



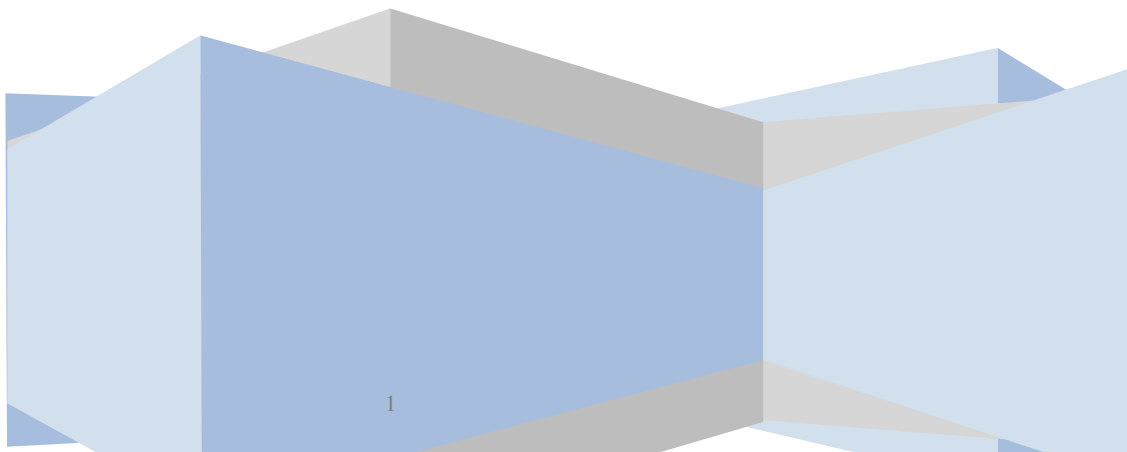
CASAC

Credentialed Alcohol And Substance Abuse Counseling Program

NYS OASAS PROVIDER NUMBER 0218

Metropolitan College of New York
60 West Street
New York, NY 10006

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CREDENTIALLED ALCOHOL AND SUBSTANCE ABUSE COUNSELING PROGRAM

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NOTE: Students are required to access the Mandated Reporter Training (minimum of 2 clock hours) via online. This is required when students take CASAC #005.

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CASAC Certificate-Provider #0218

Credentialed Alcohol and Substance Abuse Counseling Program

Credentialed Alcohol and Substance Abuse Counseling Certificate Program (CASAC)**A Non-Degree Certificate Program -****Approved by the New York State Office of Alcoholism and Substance Abuse Services**

The Audrey Cohen School for Human Services and Education offers a non-degree certificate program in Substance Abuse/Chemical Dependency, and Gambling (including Alcohol and Nicotine Dependence) Counseling.

The MCNY Credentialed Alcohol and Substance Abuse Counseling Program (CASAC) focuses on the psychopharmacological and physiological aspects of drugs; signs, symptoms, and stages of alcoholism; individual and group counseling skills; the ethics of confidentiality; family treatment; and multicultural issues including cultural competence.

The CASAC program is specifically designed to address the needs of those who wish to prepare for a career as a Credentialed Alcohol and Substance Abuse Counselor (CASAC), a Qualified Health Professional (QHP) in substance abuse/chemical dependency counseling or those who wish to enhance their skills as social workers, psychologists, psychiatrists, rehabilitation counselors, mental health counselors, substance abuse counselors, marriage and family therapists, and school counselors.

The CASAC program is currently offered on the Manhattan (60 West Street) and Bronx (463 E. 149th Street) campuses on a continuous basis and may be completed in two semesters. Classes are small and taught by OASAS Credentialed Instructors. A high school diploma or GED is required to enroll in the program. For additional information, contact the Admissions Department at 212-343-1234ext.5001.

Students may avail themselves of OASAS Learning Thursday Webinars (<https://www.oasas.ny.gov/testportal/LTcourses.cfm>) as well as the Center for Substance Abuse (CSAP) Pathways online courses (<https://www.oasas.ny.gov/workforce/training/CSAP.cfm>) for additional CASAC course credit.



CASAC Application Requirements

The MCNY CASAC Program offers CASAC1-8 (as listed in this handbook) every other semester at the Manhattan Campus (evenings Monday-Friday) and at the Bronx Campus (during the day Saturday). To adhere to the minimum 350 OASAS Required Hours, the term length is 14 weeks long with classes lasting 3 hours and 15 minutes. Each course is 195 minutes a week, meeting for 14 weeks during the term.

