

Workforce Development Collaborative Serving Children and Adolescents of South Carolina

On behalf of the
South Carolina Department of Alcohol and Other Drug Abuse Services
South Carolina Department of Mental Health

In partnership with
South Carolina Department of Juvenile Justice
University of South Carolina, College of Social Work
South Carolina Department of Health and Human Services
South Carolina Association of Alcohol & Drug Abuse Counselors

Workforce Competencies

Introduction

This document has been prepared as a step in the process of developing and implementing an effective, system-wide training effort to improve South Carolina's public workforce capability to provide effective community-based behavioral health services. This document has built upon the work of several people, borrowing literature from various competency formulations relevant to this project (e.g., *Addiction Counseling Competencies* of TAP 21, *the Proposed Maryland Mental Health Workforce Core Competencies*, *Children's Behavioral Health Training Initiative*, Washington DC, *National Technical Assistance Center for Children's Mental Health Issues*, Georgetown University).

A survey was also created using as a guide, the workforce development initiative done by the Addiction Technology Transfer Center of New England (ATTC-NE). It was administered electronically through survey monkey from November 06-December 15, 2006 at <http://www.surveymonkey.com/s.asp?u280892444124>. A total of 774 responses were received from professionals employed at various child serving agencies in South Carolina.

Many lives are enhanced or saved because of the dedication and work carried out by Behavioral Health Counselors. Knowledgeable and well-trained counselors and staff deliver services that help clients move from life-threatening problems to successful recovery. The work of promoting children's behavioral health depends on people, from parents to professionals, volunteers to friends, teachers to probation officers.

The fields of addictions and mental health are very broad in scope. Different professional standards exist across delivery systems, even though each system may work with individuals from the same population who have similar problems. We have developed core competencies to help providers, supervisors, and staff deal with psychoactive use, substance abuse and dependence, severe emotional disturbances, and co-occurring disorders among their clients. The target audiences for this document are those individuals who work with children and adolescents with substance abuse related issues.

We recognize that there is a subset of individuals who have both substance abuse and mental health concerns that are co-occurring. Co-Occurring disorders are defined as the coexistence of two or more disorders, at least one which relates to the use of alcohol and/or other drugs and at least one of which is a mental health disorder.

This document is intended to present a training based in core competencies to assure qualified behavioral health professionals are available to work with children, adolescents, and families with mental health, substance abuse, and co-occurring needs. This document is intended to serve as a guide in designing cross-training curriculums for professionals working in the mental health and substance abuse treatment systems.

PREAMBLE

An individual who engages in professional work in the various treatment delivery systems, such as those that provide addiction and mental health services to individuals and families, is assumed to have mastered basic competencies. Such a professional is required to possess at a minimum an understanding of addiction and its processes, mental health issues that impact all individuals, screening and assessment procedures and basic crisis management skills. This document serves as a guide to address the training standards of those who work in areas that are beyond basic care, and seek to meet the needs of children and adolescents in the multiple treatment systems that provide prevention, treatment and crisis management for substance abuse and mental health problems. It is designed to provide a template for the identification of core competencies that can be expected, at a minimum, to meet the needs of this unique group.

In addition to basic knowledge, this document assumes that individuals who come to this field are in possession of attitudes and values that are necessary to provide caring and effective services to children and adolescents with substance abuse and mental health issues. Above all, professionals are expected to come prepared with attitudes that reflect openness to information that may differ from personally held views. They should value new knowledge and have a willingness to be trained in new theories, models and methods. They should have the ability and willingness to engage in the evaluation of their own personal practice.

Professionals are called upon to recognize the larger environmental systems that impact youth, and be able to see differences unique to the individual client as well as seeing differences that occur within larger groups. Critical thinking skills are required that will lead not only to an interest in scientific research findings, but a willingness to reserve judgment until all aspects of the clinical assessment are complete. This document also assumes a professional willingness to engage in collaboration and routinely seek supervision.

