ALCOHOLISM & SUBSTANCE ABUSE COUNSELOR AIDE

APPENDIX A

O*NET CODE 21-1093.00

This training outline is a minimum standard for Work Processes and Related Instruction. Changes in technology and regulations may result in the need for additional on-the-job or classroom training.

If any element in this training outline appears to be out of compliance with the facility’s approved policies and procedures, the facility’s approved policies and procedures take precedence. It is the sole responsibility of the facility to ensure that any expansion of the minimum work processes and/or related instructions is consistent with applicable Federal and/or New York State Regulations, the facility’s approved procedures, and the State Education Law governing the scopes of practices of licensed professionals.

WORK PROCESSES

Approximate Hours

A. Assessment

1. Participate in Health Insurance Portability and Accountability Act of 1996 (HIPAA) training; employ HIPAA Rules regarding privacy and security.

2. Gather and document relevant substance abuse use history information from client to obtain current status.

3. Provide assessments that are sensitive to the uniqueness of the individual by gaining knowledge about personality, cultures, lifestyles, gender, special needs and any other factors influencing client behavior.

4. Recognize the signs and symptoms of alcohol and substance abuse, intoxication and withdrawal by interpreting observable behavior, laboratory data, results of interviews and testing.

5. Determine if client is experiencing problems in addition to substance use disorders.

6. Provide corroborative information and a complete history by evaluating information obtained from sources other than the client.

7. Determine the client appropriateness and eligibility for placement in the continuum of treatment by assessing and matching client’s needs and treatment resources.

8. Recognize conditions that are outside the Counselor Aide’s expertise by evaluating relevant information indicating the
need for additional professional services in order to complete a comprehensive assessment.

9. Provide an accurate assessment of the client’s problem by selecting, administering, scoring, and interpreting standardized instruments that assess substance use disorders to develop the most appropriate course of treatment.

10. Assess the degree of risk of a client’s crisis situation by evaluating observed and reported behavior to determine which services are appropriate for stabilizing the client.

11. Explain to the client the rationale, purpose and procedures associated with the assessment process using appropriate methods and technology to promote understanding and compliance with the recommended course of treatment.

12. Document client’s psychological, social and physiological signs and symptoms of substance use disorders in order to formulate a treatment plan.

13. Ensure the provision of an integrated approach to diagnosis and treatment planning, by participating as an active member of the treatment team.

14. Promote understanding and compliance with the recommended course of treatment by explaining the results of a comprehensive biopsychosocial assessment.

15. Formulate mutually agreed upon goals, objectives, and treatment methods based upon assessments findings for the purpose of direct course of treatment.

16. Modify the treatment plan through collaboration with the client to ensure it reflects treatment needs as they change over time.

**B. Counseling 600**

(Recommended maximum caseload for individual counseling – 3 clients)

1. Establish a therapeutic relationship with clients and significant/ concerned others.

2. Individualized counseling strategies with the client in order to maximize utilization of treatment resources.

3. Provide information to client regarding the structure, expectations and limitations of counseling process.

4. Develop a recovery plan with client using appropriate counseling techniques to reduce the risk of relapse.
5. Assess the level of risk involved in a client’s crisis situation.

C. Case Management

1. Maintain client information about community resources and services by establishing contact with other service providers to evaluate the appropriateness of referring clients.

2. Match community resources with client needs to improve the effectiveness of treatment by paying particular attention to the cultural and lifestyle characteristics of the client.

3. Explain directly to the client the purpose and necessity for referral in order to ease the transition and facilitate client’s participation with other service providers.

4. Demonstrate proficiency in maintaining the client’s record by following prescribed standards.

5. Consult with supervisors, counselors, and other service providers by exchanging case findings, recommendations, treatment planning, and strategies for the client.

6. Involve client actively in coordinating services by explaining the need for outside consultation on a one-to-one setting.

7. Obtain client-informed consent by explaining the need for outside consultation.

8. Advocate for client’s interests in all areas of targeted needs by negotiating plans with appropriate systems to help resolve client’s problems.

9. Provide information and/or documentation to outside agencies through appropriate contacts.

10. Evaluate the effectiveness of case management activities through regular consultation with supervisors and peers.

D. Client and Family Education

1. Use current literature and research findings to educate individuals and others about the etiology and pathology of substance use disorders for recognizing warning signs and symptoms.

2. Use current literature and research findings to deliver culturally relevant formal and informal educational programs for clients and significant/concerned others to raise awareness of the prevention, treatment and recovery processes.

3. Instruct clients and significant/concerned others through lecture, workshops and discussion to understand the
influence of substance use disorders on families and other relationships.

4. Use resources from other health/behavioral professions to educate clients and significant/concerned others about the increased health risks associated with substance use and abuse.

