

COUNSELOR COMPETENCY DESCRIPTION

ACBHC (Counselor Technician, Counselor I, Counselor II, & Clinical Supervisor)

* **NOTE:** *The following material on substance abuse counselor competency has been developed from The Northwest Frontier Addiction Technology Transfer Center (attc), `Performance Assessment Rubrics for the Addiction Counseling Competencies`. The Northwest Frontier attc used the Center for Substance Abuse Treatment (CSAT) Technical Assistance Publication No. 21 (TAP 21), `Addiction Counseling Competencies: The Knowledge, Skills, and Attitudes of Professional Practice`, as a basis for the performance rubrics.*

Introduction: The counselor competencies, as presented, are based on the concept of two categorical areas being needed for competent counselor development. The two primary categories are 1st a knowledge and skill foundation, and 2nd the development of individual counselor professional practice capacity. The two categories are briefly outlined below:

- 1) Foundations: considered to be prerequisite to the development of discipline specific skills. The four foundation areas are:
 - a) Understanding Addiction: basic knowledge of substance use disorders,
 - b) Treatment Knowledge: treatment and recovery models, to included knowledge of Alaska Native traditional health and healing when appropriate,
 - c) Application to Practice: how to apply treatment knowledge to practice, and
 - d) Professional Readiness: issues related to self-awareness, appreciation of diversity, ethics, and continuing education.

- 2) Practice Dimensions: specific skill areas needed for the provision of effective treatment services for individuals, families, and significant others. The eight essential dimensions are:
 - a) Clinical Evaluation,
 - b) Treatment Planning,
 - c) Referral,
 - d) Service Coordination,
 - e) Counseling,
 - f) Client, Family, and Community Education,
 - g) Documentation, and
 - h) Professional and Ethical Responsibilities.

Included with the categories (Foundations & Practice Dimensions) are specific knowledge and skill competencies for Counselor Technician, Counselor I, Counselor II, and Clinical Supervisor which are the current levels of counselor certification in Alaska. As a part of each level, there are performance level expectations, which some employing agencies and /or organizations may find helpful in developing position descriptions and in doing employee performance evaluations. The following are brief general descriptions of the Counselor Technical, Counselor I, Counselor II, and Clinical Supervisor:

- **Counselor Technician:** generally have limited tools, systems, and models of addiction treatment to use with clients. Most often the Counselor Technician is new to the field of addiction counseling or they have not yet developed a broad information and practice base

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for working with a range of client needs. They usually need regular professional supervision to practice, and for support.

- **Counselor I:** able to apply counseling knowledge, skills and attitudes with consistency and effectiveness in a variety of counseling interactions. They practice in a professional manner, and utilize the clinical supervision they receive to enhance their skills in the field of addictions.
- **Counselor II:** are able to conceptualized and incorporate addiction services across a broad range of disciplines, and demonstrates the greatest level of skill. These counselors will have the achieved the highest level of professional qualifications and/or credentials. In most work environments, they may provide some or all of the clinical supervision.
- **Clinical Supervisor:** has by a combination of professional credentials and range of clinical experiences reached the highest level of clinical competency. Additional to any direct clinical work, they provide leadership and serve as a role model and consultant to other clinical staff.

Each section is ended with Methods of Measurement, which suggest utilizing written test, open text exam, and/or case presentation, as well as supervisor observation. The methods of measurement can be used for competency evaluation for certification, as well as part of an administrative management tool for employee development and performance evaluation.

Not included with the counselor competencies and levels of counselor certification, is the Traditional Counselor. The Traditional Counselor may be evaluated in a similar way, in some instances. Yet it is important to keep in mind that the Traditional Counselor is an Alaska Native person who has been recognized by their people as a source of traditional knowledge and wisdom, and they have been a positive force in resolving community substance abuse and other related behavioral health issues. They characterize their traditional values and are nominated as such, based upon: 1.) Being a caring and empathetic person; 2.) Being actively involved in their village or regional area dealing with substance abuse and other related behavioral health issues; 3.) Having been identified by others as a village or regional resource person in such areas as outreach, prevention, intervention or aftercare; 4.) Being credible and respected in their culture; and 5.) Being an effective communicator, able to influence others in positive and healthy ways using traditional methods and values.

Though a number of the characteristics of the Alaska Native Traditional Counselor can in fact be found in the follow competencies, it is still important to remember that they have special connections to their communities, which tends to transcend measurement, and in some instances observation.

The following competencies are for Counselor Technical, Counselor I, Counselor II, and Clinical Supervisor.

A. Knowledge and Skills for Competency Development:

- 1. Understanding Addiction:** The counselor ...
 - a.) Is able to understand a variety of models/theories of addiction;

- b.) Can recognize the social and cultural context within which substance abuse and addiction exist, to include risk and resiliency factors;
- c.) Can describe the behavioral, psychological, physical health and social effects of psychoactive substances on the user and others; and
- d.) Recognizes the potential for substance use disorders to resemble a variety of medical and psychological disorders and the potential for the co-existence of medical and psychological disorders with substance abuse and addiction.

Specific Competency by Level:

◆ **Counselor Technician:**

1. Can identify a number of models/theories of addiction and other substance-related problems, but does not have the accumulated experience and skills to relate them specifically to individual client treatment.
2. Is aware of the substance use context for individual clients, but does not have the accumulated experience and skill to fully integrate specific treatment strategies within individual client treatment services.
3. Can identify the behavioral, psychological, physical health and social effects of different psychoactive substances, but does not readily recognize how the effects are demonstrated by clients.
4. Separates medical and psychological disorders from client treatment for substance abuse and addiction, and has not yet developed a multi-dimensional view of client needs.

◆ **Counselor I:**

1. Can identify and understands a variety of models/theories of addiction and other substance-related problems, and is able to contribute to the review and planning of intervention strategies with the supervisor and treatment team.
2. Demonstrates awareness of the substance use context for individual client's lives.
3. Identifies the behavioral, psychological, physical health needs, and social effects of psychoactive substance use on individual clients and their family members.
4. Identifies and relates medical and psychological disorders to co-existing substance use disorders.

◆ **Counselor II:**

1. Can use knowledge of a variety of models/theories of addiction and other substance-related problems to understand and plan intervention strategies for a wide range of client's.
2. Uses the context of individual client's lives in the planning and delivery of substance abuse and addiction services.
3. Identifies the behavioral, psychological, physical health needs, and social effects of psychoactive substance use on individual clients and their family members, and uses the information to plan comprehensive treatment with the client and significant others.

4. Incorporates appropriate referral and/or treatment of medical and psychological disorders, which are co-existing with substance use disorders.

◆ Clinical Supervisor:

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance for the provision of quality substance abuse and addiction services.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) of philosophy, practice, policy and outcome of models/theories of addiction and substance abuse services (intervention, treatment, recovery, relapse prevention and aftercare).
2. Supervisory observation of individual counselor philosophy, practice, policy adherence and outcome of models/theories used to affect addiction and substance abuse services (intervention, treatment, recovery, relapse prevention and aftercare).