While attention to the general problem of substance abuse among children, adolescents and families has increased, equivalent attention needs to be devoted to the unique treatment needs of children, adolescents, and their families, and to the specific needs of adolescents with co-occurring problems. Professionals who work with these individuals should be among the best trained, best prepared, willing and able to provide access to a complete range of comprehensive and integrated treatment approaches and services

Core Competencies

Tier Breakdown

Tier 1-Providers and Supervisors of direct clinical delivery and/or care

- Counselors
- Psychologist
- Social Workers
- Behavioral Health Medical Personnel

Tier 2- Staff provides these services in a more concentrated manner

- Intensive Case Managers (e.g. Bridge Counselors, Intensive Supervision Officers)
- Case Managers
- Human Service Workers

Tier 3- Support/ Direct

Level 1: Provides Direct Supervision (monitoring of day-to-day activities)

- Residential Assistants/Specialist
- Juvenile Correctional Officers (Security)
- Human Service Specialist (Mental Health Specialist)

Level 2: Provides administrative support

- Receptionist
- Other Support Personnel

Core Competencies for Children/Adolescents

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Core Competencies

I. Understanding childhood and adolescence substance abuse	Tier I	Tier II	Tier III
1. Understand the underlying assumptions and theoretical basis of diverse models of childhood and adolescence substance abuse from fields such as medicine, psychology, sociology, and other disciplines.			
a. Knowledge of substance abuse models	√	√	√
b. Ability to evaluate different models	√	√	
c. Ability to access the literature that supports various models	√	√	
2. Approach addiction from an ecological perspective that takes into account multiple contexts within which addiction and substance abuse exist.			
a. Learn Basic concepts of social, political, economic, and cultural systems and their impact on drug-taking activity.	√	√	
b. Examine the history of licit and illicit drug use	√	√	
c. Be able to access and utilize research reports and other literature identifying risk and resiliency factors for substance use.	√	√	
d. Ability to access statistical knowledge regarding the incidence and prevalence of substance use disorders in the adolescent population.	√	√	
3. Describe the behavioral, psychological, physical health, and social effects of psychoactive substances on the adolescent user and significant others.			
a. Learn fundamental concepts of pharmacological properties and effects of all psychoactive substances.	√	√	
b. Demonstrate knowledge of the continuum of drug use, such as initiation, intoxication, harmful use, abuse, dependence, withdrawal, craving, relapse, and recovery as it uniquely pertains to adolescents.	√	√	
c. Ability to identify behavioral, psychological, social, and health effects of psychoactive substances.	√	√	
d. The effects of chronic substance use on consumers, significant others, and communities within a social, political, cultural, and economic context.	√	√	
e. The relationship between infectious disease and substance use.			
II. Understanding Mental Health Issues			
1. Understand a variety of models and theories related to child psychopathology.			
a. Knowledge of child psychology and psychopathology	√	√	√
b. Ability to evaluate diverse theories of mental illness and their etiology	√	√	
c. Ability to access literature that informs and improves practice.	√	√	
2. Recognize the social, political, economic, and cultural context within which mental illness develops.			

	Tier I	Tier II	Tier III
a. Learn Basic concepts of social, political, economic, and cultural systems and their impact on the development of mental illness	√	√	√
b. Be able to access and utilize research reports and other literature identifying risk and resiliency factors for youth.	√	√	
c. Ability to access statistical knowledge regarding the incidence and prevalence of psychiatric disorders in the adolescent population.	√	√	
3. Describe the behavioral, psychological, physical health, and social affects of psychiatric disorders on the adolescent and significant others.			
a. Know the diagnostic criteria of all relevant psychiatric disorders that impact youth.	√	√	
b. Ability to identify behavioral, psychological, social, and health effects of psychiatric disorders.	√	√	
c. Know the effects of psychiatric disorders on consumers, significant others, and communities within a social, political, cultural, and economic context.	√	√	
d. Develop a working of knowledge of psychotropic medications and how they impact the individual.	√	√	
e. Know the interaction between medical and psychiatric disorders.	√	√	
4. Recognize the potential for substance use disorders to mimic a variety of medical and psychological disorders and the potential for medical and psychological disorders to co-exist with addiction and substance abuse.			
a. Identify symptoms of substance use disorders that are similar to those of other medical and/or psychological disorders and how these disorders interact.	√	√	
b. Learn the medical and psychological disorders that most commonly exist with addiction and substance use disorders.	√	√	
c. Be able to differentiate substance use disorders from other medical or psychological disorders.	√	√	
III. Diagnosis of Co-occurring Disorders in Children and Adolescents			
1. Recognize the interaction between the dimensions of substance and psychiatric diagnoses.			
a. Possess the ability to engage individuals with co-occurring disorders in an empathic and accepting manner.	√	√	√
b. Be familiar with screening tools, and the ability to identify the presence of co-occurring disorders.	√	√	
c. Have a working knowledge of the diagnostic criteria for substance abuse and dependence/ related Mental Health disorders Knowledge of the diagnostic criteria for substance abuse and dependence/ related Mental Health disorders	√	√	
d. Gain a working knowledge of service delivery systems available for adolescents with co-occurring disorders.	√		√