5. Educate clients and significant/concerned others using appropriate methods and technology regarding the relationship between lifestyle choices and substance use to understand available alternatives.

6. Discuss substance use disorders with other professionals through formal and informal meetings to examine the roles professionals play in the prevention, treatment and recovery process.

7. Translate information about techniques, such as stress management, relaxation, communication, assertiveness and refusal skills in a culturally sensitive manner using appropriate methods and technology so that clients may improve their basic life skills.

8. Provide education to the client about self help and peer support by supplying appropriate information to encourage participation.

9. Inform clients and significant/concerned others about the biomedical effects of psychoactive substances using appropriate instructional techniques to raise awareness and affect behavioral change.

E. Supervising Activities of Daily Living

(In non-prison residential facilities)*

1. Communicate house rules and regulations to clients.

2. Constant monitoring locations of clients.

3. Supervise opening of client mail.

4. Approve client requests to leave facility for specific purpose.

5. Assign chores.

6. Supervise completion of chores.

7. Assign consequences (penalties) for such behavior as failure to complete chores or to return to facility as scheduled.

8. Accompany clients to outside meetings and activities (as applicable).

9. Model appropriate behaviors and emotions for clients.
10. Monitor clients constantly. Verbally reinforce clients’ goals and expectations on a continuous basis.

11. Supervise clients’ taking of prescribed medications.

12. Help facilitate the resolution of conflicts between clients.

13. Oversee redemption of client privileges (if applicable).

F. Communication and Recordkeeping

1. Keep written records of group and individual counseling sessions.

2. Meet on a regular basis with other members of the treatment team to discuss client’s behavior, progress and suggest strategies.

3. Keep daily activity logs (if applicable).

4. Complete unusual incident reports.

5. Practice in preparing discharge plan for client (if applicable).

G. Professional Responsibility

1. Behave in an ethical manner by adhering to established professional codes of ethics and standards of practice.

2. Follow appropriate polices and procedures by adhering to Federal, State/Provincial and Agency Regulations regarding substance use disorder treatment to protect and promote client rights.

3. Recognize the importance of individual differences by gaining knowledge about personality, cultures, lifestyles, gender, special needs and any other factors influencing client behavior to provide services that are sensitive to the uniqueness of the individual.

4. Practice personal wellness by continuously assessing life choices and circumstances with the willingness to change behavior and seek assistance as appropriate.

5. Maintain effective relations with professional, Governmental entities, and community groups through open communication and supportive involvement to advocate for appropriate resources.

6. Recognize personal biases, feelings, concerns and other issues using a range of options to prevent these variables from interfering with the counseling process.

Approximate Total Hours 2000
*Apprentices working in correctional facilities and in non-residential settings will not perform this work process. They will devote the hours to further master the other work processes in this outline.

Apprenticeship work processes are applicable only to training curricula for apprentices in approved programs. Apprenticeship work processes have no impact on classification determinations under Article 8 or 9 of the Labor Law. For guidance regarding classification for purposes of Article 8 or 9 of the Labor Law, please refer to https://dol.ny.gov/public-work-and-prevailing-wage
ALCOHOLISM AND SUBSTANCE ABUSE COUNSELOR AIDE

APPENDIX B

RELATED INSTRUCTION

Safety
1. Trade Safety
2. Violence Prevention
3. HIPAA and Confidentiality
4. First Aid and CPR
5. Sexual Harassment Prevention Training – must comply with Section 201-g of the Labor Law

Occupational Theory and Science
1. General Psychology, Abnormal Psychology, and Developmental Psychology
2. Knowledge of Alcoholism and Substance Abuse
3. Basic Knowledge: Physical and Pharmacological Effects
4. Knowledge of 12-Step and Self-Help Approaches
5. Theories of Addiction
6. Alcoholism and Substance Abuse Counseling
7. Individual Counseling
8. Group Counseling
9. Family and Significant Other Counseling
10. Communicable Diseases: HIV/AIDS; STD’s; TB; HEPATITIS
11. Special Populations
12. MICA’s; Women; Gays/Lesbians; Adolescents
13. Human Growth and Development Assessment
14. Clinical Evaluation; Treatment Planning; Case Management and Patient/Family Education
15. Interviewing Techniques
16. Clinical Recordkeeping
17. Case Management and Referral
18. Cultural Diversity
19. Professional and Ethical Responsibilities
20. Counselor-Client Relationships
21. Counselor Ethics
22. Confidentiality/Legal Issues/Documentation
23. Counselor Aide Wellness

Other
1. Oral and Written Communication Skills
2. Community and Human Services
3. Time Management
4. Assertiveness Training

Other Related Courses, as necessary

144 hours of Related Instruction are required for each Apprentice for each year.

Appendix B topics are approved by New York State Education Department.