

**Certification Manual for CEAC and CEAT**  
**(Certified Equine Assisted Counselor/Therapist)**  
**Levels I and II**



***Revised: 02/01/10***

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# **National Association of Certified Professionals of Equine Therapy (NACPET, Inc)**

**The National Association of Certified Professionals of Equine Therapy (NACPET, Inc)**, founded as a non-profit in 2008, is the ONLY Board that certifies Equine Assisted Counselors and Therapists (CEAC/CEAT) and Specialized Horse Professionals/Equine Specialists (CES).

## **PURPOSE**

We certify Specialized Equine and Equine Therapy Professionals to ensure the highest standards and safety in the Equine/Mental Health fields, and provide appropriations for scientific research, at risk youth, low-income children, veterans, and Native Americans to advance the development of Equine Therapy worldwide. The Certification process provides public assurance that certified professionals are held to and demonstrate the highest levels of experience, training, safety, continued education and ethics.

## **VISION**

To implement a universal credentialing system for Equine Assisted Therapy/Equine Facilitated Therapy that will provide regulated guidelines for practitioners in the field to follow. We are working to improve the professionalism, ethics and standards in this discipline, which will increase public safety, add credibility to the field in psychology, lower liability insurance, and enhance the lives of individuals and specific populations that are in the greatest need of an intensive, yet non-threatening and short-term form of therapy. Furthermore, we are striving to improve the standards in all specialized Equine Professions.

## **OPERATIONS**

Our operations include, but are not limited to: certification of licensed Mental Health/Chemical Dependency Counselors & Therapists as Equine Assisted Counselors/Therapists (CEAC/CEAT) and the certification of Equine Professionals with a formal education in Equine Studies/Animal Sciences and/or years of experience in the Equine field as Equine Specialists. Accreditation (**NACPET**) and dual accreditation (**NACPET & CTHA**) for facilities utilizing certified staff and/or horses is also available. Annual membership is required for all certified professionals and these funds help with the operations of the organization, including appropriating grants to other organizations for EAP/EFT growth, scientific research, and no cost services to at risk youth, veterans, Native Americans, and low income children.

## **CERTIFIED THERAPY HORSE ASSOCIATION (CTHA®™)**

The National Association of Certified Professionals of Equine Therapy works in conjunction with the **Certified Therapy Horse Association (CTHA®™)**, which is the only certifying board for the third professional in EAP/EFT, the **Therapy Horse**. Both organizations provide appropriations for scientific research in the field and a variety of support and prevention programs for specific populations who can benefit from Equine Therapy. While providing for the humane treatment of Therapy Horses, CTHA's certification process protects the safety and interests of professionals and clients in Equine Therapy by providing a system of documentation, communication, and inspection that mandates prerequisite and continued training, regular vet checks, maintenance of health/feed records, the posting of personal rights for complaints, incident reports, unannounced inspections, complaint investigations, and collaboration with other Governing Boards. The standards and ethics that each professional must meet and maintain in this scope of practice will prevent neglect and casualties, which are costly and can result in the suspension and/or loss of certification for Equine Professionals, as well as notification to their license/certification boards in Mental Health and to the SPCA.

## INTRODUCTION

Equine Assisted Psychotherapy is an emerging field in which Certified Therapy Horses are used as significant partners in collaboration with Certified Equine Assisted Therapists/Counselors and Certified Equine Specialists to stimulate growth and development for all individuals and/or groups that have the desire to grow emotionally, mentally, physically and spiritually. It addresses a variety of mental health and human development needs including behavioral issues, Attention Deficit Disorder, substance abuse, eating disorders, trauma/abuse issues, depression, anxiety and communication/relational problems.

EAP/EFT is client-centered and provides hands-on opportunities to experience new solutions and to develop healthy coping skills and tools for effectively realizing and managing internal happiness. This experiential therapy module promotes the exchange of unhealthy behavioral and communication patterns for successful ones, revealed through immediate cause and effect situations. Clients are challenged in a non-threatening and innovative manner, using a method proven to rapidly break down defense mechanisms that interfere with growth and development. EAP is considered “Brief Therapy.” It is an intensive, short-term therapeutic approach that effectively stimulates long-term change. Skills that individuals and groups acquire during Equine Assisted Therapy include: self-esteem strategies, communication skills, conflict resolution, anger management, responsibility and accountability. Each EAP/EFT session is conducted by 3 professionals: the Equine Assisted Therapist/Counselor, the Horse Professional, and the Horse, all of whom should be appropriately trained and Certified.

The Certification of Equine Assisted Therapists/Counselors and Equine Specialists is the first area of importance to NACPET. We have 2 types of certification available including the certification of Mental Health Professionals who are State Licensed or Certified as Counselors/Therapists as Certified Equine Assisted Counselors/Therapists (CEAC/CEAT), and the Certification of Horse Professionals who specialize in Equine Therapy, or any specialized Equine field, as Certified Equine Specialists (CES).

This Certification Manual will guide any type of Mental Health Professional who is State Licensed or certified as a Counselor/Therapist through the process of becoming certified as an Equine Assisted Counselor/Therapist (CEAC/CEAT). Applicants must have undergone training in Equine Therapy by EAGALA, NARHA, O.K. Corral, or another approved training organization and have at least 60 hours of formal education at an accredited college level institution (25 of which may be substituted for work experience), in addition to having 1000 hours of supervised Equine Therapy sessions for level I certification, and 4000 hours for level II certification. It is not necessary to be Level I Certified in order to apply for Level II certification. Testing, in the form of conducting a case study, is also required. All applicants must maintain annual membership with NACPET.

Level I and Level II Certification must be renewed every two years to ensure that practicing CEAC/CEATs are current with trends in the field and maintain an appropriate level of experience. Renewal applicants must document either 40 hours of Continued Educational Units (CE’s) in the Mental Health/Equine Therapy field, or 600 hours of direct clinical/Equine Therapy work within the past 2 years.