2. Treatment Knowledge: The Counselor is able to:

- a.) Describe the philosophies, practices, policies and outcomes of the most generally accepted and scientifically supported models of treatment, recovery, relapse prevention, and aftercare for addiction and other substance-related problems;
- b.) Recognize the importance of family, “traditional healing”, social networks, and community systems in the treatment and recovery process;
- c.) Understand the importance of research and outcome data and their application in clinical practice; and
- d.) Understand the value of an interdisciplinary approach to addiction and substance abuse treatment.

Specific Competency by Level:

◆ Counselor Technician:

1. Can identify a variety of philosophies, practices, policies, and outcomes, but still needs additional experience and skill development to relate treatment models to client needs.
2. Tends to address the needs of the client directly with him or her, and as a result of not having extensive experience in the field excludes family members, social networks, and community systems for support.
3. Uses treatment strategies and methods, but has as yet not been able to relate the scientific research and outcome data supporting those practices.
4. As a result of needing additional experience tends to work in isolation with limited consideration of collaborating with other disciplines for the planning and delivery of treatment.

◆ Counselor I:

1. Understands a variety of philosophies, practices, policies, and outcomes and applies them to treatment planning and delivery.

2. Identifies family members, appropriate “traditional healing practices”, social networks, and community systems that need to be included in the service plans for clients.
3. Is aware of the scientific research and outcome data supporting treatment strategies and methods and applies them to case planning decisions.
4. Participates in collaborating with other disciplines and team planning for the delivery of treatment.

◆ **Counselor II:**

1. Develops addiction services plans that link client needs with appropriate treatment philosophies, practices, policies, that lead to relevant client outcomes.
2. Identifies family members, “traditional healing practices”, social networks, and community systems that need to be included in the service plans for clients.
3. Uses science-based treatment, recovery, relapse prevention and aftercare methods whenever possible.
4. Critically reviews treatment strategies and methods for supporting research and outcome data, prior to implementing new practices.
5. Participates equally in collaborating with other disciplines and team planning for the delivery of treatment.

◆ **Clinical Supervisor:**

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding treatment philosophies, practices, and policies for the provision of quality substance abuse and addiction services.
2. Ensures the inclusion of family members, social networks, and community systems that need to be included in the service plans for clients.
3. Provides clinical leadership and guidance in the use of science-based treatment, recovery, relapse prevention and aftercare methods.
4. Ensures collaborating with other disciplines and team planning for the delivery of treatment.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) of philosophy, practice, policy and outcome of models/theories of addiction and substance abuse services (intervention, treatment, recovery, relapse prevention and aftercare); use of science-based services, the importance of collaboration, and team planning for relevant client outcomes.
2. Supervisory observation of individual counselor philosophy, practice, policy adherence and outcome of models/theories used to effect addiction and substance abuse services (intervention, treatment, recovery, relapse prevention and aftercare); use of science-based services, the importance of collaboration, and team planning for relevant client outcomes.

- 3. Application to Practice:** The counselor:
- a.) Understands the use of established substance abuse and addiction diagnostic and placement criteria used within the continuum of care;
 - b.) Can describe a variety of helping strategies for reducing the negative effects of substance use, abuse and addiction;
 - c.) Can tailor treatment services and strategies to the individual client's stage of dependence, change, or recovery;
 - d.) Can provide treatment services appropriate to the personal and cultural identity and language of the client;
 - e.) Can adapt practice to the range of treatment setting and modalities;
 - f.) Is familiar with medical and pharmacological resources in the treatment of addiction and substance abuse disorders;
 - g.) Understands the variety of insurance and health maintenance options, which are available, and the importance of helping clients access those benefits;
 - h.) Recognizes that crisis may indicate an underlying substance use disorder and that it may be a window for promoting change; and
 - i.) Understands the need for and the use of methods for measuring treatment outcomes.

◆ Counselor Technician:

1. Knows substance abuse and addiction diagnostic and placement criteria, but lacks the experience and skill development to apply the criteria with individual client circumstance.
2. Has limited knowledge of helping strategies and how they support substance abuse and addiction treatment.
3. Lacks sensitivity to a client's personal and cultural identity, language literacy, acculturation or assimilation, as a result of limited field experience, and thus is limited in adapting treatment modalities for the client.
4. Needs further development in the knowledge of medical and pharmacological resources in the treatment of addiction and substance abuse disorders.
5. Needs experience and knowledge to address the issues of insurance and health maintenance options that are available to the client.
6. Understands client crisis only as evidence of a substance use disorder.
7. Has awareness of outcome measures, but does not have the knowledge of skills to use outcome measures to adjust treatment planning.

◆ Counselor I:

1. Understands the use of substance abuse and addiction diagnostic and placement criteria to determine the existence of a disorder and for identifying appropriate treatment placement.
2. Has a working knowledge of effective treatment strategies.
3. Is sensitive to a client's personal and cultural identity, language literacy, acculturation or assimilation in providing services.
4. Understands the usefulness of medical and pharmacological resources in the treatment of addiction and substance abuse disorders.

5. Is aware of insurance and health maintenance options, which are available to the client.
6. Deals with client crisis within the planned treatment strategy and agency policy/procedure.
7. Collects outcome measures as directed and uses the measures in monitoring treatment progress.

◆ **Counselor II:**

1. Uses the substance abuse and addiction diagnostic and placement criteria to identify substance use disorders and for appropriate treatment placement.
2. Tailors helping strategies into individualized treatment plans that reduce the negative effects of substance abuse and dependency.
3. Uses treatment strategies and modalities appropriate to the client's personal and cultural identity, language literacy, acculturation or assimilation.
4. Uses knowledge of medical and pharmacological resources appropriately in planning and implementing treatment of addiction and substance abuse disorders.
5. Develops treatment plans that are sensitive to the insurance and health maintenance options, which are available to the client.
6. Identifies crisis as a potential indicator of underlying substance abuse problems and potential treatment opportunity.
7. Regularly includes measures of outcome in treatment plans for monitoring treatment progress.

◆ **Clinical Supervisor:**

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding diagnostic/placement criteria, treatment strategies, medical/pharmacological resources, clients personal budgeting, and outcome measures for the provision of quality substance abuse and addiction service.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) of substance abuse and addiction diagnostic and placement criteria, treatment modalities, medical and pharmaceutical resources, and methods for measuring treatment outcomes.
2. Supervisory observation of individual counselor knowledge and skills related to substance abuse and addiction diagnostic and placement criteria, treatment modalities, medical and pharmaceutical resources, and methods for measuring treatment outcomes.

4. Professional Readiness: The counselor is able to:

- a.) Understand diverse cultures and incorporate the relevant needs of diverse groups, as well as people with disabilities into clinical practice;
- b.) Understand the importance of self-awareness in one's personal, professional, and cultural life;

- c.) Understand the addiction professional's obligation to adhere to ethical and behavioral standards of conduct in the helping relationship;
- d.) Understand the importance of ongoing supervision and continuing education, as it relates to quality client services; and
- e.) Understand the obligation of the addiction professional to participate in prevention, as well as treatment.

