of the examination date, illness or medical

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<sup>1</sup> The **immediate family** is a defined group of relations, used in rules or laws to determine which members of a person's [family](#) are affected by those rules. It includes a person's parents, spouses, siblings and children.

complication within **14 calendar days** prior to the examination date **OR** the scheduled examination date, and military deployment.

If one of these four reasons prevents you from testing, you must contact IQT directly and provide sufficient documentation of the event that has occurred. Documentation must be submitted to IQT within **14 calendar days** of your missed examination. There will be no additional fee incurred under these circumstances. IQT can be reached toll free at +1-866-773-1114.

If you fail to show up for your examination at the scheduled time, do not have the proper identification, or your Candidate Admission Letter, you will not be permitted to sit for your exam. You will be considered a “No-Show”, your examination fees will be forfeited, and you will be required to re-register and pay all fees to your IC&RC Member Board prior to sitting for the exam. Candidates who miss their scheduled examinations must reschedule with their IC&RC Member Board.

## Examination Rules and Security

Failure to follow candidate instructions or conduct that results in violation of security or disruption of the administration of an examination may result in dismissal from the examination, voided examination scores, and forfeiture of examination fees.

Examples of misconduct include, but are not limited to:

- Writing on anything other than the authorized scratch paper provided at the administration site
- Looking at other candidate's examination
- Discussing examination content before, during, or after administration orally, electronically or in writing with any person or entity
- Copying or removing examination information from the testing area
- Use of cellphones or other electronic devices

Candidates may not attend the examination only to review or audit test materials. No unauthorized persons will be admitted into the testing area. All examination content is strictly confidential. Candidates may only communicate about the examination, using appropriate forms provided within the examination delivery system.

No books, papers, or other reference materials may be taken into the examination room. An area will be provided for storage of such materials.

No questions concerning the content of the examination may be asked during the examination period. The candidate should listen carefully to the directions given by the Proctor and read the examination directions carefully.

## Special Accommodations

Individuals with disabilities and/or religious obligations that require modifications in test administration may request specific procedure changes, in writing, to the relevant IC&RC Member Board. With the written request, the candidate must provide official documentation of the accommodation requested. Submitted documentation must follow ADA guidelines in that psychological or psychiatric evaluations must have been conducted within the last **three years**. All medical/physical conditions require documentation of the treating physician's examination conducted within the previous **three months**. Candidates should contact their IC&RC Member Board to inquire about other necessary documentation. Contact information for all IC&RC Member Boards can be found on our website [www.internationalcredentialing.org](http://www.internationalcredentialing.org).

The IC&RC Member Board will offer appropriate modifications to its procedures when documentation supports the need. All requests for special accommodations must be submitted to your IC&RC Member Board **prior** to scheduling your examination. You will receive further information on scheduling your examination with accommodations once your board has reviewed and approved the accommodation request.

## Scoring of Exams

### Receiving Scores:

All scores are reported to the designated IC&RC Member Board for distribution. IC&RC does **not** have the authority to release scores. This process takes approximately four to six weeks for paper and pencil exams and two to three weeks for CBT exams. Preliminary computer based exam scores are provided to candidates immediately following completion of the exam. Candidates seeking their official scores should contact their IC&RC Member Board. Contact information for all IC&RC Member Boards can be found on our website [www.internationalcredentialing.org](http://www.internationalcredentialing.org).

### Reporting Scores:

Scores are reported on a scale ranging from 200-800 with a 500 passing. The minimum scaled passing score is 500 for all examinations. Candidates are provided with official score letters that report a final scaled score and the percentages of items answered correctly in each content domain.

### **Scaled Scores:**

Scaled scores are created when the number of questions answered correctly is mathematically transformed so that the passing score equals 500 on a scale starting at 200 and ending at 800.

This transformation is very similar to converting inches to centimeters. For example, a 10 inch ribbon is also 25.4 centimeters long. The length of the ribbon has not been changed, only the units of measurement to describe its length.

The use of scaled scores allows for direct comparison of exam scores from one form of the examination to another. For security purposes, IC&RC keeps multiple forms of each examination in circulation at all times. Candidates are randomly assigned a form. The use of scaled scores allows IC&RC to report scores for every form of an examination using the same scale of 200-800 with a 500 passing.