Applicants for CEAC/CEAT certification who have not yet fulfilled the therapy session requirement can apply for Associate status with NACPET, using the Certification Manual for Certified Equine Assisted Counselor/Therapist Associate (CEACA/CEATA). An Associate is an intern who is in the process of accumulating the minimum amount of documented therapy hours of supervised Equine Therapy sessions required for certification as a CEAC/CEAT. Applicants will have two years to complete the requirements, after which their Associate status must be renewed if they are not yet prepared to apply for Certification. The cost of registering as an Associate goes directly toward the cost of Certification unless your internship expires.

## **Requirements for Certification as a CEAC/CEAT Level I**

- Must complete 3 Day Level I Certification Training by an approved Organization, including, but not limited to, NARHA, EAGALA, and Pegasus ECT. This usually constitutes 24 hours of Training and/or 24 CE's. These hours do work towards the experiential training requirement portion of the Certification.
- Must be state Certified or Licenced as a Counselor/Therapist in the Mental Health field, and provide documentation that verifies Licensure and/or Certification.
- Must meet the academic requirement, which may be partially substituted for the work experience requirement:

### **Academic requirement:**

Provide transcripts that document a minimum of 60 units/hours in Human Services/Psychology/Medical/Behavioral and Health Sciences completed at an accredited college-level institution. A maximum of 25 of these units/hours may be substituted using the work experience requirement below:

### **Work Experience requirement:**

A maximum of 25 of the 60 units/hours mandated for the academic requirement may be substituted for work experience as a Mental Health Professional in the applicant's respective field of specialty. Every 1 unit/hour of formal education may be substituted for 200 hours of work experience. (25 substituted units/hours is equivalent to 2.6 years of full-time work). If you need to use the substitution, you must submit a resume and (4) letters of recommendation indicating your experience from other professionals in the field of the Certification that you are petitioning for.

- Experiential training requirement: Must have 1000 hours of documented Equine Therapy sessions.
- Testing Requirement: Must complete, submit and have Clinical Acceptance of a Case Study. The outline and due date of the case study will be mailed to applicant upon NACPET's receipt and approval of this application.
- Complete the application form and all required documentation as specified in the application. These guidelines are accepted by NACPET, Inc, yet are not limited to revisions set forth by the board at any time. All revisions will be posted on the website.
- Must submit payment for application processing fee, initial certification fee and testing fee (testing fee is not submitted until application has been approved and you have received a letter with testing instructions).
- Must be a current member of NACPET

## **Requirements for Certification as a CEAC/CEAT Level II**

- Must meet all requirements for CEAT/CEAT Level I (You may apply for Level II without being Level I Certified)
- Experiential training requirement: Must have 3000 additional hours of documented Equine Therapy sessions for a total of 4000 hours.
- Must submit payment for certification fee and be current with NACPET membership.

## **Renewal of Certification as CEAC/CEAT Level I/II**

- CEAC/CEAT Level I and Level II Certification must be renewed every two years from the date of Certification approval to ensure that practicing Equine Assisted Counselors and Therapists are current with trends in the field and maintain an appropriate level of experience. Renewal applicants must document either 40 hours of Continued Educational Units (CE's) in the Mental Health/Equine Therapy field, or 600 hours of direct clinical/Equine Therapy work within the past 2 years. To renew certification, download the CEACA/CEATA/CEAC/CEAT Renewal Certification manual.

## **BENEFITS OF NACPET MEMBERSHIP/CERTIFICATION**

- Quarterly newsletter *on-line only*
- Recognition of certification in newsletter (individual(s)/organization)
- Recognition of active status on the Registry as a member and/or Certified and what level of certification. Accredited facilities will also be listed as Active, Inactive or Suspended.
- Approved schools will be listed in the Registry for CE and Equine Therapy Approval. School recognition is given to those who chose to become members even if they are not approved. However, the approval status will be so noted.
- NACPET certification and an opportunity to apply for accreditation for your organization and Dual Accreditation with CTHA.
- Reinforced creditability and distinguished professionalism added to your therapy practice.
- Improving by participation the standards in the field of Equine Therapy.
- Possible employment/independent contractor opportunities
- Discounts on advertising in the NACPET newsletter.
- Special rates on equine liability insurance in near the future with Shorepoint Insurance Services (Dee R. Renfro, Exc. VP 717.430.0035)
- Discounts from NACPET sponsors on equipment/supplies and future trainings.
- 5% Discount on NACPET certification and renewal only, if also maintaining current membership with NARHA, EAGALA, Pegasus ECT or other approved organizations.
- Proceeds help support grants to organizations to provide NO COST Equine Therapy to Native American's, veteran's, at-risk youths, low-income children.
- Proceeds help support grants to organizations that promote community outreach for NO COST and sliding scale to at-risk youths and low-income children.
- Proceeds help support grants for scientific research, short-term and long-term, to promote credibility and outcome monitoring in this new experiential approach to therapy in the field of Psychology.