Specific Competency by Level:

◆ **Counselor Technician:**

- 1. Treats all clients the same, not having accumulated a broad range of experience and appreciation regarding cultural and social diversity.
- 2. Has a general understanding of agency policies, procedures, and practices; and relies on supervisor for specific direction related to policy, procedure, and practice.
- 3. Generally unaware of client reaction/s to their personal presence, as the counselor technician is still developing a professional presence in client interactions.
- 4. Is aware of ethical and behavioral standards of conduct in interactions with colleagues and clients.
- 5. Seeks supervisor's review and guidance, and participates in learning opportunities.
- 6. Sees prevention as separate from the treatment process.

◆ **Counselor I:**

- 1. Treats clients with respect, and is accepting of cultural and social diversity.
- 2. Is aware of and adheres to agency policies, procedures, and practices.
- 3. Has developed accurate self-awareness and maintains a professional presence in client interactions.
- 4. Provides services within the generally accepted ethical and behavioral standards of conduct.
- 5. Accepts supervisor's review and guidance, and participates in learning opportunities.
- 6. Understands the relationship between prevention and the treatment process.

◆ **Counselor II:**

- 1. Where possible incorporates client cultural beliefs and values in planning and delivering treatment services.
- 2. Uses agency policies, procedures, and practices to enhance the treatment of clients in a safe and supportive environment.
- 3. Maintains a professional and supportive presence with clients and colleagues that facilitate treatment effectiveness.
- 4. Always works within the highest ethical and behavioral standards of conduct.
- 5. Seeks supervisory review and guidance as necessary, and always seeks development and improvement of professional skills, knowledge, and attitudes.

6. Includes prevention concepts and practices whenever possible in their overall practice.

◆ **Clinical Supervisor:**

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding client diversity, agency policy/procedure/practice, professionalism, ethical/behavioral conduct, professional development, and prevention services for the provision of quality substance abuse and addiction services.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) regarding client diversity, agency policy/procedure/practice, professionalism, ethical/behavioral conduct, professional development, and prevention.
2. Supervisory observation of individual counselor knowledge and skills related to client diversity, agency policy/procedure/practice, professionalism, ethical/behavioral conduct, professional development, and prevention.

B. Professional Practice Dimensions:

1. **Clinical Evaluation:** The systematic approach to screening and assessment.

1. a. **Screening:** The counselor is able to:

- a.) Establish rapport, including management of crisis situation and determination of need for additional professional assistance;
- b.) 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 history; mental status; and current social, environmental, and/or economic constraints);
- c.) Screen for psychoactive substance toxicity, intoxication, and withdrawal symptoms; aggression or danger to others; potential for self-inflicted harm or suicide; and coexisting mental health problems;
- d.) Assist the client in identifying the impact of substance use on his or her current life problems and the effects of continued harmful use or abuse;
- e.) Determine the client's readiness for treatment and change as well as the needs of others involved in the current situation;
- f.) review the treatment options that are appropriate for the client's needs, characteristics, goals, and financial resources;
- g.) Apply accepted criteria for diagnosis of substance use disorders in making treatment recommendations;
- h.) Construct with client and appropriate others an initial action plan based on client: needs, preferences, and resources available; and
- i.) Based on initial action plan, take specific steps to initiate an admission or referral and ensure follow-through.

Specific Competency by level:

- ◆ Counselor Technician:
 1. Addresses all clients in a respectful manner.
 2. Gathers data from the client in a routine, structured interview, including current and historical substance use, physical and mental health,
 3. Assists in managing client crisis situations.
 4. Restricts screening to routine protocols and the use of standard clinical instruments.
 5. Relies on a *standard action plan* to address the client's current needs. Addresses client placement within the continuum of care using a *standard action plan* related to substance-related treatment history.
 6. Reviews the action plan with the client and initiates treatment.

- ◆ Counselor I:
 1. Establishes rapport with the client in a way that facilitates cooperation and engagement in treatment.
 2. Systematically gathers data about current and historical substance use, physical and mental health and substance-related treatment history. Utilizes instruments sensitive to the client's context.
 3. Manages crisis situations including self-inflicted harm or attempted suicide, to assure safety of client and significant others.
 4. Reviews substance use with client, and helps client establish targets for improvement. Facilitates establishment of an appropriate treatment strategy, which uses modalities on the continuum of care appropriately.
 5. Presents a specific action plan for addressing client needs to the client and appropriate significant others.

- ◆ Counselor II:
 1. Establishes a working partnership with the client to address treatment needs and make action plans for enrollment in treatment.
 2. Elicits cooperation of the client and significant others in systematically gathering data about current and historic substance use, physical and mental health and substance-related treatment history.
 3. Initiates use of instruments and interview methods appropriate to clients age, developmental level, culture and gender
 4. Anticipate the potential for self-destructiveness and assesses suicide ideation. Manages crisis situations skillfully, including necessary follow-up and referral. Works with the client to identify and review substance use in his/her current life problems, and enhance motivation for treatment.
 5. Establishes with the client and significant others a treatment strategy that includes appropriate modalities on the continuum of care.
 6. Works with the client and appropriate significant others to construct and initiate an action plan for addressing the needs of the client and his/her support system.

◆ Clinical Supervisor:

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding the counselor, client, and available significant others determining the most appropriate initial course of action, given the client's needs, characteristics, and available resources within the community.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) regarding counselor, client, and available significant others determining the most appropriate initial course of action, given the client's needs, characteristics, and available resources within the community.
2. Supervisory observation of individual counselor knowledge and skills related to counselor, client, and available significant others determine the most appropriate initial course of action, given the client's needs, characteristics, and available resources within the community.

1. b. Assessment: An ongoing process through which the counselor collaborates with the client, and others, to gather and interpret information necessary for planning treatment and evaluating client progress. *Typically the counselor will know and use the Diagnostic and Statistical Manual, 4th Ed. (DSM-IVTR) and the American Society of Addiction Medicine, Patient Placement Criteria for the Treatment of Substance-Related Disorders, 2nd Ed. (ASAM PPC-2R), or later editions as they become available, in the assessment process.*

The counselor is able to:

- a.) Select and use a comprehensive assessment process that is sensitive to age, gender, racial and ethnic cultural issues, and disabilities that include, but are not limited to:
 1. history of alcohol and other drug use;
 2. current status of physical health, mental health, and substance use;
 3. physical health, mental health, and addiction treatment history;
 4. spirituality;
 5. family issues;
 6. education and basic life skills;
 7. work history and career issues;
 8. socio-economic characteristics, lifestyle, and current legal status;
 9. history of criminality;
 10. use of community resources; and
 11. psychological, emotional, and world-view concerns;
12. Analyze and interpret the data to determine treatment recommendations;
13. Seek appropriate supervision and consultation; and
14. Document assessment findings and treatment recommendations.

Specific Competency by Level:

- ◆ Counselor Technician:
 1. Applies a routine assessment procedure for all clients.
 2. Performs a limited analysis of assessment data and makes general treatment recommendations.
 3. Relies on supervision and consultation to accomplish comprehensive assessment of clients.
 4. Provides general summaries of assessment findings and treatment recommendations.

- ◆ Counselor I:
 1. Appropriately uses comprehensive assessment instruments and interview strategies that are sensitive to age, gender, and culture of client.
 2. Uses data from a comprehensive assessment to form appropriate treatment recommendations.
 3. Seeks supervision and consultation, as necessary.
 4. Records assessment findings and treatment recommendations in the clinical record.