The use of scaled scores does not influence whether a candidate passes or fails an examination. The passing of an IC&RC examination is always incumbent on achieving the minimum passing score as it is determined in the process below.

### **Determining a Passing Score:**

Passing scores for IC&RC exams are not based on a percentage of questions answered correctly. Instead, IC&RC uses a Modified Angoff Study to determine a cut score for each examination. The Angoff method uses a systematic and documented approach to establish accurate, reliable, and legally defensible pass/fail scores.

Cut scores are determined by a panel of Subject Matter Experts (SMEs) that are working in and have demonstrated expertise in the field. SMEs work with our professional testing company to discuss the specific knowledge, skills, and abilities needed to demonstrate minimum competence.

The SMEs evaluate and rate the difficulty of each question. These ratings are then combined to determine the final cut score for the exam. The final cut score is subsequently transformed to an equivalent scaled score. All examination questions are weighted equally.

### **Use of Multiple Exam Forms:**

For every IC&RC exam, there are multiple forms of the same examination. Each form will use different questions but test the same content. Examination forms are updated and replaced on a continuous basis to ensure the security and integrity of the examination.

The use of multiple forms for the same exam will not make it easier or more difficult for candidates to pass one form of the examination. IC&RC's testing company uses statistical data



on each test question to evaluate the difficulty of each examination form. The examinations are constructed in order to minimize variations in difficulty from one form to another. The passing scores for each examination form are adjusted accordingly to account for any differences in form difficulty.

### **Use of Pretesting Items:**

On each IC&RC exam, there are unweighted items that do not influence final scores. Unweighted items are also called pretest items. Pretest items are not identified on exams and appear randomly on all exam forms. Pretest items do not influence final scores or pass/fail status. IC&RC uses pretest items to pilot newly written questions to ensure item quality prior to its addition to an examination as a weighted question.

Pretesting provides verification that the items are relevant to competency, measure proficiency and helps ensure the quality of future examinations. Pretest items do not influence a candidate's score and protect candidates against poorly-performing items.

### **Failing Scores:**

Candidates who do not pass their examination are provided with percentages of correctly answered items in each content domain to better focus future study efforts. For security reasons, candidates will not be provided with their raw score (total number of questions answered correctly), total percentage of questions answered correctly, or a copy of the examination to review.

It is important to note that because the number of questions contained within each domain of the examination varies, adding or averaging the percentage correct scores in each domain will NOT be an accurate reflection of a candidate's overall examination score.

## **Appeals, Examination Grievances, Test Disclosure, and Retakes**

### **Appeals:**

All examination scores are final. Examination scores cannot be appealed. Candidates may request a second verification of their examination score within 30 calendar days of taking their exam. To initiate this process, complete the Hand Score Request Form found at [www.internationalcredentialing.org](http://www.internationalcredentialing.org) and return it to IC&RC.

IC&RC's testing company will hand score the examination against the master key and send the results directly to candidates. There is a fee for this service.

### **Examination Grievances:**

Candidates who believe an unusual event or condition related to the administration of their examination caused a significant adverse effect on their performance during their examination may submit a grievance regarding the exam administration to IC&RC for investigation.

Grievances must be submitted to IC&RC within **14 calendar days** of the examination. Grievance statements must be submitted in writing, dated, and signed. Grievance statements must be accompanied by the **IC&RC Exam Administration Grievance Form** found at [www.internationalcredentialing.org](http://www.internationalcredentialing.org). Information to include in the grievance statement should include, but is not limited to:

- Title of exam
- Examination date
- Name and location of testing center
- Name of proctor on duty (if known)
- Detailed explanation of the situation
- Impact the situation had on exam performance

IC&RC will then investigate the specifics of the testing situation. When warranted, candidates will be offered a free retake. An exam grievance will not challenge the design or content of an examination nor overturn a failing score. There is a fee for this service. Candidates that are offered free retakes will be refunded their grievance fee.

### **Test Disclosure:**

Candidates should be aware that IC&RC exam security and item banking procedures do not permit candidates access to exam questions, answer keys, or other secure materials related to the examination. Candidates that have questions or comments about a specific examination question should request a **Comment Form** from their examination proctor during a paper and pencil exam or click the **Comment On This Question** button for CBT exams. Candidate comments will be reviewed by IC&RC for consideration. Candidates will not be contacted regarding their comments.