**FORMS/DOCUMENTS TO BE SUBMITTED for Level I applicants and Level II applicants who have not obtained Level I Certification as CEAT/CEAC**

- Application
- Copies of all Certificates of Trainings in Equine Therapy
- Copies of all Certifications &/or Licensures in Mental Health Field, & school transcripts, if necessary
- Resume & (4) Letters of Reference from Clinical Supervisors, *if applicable* (only required for Partial Academic/Work Experience Substitution to meet Academic Requirement. See Section 3 for Details)
- Copies of active Memberships in EAGALA/NARHA/Pegasus (for 5% discounts on Certification and Renewal fee only)
- Copy of Photo ID
- Statement of Understanding
- Signed Recommendation Form and resume, certificates/degrees of reference (Submitted with application or mailed in by reference, see recommendation form for details)
- Signed Code of Ethics
- Confidentiality Agreement
- Patient's Rights
- Proof of Liability Insurance
- Signed Release of Liability
- Signed Scope of Practice
- Written Exam (*Case study*) *Not to be submitted with application. Outline and deadline will be mailed to you after your application has been approved.*

**FORMS/DOCUMENTS TO BE SUBMITTED for Level I applicants who have CEACA/CEATA status and Level II applicants who have already obtained Level I Certification as CEAT/CEAC**

- Application (*Complete only sections 1, 2, 7 and 8*)
- Copies of active Memberships in EAGALA/NARHA/ or PEGASUS (optional, for 5% discounts on Certification and Renewal fee only)
- Signed Recommendation Form and resume, certificates/degrees of reference (Submitted with application or mailed in by reference, see recommendation form for details)
- Patient's Rights
- Proof of Liability Insurance
- Signed Code-of-Ethics
- Signed Scope-of-Practice





**Certified Equine Assisted Counselors or Therapists (CEAC/CEAT) must provide certificates or degrees verifying licensure/registration or certification as a Counselor or Therapist in the Mental Health Field. You must also meet the Academic Education Requirement below.**

**SECTION 3. Academic Education:** Please also provide information identifying your academic hours of formal education in Human Services/Psychology/Medical/Behavioral and Health Sciences. This course work and/or degrees must have been completed at an accredited college-level institution. Provide any certificates of completion and/or degrees, along with transcripts. You must show/document a minimum of **60 hours/units**, in order to meet this requirement. If you do not meet the required amount, you may use the work experience substitution described below. However, you must record at least **35 hours/units** in this section. Use additional paper, if necessary. **Do not include any training information on this section.**

<i>Name of Institution</i>	<i>Course(s)/Degree(s)</i>	<i>Hours or Units</i>	<i>Date completed</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**WORK EXPERIENCE SUBSTITUTION FOR ACADEMIC EDUCATION**

Mental Health Professionals who do not meet the academic education requirement and have work experience in their respective field of specialty can waive a portion of the academic education requirement. Every one **(1) unit/hour** of formal education required may be substituted with **200 hours** of actual work experience in the field as a Mental Health Professional. Out of the **60 units/hours** of formal college-level education required, a maximum of **25 units/hours** of academic education may be substituted. For Example: If you have completed the minimum requirement of **35 units/hours** of formal college-level education, and have **5,000 hours** of work experience, which is about **2.6 years** of full-time work, you have fulfilled the academic education requirement. In order to receive credit for the experience, please provide a resume with at least **(4) letters of reference** indicating your experience, signed and sealed by Clinical Supervisors. Submit the resume and letters with your application.

**SECTION 4. Experiential Training:** This section includes the minimum direct clinical/professional experience requirement in Equine Therapy, which is **1,000 hours if applying for CEAC/CEAT Level I**, and **4,000 hours if applying for CEAC/CEAT Level II**. Please fill out the **Recommendation Form**, to verify your clinical/professional experience, and submit it with this application. The **Recommendation Form** may also be sent in separately by the Mental Health Professional giving you their reference. Please list information and use additional paper, if necessary.

<i>Name of Employer/Organization</i>	<i>Job Title/Description</i>	<i>Hours</i>	<i>Dates (from/to)</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Equine Therapy Training:** CEACA/CEATAs must have undergone training in Equine Therapy by NARHA/EAGALA/ PEGASUS ECT/other approved organizations (Call NACPET for details. Please list information requested regarding the training you have received and use additional paper, if necessary. These hours do go toward the Experiential Training Requirement. Please submit certificates of training with this application.

<i>Name of Organization</i>	<i>Level of Training</i>	<i>Hours</i>	<i>Date Completed</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**SECTION 5. Photograph:** Please include a recent colored photograph of yourself with your application. This photo will be used by NACPET, INC. to identify you. Write your full name on the back of the photo, which may be any size between **2" x 4" and 5" x 7"**. We will keep your photo in your file, and it will not be returned.

**SECTION 6. Specialization:** Please check the area(s) of Equine Therapy in which you specialize. You may choose one or more areas. If your area is not listed, please identify the area of specialty on the blank lines provided. Use additional paper, if necessary.

- |   |  |
|---|--|
| <input type="checkbox"/> Adolescents                            | <input type="checkbox"/> Depressive Disorders                  |
| <input type="checkbox"/> Chemical Dependency                    | <input type="checkbox"/> Other Disorders, please Specify _____ |
| <input type="checkbox"/> Dual Diagnosis                         | <input type="checkbox"/> Physically Challenged                 |
| <input type="checkbox"/> Eating Disorders                       | <input type="checkbox"/> _____                                 |
| <input type="checkbox"/> Other Addictions, Please Specify _____ | <input type="checkbox"/> _____                                 |

**SECTION 7. Fees and Documentation:** Please check the applicable fees and documentation to be included with your Application.  
**•First-time applicants** applies to Level I applicants who do not have CEACA/CEATA status and Level II applicants who are not Level I Certified as CEAC/CEAT•

- Application Fee (*First-time applicants only*). ..... **\$ 45.00**
- Certification Fee (Doesn't apply to CEACAs/CEATAs whose internship has not expired) ..... **\$150.00**
- Membership Fee Paid On-Line (Annual dues for NACPET membership) (Not applicable, if already a Member).... **\$ 45.00**
- Copies of active Memberships in EAGALA/NARHA/PEGASUS (optional, for 5% discounts on Certification and Renewal fee)
- Copies of certificates of training from an approved organization (*First-time applicants only*)
- Copies of all certificates, degrees, licenses, and transcripts (*First-time applicants only*)
- A Resume with **(4) Letters of Reference**, signed and sealed by clinical supervisors, if using work experience substitution-see application for details (*First time applicants only*)
- A signed original of the **Statement of Understanding**. (*First time applicants only*)
- Recommendation Form** with reference's resume, certificates/degrees (Sent separately if mailed by reference)
- A signed original of the **Code of Ethics**
- A signed original of the **Confidentiality Agreement** (*First-time applicants only*)
- A signed original of the **Patient's Rights**- A copy of this form should be posted where it is visible to all clients and staff
- Proof of Liability Insurance
- A signed original of the **Statement of Release of Liability** (*First-time applicants only*)
- A signed original of the **Scope of Practice**
- A current photograph, with your full name printed on the back (*First-time applicants only*)

**SECTION 8. Declaration of Authenticity:** The undersigned applicant declares that the information provided in the application and with the supporting documentation is true and authentic. The applicant understands that if at any time it is shown that the information or documentation provided is not true or is misrepresented, any fees that have been paid by the applicant will be forfeited, and certification as an Equine Assisted Counselor or therapist may be revoked.