Courses are offered during the spring, summer, and fall terms. The program utilizes a letter grading system which will be calculated based upon class participation, class attendance, and competency in course assignments and activities. Prospective students are encouraged to apply to take one or more courses based on their own availability and course offerings.

Students may begin their program attendance at any term since we have year-round application.

To apply for the program,

- Submit one of the following:
 - High School Diploma
 - GED
 - College Degree
- Complete an application with the Office of Admission and meet with the Advisor
- Pay the Registration fee (one-time fee)
- Pay the per Course fee (payment plans accepted)

*To take advantage of the payment plan, a deposit is required. Once the deposit (50% per course) is made, the remaining balance is to be paid in two monthly installments. The first payment (1/2 of the remaining balance) is due at the end of the first month of the course and the second payment is due at the end of the following month. Payment can be made by cash, check, or money order payable to MCNY for the full amount, or, for your convenience, you may charge the course(s) to American Express, Discover, MasterCard, or Visa credit/debit cards. Financial assistance may be available from Americorps, VESID, the Veteran's Administration, or the student's employer.

Note Regarding Tuition Reimbursement: If the student qualifies for tuition reimbursement, the student must provide a letter from his/her employer explaining the company's terms of payment at the time of registration. The letter should state that the student is a current employee and entitled to participate in their tuition reimbursement program. Additionally, it should include when payment is made, and to whom.

Course Offerings

Please note that to obtain the OASAS certification, you must have 350 hours of coursework whether it is in MCNY or hours cumulated from other institutions: **Classes may be taken in any order.**

CASAC CURRICULUM

- #001 Overview of Substance Abuse/Chemical Dependency including Alcohol and Nicotine Dependence and Gambling Addiction Treatment: Physiological and Pharmacological Counseling
- #002 Overview of Substance Abuse/Chemical Dependency Treatment within the Context of the Family
- #003 Signs, Symptoms, and Stages of Substance Abuse/Chemical Dependency, Problem/Pathological Gambling and Co-Existing Disorders
- #004 Group Counseling Skills/Techniques in Addressing Substance Abuse/Chemical Dependency
- #005 Professional Ethics and Confidentiality in Substance Abuse/Chemical Dependency Counseling
- #006 Diverse Populations, Cultural Competence and Multicultural Issues in the Treatment of Substance Abuse/Chemical Dependency
- #007 Theories and Principles of Substance Abuse/Chemical Dependency Counseling
- #008 Assessment and Treatment Planning with Substance Abusing/Chemically Dependent Consumers

If a student takes one or more courses at MCNY and needs to send proof of course completion to OASAS, a transcript form must be completed and processed by the Office of the Registrar. If the student owes a balance, no transcript will be provided.

To obtain a certificate of the 350-Hours, students must complete a graduation form and submit to the Office of the Registrar.

NOTE: Students are required to access the Mandated Reporter Training (minimum of 2 clock hours) via online. This is required when students take CASAC#005.

If a student withdraws before the start of classes, s/he is entitled to a full refund. Once classes begin, there is no refund and total tuition is due in full. Late registrants who withdraw from course/s are subject to full payment of tuition.

Education and Training

(from OASAS Website - <https://www.oasas.ny.gov/sqa/credentialing/casacreq.cfm#education>)

You must document completion of education and training consisting of a minimum of 350 clock hours, which address the full range of knowledge, skills and professional techniques related to chemical dependence counseling.

In order to best prepare for the examination, OASAS strongly encourages that you have completed education and training which has provided you with:

- knowledge of the variety of models and theories of addiction and other chemical abuse and/or dependence related problems;
- knowledge of the social, political, economic and cultural context within which chemical abuse and/or dependence exists;
- knowledge of the behavioral, psychological, physical health and social effects of chemical abuse and/or dependence on the patient and significant others;
- skill in recognizing the potential for chemical abuse and/or dependence disorders to mimic a variety of medical and psychological disorders and the potential for medical and psychological disorders to coexist with chemical abuse and/or dependence;
- knowledge of the philosophies, practices, policies and outcomes of the most generally accepted models of treatment, recovery, relapse prevention and continuing care for chemical abuse and/or dependence related problems;
- knowledge of the importance of family, social networks and community systems in the treatment and recovery process;
- understanding of the value of an interdisciplinary approach to chemical abuse and/or dependence treatment;
- skill in using the established diagnostic criteria for chemical abuse and/or dependence and understanding of the variety of treatment options and placement criteria within the continuum of care;
- ability to utilize various counseling strategies and develop treatment plans based on the patient's stage of dependence or recovery;
- knowledge of the medical and pharmaceutical resources in the treatment of chemical abuse and/or dependence;
- ability to incorporate the special needs of diverse racial and ethnic cultures and special populations into clinical practice, including their distinct patterns of communication;