### **Retakes:**

#### **Retakes:**

Candidates interested in retaking an exam must wait 60 days after their original exam. Effective May 1, 2017, candidates needing to retake an examination must wait 90 days after the original test date. However, some IC&RC Member Boards have chosen to implement the 90-day waiting period prior to May 1, 2017. To schedule a retake and clarify the mandatory waiting period,

candidates should contact their local IC&RC Member Board. Contact information for all IC&RC Member Boards can be found on our website [www.internationalcredentialing.org](http://www.internationalcredentialing.org).

**The mandatory waiting period cannot be waived under any circumstances.**

In addition, effective May 1, 2017, after four consecutive failed attempts, IC&RC Member Boards must require candidates to take remedial actions before a subsequent four testing attempts. The required remedial actions are at the discretion of the board, so candidates who fall into this category are urged to contact their IC&RC Member Board for details. A directory of Member Boards can be found on our website [www.internationalcredentialing.org](http://www.internationalcredentialing.org).

## Examination Content

The **2008 Clinical Supervisor** Job Analysis identified **six** performance domains for the IC&RC Clinical Supervisor Examination:

1. Counselor Development
2. Professional & Ethical Standards
3. Program Development & Quality Assurance
4. Performance Evaluation
5. Administration
6. Treatment Knowledge

Within each performance domain are several identified tasks that provide the basis for questions in the examination. Following is the outline of the tasks that fall under each domain.

### **Domain 1: Counselor Development**

**Weight on Exam: 24%**

#### **Associated Tasks:**

- Build a supportive and individualized supervisory alliance, which includes teaching the purpose of clinical supervision, using it effectively, and respecting professional boundaries.
- Maintain a constructive supervisory learning environment that fosters awareness of oneself and others, motivation, self-efficacy, enthusiasm, and two-way feedback.
- Demonstrate multicultural competencies and help supervisees develop skills of empathy and acceptance specific to working with culturally diverse clients.
- Provide timely and specific feedback to supervisees on their conceptualization of client needs, attitudes towards clients, clinical skills, and overall performance of assigned responsibilities.

- Create a professional development plan with supervisees that includes mutually approved goals and objectives for improving job performance, a timeline for expected accomplishments, and measurements of progress and goal attainment.
- Implement a variety of direct supervisory activities to teach and strengthen supervisees' theoretical orientation, professional ethics, clinical skills, and personal wellness.
- Help supervisees recognize, understand, and cope with unique problems of transference and countertransference when working with clients and substance use disorders.
- Educate supervisees regarding developments in the addictions and behavioral health care fields to ensure best practices in consumer care.
- Encourage and help supervisees develop a personal wellness plan to manage their stress and avoid compassion fatigue and burnout.

## **Domain 2: Professional and Ethical Standards**

**Weight on Exam: 20%**

### **Associated Tasks:**

- Practice only within one's areas of clinical and supervisory competence.
- Ensure that supervisors and supervisees are familiar with and are adherent to relevant professional codes of ethics, client's rights documents, and laws and regulations that govern both counseling and clinical supervision practices.
- Follow due process guidelines when responding to grievances and ensure that supervisees know their rights as employees and understand the organization's employee grievance procedures.
- Pursue personal and professional development by participating in related professional educational activities in order to improve supervisory competence.
- Recognize the supervisees' unique personality, culture, lifestyle, values and attitudes, and other factors to enhance his/her professional development.
- Ensure that supervisees inform clients about the limits of confidentiality.
- Ensure that supervisees inform clients about supervision practices and obtain documented informed consent from clients as appropriate.

- Use and teach supervisees various ethical decision-making models and monitor their use to ensure their ethical treatment of clients.
- Understand the risks of dual relationships and potential conflicts of interest and maintain appropriate relationships at all times.
- Provide timely consultation and guidance to supervisees in situations that present moral, legal, and/or ethical dilemmas.
- Ensure that supervisees maintain complete, accurate, and necessary documentation, including detailed descriptions of critical situations.
- Understand the reporting process for ethical violations to the appropriate professional organizations or regulatory authorities.
- Intervene immediately and take action as necessary when a supervisee's job performance appears to present problems.
- Maintain familiarity with consensus- and evidence-based best practices in the treatment of substance use disorders.
- Seek supervision and consultation to evaluate one's personal needs for training and education, receive and discuss feedback on supervisory job performance, and implement a professional development plan.
- Development and maintain a personal wellness plan for physical and mental health.