- ◆ Counselor II:
 1. Selectively uses assessment instruments and interview strategies that identify client needs and address age, gender, and cultural issues.
 2. Analyzes and interprets data to identify a breadth of treatment needs.
 3. Makes recommendations, to the client in manner sensitive to clients' personal characteristics.
 4. Collaborates with supervisor, consultants, and the treatment team, as necessary.
 5. Documents assessment findings and treatment recommendations, in the clinical record and in the form of assessment reports for referring agencies.

- ◆ Clinical Supervisor:
 1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding the process through which the counselor collaborates with the client, and others, to gather and interpret information necessary for planning treatment and evaluating client progress.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) regarding the process through which the counselor collaborates with the client, and others, to gather and interpret information necessary for planning treatment and evaluating client progress.
2. Supervisory observation of individual counselor knowledge and skills related to the process through which the counselor collaborates with the client, and others, to gather and interpret information necessary for planning treatment and evaluating client progress.

1. c. Treatment Planning: A collaborative process through which the counselor and client develop desired treatment outcomes and identifies strategies to achieve them. At a minimum, the treatment plan addresses the identified substance use disorders, as well as issues related to treatment progress, including relationships with family and significant others, employment, education, spirituality, health concerns, and legal needs.

The counselor is able to:

- a.) Obtain and interpret all relevant assessment information;
- b.) Explain assessment findings to the client and significant others involved in potential treatment;
- c.) Provide the client and significant others with clarification and further information as needed;
- d.) Examine treatment implications, including Alaska Native/American Indian traditional treatment issues, in collaboration with the client and significant others;
- e.) Confirm the readiness of the client and significant others to participate in treatment;
- f.) Prioritize client needs in the order they will be addressed;
- g.) Formulate mutually agreed upon and measurable treatment outcome statements for each need;
- h.) Identify appropriate strategies for each outcome;
- i.) Coordinate treatment activities and community resources with prioritized client needs in a manner consistent with the client's diagnosis and existing placement criteria;
- j.) Develop with the client a mutually acceptable plan of action and method for monitoring and evaluating progress;
- k.) Inform client of confidentiality rights, program procedures that safeguard them, and the exceptions imposed by regulations; and
- l.) Reassess the treatment plan at regular intervals as when indicated by changing circumstances.

Specific Competency by Level:

- ◆ Counselor Technician:
 1. Reviews general assessment findings with the client and recommends a treatment plan to address substance use disorder.
 2. Asks if the client is willing to follow the plan.
 3. Identifies others who the client can involve in the treatment process.
 4. Incorporates community resources as appropriate to the treatment plan.
 5. Informs the client of his/her confidentiality rights and exceptions imposed by statute.
 6. Assesses client progress in achieving the goals identified in the treatment plan.

- ◆ Counselor I:
 1. Reviews assessment findings and interprets the results to the client and significant others.

2. Confirms client readiness for treatment
3. Reviews a comprehensive treatment plan with the client and significant others, including implications of full compliance on the client's daily life.
4. Coordinates treatment activities with community resources to address prioritized client's needs.
5. Informs the client of his/her confidentiality rights, safeguards to protect confidentiality, and exceptions imposed by statute.
6. Reassesses the treatment plan at regular intervals or when indicated to adjust the plan.

◆ **Counselor II:**

1. Establishes a rapport with the client and appropriate significant others that facilitates a collaborative review of assessment information and treatment options.
2. Confirms client readiness for treatment and establishes a strategy for developing a comprehensive treatment plan.
3. Works collaboratively with the client and appropriate others to develop a comprehensive treatment plan that addresses priority needs of the client, desired treatment outcomes, an agreed upon plan of action, and reassessment plan.
4. Works with the client to align treatment activities with community resources that strategically address client's needs.
5. Keeps the client involved in review of progress while respecting and communicating the rights to confidentiality and safeguards to the client, and clearly communicates exceptions imposed by the state.

◆ **Clinical Supervisor:**

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding the collaborative process through which the counselor and client develop desired treatment outcomes and identifies strategies to achieve them. These strategies includes how the treatment plan addresses the identified substance use disorders, as well as issues related to treatment progress, including relationships with family and significant others, employment, education, spirituality, health concerns, and legal needs.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) regarding the process through which the counselor and client develop desired treatment outcomes and identifies strategies to achieve them.
2. Supervisory observation of individual counselor knowledge and skills related to the process through which the counselor and client develop desired treatment outcomes and identifies strategies to achieve them.

- 1. d. Referral:** The process of facilitating the client's utilization of available support systems and community resources to meet needs identified in clinical evaluation and/or treatment planning.

The counselor is able to:

- a.) Establish and maintain relations 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 to address unmet needs;
- b.) Continuously assess and evaluate referral resources to determine their appropriateness;
- c.) Differentiate between situations in which it is most appropriate for the client to self-refer to a resource and instances requiring counselor referral;
- d.) Arrange referrals to other professionals, agencies, community programs, or other appropriate resources to meet client needs;
- e.) Explain in clear and specific language the necessity for and process of referral to increase the likelihood of client understanding and follow through;
- f.) Exchange relevant information with the agency or professional to whom the referral is being made in a manner consistent with confidentiality regulations and generally accepted professional standards of care; and
- g.) Evaluate the outcome of the referral.

Specific Competency by Level:

◆ Counselor Technician:

1. Is aware of civic groups, agencies, other professionals, and governmental entities that provide referral services.
2. Refers clients for services that are not offered by his/her agency.
3. Identifies for the client how to obtain the referral services.
4. Sends client information to receiving agencies, when requested.
5. Includes receiving agency reports in client's record.

◆ Counselor I:

1. Establishes and maintains relationship with selected agencies and other professionals, by learning about their services and making client referrals.
2. Considers community referral services in planning comprehensive treatment with client.
3. Makes referrals to community services that supplement agency treatment options.
4. Recommends self-referral services to the client and facilitates counselor referrals as necessary.
5. Clearly discusses the intended outcomes expected from referral services with the client.
6. Works with the receiving agency to exchange relevant and appropriate information, consistent with the client's rights to confidentiality and best professional practice.

7. Requests and reviews receiving agency reports on treatment progress and incorporate information in monitoring client's progress.

◆ **Counselor II:**

1. Consistently is involved in professional activities with other civic groups, agencies, and community professionals, to increase the breadth and availability of community services to clients having substance use disorders.
2. Utilizes referral resources to address key issues and maximize likelihood of achieving treatment goals.
3. Prepares client when self-referral is appropriate and facilitates referral when necessary to assure effective treatment.
4. Involves referral resources as part of the treatment team to meet the needs of the client, sharing appropriate information and treatment objectives within the limits of confidentiality and professional practice.
5. Involves the client in planning for referral services as part of the overall treatment plan to maximize benefits for the client.
6. Consistently evaluates the outcomes from referrals within the overall objective of the client's treatment plan.

◆ **Clinical Supervisor:**

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding the process of facilitating the client's utilization of available support systems and community resources to meet needs identified in clinical evaluation an/or treatment planning.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) regarding the process of facilitating the client's utilization of available support systems and community resources to meet needs identified in clinical evaluation an/or treatment planning.
2. Supervisory observation of individual counselor knowledge and skills related to the process of facilitating the client's utilization of available support systems and community resources to meet needs identified in clinical evaluation an/or treatment planning.

