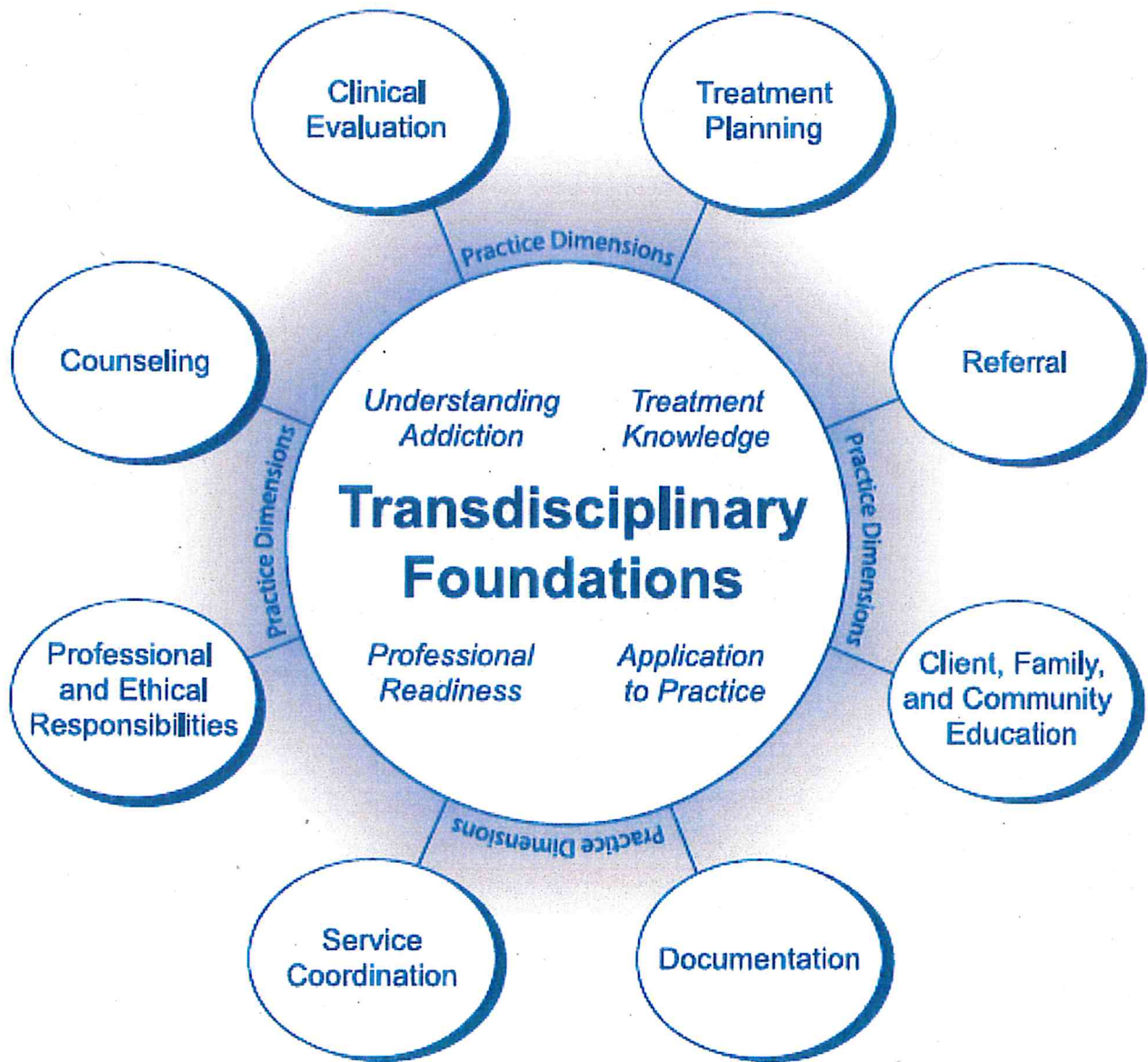


Mountain West Addiction Treatment Services Minor Relationship to Addiction Counseling Competencies (TAP 21)