Applicant Signature:

Print Name

Date

# Certified Equine Assisted Counselor/Therapist

## STATEMENT OF UNDERSTANDING

NACPET, Inc.

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**This document is to assist you in understanding your responsibilities and the criteria/requirements for certification. You must read and initial each of the following statements.**

### ETHICS AWARENESS

As part of NACPET, INC., you will be required to read and sign a Code of Ethics. Please be aware that most certification/license programs require the same during the process.

\_\_\_\_\_ I understand that I and those I deem appropriate must follow and maintain NACPET's Code of Ethics at all times during my certification period, as a Certified Equine Assisted Counselor/Therapist.

\_\_\_\_\_ I understand it is my responsibility to ensure that the Code of Ethics is followed and maintained.

\_\_\_\_\_ I understand my certification or opportunity to be certified as an Equine Assisted Counselor/Therapist can be made null and void, per the NACPET Director's discretion, if the Code of Ethics is not followed.

\_\_\_\_\_ I understand if I am unable to meet the responsibility noted above, it is in the best interest of NACPET, Inc. and NACPET Certified Professionals to reconsider my certification at this time.

\_\_\_\_\_ I understand if I want to discuss this matter confidentially, I may contact NACPET at (949) 646-8010.

### CRITERIA/REQUIREMENTS FOR CERTIFICATION

• **First-time applicants includes CEAC/CEAT Level I applicants, excluding CEACA/CEATAs, and CEAC/CEAT Level II applicants who are not Level I certified**

\_\_\_\_\_ I understand that a Certified Equine Assisted Counselor/Therapist (CEAC/CEAT) is a specialized Mental Health Professional that demonstrates the highest standards in experience, training, safety, continued education and ethics in the field of Equine Assisted Psychotherapy. These professionals work directly with people of all ages to promote growth and development with the utilization of a short-term and intensive therapeutic modality, which is documented thoroughly and supervised by the certification board of NACPET, Inc.

\_\_\_\_\_ I understand that I will need to disclose my full legal name, permanent address, phone number(s), email address (if applicable), DOB, and Social Security number.

\_\_\_\_\_ I understand that there is an application fee of **\$45.00** (First-time Applicants only).

\_\_\_\_\_ I understand that there is a certification fee of **\$150.00**, unless I have CEACA/CEATA status and my internship has not expired. (Good for two years from the date of approval).

\_\_\_\_\_ I understand that if I am renewing my certification there is a renewal fee of **\$150.00** (Good for two years from the date of your renewal).

\_\_\_\_\_ I understand that there is an examination fee of **\$100.00**, which is not due until after my application has been approved. (Written case study-An outline and scheduled due date will be mailed to you after approval. Not applicable if you are a CEAC/CEAT I applying for Level II Certification).

\_\_\_\_\_ I understand that I must maintain a NACPET membership, and the membership Fee is **\$45.00**, (**Paid On-Line only**, not applicable if you are a current and paid Member). I understand that NACPET Membership fees are due on an annual basis.

\_\_\_\_\_ I understand that all fees are nonrefundable, except for the examination fee, which is refundable up to 30 days prior to due date scheduled and nonrefundable thereafter.

\_\_\_\_\_ I understand that I must supply copies of certificates of training in Equine Therapy from an approved organization. (First-time applicants only)

\_\_\_\_\_ I understand that I may submit proof of current and paid membership with EAGALA, NARHA, PEGASUS ECT or other approved organizations to qualify for a 5% discount on my certification or renewal fee.

\_\_\_\_\_ I understand that I must have a license and/or certification as a Counselor/Therapist in the Mental Health Field and must

supply copies of all applicable certificates, degrees, licenses and transcripts.

\_\_\_\_\_ I understand that I must meet the academic education requirement, which asks me to provide information verifying my academic hours of formal education in Human Services/Psychology/Medical/Behavioral and Health Sciences. This course work and/or degree(s) must have been completed at an accredited college-level institution. I must provide certificates of completion and/or degree(s), along with transcripts. I must show/document a minimum of **60 hours/units**, in order to meet this requirement. If I do not meet the required amount, I may use the work experience substitution, but I must record at least **35 hours/units** of specialized education through an accredited college-level institution in the academic requirement section. (First-time applicants only).

\_\_\_\_\_ I understand that the work experience substitution for academic education is for Health Professionals who need to substitute a portion of the Academic Education requirement for work experience in their respective field of specialty. Every one (1) unit/hour of formal education required may be substituted with 200 hours of actual work experience in the field as a Mental Health Counselor/Therapist. For example: If I have completed the minimum requirement of 35 units/hours of formal college-level education, and have 5,000 hours of work experience, I have fulfilled the academic education requirement. Out of the 60 units/hours of formal college-level education required, a maximum of 25 units/hours of academic education may be substituted with 5,000 hours of work experience, which is about 2.6 years of full-time work. (First-time applicants only).

\_\_\_\_\_ I understand that I must submit a Resume with **(4) Letters of References**, signed and sealed by Clinical Supervisors, if I am using the work experience substitution for the academic requirement. (See the application for details)

\_\_\_\_\_ I understand that I must submit current photograph, with my full name printed on the back. (First-time applicants only).