- understanding of the obligation of the CASAC to engage in prevention as well as treatment techniques;
- knowledge of the obligations of a CASAC to adhere to generally accepted ethical and behavioral standards of conduct in the counseling relationship; and
- proficiency in English including the ability to speak, write, comprehend aurally and read at a minimum level necessary to perform as a CASAC.

Minimum requirements are as follows:

- **85 clock hours** related to Knowledge of Alcoholism and Substance Abuse (must include a minimum of 4 clock hours related to tobacco use and nicotine dependence);
- **150 clock hours** related to Alcoholism and Substance Abuse Counseling (must include a minimum of 15 clock hours specific to cultural competence);
- **70 clock hours** related to Assessment; Clinical Evaluation; Treatment Planning; Case Management; and Patient, Family and Community Education; and
- **45 clock hours** related to Professional and Ethical Responsibilities (must include a minimum of 2 clock hours of Child Abuse and Maltreatment Mandated Reporting and a minimum of 15 clock hours specific to ethics for addiction professionals).

MCNY CASAC Curriculum Map

	Required OASAS Curriculum competencies	CAS #1	CAS #2	CAS #3	CAS #4	CAS #5	CAS #6	CAS #7	CAS #8
1	Basic Knowledge: Physical, Psychological and Pharmacological Effects - Min. 27 hrs	27 hrs							
2	Supporting Recovery with Medications for Addiction Treatment (MAT) ATTC approved Min. 3 hrs	3 hrs							
3	Overview of the Addictions Field Min. 28 hrs	15 hrs						13 hrs	
4	Diversity of Intervention and Treatment Approaches Min. 14 hrs			14 hrs					
5	Introduction to Diagnostic Criteria Min. 6 hrs			6 hrs					
6	Knowledge of 12 Step and Mutual Aid Groups Min. 4 hrs			4 hrs					
7	Toxicology Testing/ Screening Min. 3 hrs			3 hrs					
8	Foundational Counseling Skills and Group Counseling Min. 2 0hrs						20 hrs		
9	Individual Counseling Min. 20 hrs		2 hrs	18 hrs					
10	Group Counseling Min. 25 hrs				25 hrs				
11	Counseling Special Populations/ Cultural Competency Min. 25 hrs						25 hrs		
12	Theories of Human Development and the Relationship to Substance Use Min. 10 hrs					11 hrs			
13	Counseling and Communicating with Families and Significant Others Min. 15 hrs		15 hrs						
14	Integrated Care Min. 10 hrs		10 hrs					9 hrs	
15	Crisis Management Min. 10 hrs		3 hrs			7 hrs			
16	Recurrence of Symptoms/ Relapse Prevention Min. 15 hrs		15 hrs						
17	Screening, Assessment and Evaluation Min. 24 hrs					3 hrs			21 hrs
18	Treatment Planning, Client Record Keeping and Discharge Planning Min. 24 hrs								24 hrs
19	Case Management , Referral and Service Coordination Min. 12 hrs							12 hrs	
20	Patient, Family, and Community Education and Prevention Min. 10 hrs					10 hrs			
21	Counselor- Client Relationships Min. 16 hrs				16 hrs				
22	Ethical Decision Making & Conduct Min.9 hrs					9 hrs			
23	Confidentiality/ Legal Issues Min. 9 hrs				4 hrs	5 hrs			
24	Professional Development Min. 4 hrs							4 hrs	
25	Child Abuse and Maltreatment Min. 2 hrs							2 hrs	
26	Counselor Wellness Min. 5 hrs							5 hrs	

CASAC #001**Syllabus**

Course Title: **CASAC #001 Overview of Substance Abuse/Chemical Dependency including Alcohol and Nicotine Dependence Treatment: Physiology and Pharmacological Counseling**