FIGURE 1. COMPONENTS IN THE COMPETENCIES MODEL



Transdisciplinary Foundations

- Understanding Addiction
 - Treatment Knowledge
 - Professional Readiness
 - Application to Practice
- } (CAS 154 & CAS 254)

The Eight Practice Dimensions of Addiction Counseling

- I. Clinical Evaluation
 - Screening (CAS 354)
 - Assessment (CAS 454)
- II. Treatment Planning (CAS 454)
- III. Referral (CAS 354)
- IV. Service Coordination
 - Implementing the Treatment Plan
 - Consulting
 - Continuing Assessment and Treatment Planning

} (CAS 454)
- V. Counseling
 - Individual Counseling (CAS 355)
 - Group Counseling (CAS 355)
 - Counseling Families, Couples, and Significant Others
- VI. Client, Family, and Community Education (CAS 255)
- VII. Documentation (CAS 454)
- VIII. Professional and Ethical Responsibilities (CAS 354 & CAS 355)

CAS 154 Problems of Substance Abuse and Addiction and CAS 254 Biopsychosocial Factors of Addiction

Transdisciplinary Foundations *Understanding Addiction*

COMPETENCY 1:

Understand a variety of models and theories of addiction and other problems related to substance use.

COMPETENCY 2:

Recognize the social, political, economic, and cultural context within which addiction and substance abuse exist, including risk and resiliency factors that characterize individuals and groups and their living environments.

COMPETENCY 3:

Describe the behavioral, psychological, physical health, and social effects of psychoactive substances on the person using and significant others.

COMPETENCY 4:

Recognize the potential for substance use disorders to mimic a variety of medical and mental health conditions and the potential for medical and mental health conditions to coexist with addiction and substance abuse.

Treatment Knowledge

COMPETENCY 5:

Describe the philosophies, practices, policies, and outcomes of the most generally accepted and scientifically supported models of treatment, recovery, relapse prevention, and continuing care for addiction and other substance-related problems.

COMPETENCY 6:

Recognize the importance of family, social networks, and community systems in the treatment and recovery process.

COMPETENCY 7:

Understand the importance of research and outcome data and their application in clinical practice.

COMPETENCY 8:

Understand the value of an interdisciplinary approach to addiction treatment.

Application to Practice

COMPETENCY 9:

Understand the established diagnostic criteria for substance use disorders, and describe treatment modalities and placement criteria within the continuum of care.

COMPETENCY 10:

Describe a variety of helping strategies for reducing the negative effects of substance use, abuse, and dependence.

COMPETENCY 11:

Tailor helping strategies and treatment modalities to the client's stage of dependence, change, or recovery.

COMPETENCY 12:

Provide treatment services appropriate to the personal and cultural identity and language of the client.

COMPETENCY 13:

Adapt practice to the range of treatment settings and modalities.

COMPETENCY 14:

Be familiar with medical and pharmacological resources in the treatment of substance use disorders.

COMPETENCY 15:

Understand the variety of insurance and health maintenance options available and the importance of helping clients access those benefits.

COMPETENCY 16:

Recognize that crisis may indicate an underlying substance use disorder and may be a window of opportunity for change.

COMPETENCY 17:

Understand the need for and use of methods for measuring treatment outcome.

Professional Readiness

COMPETENCY 18:

Understand diverse cultures, and incorporate the relevant needs of culturally diverse groups, as well as people with disabilities, into clinical practice.

COMPETENCY 19:

Understand the importance of self-awareness in one's personal, professional, and cultural life.

COMPETENCY 20:

Understand the addiction professional's obligations to adhere to ethical and behavioral standards of conduct in the helping relationship.

COMPETENCY 21:

Understand the importance of ongoing supervision and continuing education in the delivery of client services.

COMPETENCY 22:

Understand the obligation of the addiction professional to participate in prevention and treatment activities.

COMPETENCY 23:

Understand and apply setting-specific policies and procedures for handling crisis or dangerous situations, including safety measures for clients and staff.