\_\_\_\_\_ I understand that I must identify the area(s) of Equine Therapy in which I specialize in on the application. I may choose one or more areas. If my area is not listed, I must identify the area of specialty on the blank lines provided.

\_\_\_\_\_ I understand that in the event that NACPET staff must personally view/inspect the Certified Equine Assisted Counselor/Therapist for any reason after Initial Certification, the Certified individual may be financially responsible for any and all expenses incurred. (*Expenses average between \$200.00 and \$1500.00 depending on location of travel for NACPET staff*). In the event that any **deficiencies** are found, the individual/organization will have a certain amount of time to correct the problem. There are two types of deficiencies: **Class A** and **Class B**: Class A deficiencies can result in immediate loss of certification, if deemed necessary per NACPET Board members. However, most Class A deficiencies will have **(3) days** to correct the problem. Class B deficiencies receive **(30) days** to correct the problem. Any deficiency that has not been corrected in the designated period of time will result in the loss of Certification with NACPET. A list of deficiencies will be provided with approval of certification.

\_\_\_\_\_ I understand that I must submit a signed original of this form, the **Statement of Understanding**. (First-time applicants only).

\_\_\_\_\_ I understand that I must submit a **Recommendation Form**, along with the reference's resume and certificates/degrees (sent separate from application if mailed by Reference), to verify that I have completed the minimum direct clinical/professional experience requirement in Equine Therapy, which is 1,000 hours for CEAC/CEAT Level I and is increased to 4,000 if applying for CEAC/CEAT Level II.

\_\_\_\_\_ I understand that I must submit a signed original of the **Code of Ethics**.

\_\_\_\_\_ I understand that I must submit a signed original of the **Confidentiality Agreement**. (First-time applicants only).

\_\_\_\_\_ I understand that I must submit a signed original of the **Patient's Rights**. (A copy of this Form should be posted where it is visible to all clients and staff).

\_\_\_\_\_ I understand that I must submit a signed original of the **Statement of Release of Liability**. (First-time applicants only).

\_\_\_\_\_ I understand and declare that the information provided in the application and with the supporting documentation is true and authentic. The applicant understands that if at any time it is shown that the information or documentation provided is not true or is misrepresented, any fees that have been paid will be forfeited by the applicant, and certification as an Equine Assisted Counselor/Therapist may be revoked.

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I confirm that I have read, understood, and initialed each of the items listed above and that it is my responsibility to retain a copy of this document for my records. I am aware if I do not initial each item, my application to NACPET, Inc. will not be accepted.

Applicant's Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

NACPET Staff: \_\_\_\_\_

Dated: \_\_\_\_\_

# Certified Equine Assisted Counselor/Therapist Level I or Level II RECOMMENDATION FORM NACPET, Inc.

WRITE OUT LEGALLY DOCUMENTED NAME (PLEASE PRINT AND DATE)

Printed Name: \_\_\_\_\_

Date \_\_\_\_\_

**To the Professional applying for Certification:** Provide this recommendation form to a **Mental Health Professional in Equine Therapy** who has directly observed you at work doing Equine Therapy with Client(s)/Patient(s) within the age group you and/or your Organization work with. This Professional, (the Endorser/Reference), is signing off your work experience, which may have been either voluntary or paid but must have occurred in a structured setting for a minimum of **1000 hours**, if you are applying for **Level I Certification** or a minimum of **4000 hours** if you are applying for **Level II Certification**, some of which must have been witnessed by the Endorser/Reference within the past **6 months** from the date of this form. The Endorser/Reference that is recommending you must have observed at least **4 sessions** of you specifically utilizing EAP/EFT, after your Certification Training Period by an approved Organization.

Daily Work, in regards to the work outside of the Therapy session, **cannot** be used for the recommendation. Family is **not** considered a professional reference. Professors **cannot** be used as a reference unless they have directly observed you at work with (a) Client(s)/Patient(s).

**Before providing this form to your Endorser/Reference, please complete this section.**

I understand that I may review this completed form; however, waiving the right to have access to the Recommendation Form will establish confidentiality and trust to ensure that the Endorser/Reference is comfortable documenting accurately below. The Endorser/Reference must place the completed form in a signed and sealed envelope, if the Professional applying for Certification has waived their rights, and return the envelope to NACPET, INC, separate from the rest of the Application Packet.

If you believe it might be to your advantage to **not** waive your rights, and to read this form of recommendation, so indicate below. If you waive your rights to the form, our professional staff will continue to give you information about the contents of your Application Review File at your request, but will not show you the form or identify the individual making specific comments.

\_\_\_\_\_ (Your Initials) I waive my rights.

Your Signature: \_\_\_\_\_

\_\_\_\_\_ (Your Initials) I do not waive my rights.

Your Address: \_\_\_\_\_

**To the Endorser/Reference:** The Individual identified above is applying for Certification with NACPET, INC. Your appraisal of this Individual/Professional will help to determine if they have the qualifications necessary to be Certified as an Equine Assisted Counselor/Therapist Level I or II and if their Certification would be beneficial to the field of EAP/EFT and to NACPET, INC. Please read the entire form and complete the section below. Please also retain a copy of this form for your records.

Please mail the completed recommendation form, **along with your resume and any certificates/degrees**, in a signed and sealed envelope to NACPET, INC. 711 W. 17<sup>th</sup> Street; Suite A8; Costa Mesa, CA 92627, Attn: Application Review, if the Individual/Professional has waived their rights to inspect the completed form. If they have not waived their rights to access, return the completed form to the Individual and/or FAX it to (949) 646-8447. Please feel free to contact NACPET, INC. with any questions or concerns by mail, fax or by phone at (949) 646-8010.