2. **Service Coordination:** The administrative, clinical, and evaluative activities that bring the client, treatment services, community agencies, and other resources together to focus on issues and needs identified in the treatment plan. Service coordination, which includes case management and client advocacy, establishes a framework of action for the client to achieve specified goals. It involves collaboration with the client and significant others, coordination of treatment and referral services, liaison activities with community resources and managed care systems, client advocacy, and ongoing evaluation of treatment progress and client needs.

2. a. Implementing the Treatment Plan: The counselor is able to:

- a.) Initiate collaboration with referral source;

- b.) Obtain, review, and interpret all relevant screening, assessment, and initial treatment-planning information;
- c.) Confirm the client's eligibility for admission and continued readiness for treatment and change;
- d.) Complete necessary administrative procedures for admission to treatment;
- e.) Establish accurate treatment and recovery expectations with the client and involved significant others including, but not limited to:
 - 1. nature of services,
 - 2. program goals,
 - 3. program procedures,
 - 4. rules regarding client conduct,
 - 5. schedule of treatment activities,
 - 6. costs of treatment,
 - 7. factors affecting duration of care,
 - 8. client's rights and responsibilities, and
- f.) Coordinate all treatment activities with services provided to the client by other resources.

Specific Competency by level:

◆ **Counselor Technician:**

- 1. Facilitates client entry to treatment services.
- 2. Provide information to referral sources when requested.
- 3. Reviews eligibility criteria for admissions and continued readiness for treatment with client.
- 4. Directs client to treatment admissions for completion of administrative enrollment procedures.
- 5. Relies on other treatment staff to coordinate community resources and collaborate with managed care services.
- 6. Adds treatment reports to client's records.

◆ **Counselor I:**

- 1. Establishes accurate client expectation regarding the treatment process.
- 2. Initiates collaboration with individual referral sources.
- 3. Reviews and provides relevant client information to referral sources, including desired treatment outcomes.
- 4. Works with client to determine eligibility for admission and continued readiness for treatment.
- 5. Facilitates completion of administrative procedures for admission to treatment.
- 6. Coordinates client involvement with community resources and collaborates with managed care services.
- 7. Reviews treatment activities and monitors client progress in reaching treatment objectives.

◆ **Counselor II:**

1. Provides leadership in planning, implementing and monitoring client treatment.
2. Maintains communication between the client, significant others, referral service providers, and managed care systems regarding treatment goals or expectations.
3. Works with the treatment team, the client and third party payers to determine eligibility for admission and assess continued readiness for treatment.
4. Reviews and coordinates necessary administrative procedures for admission to treatment.
5. Regularly assesses readiness for change and the need to adjust treatment plans to achieve maximum benefit.
6. Coordinates all treatment activities with clients, service providers, community resources and managed care systems.

◆ **Clinical Supervisor:**

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding all elements of treatment plan implementation.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) regarding all elements of treatment plan implementation.
2. Supervisory observation of individual counselor knowledge and skills related to all elements of treatment plan implementation.

2.b. Consulting: The counselor is able to:

- a.) Summarize client's personal and cultural background, treatment plan, recovery progress, and problems inhibiting progress purpose of assuring quality of care, gaining feedback, and planning changes in the course of treatment;
- b.) Understand terminology, procedures, and roles of other disciplines related to the treatment of substance use disorders;
- c.) Contribute as part of a multidisciplinary treatment team;
- d.) Apply confidentiality regulations appropriately; and
- e.) Demonstrate respect and nonjudgmental attitudes toward clients in all contacts with community professionals and agencies.

Specific Competency by Level:

◆ **Counselor Technician:**

1. Provides basic summary that lacks specific details, of the client's background, treatment plan, recovery progress, and problems inhibiting progress to supervisor, when summary is requested.
2. Has limited understanding of terminology, procedures, and the roles of other disciplines related to the treatment of addiction that interferes with collaborative treatment planning.
3. Seeks supervision to assure compliance with confidentiality regulations.

4. Complies with all treatment team decisions regarding client care.
5. Provides basic client information to the multi-disciplinary treatment team.
6. Is developing nonjudgmental means of communicating with other professionals or agencies.

◆ Counselor I:

1. Summarizes critical client history, treatment plan, recovery progress, and problems inhibiting progress.
2. Understands terminology, procedures, and the roles of other disciplines related to the treatment of addiction sufficiently to follow discussion of treatment options.
3. Effectively participates as a member of a multi-disciplinary treatment team.
4. Applies correctly confidentiality-related legal restrictions on the sharing of client information.
5. Demonstrates respect and nonjudgmental attitudes toward the client in all contacts with other professionals or agencies.

◆ Counselor II:

1. Provides leadership to the treatment team in summarizing critical client background information, treatment plan, recovery progress, and problems inhibiting progress.
2. Facilitates collaborative understanding and effective planning by the treatment team.
3. Uses understanding of terminology, procedures, and the roles of other disciplines to facilitate collaborative treatment planning with other professionals, and community agencies.
4. Provides leadership to a multi-disciplinary treatment team. Correctly interprets confidentiality-related legal restrictions or the sharing of client information and applies them in complex multi-disciplinary collaboration.
5. Establishes and reinforces a tone of respect and nonjudgmental attitudes toward the client in all contacts with other professionals or agencies.

◆ Clinical Supervisor:

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding all elements of the consultation process.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) regarding all elements of the consultation process.
2. Supervisory observation of individual counselor knowledge and skills related to all elements of the consultation process.

2. c. Continuing Care (Assessment and Treatment Planning): The counselor is able to:

- a.) Maintain ongoing contact with the client and involved significant others to ensure adherence to the treatment plan;
- b.) Understand and recognize stages of change and other signs of treatment progress;
- c.) 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;
- d.) Describe and document treatment process, progress, and outcome;
- e.) Use accepted treatment outcome measures;
- f.) Conduct continuing care, relapse prevention, and discharge planning with the client and involved significant others;
- g.) Document service coordination activities throughout the continuum of care; and
- h.) Apply placement, continued stay, and discharge criteria for each modality on the continuum of care.

Specific Competency by Level:

◆ **Counselor Technician:**

1. Upon request, reviews treatment progress with the client or other treatment providers.
2. Considers stages of change and observations of client behaviors to document treatment progress and outcome.
3. Implements treatment plan only after adequate discussion with other treatment team members.
4. Documents treatment process, progress, and outcomes in routine fashion. Uses a limited number of measures to document treatment outcome.
5. Displays caution or uncertainty in making referrals to other community services. Does not sufficiently feel competent enough to provide continuing care, relapse prevention, or discharge planning independently.
6. Maintains general documentation of case management activities throughout the course of treatment.
7. Plans placement, continued stay, and discharge in close collaboration with supervisor or other members of the treatment team.

◆ **Counselor I:**

1. Keeps client involved significant others and other treatment providers informed of treatment progress.
2. Recognizes and reports culturally appropriate indicators of change and other signs of treatment progress.
3. Identifies needs for altering client's treatment plan and discusses treatment options with other treatment team members, the client and involved significant others.
4. Summarizes and documents treatment process, progress, and results in accordance with administrative policy and procedure. Uses accepted measures of treatment outcome.
5. Recommends referral needed community or professional resources.
6. Provides effective continuing care, relapse prevention, and discharge planning.