### **Domain 3: Program Development and Quality Assurance**

**Weight on Exam: 12%**

#### **Associated Tasks:**

- Structure and facilitate staff learning about specific consensus- and evidence-based treatment interventions, program service design, and recovery models relevant to the organization and the population it serves.
- Understand the balance between fidelity and adaptability when implementing new clinical practices.
- Advocate within the agency for ongoing quality improvement, including strategies for enhancing client access, engagement, and retention in treatment.
- Support the organization's quality assurance plan and comply with all monitoring, documenting, and reporting requirements.

- Develop program goals and objectives that are consistent with the organization's quality assurance plan.
- Facilitate development and implementation of professional quality improvement guidelines, forms, and instruments to monitor client outcomes and/or upgrade organizational performance.
- Advocate for the organization's target population throughout the entire continuum of care as an agent of organizational change.
- Build and maintain relationships with referral sources and other community programs to expand, enhance, and expedite service delivery.
- Identify and assess program needs and develop a plan to improve clinical services and program development.

#### **Domain 4: Performance Evaluation**

**Weight on Exam: 12%**

##### **Associated Tasks:**

- Communicate agency expectations about the job duties and competencies, performance indicators, and criteria used to evaluate job performance.
- Understand the concept of supervision as a two-way evaluation process with each party providing feedback to the other, including constructive sharing and resolution of disagreements.
- Assess supervisees' professional development, cultural competence, and proficiency in the addiction counseling competencies.
- Assess supervisees' performance of tasks and/or clinical functioning by interviews, observations, review of case records, use of evaluation tools, and client/family feedback.
- Differentiate between counselor development issues and those requiring corrective action (e.g., ethical violations, incompetence).
- Assess supervisees' preferred learning style, motivation, and suitability for the work setting.
- Institute an ongoing formalized, proactive process that identifies supervisees' training needs, actively involves supervisees in conjointly reviewing goals and objectives, and reinforces performance improvement with positive feedback.

- Communicate feedback clearly, including timely written feedback, regarding performance deficits, weak competencies, or harmful activities and ensure that supervisees understand the feedback.
- Address and manage relational issues common to evaluation, including anxiety, disagreements, and full discussion of performance problems.
- Self-assess for evaluator bias (e.g., leniency, overemphasis on one area of performance, favoritism, stereotyping) and conflict with other supervisory roles.
- Adhere to professional standards of ongoing supervisory documentation, including written individual development plans, supervision session notes, written documentation of corrective actions, and written recognition of good performance.

### **Domain 5: Administration**

**Weight on Exam: 10%**

#### **Associated Tasks:**

- Ensure that comprehensive orientation is provided to new employees, including areas such as the organization's client population, mission, vision, policies, and procedures.
- Develop, evaluate, and monitor clinical policies and procedures using regulatory standards to ensure compliance.
- Involve the supervisees in designing and scheduling their activities to maintain clinically effective service delivery.
- Participate in the hiring/termination, performance recognition, disciplinary action, and other personnel decisions to maintain high standards of clinical care.
- Ensure workforce is trained to meet service delivery needs.

### **Domain 6: Treatment Knowledge**

**Weight on Exam: 22%**

#### **Associated Tasks:**

- Have professional experience with and knowledge of the field of addictions, social and behavioral science, and self-help philosophy.
- Understand the limitation of addiction treatment in general; its relationship to sustained, long-term recovery; and the specific limitation of the models or design in use by supervisees.

- Understand the principles of addiction prevention and treatment.
- Understand the addiction process and recovery management.
- Understand the limitations of and appropriateness of assessment and evaluation tools utilized in the addiction field.
- Understand the use of pharmacological interventions and interactions.

**Total number of examination questions: 150**

**Total Number of pretest questions: 25**

**Total time to complete the examination, Paper & Pencil: 3 ½ hours**

**Total time to complete the examination, Computer Based: 3 hours**

## Sample Questions

The questions on the IC&RC Clinical Supervisor Examination were developed from the tasks identified in the 2008 Clinical Supervisor Job Analysis. Multiple sources were utilized in the development of questions for the exam. Each question is linked to one of the job analysis task statements as listed above.