1. *If the individual is applying for CEAC/CEAT Level I Certification*, did the Individual being examined for Certification work in a structured setting doing Equine Therapy in the field of Mental Health a minimum of **1000 hours**? Yes  No
2. *If the individual is applying for CEAC/CEAT Level II Certification*, did the Individual being examined for Certification work in a structured setting doing Equine Therapy in the field of Mental Health for a minimum of **4000 hours**? Yes  No
3. Have you observed the Individual conducting Equine Therapy within the last 6 months? Yes  No
4. Did you directly observe the Individual conducting a minimum of **4 sessions specifically in EAP/EFT**? Yes  No
5. With what age group did the Professional work with?  Is this the age group that the Professional usually works with? Yes  No
6. Please rank the Professional based **only** on a perceptive and/or observatory basis using the following scale: **0 = not observed, 1 = lacking/ none, 2 = moderate/some, 3 = above average/often, 4 = exceptional/all the time**

Interaction with Client(s)/Patient(s), seemed appropriate:	0	1	2	3	4	Ability to work through difficulty:	0	1	2	3	4
Dependability, in regards to safety around others:	0	1	2	3	4	Tolerance level:	0	1	2	3	4
Exhibited expertise in the field of EAP/EFT:	0	1	2	3	4	Appeared Stable emotionally and mentally:	0	1	2	3	4
Explained Confidentiality and Personal Rights to Client(s):	0	1	2	3	4	Seemed to promote growth:	0	1	2	3	4
5. Do you recommend this Professional for Certification with NACPET as an Equine Assisted Counselor/Therapist? Yes  No
6. Comments:

Endorser/Reference's Name (Please Print) \_\_\_\_\_

Endorser/Reference's Signature \_\_\_\_\_

Date \_\_\_\_\_

Title \_\_\_\_\_

Day Time Phone Number \_\_\_\_\_

## NACPET, Inc

711 W. 17th Street; Suite A8; Costa Mesa, CA 92627  
(949) 646-8010 • Fax (949) 646-8447

### Code of Ethics for Members of NACPET/CTHA

I, \_\_\_\_\_ do hereby agree to the following:

*(Print Name)*

That I will:

- Not discriminate against any client or professional based upon their race, religion, age, sex, handicaps, national ancestry, sexual orientation or economic condition.
- Insure objectivity and integrity, and maintain the highest standards in the services of Equine Assisted Psychotherapy/training/instructing and/or Equine Therapy.
- Recognize that the profession is founded on national standards of competence, which promote the best interest of society, the client, professionals and the profession as a whole.
- Recognize the need for ongoing education as a component of professional competency.
- Do my best to prevent the practice and/or the treatment of mental/medical/physical health by unqualified persons. This includes the training and instruction of clients and horses.
- Report any unethical conduct or unprofessional modes of practice to appropriate authorities, which includes reporting any and all unethical conduct/violations to NACPET and/or CTHA.
- Report any and all harmful incidents involving the Therapy Horse(s) utilized in my profession to NACPET and/or CTHA immediately, according to my agreement for certification.
- Recognize my own boundaries and limitations and not offer services outside of my competencies. This also includes the recognition of any and all limitations and personality traits of the Therapy Horse(s) utilized in my profession that may compromise the client's safety.
- Recognize the effect of professional impairment with regards to unprofessional performance and be willing to seek appropriate treatment for myself or for my colleagues.
- Uphold the legal and accepted moral code, which pertains to professional conduct.
- Not claim directly or by implication, professional qualifications/affiliations that I do not possess.
- Be responsible and professional regarding how I present myself and the Therapy Horse(s) utilized in my practice in any possible publications, books or media.
- Respect the integrity and protect the welfare of the clientele with whom I am working.
- Be concerned primarily with the welfare of the client in the presence of professional conflict.
- Terminate counseling or consulting relationship when it is reasonably clear that the client is not benefiting from it.
- Assume responsibility in referral cases for the client's welfare either by termination of consulting relationship by mutual agreement and/or by the client becoming engaged with another professional. In situations when the client refuses treatment, referral or recommendations, I should carefully consider the welfare of the client.

- Obtain a release of information in written form and a consent to contact in written form before discussing client or client welfare with any other person whether this person is professional or not.
- Not use a client in a demonstration role in a workshop setting where such participation would potentially harm the client emotionally or physically.
- Collaborate with other health-care/horse professionals in providing a supportive environment for the client who is receiving approved prescribed medication that may jeopardize the client's safety.
- Protect the privacy of the client and will not disclose confidential information acquired in teaching, practice or investigation.
- Inform the client and reach an agreement in areas likely to affect the client's participation in Equine Therapy/training/instruction including the recording of an interview, the use of interview material for training purposes, and the observation of an interview by another person.
- Make provisions for the maintenance of confidentiality and the ultimate disposition of confidential record.
- Reveal information received in confidence only when there is clear and imminent danger to the client or to other persons, and then only to appropriate professional workers or public authorities.
- Discuss information obtained in clinical or consulting relationships only in appropriate settings, and only for professional purposes squarely concerned with the case. Written and oral reports should present only data for the purpose of evaluation and every effort should be made to avoid undue invasion of privacy.
- Inform prospective clients of the important aspects of the medical/clinical/professional relationship.
- Not enter into a professional relationship, if this relationship should have potential to jeopardize NACPET and/or CTHA, or the client's welfare.
- Not engage in any type of sexual activity with the client.
- Cooperate with the state of California Alcohol and Drug programs, Board of Behavioral Sciences, NACPET, CTHA, EAGALA/NARHA professional ethics committees and the CAADAC/CAADE counseling code of ethics.
- Not accept any private fee or any other gift or gratuity for professional work with a client who is entitled to such services indicated by a contract that was initiated by NACPET and/or CTHA unless you are not specialized in Equine Therapy.
- Discuss any former client with the Director of NACPET and/or CTHA, after obtaining appropriate signed consent, before engaging in any personal, professional or business relationship.
- Be responsible and accountable in maintaining any and all requirements for certification and membership with NACPET and/or CTHA.