7. Maintains accurate documentation of case management activities throughout the course of treatment.
8. Appropriately uses placement, continued stay, and discharge criteria for each modality on the continuum of care to assure progress toward treatment goals.

◆ **Counselor II:**

1. Implements and monitors client treatment plan, effectively working with the client and other treatment providers to assure adherence to the plan and progress toward treatment goals.
2. Uses knowledge of client's culture and signs of treatment progress to make necessary modifications to the treatment plan.
3. Discusses treatment plan changes with client and other treatment team members.
4. Maintains the involvement of the client and other treatment team members in the ongoing development of the treatment plan by sharing summaries and documentation of treatment processes, progress and outcomes.
5. Works with the client and treatment team members to identify referral opportunities to other community and professional services.
6. Works with client and other treatment team members to effectively plan and implement continuing care, relapse prevention, and discharge planning.
7. Provides accurate documentation of case management activities throughout the course of treatment to treatment team members, client, and involved significant others, as appropriate.
8. Effectively applies placement, continued stay, and discharge criteria for each modality on the continuum of care.

◆ **Clinical Supervisor:**

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding all elements of the continuing care (assessment and treatment planning) process.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) regarding all elements of the continuing care (assessment and treatment planning) process.
2. Supervisory observation of individual counselor knowledge and skills related to all elements of the continuing care (assessment and treatment planning) process.

3. **Counseling:** A collaborative process that facilitates the client's progress toward meeting treatment goals and objectives. Counseling includes methods that are sensitive to individual client characteristics and to the influence of significant others, as well as the client's cultural and social context. Competence in counseling is built upon an understanding of, appreciation of, and ability to appropriately the contributions of various addiction counseling models as they apply to modalities of care for individuals, groups, families, couples, and significant others.

3. a. Individual Counseling: The counselor should be able to:

- a.) Establish a helping relationship with the client characterized by warmth, respect, genuineness, concreteness, and empathy;
- b.) Facilitate the client's engagement in the treatment and recovery process;
- c.) Work with the client to establish realistic, achievable goals consistent with achieving and maintaining recovery;
- d.) Promote client knowledge, skills, and attitudes that contribute to a positive change in substance use behaviors;
- e.) Encourage and reinforce client actions determined to be beneficial in progressing toward treatment goals;
- f.) Work appropriately with the client to recognize and discourage all behaviors inconsistent with progress toward treatment goals;
- g.) Recognize how, when, and why to involve the client's significant others in enhancing or supporting the treatment plan;
- h.) Promote client knowledge, skills, and attitudes consistent with the maintenance of health and prevention of Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS), tuberculosis (TB), sexually transmitted diseases (STDs), and other infectious diseases;
- i.) Facilitate the development of basic and life skills associated with recovery;
- j.) Adapt counseling strategies to the individual;
- k.) Make constructive therapeutic responses when client's behavior is inconsistent with stated recovery goals;
- l.) Apply crisis management skills; and
- m.) Facilitate the client's identification, selection, practice of strategies, and when appropriate the use of "traditional healing practices", that help sustain the knowledge, skills, and attitudes needed for maintaining treatment progress and preventing relapse.

Specific Competency by Level:

- ◆ Counselor Technician:
 1. Addresses all clients in a caring and respectful manner that encourages clients to engage in the treatment process.
 2. Treats all clients similarly, generally using limited individualized counseling strategies that are sensitive to the unique characteristics of the client.
 3. Reviews beneficial and detrimental behaviors with client that generally impacts progress toward treatment goals.
 4. Typically does not immediately recognize need for therapeutic change strategies when appropriate.
 5. Makes general recommendations regarding the involvement of significant others to enhance or support the treatment plan.
 6. Reviews information with client about health maintenance, including the prevention of infectious diseases, and basic and life skills associated with recovery.
 7. Due to limited experience does not anticipate crisis events. Relies on supervisor or other team members to provide therapeutic response to treatment events.

8. Addresses follow-up and maintenance of treatment gains in standard fashion. Is not yet proficient in developing individualized continuing care or relapse prevention plans.

◆ Counselor I:

1. Establishes an effective working relationship with the client, which facilitates client cooperation in the treatment process.
2. Recommends to the client and treatment team counseling strategies that are sensitive to the individual characteristics of the client, including disability, gender, sexual orientation, developmental level, acculturation, ethnicity, age, and health status.
3. Encourages and reinforces clients' behaviors consistent with treatment goals.
4. Intervenes when client behavior impedes treatment progress.
5. Generally involves client's significant others to enhance or support the treatment strategy when appropriate.
6. Facilitates client knowledge, skills, and attitudes consistent with the maintenance of good health, including the prevention of infectious diseases and the development of basic and life skills associated with recovery.
7. Intervenes effectively in crisis situations, providing appropriate responses and working with other professionals and community agencies.
8. Provides client support for maintaining treatment progress, doing relapse prevention, and participating in continuing care.

◆ Counselor II:

1. Establishes a therapeutic partnership with the client, characterized by warmth, respect, genuineness, concreteness and empathy.
2. Works mutually with the client to establish realistic, achievable goals consistent with achieving and maintaining recovery.
3. Establishes with the client and treatment team, behavior change strategies that are sensitive to the individual characteristics of the client, including disability, gender, sexual orientation, developmental level, acculturation, ethnicity, age, and health status.
4. Routinely reviews treatment progress with client to reinforce beneficial client actions and discourage detrimental behaviors.
5. Makes changes to therapeutic approach and treatment plan when necessary.
6. Strategically involves client's significant others to enhance or support the treatment plan.
7. Assures client acquisition of knowledge, skills, and attitudes consistent with the maintenance of good health, including the prevention of infectious diseases and the development of basic and life skills associated with recovery.
8. Works with clients to anticipate, avoid, and manage crisis situations during the course of treatment.
9. Facilitates follow-up contacts and assists client in maintaining treatment progress, preventing relapse, and participating in continuing care.

◆ Clinical Supervisor:

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding methods that are sensitive to individual client characteristics and to the influence of significant others, as well as the client's cultural and social context.
2. Demonstrates highest level of competence in counseling built upon an understanding of, appreciation of, and ability to appropriately the contributions of various counseling/therapy models as they apply to individual counseling services.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) regarding methods that are sensitive to individual client characteristics and to the influence of significant others, as well as the client's cultural and social context. This assessment will also evaluate the understanding of, appreciation of, and ability to appropriately the contributions of various counseling/therapy models as they apply to individual counseling services.
2. Supervisory observation of individual counselor knowledge and skills regarding methods that are sensitive to individual client characteristics and to the influence of significant others, as well as the client's cultural and social context. This assessment will also evaluate the understanding of, appreciation of, and ability to appropriately the contributions of various counseling/therapy models as they apply to individual counseling services.