Instructor's Name: TBA

Course Schedule: Provided within a 3.25 Hour period Weekly/14 Weeks

Delivery Mode: Instructor Led Classroom, Experiential Activities

COURSE DESCRIPTION:

This course examines the history and evolution of substance use, diagnosis, and treatment. Alcohol, tobacco and other drugs (ATOD) as delineated in the most current version of the Diagnostic and Statistical Manual (DSM), substances of abuse, patterns and methods of use and misuse, and emerging trends are examined. This course covers ATOD ingestion on the brain and body, including blood alcohol content and how it affects behavior. ATOD pharmacology and interaction of ATOD with other medications (both prescription and non-prescription) drugs is reviewed. The signs and symptoms of substance use including intoxication, tolerance and withdrawal, biological, psychological, and social aspects of substance use disorders are explored. The course reviews the emotional, cognitive, and behavioral aspects of substance use with an emphasis on trauma. The potential for multiple substance use disorders and recognition of behavior substitution or ATOD substitution is analyzed. The types and effectiveness of nicotine replacement therapy are appraised and its use as an adjunct. The use of E-cigarettes/vaping is analyzed and treatment implications examined.

This course also examines the terms and concepts related to theory, research, and practice of treatment approaches, including faith-based approaches. Basic concepts of social, political, economic, and cultural systems and their impact on substance abuse are investigated. An exploration of risk and protection factors that influence individuals and groups. The continuum of substance use disorder services; prevention, treatment, recovery, and relevant levels of intervention and care are analyzed. The developmental stages of recovery (Transition, stabilization, Early Recovery, Middle Recovery, Late Recovery, and Maintenance) are examined. This course also aims to develop a knowledge base of common client payer systems and funding sources (Medicaid Insurance, Medicare, Private Insurance (SSI/SSD)).

The types and effectiveness of nicotine replacement therapy are appraised and its use as an adjunct. The use of E-cigarettes/vaping is analyzed and treatment implications examined. As an integral part of this course, participants must become knowledgeable in medications for addiction treatment (MAT) by accessing the 3-hour training on-line:

<http://healthknowledge.org/course/search.php?search=assisted+Medication>

Course work drawn from Section 1. Basic Knowledge: Physical, Psychological, and Pharmacological Effects, and Overview of the Addictions Field of the NYS OASAS, Credentialed Alcoholism and Substance Abuse Counselor (CASAC) 350-Hour Education

and Training Standardized Curriculum.**LEARNING OBJECTIVES:**

By the end of this course, participants will be able to:

- ✓ Articulate their personal views and values pertaining to substance abuse/chemical dependency, including alcohol, tobacco and nicotine
- ✓ Describe how substance abuse/chemical dependency and problems that affect the primary individual, physically, psychologically, socially and normally as well as the societal and socioeconomic impact to the community
- ✓ Understand and describe the effects of substances including tobacco use, and nicotine dependence from a bio-psychosocial model and its genetic factors
- ✓ Describe the neurobiology (Brain), and pharmacology of drugs as it relates to other medications
- ✓ Identify the characteristics, effects, and patterns of usage of each drug (pharmacology) and presenting behaviors to include the interaction of addiction medication
- ✓ The history and evolution of substance use, diagnosis and treatment of ATOD
- ✓ Explain how tobacco use can impact the individual and society
- ✓ Describe the ways nicotine dependence can be treated with or without the use of pharmacological agents
- ✓ Identify the three phases of pharmacological treatment: Acute Phase, Continuation Phase, and Maintenance Phase
- ✓ Describe the inter-connection between neurobiology of and pharmacology with respect to substance use
- ✓ Discuss the term “psychopharmacology” as it relates to substance abuse treatment
- ✓ Effectively give information about the physiological actions of drug and pharmacological properties of treatments for drug and alcohol dependence
- ✓ Evaluate protocols for the delivery of pharmacological treatment
- ✓ Distinguish among full agonist, partial agonist, and antagonist agents
- ✓ Describe the pharmacological effect of methadone; alcohol dependence medications; and psychiatric medications
- ✓ Describe the consequences of drug abuse as acute on both a personal and societal level
- ✓ Characterize prevention models including primary prevention of alcohol and other drugs
- ✓ Demonstrate knowledge of drug use to include initiation; intoxication; harmful use; abuse; dependence; withdrawal; relapse and recovery
- ✓ Understand that risk factors occur before substance abuse
- ✓ Understand the treatment and recovery continuum
- ✓ Describe the essentials of features of “Identification” and “assessment” on a continuum of care
- ✓ Describe the concept of “stabilization” on a continuum of care and the juxtaposition with the concept in the Gorski Developmental Stages of recovery
- ✓ Understand the scope of the drug dilemma and how social, political, economic, and cultural systems impact substance use
- ✓ Have a working knowledge of third-party reimbursement generally, and with regard to ICCD-10/DSM diagnoses specifically