The questions on the examination are multiple-choice with four (4) choices: A, B, C, and D. There is only one correct or best answer for each question. Carefully read each question and all the choices before making a selection. Choose the single best answer. Mark only one answer for each question. You will not be given credit for any question for which you indicate more than one answer. It is advisable to answer every question since the number of questions answered correctly will determine your final score. There is no penalty for guessing.

The following are **sample** questions that are similar to those you will find in the exam.

**1. Which counselor behavior is an effective method for dealing with denial?**

- A. Stating the client is not ready to change
- B. Asking circular questions
- C. Self-disclosure
- D. Consultation

Domain: Treatment Knowledge



**2. Which of the following is a common symptom of the later stages of burnout?**

- A. Aggression
- B. Apathy
- C. Depression
- D. Dissociation

Domain: Counselor Development

**3. Group supervision is an effective means to promote skill development for the beginning counselor because it gives the:**

- A. clinical supervisor a basis for reassigning cases when appropriate.
- B. clinical supervisor a forum to promote staff cohesiveness and morale.
- C. counselor the opportunity to receive peer support and feedback.
- D. counselor an opportunity to develop trusting relationships with other counselors.

Domain: Counselor Development

**4. What are the MOST effective ways the supervisor can demonstrate supervisory involvement and prevent malpractice?**

- A. Consultation and documentation
- B. Role-playing and role modeling
- C. Counseling and documentation
- D. Co-facilitation and feedback

Domain: Professional and Ethical Standards

**5. Clients should be informed of a supervisory relationship because:**

- A. any observation will inhibit the client.
- B. the client may question the credibility of the counselor.
- C. the client's care will be discussed openly in agency staff meetings.
- D. the supervisor has a relationship with the client through the counselor.

Domain: Professional and Ethical Standards

**6. Command-control and networked, team-based are examples of:**

- A. organizational structures.
- B. effective supervision.
- C. program strategy.
- D. leadership principles.

Domain: Administration

- 7. Which of the following situations allows the supervisor to provide the MOST effective feedback to the counselor?**
- A. Self-report of a session by the counselor
  - B. Audiotape review of a session by the supervisor
  - C. Supervisor participation in a session as a co-therapist
  - D. Role-play with the supervisor and the counselor

Domain: Counselor Development

- 8. The BEST management technique to use in order to maintain effective programming and to ensure a maximum level of client care is:**
- A. practicing linkage and networking strategies.
  - B. monitoring supervisees regularly for signs of burnout.
  - C. reviewing daily program schedules.
  - D. matching clients to appropriate staff and level of care.

Domain: Program Development and Quality Assurance

- 9. According to IC&RC standards, certification is:**
- A. an important aspect of counselor development.
  - B. a requirement for many member boards.
  - C. a critical element for the protection of the public.
  - D. an unnecessary step to gain licensure.

Domain: Professional and Ethical Standards

- 10. When presented with conflicting messages, communicators are MOST likely to rely on the:**
- A. non-verbal message.
  - B. verbal message.
  - C. most recent message.
  - D. context of message.

Domain: Counselor Development

**Answer Key**

- |    |   |     |   |
|----|---|-----|---|
| 1. | B | 6.  | A |
| 2. | B | 7.  | C |
| 3. | C | 8.  | D |
| 4. | A | 9.  | C |
| 5. | D | 10. | A |

# Examination Reference List

Revised June 2016

The following resources were compiled as suggested reading to assist candidates preparing for the IC&RC Clinical Supervisor Examination. Consulting these and other references may be beneficial to candidates. Please note that this is not a comprehensive listing of all references and that not all questions on the examination came from these references.

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## About IC&RC

IC&RC promotes public protection by setting standards and developing examinations for credentialing prevention, substance use treatment, and recovery professionals. Organized in 1981, it has a worldwide network of over 50,000 professionals.

Quality and integrity are the foundation of IC&RC's work. IC&RC's credentials use the latest research on evidence-based practices, and they are updated every five years and subjected to an extensive process of peer review. IC&RC examinations are based on formal Job Analyses, written by subject matter experts, and supported by current references. Member boards are audited regularly to ensure compliance with international standards.