3. b. Group Counseling: The counselor should be able to:

- a.) Describe, select, and appropriately use strategies from accepted and culturally appropriate models for group counseling with clients with substance use disorders;
- b.) 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;
- c.) Facilitate the entry of new members and the transition of exiting members;
- d.) Facilitate group growth within the established ground rules and movement toward group and individual goals by using methods consistent with group type;
- e.) Understand the concepts of process and content, and shift the focus of the group when such an intervention will help the group move toward its goals;
- f.) Describe and summarize client behavior within the group for the purpose of documenting the client's progress and identifying needs and issues that may require a modification in the treatment plan;
- g.) Collaborates with treatment team members', regarding client completion; and
- h.) Maintains documentation of group interactions with few references to individual clients.

Specific Competency by Level:

- ◆ Counselor Technician:

1. Assists in creating counseling groups using generally accepted models, skills and strategies.
2. Relies on existing counseling group models to help structure new groups.
3. Works as a co-facilitator of counseling groups, developing skills in promoting group growth and facilitating the realization of group goals.
4. Orients new members and transitions exiting members from group.
5. Collaborates with treatment team members' regarding client completion of group.
6. Maintains documentation of group interactions with few references to individual clients.

◆ **Counselor I:**

1. Forms counseling groups using generally acceptable and culturally appropriate models.
2. Facilitates and manages counseling groups by following agency guidelines for 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.
3. Follows agency policies for adding and transitioning exiting members from counseling group. Introduces new group members to established ground rules and maintains a focus on accomplishing group and individual goals within the group.
4. Documents client behavior within the group and reviews observations with treatment team or supervisor to facilitate continued client progress.

◆ **Counselor II:**

1. Establishes counseling groups to strategically address client needs using acceptable and culturally appropriate models.
2. Carefully plans the creation, facilitation and management of a counseling group to optimize the benefit for clients by determining group type, purpose, size, and leadership; recruiting and selecting members; establishing and monitoring group goals and clarifying behavioral ground rules for participating; identifying outcomes; and determining criteria and methods for termination or graduation from the group.
3. Strategically considers additions and transition of exiting members from the group to serve the needs of the individuals and the group as a whole. Provides effective introductions and management of group change that successfully sustains the progress of the group.
4. Maintains documentation and shares summary of client behavior within the group with the treatment team. Carefully reviews observations with team to facilitate continued client progress.

◆ **Clinical Supervisor:**

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding methods of group counseling.
2. Demonstrates highest level of competence in the methods of group counseling.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) regarding the methods of group counseling.
2. Supervisory observation of individual counselor knowledge and skills regarding the methods of group counseling.

3. c. Family, Couple and Significant Other Counseling: The counselor should be able to:

- a.) Understand the characteristics and dynamics of families, couples, and significant others affected by substance use;
- b.) Be familiar with and appropriately use models of diagnosis and intervention for families, couples, and significant others, including extended, kinship, or tribal family structures;
- c.) Facilitate the engagement of selected members of the family, couple, or significant others in the treatment and recovery process;
- d.) Assist families, couples, and significant others to understand the interaction between the system and substance use behaviors; and
- e.) Assist families, couples, and significant others to adopt strategies and behaviors that sustain recovery and maintain healthy relationships.

Specific Competency by Level:

◆ Counselor Technician:

1. Knows the general characteristics and dynamics of families, and significant others, and appreciates the value of involving others in the treatment and recovery process.
2. Recommends treatment participation by selected significant others, including members in extended, kinship, or tribal family structures.
3. Reviews with client's family and/or significant others the general interaction between home and family systems and addiction, and recommends strategies and behaviors that generally support recovery and build healthy relationships.

◆ Counselor I:

1. Understands the characteristics and dynamics of the client's family, and/or significant others, and uses that understanding to plan appropriate treatment for client.
2. Encourages selected members of the client's family and/or significant others, including members in extended, kinship, or tribal family structures, to engage in the treatment and recovery process.
3. Uses culturally appropriate models for diagnosis and intervention.
4. Facilitates client's family, and/or significant others to understand the interaction between home and family systems and addiction, and works with significant

others to identify strategies and behaviors that sustain recovery and build healthy relationships.

◆ **Counselor II:**

1. Uses knowledge of the characteristics and dynamics of the client's family and/or significant others to establish a strong network of support for the client's treatment and recovery.
2. Engages selected members of the client's family and/or significant others, including members in extended, kinship, or tribal family structures, in the treatment and recovery process.
3. Designs culturally appropriate methods for diagnosis and intervention.
4. Actively works with client's family, and/or significant others to develop a shared understanding of the interaction between home and family systems and addiction.
5. Facilitates strategies that sustain recovery, build and maintain healthy relationships.

◆ **Clinical Supervisor:**

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding the methods of family, couple and significant other counseling.
2. Demonstrates highest level of competence in the methods of family, couple and significant other counseling.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) regarding the methods of family, couple and significant other counseling.
2. Supervisory observation of individual counselor knowledge and skills regarding the methods of family, couple and significant other counseling.

4.Client, Family, and Community Education: The process of providing clients, families, significant others, and community groups with information on risks related to psychoactive substance use, as well as available prevention, treatment, and recovery resources.

The counselor should be able to:

- a.) Provide culturally relevant formal and informal education programs that raise awareness and support substance abuse prevention and/or the recovery process;
- b.) Describe factors that increase the likelihood for an individual, community, or group to be at-risk for, or resilient to, psychoactive substance use disorders;
- c.) Sensitize others to issues of cultural identity, ethnic background, age, and gender in prevention, treatment, and recovery;
- d.) Describe warning signs, symptoms, and the course of substance use disorders. Describe how substance use disorders affect families and concerned others;
- e.) Describe the continuum of care and resources available to family and concerned others;

- f.) Describe principles and philosophy of prevention, treatment, and recovery;
- g.) Understand and describe the health and behavior problems related to substance use, including transmission and prevention of HIV/AIDS, TB, STDs, and other infectious diseases; and
- h.) Teach life skills, including but not limited to, stress management, relaxation, communication, assertiveness, and refusal skills.

Specific Competency by Level:

◆ Counselor Technician:

- 1. Is generally aware of community substance abuse prevention organizations and activities.
- 2. Shares with clients limited information about: (a) risk factors for addiction; (b) cultural, ethnic, age and gender factors in prevention, treatment, and recovery; (c) effects of chemical dependency on families and significant/concerned others and (d) health and life skills.
- 3. Is generally aware of the warning signs, symptoms, and the course of chemical dependency; the continuum of care; and the principles and philosophies of prevention, treatment, and recovery.

◆ Counselor I:

- 1. In the context of the treatment setting, participates in substance abuse prevention and awareness activities, including structured education programs and informal sharing of prevention, substance abuse and recovery information.
- 2. Teaches clients in addiction treatment information and skills related to (a) risk factors for addiction; (b) cultural, ethnic, age and gender factors in prevention, treatment, and recovery; (c) impact of chemical dependency on families and significant/ concerned others and (d) health and life skills.
- 3. Relays to clients, families and others knowledge about the warning signs, symptoms, and the course of chemical dependency; the continuum of care; and the principles and philosophies of prevention, treatment, and recovery.