CAS 255 Introduction to Substance Abuse Prevention

Practice Dimension VI Client, Family, and Community Education Competencies 99 - 107

COMPETENCY 99:

Provide culturally relevant formal and informal education programs that raise awareness and support substance abuse prevention and the recovery process.

COMPETENCY 100:

Describe factors that increase the likelihood for an individual, community, or group to be at risk for, or resilient to, psychoactive substance use disorders.

COMPETENCY 101:

Sensitize others to issues of cultural identity, ethnic background, age, and gender in prevention, treatment, and recovery.

COMPETENCY 102:

Describe warning signs, symptoms, and the course of substance use disorders.

COMPETENCY 103:

Describe how substance use disorders affect families and concerned others.

COMPETENCY 104:

Describe the continuum of care and resources available to the family and concerned others.

COMPETENCY 105:

Describe principles and philosophy of prevention, treatment, and recovery.

COMPETENCY 106:

Understand and describe the health and behavior problems related to substance use, including transmission and prevention of HIV/AIDS, tuberculosis, sexually transmitted diseases, hepatitis C, and other infectious diseases.

COMPETENCY 107:

Teach life skills, including but not limited to stress management, relaxation, communication, assertiveness, and refusal skills.

CAS 354 Addiction Treatment I

Practice Dimension I Clinical Evaluation – Screening Competencies 24 - 32

COMPETENCY 24:

Establish rapport, including management of a crisis situation and determination of need for additional professional assistance.

COMPETENCY 25:

Gather data systematically from the client and other available collateral sources, using screening instruments and other methods that are sensitive to age, developmental level, culture, and gender. At a minimum, data should include current and historic substance use; health, mental health, and substance-related treatment histories; mental and functional statuses; and current social, environmental, and/or economic constraints.

COMPETENCY 26:

Screen for psychoactive substance toxicity, intoxication, and withdrawal symptoms; aggression or danger to others; potential for self-inflicted harm or suicide; and co-occurring mental disorders.

COMPETENCY 27:

Assist the client in identifying the effect of substance use on his or her current life problems and the effects of continued harmful use or abuse.

COMPETENCY 28:

Determine the client's readiness for treatment and change as well as the needs of others involved in the current situation.

COMPETENCY 29:

Review the treatment options that are appropriate for the client's needs, characteristics, goals, and financial resources.

COMPETENCY 30:

Apply accepted criteria for diagnosis of substance use disorders in making treatment recommendations.

COMPETENCY 31:

Construct with the client and appropriate others an initial action plan based on client needs, client preferences, and resources available.

COMPETENCY 32:

Based on the initial action plan, take specific steps to initiate an admission or referral and ensure followthrough.

**Practice Dimension III Referral
Competencies 49 - 55**

COMPETENCY 49:

Establish and maintain relationships with civic groups, agencies, other professionals, governmental entities, and the community at large to ensure appropriate referrals, identify service gaps, expand community resources, and help address unmet needs.

COMPETENCY 50:

Continuously assess and evaluate referral resources to determine their appropriateness.

COMPETENCY 51:

Differentiate between situations in which it is most appropriate for the client to self-refer to a resource and situations requiring counselor referral.

COMPETENCY 52:

Arrange referrals to other professionals, agencies, community programs, or appropriate resources to meet the client's needs.

COMPETENCY 53:

Explain in clear and specific language the necessity for and process of referral to increase the likelihood of client understanding and followthrough.

COMPETENCY 54:

Exchange relevant information with the agency or professional to whom the referral is being made in a manner consistent with confidentiality rules and regulations and generally accepted professional standards of care.

COMPETENCY 55:

Evaluate the outcome of the referral.

**Practice Dimension VIII Professional and Ethical Responsibilities
Competencies 115 - 123**

COMPETENCY 115:

Adhere to established professional codes of ethics that define the professional context within which the counselor works to maintain professional standards and safeguard the client.

COMPETENCY 116:

Adhere to Federal and State laws and agency regulations regarding the treatment of substance use disorders.

COMPETENCY 117:

Interpret and apply information from current counseling and psychoactive substance use research literature to improve client care and enhance professional growth.