*I have read and understand these suggestions; I have retained a copy for my records.*

Applicant's Signature: \_\_\_\_\_ Dated: \_\_\_\_\_

NACPET/CTHA, Inc. President: \_\_\_\_\_ Dated: \_\_\_\_\_

Revised: 02/01/10

## Confidentiality Agreement

**In keeping with NACPET’s Code of Ethics, California State Regulations and Statement of**

**Understanding, I \_\_\_\_\_ do hereby agree to the following:**  
*(Print Name)*

- 1- That I will not discuss client/patient status with entities or anyone outside of Equine Assisted Psychotherapy and/or other forms of Equine Therapy. If you are not specialized in Equine Therapy, you will also not discuss anything or anyone that has been disclosed by or about a client, unless you have been given expressed written consent by the party/entity that you are providing services to/for.
- 2- That I will not discuss client/patient information with any other client unless it pertains directly to that person’s treatment/training/instruction.
- 3- That I will not take any classified client/patient material outside of Equine Assisted Psychotherapy and/or other forms of Therapy at any time. This does not apply to those professionals who are not specialized in Equine Therapy; however, it does apply if you are doing any **therapy** with clients; including Equine Therapy of any kind.
- 4- That I will obtain the client’s consent before acknowledging the client’s participation in therapy to entities/people outside of the therapy place/staff. This does not apply to those professionals who are not specialized in Equine Therapy; however, it does apply if you are doing any **therapy** with clients.
- 5- That I will inform those who we do not have a consent with of the following:

*“I cannot confirm or deny that this person is here. What I will do is take a written message, and if they are here, I will give it to them.”* This does not apply to those professionals that are not specialized in Equine Therapy; however, it does apply if you are doing any **therapy** with clients.

- *I have received a copy of this signed document.*

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Applicant’s Signature	Print Name	Date
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NACPET Staff	Print Name	Date
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# Patient's Rights

In Accordance with NACPET's Code of Ethics, California State Regulations and Statement of Understanding, each person receiving services from a residential alcoholism or drug abuse treatment facility, or receiving any kind of Equine Therapy or Horse Professional Services shall have rights, which include, but are not limited to, the following:

The right to confidentiality as provided for in Title 42, Section 2.1 through 2.67-1, of the Code of Federal Regulations, which includes HIPPA (Compliance Date: 2004).

To be accorded dignity in personal relationships with staff and other individuals.

To be accorded safe, healthful, and comfortable accommodations to meet his/her needs.

To be free from intellectual, emotional and/or physical abuse. This includes gossip and/or slander.

To be informed by the licensee of the provisions of law regarding complaints including, but not limited to, the address and telephone number of NACPET, Inc.

To be free to attend religious services or activities of his or her choice and to have visits from a spiritual advisor, provided that these services or activities do not conflict with facility program requirements. Participation in religious services will be voluntary only. This does not apply to those Professionals that are not specialized in Equine Therapy; however, it does apply if you are doing any *therapy* with clients.

## Complaints

In accordance with NACPET's Code of Ethics and California State Regulations and Statement of Understanding, any individual may request an inspection of an Equine/EAP Professional, a Therapy Horse owner, or an Organization. All complaints will be investigated and can be submitted anonymously. Complaints should be directed to:

NACPET, Inc.  
Certification Branch  
711 W. 17<sup>th</sup> Street; Suite A8  
Costa Mesa, CA 92627

Attention: Complaint Coordinator  
(949) 646-8010  
FAX: (949) 646-8447

### Acknowledgement

I \_\_\_\_\_ have been personally advised and have received a copy  
(Print Name)

of the Patient's rights and have been informed of and presented with the provisions for complaints made by clients at the time of their participation and/or visit with (an) Individual/Organization/Horse Owner(s) who is/are currently providing therapy for them and are members of NACPET, INC.

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Member's Signature

Date

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NACPET Board Member Signature

Date

Revised: 02/01/10

**NACPET, INC.**

**Statement of Release of Liability**

WITNESS THIS AGREEMENT this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,  
by and between Equine Specialist/Equine Assisted Counselor/Therapist (certified or an intern), hereinafter referred to as Releaser, and NACPET Inc., hereinafter referred to as NACPET. For consideration received, and in return for the use, today and on all future dates, of certification and services of NACPET and Releaser's, hereby agree to the following: (Please Initial by each number)

- (\_\_\_\_\_)1. Inherent Risks and Assumption of Risk: The undersigned acknowledges there are inherent risks associated with equine activities such as described below, and hereby expressly assumes all risks associated with participating in such activities. The inherent risks include, but are not limited to, the propensity of equines to behave in ways such as running, bucking, biting, kicking, shying, stumbling, rearing, falling or stepping on, that may result in injury, harm or death to persons on or around them, the unpredictability of equine('s) reaction to such things as sounds, sudden movement, unfamiliar objects, persons and other animals, certain hazards such as surface and subsurface conditions, collisions with other animals, the limited availability of emergency medical care, and the potential of a participant to act in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the animal or not acting within such participant's ability.

Releaser acknowledges that horses, by their very nature, are unpredictable and subject to animal whim. Releaser assumes all risks in connection therewith, and expressly waives any claims for injury or loss arising therefrom. Releaser agrees to abide by and follow NACPET rules and regulations, which are in the application packet and may be revised from time to time. Releaser further acknowledges that the behavior of any animal is contingent to some extent upon the ability of the Releaser. Releaser assumes all risks therefore and warrants that a full and fair disclosure of the Releaser's abilities has been made to NACPET.

Releaser expressly releases NACPET from any and all claims for personal injury or property damage, even if caused by negligence, (if allowed by the laws of this State), of NACPET or its representatives, agents or employees.