IV. Normal childhood and adolescent development.	Tier I	Tier II	Tier II
1. Apply child development principles to practice by recognizing and responding to children's developmental differences	√	√	
2. Learn how to support positive parenting practices to foster age appropriate child development and enhance parent-child rapport.	√	√	
3. Demonstrate an understanding of common childhood stressors, effective coping mechanisms, and problems affecting development and mental health challenges in childhood and how to support the child's social/emotional development.	√	√	
4. Identify a child's disorder and intervene to ameliorate the presenting problem.	√		
5. Learn the impact of prenatal, parental substance use, and the youth's substance abuse on child development.	√	√	
V. Treatment Knowledge for Children/Adolescents			
1. Ability to implement effective practice principles using appropriate practice approaches with clients who have diverse needs and treatment requirements.			
a. Identify the specific needs of the individual and match them with the most effective treatment that takes into account the youth's psychiatric and substance abuse, as well developmental, environmental and cultural factors.	√	√	
b. Identify models that are based in a best practices philosophy and are congruent with each individual practitioner, and appropriate for each phase of treatment.	√		
c. Learn the specific skills and interventions of the practitioner's chosen model(s) and be able to apply them with appropriate clients.	√		
d. Recognize the importance of family, social networks, and community systems in the treatment and recovery process.	√	√	
e. Adapt practice to the range of treatment settings and modalities.	√		
f. Be familiar with medical and pharmacological resources in the treatment of substance use disorders.	√	√	
g. Understand the variety of insurance and health maintenance options available and the importance of helping clients access those benefits.	√	√	
h. Understand the need for and the use of methods for measuring treatment outcome.	√		
i. Participate in ongoing counselor trainings that incorporate current counseling and psychoactive substance use research literature to improve client care and enhance professional growth.	√		

VI. Screening Assessment and Referral	Tier I	Tier II	Tier III
1. Understand the established diagnostic criteria for substance use disorders and describe the treatment modalities and placement criteria within the continuum of care.	√	√	
2. 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.	√	√	
3. Develop the ability to recognize psychoactive substance toxicity, intoxication, and withdrawal symptoms; aggression or danger to others; potential for self-inflicted harm or suicide, or other evidence of severe emotional disturbance.	√	√	
4. Learn to assist clients to develop a sense of discrepancy when examining the impact of substance use on his or her current life problems and the effects of continued harmful use or abuse.	√	√	
5. Determine the client's readiness for treatment and change as well as the needs of others involved in the current situation.	√	√	
6. Review the treatment options that are appropriate for the client's needs, characteristics, goals, and financial resources.	√	√	
7. Apply accepted criteria for diagnosis of substance use disorders in making treatment recommendations.	√	√	
8. Recognize other severe emotional disturbances and acquire knowledge to refer for appropriate care or treatment.	√	√	
9. Construct with client and appropriate others an initial action plan based on client needs, preferences, and resources available.	√	√	
10. Based on initial action plan, take specific steps to initiate an admission or referral and ensure follow-through.	√	√	
VII. Crisis Management			
1. Establish rapport, including management of crisis situation.	√	√	√
2. Understand and apply setting-specific policies and procedures for handling crisis or dangerous situations, including safety measures for clients and staff.	√	√	√
3. Recognize that crisis may indicate an underlying substance use disorder or other severe emotional disturbance as these may present a window of opportunity for change.	√	√	√
4. Develop knowledge of crisis-related community resources (e.g., shelters, hospitals, police, mobile crisis units and DSS).	√	√	√
VIII. Families and Communities as Partners			
1. Understand the characteristics and dynamics of families, couples, and significant others affected by substance use.			
a. Dynamics associated with substance use, abuse, and dependence in families, couples, and significant others.	√	√	