COMPETENCY 118:

Recognize the importance of individual differences that influence client behavior, and apply this understanding to clinical practice.

COMPETENCY 119:

Use a range of supervisory options to process personal feelings and concerns about clients.

COMPETENCY 120:

Conduct self-evaluations of professional performance applying ethical, legal, and professional standards to enhance self-awareness and performance.

COMPETENCY 121:

Obtain appropriate continuing professional education.

COMPETENCY 122:

Participate in ongoing supervision and consultation.

COMPETENCY 123:

Develop and use strategies to maintain one's physical and mental health.

CAS 355 Individual and Group Treatment Skills

Practice Dimension V Counseling – Individual and Group *Individual Competencies 75 - 87*

COMPETENCY 75:

Establish a helping relationship with the client characterized by warmth, respect, genuineness, concreteness, and empathy.

COMPETENCY 76:

Facilitate the client's engagement in the treatment and recovery process.

COMPETENCY 77:

Work with the client to establish realistic, achievable goals consistent with achieving and maintaining recovery.

COMPETENCY 78:

Promote client knowledge, skills, and attitudes that contribute to a positive change in substance use behaviors.

COMPETENCY 79:

Encourage and reinforce client actions determined to be beneficial in progressing toward treatment goals.

COMPETENCY 80:

Work appropriately with the client to recognize and discourage all behaviors inconsistent with progress toward treatment goals.

COMPETENCY 81:

Recognize how, when, and why to involve the client's significant others in enhancing or supporting the treatment plan.

COMPETENCY 82:

Promote client knowledge, skills, and attitudes consistent with the maintenance of health and prevention of HIV/AIDS, tuberculosis, sexually transmitted diseases, hepatitis C, and other infectious diseases.

COMPETENCY 83:

Facilitate the development of basic and life skills associated with recovery.

COMPETENCY 84:

Adapt counseling strategies to the individual characteristics of the client, including but not limited to disability, gender, sexual orientation, developmental level, culture, ethnicity, age, and health status.

COMPETENCY 85:

Make constructive therapeutic responses when the client's behavior is inconsistent with stated recovery goals.

COMPETENCY 86:

Apply crisis prevention and management skills.

COMPETENCY 87:

Facilitate the client's identification, selection, and practice of strategies that help sustain the knowledge, skills, and attitudes needed for maintaining treatment progress and preventing relapse.

Group Competencies 88 - 93

COMPETENCY 88:

Describe, select, and appropriately use strategies from accepted and culturally appropriate models for group counseling with clients with substance use disorders.

COMPETENCY 89:

Carry out the actions necessary to form a group, including but not limited to determining group type, purpose, size, and leadership; recruiting and selecting members; establishing group goals and clarifying behavioral ground rules for participating; identifying outcomes; and determining criteria and methods for termination or graduation from the group.

COMPETENCY 90:

Facilitate the entry of new members and the transition of exiting members.

COMPETENCY 91:

Facilitate group growth within the established ground rules and movement toward group and individual goals by using methods consistent with group type.

COMPETENCY 92:

Understand the concepts of process and content, and shift the focus of the group when such a shift will help the group move toward its goals.

COMPETENCY 93:

Describe and summarize the client's behavior within the group to document the client's progress and identify needs and issues that may require a modification in the treatment plan.

Practice Dimension VIII Professional and Ethical Responsibilities Competencies 115 - 123

COMPETENCY 115:

Adhere to established professional codes of ethics that define the professional context within which the counselor works to maintain professional standards and safeguard the client.

COMPETENCY 116:

Adhere to Federal and State laws and agency regulations regarding the treatment of substance use disorders.

COMPETENCY 117:

Interpret and apply information from current counseling and psychoactive substance use research literature to improve client care and enhance professional growth.

COMPETENCY 118:

Recognize the importance of individual differences that influence client behavior, and apply this understanding to clinical practice.

COMPETENCY 119:

Use a range of supervisory options to process personal feelings and concerns about clients.