**WARNING**

**You are advised that there are inherent risks, including the risk of serious injury or death, while engaging in equine activities. By engaging in equine activities and in accordance with the terms of this agreement you hereby assume all risks of injury or death.**

- (  ) 2. Releaser agrees to indemnify and defend NACPET against, and hold harmless from, any and all claims, demands, causes of action, damages, judgments, orders, costs or expenses, including attorney's fees, whether actually incurred or not, which may in any way arise from or be in any way connected with Releaser's use of certification by NACPET.
  
- (  ) 3. In the event Releaser is using Releaser's own horse, or (a) horse(s) not owned or leased by NACPET, Releaser warrants said horse(s) be free from infection, and contagious or transmittable diseases. NACPET reserves the right to refuse access or use of any horse for certification that does not appear to NACPET to be in good health, or is deemed dangerous or undesirable.
  
- (  ) 4. Any action brought under this agreement shall be brought within one (1) year of the incident or accident giving rise to said claim. Releaser agrees that damages shall be limited to \$250 for property damage, actual expenses incurred, and a maximum of \$100, 000 for damages such as pain and suffering.
  
- (  ) 5. Releaser agrees to waive the protection of any applicable statutes in this jurisdiction whose purpose, substance and/or effect is to provide that a general release shall not extend to claims, material or otherwise, which the person giving the release does not know or suspect to exist at the time of executing said release.

\_\_\_\_\_  
Professional/Interns Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
NACPET Inc., Staff

\_\_\_\_\_  
Date

Revised: 02/01/10

# SCOPE OF PRACTICE

## Certified Equine Assisted Counselor/Therapist/Associates

### PURPOSE

To assure a consistent standard of quality education, training and experience for Certified Equine Assisted Counselors/Therapists/Associates. Certification is necessary to safeguard public health, safety, and welfare, and to protect the public from unauthorized service delivery by non-certified Equine Assisted Counselors/Therapists/Associates and unprofessional conduct by Certified Equine Counselors/Therapists/Associates.

### REQUIREMENTS

- Must be state Certified or Licenced as a Counselor/Therapist in the Mental Health field, and provide documentation that verifies Licensure and/or Certification.
- Must meet the academic requirement, which is 60 units/hours in Human Services/Psychology/Medical/Behavioral and Health Sciences completed at an accredited college-level institution. The academic requirement may be partially substituted for the work experience requirement in which a maximum of 25 of the 60 units/hours required may be substituted for work experience as a Mental Health Professional in the applicant's respective field of specialty. Every 1 unit/hour of formal education may be substituted for 200 hours of work experience.
- Complete 3 Day Level I Certification Training in Equine Therapy for Mental Health by an approved Organization. This usually constitutes **24 hours of Training and/or 24 CE's**. These hours do work towards the Documented Therapy Hours required for certification. Training is required in order for Counselors/Therapists/Associates to practice and/or be Certified.
- A Certified Equine Assisted Counselor/Therapist (CEAC or CEAT) must successfully complete **1000** hours of documented Equine Therapy for Level I certification, and **4000** hours for Level II certification, following specified criteria established by the Board of the National Association of Certified Professionals of Equine Therapy. All individuals must successfully pass a written examination process (Case Study).
- CEAC/CEAT persons must renew their certification every two (2) years by meeting the following criteria:
  1. Documentation of a minimum of forty (40) hours of continuing education in the area of Professional Equine Therapy development, or **600 hours** of direct Clinical/Equine Therapy work within the past **2 years**, which is verified by a Clinical/Equine Therapy Supervisor in a letter form that is sealed and signed.
  2. Will ascribe to the Professional Code of Ethics at each certification renewal period.
- The Certified Equine Assisted Counselor/Therapist Associate, (CEACA or CEATA) must successfully complete the certification requirements in (2) years or must renew their certification as an Associate by meeting the following criteria:
  1. Documentation of a minimum of forty (40) hours of continuing education in the area of Professional Equine Therapy development, or **600 hours** of direct Clinical/Equine Therapy work within the past **2 years**, which is verified by a Clinical/Equine Therapy Supervisor in a letter form that is sealed and signed.
  2. Will ascribe to the Professional Code of Ethics at each certification renewal period.

### ROLE OF THE CERTIFIED EQUINE ASSISTED COUNSELOR/THERAPIST/ASSOCIATE

1. To assist and support clients and their family members with Mental Health needs utilizing Equine Therapy. Certified Professionals must stay within their own Scope of Practice as designated by State and Federal Regulations.
2. Develop a program tailored to the individual in support of a recovery process to affect an improved quality of living.
3. Provide quality professional counseling and/or therapy for Mental Health needs, by the means of providing current and accurate information and education within the Certified Professional's Scope of Practice.
4. Co-facilitate a process for clients to self-explore the consequences of unhealthy coping skills by collaborating with a Horses and a Horse Professional, preferably a Certified Equine Specialist.
5. Utilize the functions of screening, intake, orientation, assessment, treatment planning, referral, case management, crisis intervention, counseling/therapy, education, documentation, discharge planning/aftercare, and consultation.
6. Display competency in the Certified Professional's own Scope of Practice **only. Certified and/or Licensed Counselors are not Licensed Therapists.**
7. Assisting in relapse prevention planning and recognizing relapse symptoms and behavior patterns, if applicable.
8. Providing current and accurate information and education for identifying and understanding the roles of family members and significant others within the Certified Professional's Scope of Practice.
9. Educating on how self-help groups (for example, Alcoholics Anonymous, Al-Anon, Women for Sobriety, Narcotics Anonymous, Secular Organization for Sobriety, Co-dependents Anonymous, etc.) can be beneficial to clients, if applicable.
10. Assisting clients to establish life management skills to support a recovery and/or growth process.

I have read and understand this document. In fact, I have retained a copy for my records.

Applicant's Signature: \_\_\_\_\_

Dated: \_\_\_\_\_