	Tier I	Tier II	Tier III
b. Cultural factors related to the impact of substance use disorders on families, couples, and significant others.	√	√	
c. Systems theory and family dynamics and their impact on patterns in addicted families.	√	√	
d. Signs and patterns of domestic violence.	√	√	
2. Facilitate the engagement of selected members of the family, couple, or significant others in the treatment and recovery process.	√	√	
3. Assist families, couples, and significant others to understand the interaction between the family system and substance use behaviors and to adopt strategies and behaviors that sustain recovery and maintain healthy relationships.	√	√	
4. Maintain the philosophical belief that adolescents cannot be treated to the best outcome without the involvement of parents/caretakers, peer system, and community.	√	√	
5. Be able to develop a protocol for strength-based treatment that is child-focused and family-driven to meet individual needs of families and children.	√	√	
6. Be willing to include the family as a partner in decision-making and practice.	√	√	
7. Use flexibility in creative and effective ways to individualize and appropriately meet the needs of the child and family consistent with best practices and regulatory requirements.	√	√	√
IX. Cultural Competency			
1. Understands diverse cultures and incorporates unique needs of culturally diverse groups, as well as people with disabilities, into clinical practice.			
a. Develop and maintain Information and resources that support and value diverse racial and ethnic cultures, lifestyles, gender, age, ethnic, racial, and relevant needs of people with disabilities.	√	√	√
b. Understand the unique influence the client's culture; lifestyle, gender, and other relevant factors may have on behavior.	√	√	
c. Gain an understanding of the relationship between substance use, mental disorders, and diverse cultures, values, and lifestyles.	√	√	
d. Learn to do assessments and utilize intervention methods that are appropriate to an individual's culture and gender.	√	√	
e. Understand counseling methods relevant to the needs of culturally diverse groups and people with disabilities.	√	√	
f. Know the Americans with Disabilities Act and other legislation related to human, civil, and client rights.	√	√	√
g. Diversity and cultural differences in families.	√	√	√
2. Understand the importance of self-awareness in one's personal, professional, and cultural life.			
a. Recognize personal and professional strengths and limitations.	√	√	

b. Actively work to confront and diminish cultural, ethnic, or gender biases.	√	√	
3. Apply an understanding of cultural differences and family values to practice.	√	√	
4. Use appropriate communication skills and strategies to meet the cultural and linguistic diversity of children and families.	√	√	
X. Professional and Ethical Responsibility			
1. 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.	√	√	√
2. Learn the federal, state, agency, and professional codes of ethics that apply to good practice.	√	√	√
a. At a minimum this knowledge should be comprised of client rights and responsibilities, understanding boundary issues between client and counselor, understanding the roles of a professional counselor	√	√	√
3. Have a working knowledge of professional standards and operate within the individual's scope of practice.	√	√	√
4. Know the consequences of ethical violations.	√	√	√
a. Develop means for addressing alleged ethical violations.	√	√	√
5. Understand and be willing to follow the requirements of mandatory reporting of criminal activity, child abuse, or other activities that may require outside attention.	√	√	√
6. Adhere to federal and state laws and agency regulations regarding the treatment of substance use disorders.	√	√	√
7. Utilize a range of supervisory options to process personal feelings and concerns about clients.	√	√	√
8. Conduct self-evaluations of professional performance applying ethical, legal, and professional standards to enhance self-awareness and performance.	√	√	√
9. Participate in ongoing supervision and consultation.	√	√	
10. Develop and utilize strategies to maintain one's own physical and mental health.	√	√	