COMPETENCY 120:

Conduct self-evaluations of professional performance applying ethical, legal, and professional standards to enhance self-awareness and performance.

COMPETENCY 121:

Obtain appropriate continuing professional education.

COMPETENCY 122:

Participate in ongoing supervision and consultation.

COMPETENCY 123:

Develop and use strategies to maintain one's physical and mental health.

CAS 454 Addiction Treatment II

Practice Dimension I Clinical Evaluation – Assessment Competencies 33 - 36

COMPETENCY 33:

Select and use a comprehensive assessment process that is sensitive to age, gender, racial and ethnic culture, and disabilities that includes but is not limited to:

- History of alcohol and drug use
- Physical health, mental health, and addiction treatment histories
- Family issues
- Work history and career issues
- History of criminality
- Psychological, emotional, and worldview concerns
- Current status of physical health, mental health, and substance use
- Spiritual concerns of the client
- Education and basic life skills
- Socioeconomic characteristics, lifestyle, and current legal status
- Use of community resources
- Treatment readiness
- Level of cognitive and behavioral functioning

COMPETENCY 34:

Analyze and interpret the data to determine treatment recommendations.

COMPETENCY 35:

Seek appropriate supervision and consultation.

COMPETENCY 36:

Document assessment findings and treatment recommendations.

Practice Dimension II Treatment Planning Competencies 37 - 48

COMPETENCY 37:

Use relevant assessment information to guide the treatment planning process.

COMPETENCY 38:

Explain assessment findings to the client and significant others.

COMPETENCY 39:

Provide the client and significant others with clarification and additional information as needed.

COMPETENCY 40:

Examine treatment options in collaboration with the client and significant others.

COMPETENCY 41:

Consider the readiness of the client and significant others to participate in treatment.

COMPETENCY 42:

Prioritize the client's needs in the order they will be addressed in treatment.

COMPETENCY 43:

Formulate mutually agreed-on and measurable treatment goals and objectives.

COMPETENCY 44:

Identify appropriate strategies for each treatment goal.

COMPETENCY 45:

Coordinate treatment activities and community resources in a manner consistent with the client's diagnosis and existing placement criteria.

COMPETENCY 46:

Develop with the client a mutually acceptable treatment plan and method for monitoring and evaluating progress.

COMPETENCY 47:

Inform the client of confidentiality rights, program procedures that safeguard them, and the exceptions imposed by regulations.

COMPETENCY 48:

Reassess the treatment plan at regular intervals or when indicated by changing circumstances.

**Practice Dimension IV Service Coordination
Competencies 67 - 74**

COMPETENCY 67:

Maintain ongoing contact with the client and involved significant others to ensure adherence to the treatment plan.

COMPETENCY 68:

Understand and recognize stages of change and other signs of treatment progress.

COMPETENCY 69:

Assess treatment and recovery progress, and, in consultation with the client and significant others, make appropriate changes to the treatment plan to ensure progress toward treatment goals.

COMPETENCY 70:

Describe and document the treatment process, progress, and outcome.

COMPETENCY 71:

Use accepted treatment outcome measures.

COMPETENCY 72:

Conduct continuing care, relapse prevention, and discharge planning with the client and involved significant others.

COMPETENCY 73:

Document service coordination activities throughout the continuum of care.

COMPETENCY 74:

Apply placement, continued stay, and discharge criteria for each modality on the continuum of care.

**Practice Dimension VII Documentation
Competencies 108 - 114**

COMPETENCY 108:

Demonstrate knowledge of accepted principles of client record management.

COMPETENCY 109:

Protect client rights to privacy and confidentiality in the preparation and handling of records, especially in relation to the communication of client information with third parties.

COMPETENCY 110:

Prepare accurate and concise screening, intake, and assessment reports.

COMPETENCY 111:

Record treatment and continuing care plans that are consistent with agency standards and comply with applicable administrative rules.

COMPETENCY 112:

Record progress of client in relation to treatment goals and objectives.

COMPETENCY 113:

Prepare accurate and concise discharge summaries.

COMPETENCY 114:

Document treatment outcome, using accepted methods and instruments.