◆ Counselor II:

- 1. Assists in the delivery of community substance abuse prevention and awareness activities, including structured education programs and prevention oriented activities.
- 2. Incorporates into addiction treatment and recovery services information and training about (a) risk factors for addiction; (b) cultural, ethnic, age, and gender factors in prevention, treatment, and recovery; (c) impact of chemical dependency on families and significant/concerned others; and (d) health and life skills.
- 3. Uses and shares knowledge with clients, families and others about the warning signs, symptoms, and the course of chemical dependency; the continuum of care; and the principles and philosophies of prevention, treatment, and recovery.

◆ Clinical Supervisor:

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding the process of providing clients, families, significant others, and community groups with information on risks related to psychoactive substance use, as well as available prevention, treatment, and recovery resources.
2. Demonstrates highest level of competence in the process of providing clients, families, significant others, and community groups with information on risks related to psychoactive substance use, as well as available prevention, treatment, and recovery resources.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) regarding the process of providing clients, families, significant others, and community groups with information on risks related to psychoactive substance use, as well as available prevention, treatment, and recovery resources.
 2. Supervisory observation of individual counselor knowledge and skills regarding the process of providing clients, families, significant others, and community groups with information on risks related to psychoactive substance use, as well as available prevention, treatment, and recovery resources.
- 5. Documentation:** The recording of the screening and intake process, assessment, treatment plan, clinical reports, clinical progress notes, discharge summaries, and other client-related data.

The counselor is able to:

- a.) Demonstrate knowledge of accepted principles of client record management;
- b.) 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;
- c.) Prepare accurate and concise screening, intake, and assessment reports;
- d.) Record treatment and continuing care plans that are consistent with agency standards and comply with applicable administrative rules;
- e.) Record progress of client in relation to treatment goals and objectives;
- f.) Prepare accurate and concise discharge summaries; and
- g.) Document treatment outcome, using accepted methods and instruments.

Specific Competency by Level:

◆ Counselor Technician:

1. Produces basic client records related to screening, intake, treatment, continuing care, progress toward goals and objectives, discharge summary, and treatment outcomes in consultation with other team members or the supervisor.
2. Is aware of and generally follows federal and state laws and agency guidelines regarding the confidentiality of client records.
3. Documents treatment outcome in accord with agency policy and procedures.

◆ Counselor I:

Alaska Commission For Behavioral Health Certification

1. Maintains client records related to screening, intake, treatment, continuing care, progress toward goals and objectives, discharge summary, and treatment outcomes that are accurate, concise, and useful for documenting agency involvement with a client.
 2. Carefully follows federal and state laws and agency guidelines to maintain the confidentiality of client records.
 3. Prepares accurate, timely, and concise client records consistent with applicable regulations or standards.
- ◆ **Counselor II:**
1. Maintains client records related to screening, intake, treatment, continuing care, progress toward goals and objectives, discharge summary, and treatment outcomes that are accurate, concise, and useful for coordinating treatment team planning, monitoring, and review.
 2. Protects the confidentiality of client records by working with treatment team members to establish appropriate record handling procedures consistent with federal and state laws and agency guidelines.
 3. Utilizes accurate, timely, and concise client record keeping to facilitate effective planning and monitoring of treatment and to appropriately discharge clients.
- ◆ **Clinical Supervisor:**
1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding the recording of the screening and intake process, assessment, treatment plan, clinical reports, clinical progress notes, discharge summaries, and other client-related data.
 2. Demonstrates highest level of competence in the recording of the screening and intake process, assessment, treatment plan, clinical reports, clinical progress notes, discharge summaries, and other client-related data.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) regarding methods of recording of the screening and intake process, assessment, treatment plan, clinical reports, clinical progress notes, discharge summaries, and other client-related data.
 2. Supervisory observation of individual counselor knowledge and skills regarding the recording of the screening and intake process, assessment, treatment plan, clinical reports, clinical progress notes, discharge summaries, and other client-related data.
- 6. Professional and Ethical Responsibility:** The obligations of an addiction counselor to adhere to accepted ethical and behavioral standards of conduct and continuing professional development.

The counselor will be able to:

- a.) Adhere to established professional codes of ethics that define the professional context within which the counselor works, in order to maintain professional standards and safeguard the client;
- b.) Adhere to Federal and State laws and agency regulations regarding the treatment of substance use disorders;
- c.) Interpret and apply information from current counseling and psychoactive substance use research literature to improve client care and enhance professional growth;
- d.) Recognize the importance of individual differences that influence client behavior and apply this understanding to clinical practice;
- e.) Utilize a range of supervisory options to process personal feelings and concerns about clients;
- f.) Conduct self-evaluations of professional performance applying ethical, legal, and professional standards to enhance self-awareness and performance;
- g.) Obtain appropriate continuing professional education;
- h.) Participate in ongoing supervision and consultation; and
- i.) Develop and utilize strategies to maintain one's own physical and mental health.

Specific Competency by Level:

◆ **Counselor Technician:**

- 1. Is aware of federal and state laws, agency regulations, and professional standards of ethical conduct.
- 2. Is aware of basic professional research literature.
- 3. Uses supervisors' evaluations to improve personal performance. Seeks continuing education opportunities consistent with personal development needs.
- 4. Engages in professional development through education and participation in regular supervision and consultation sessions as directed or required.
- 5. Builds an appreciation for recreation and maintenance of personal physical and mental health.

◆ **Counselor I:**

- 1. Adheres to federal and state laws, agency regulations, and professional standards of ethical conduct.
- 2. Interprets and applies information from current professional research literature to assure delivery of relevant and effective services.
- 3. Uses supervision, peer consultation, and self-evaluation to enhance self-awareness and improved personal performance.
- 4. Works with clients to adapt treatment to their individual characteristics and needs.
- 5. Participates in continuing education events regularly.
- 6. Uses professional development through education and participation in regular supervision and consultation sessions to enhance specific skill and knowledge needs.
- 7. Attends to own physical and mental health needs.

◆ **Counselor II:**

Alaska Commission For Behavioral Health Certification

1. Provides leadership to treatment teams in adhering to federal and state laws, agency regulations, and professional standards of ethical conduct.
2. Seeks, interprets and applies information from current professional research literature to enhance delivery of relevant and effective services.
3. Uses supervision, peer consultation, team performance, and self-evaluation to continually enhance self-awareness and personal performance.
4. Considers individual client characteristics and needs and integrates that understanding in the counselor's clinical practice to maximize treatment effectiveness.
5. Seeks professional development opportunities consistent with needs and interests.
6. Continually engages in professional development through education and participation in regular supervision and consultation sessions.
7. Develops habits for maintaining physical and mental health that serve as a model for other members of the treatment team.

◆ Clinical Supervisor:

1. Incorporates and uses all of the skills and knowledge of the Counselor II, and provides clinical leadership and guidance regarding the adherence to accepted ethical and behavioral standards of conduct and continuing professional development.
2. Demonstrates highest level of competence in the adherence to accepted ethical and behavioral standards of conduct and continuing professional development.

Methods of Measurement:

1. Knowledge assessment (may include written test and/or case presentation) regarding the obligations of an addiction counselor to adhere to accepted ethical and behavioral standards of conduct and continuing professional development.
2. Supervisory observation of individual counselor knowledge and skills regarding the obligations of an addiction counselor to adhere to accepted ethical and behavioral standards of conduct and continuing professional development.

Approved 7/04