- ✓ Distinguish between government health insurance plans, Health Maintenance Organization (HMOs), Preferred Provider Organizations (PPOs), other managed care plans, and indemnity plans
- ✓ Understand the importance of concrete services (e.g., benefits and entitlements) for substance abuse services
- ✓ Distinguish between Supplemental Security Benefits (SSI), Social Security Disability (SSDI), and Social Security Income
- ✓ Understand the integral role of faith-based organization in the addictions field
- ✓ Understand the Gorski Developmental Model of Recovery

Learning Assessment

Assessment will be based on:

- Attendance
- Achievement of course objectives as shown by:
 - Class Participation
 - Reaction Papers
 - Oral Presentations
 - Term Paper based on the integration of theory and practice
 - Quizzes and Exams

COURSE OUTLINE:

- | | |
|---------|---|
| Week #1 | Introduction to Course, Exploration on Prevailing/Personal Views (e.g., moral model) of Substance Abuse Including Tobacco and Nicotine; Appraisal of Gum, Inhalers, Lozenges, Nasal Spray, and Skin Patch, Examination of Functional Consequences of Tobacco Withdrawal, Goal of Therapy to Cut Down on Cravings, Symptoms of Nicotine Withdrawal; Current Perspectives on Problem and Other Problem and Other Addictions; Personal Values Clarification Exercise, Overview of Risk Factors for Substance Use and its Precursors; Eliminating, Reducing, and Mitigating Precursor |
| Week #2 | The Physical, Psychological, Social, and Moral Impact on the Individual; Socioeconomic Impact on communities Resulting From substance abuse/chemical Dependency; Investigation of Two Categories of Risk Factors: Broad Societal and Cultural (Contextual Factors); Normative Expectations for Behavior; Risk Factors Lying Within Individuals; Individuals' Principal Interpersonal Environment (i.e., peer group) |
| Week #3 | Bio-psychosocial Determinants of Substance Use and its Genetic Basis; Examination of Genetic Pre-Dispositions; How Substance Use Disorders are Prevented; Primary Prevention: Promoting Abstinence, Developing Refusal Skills, Promoting Viable Alternatives or Activities |
| Week #4 | Introduction to the Nervous System; Drugs and the Nervous System; Acute Tolerance, Protracted Tolerance; Cross Tolerance; Behavioral Pharmacology, A |

- study of brain Chemistry (neurotransmitters) and their relationship to Drugs; Introduction of Gorski and Miller; The Developmental Stages of Recovery: Transition, Stabilization, Early Recovery, Middle Recovery, Late Recovery, Maintenance; Gorski's Nine Principles to Facilitate Relapse Prevention; Detoxification as a Beginning Stage of Treatment in Stabilization
- Week #5 Pharmacokinetics: Absorbed Drugs, Absorption, Metabolism, Distribution, Routes of Administration: Intravenous, Intramuscular, Inhalation, Sublingual; Drug Synergistic Effects, Alcohol Dehydrogenase and the Action of Disulfiram; Managing Feelings in Early Recovery; Late Recovery and Maintenance Stages Studied; Exploring Ideas of a Balanced Lifestyle in Middle Recovery: of Dual-Diagnosis, Relapse, Lapse Risk Factors for Substance Abuse in Context of Individual and Group Environment
- Week #6 Full Agonist, Partial Agonist, Antagonist, Medical Schedules vs. Diagnostic and Statistical Manual Substance Use Disorders, Methadone Maintenance Treatment as Pharmacotherapy
- Week #7 History and Evolution of Substance Use Diagnosis, Evolution from Diagnostic Impression Using Axis and Substance Abuse, Substance Dependence, to Substance Use Disorders; Levels of Care and Interventions: Models of Causes and Treatment Methods, Economic Factors, In Alcohol and Drug Treatment, The Stepped Care Approach, Programs, Outpatient Substance Abuse Treatment, MMTP, MTA, In-patient Rehab, and an Assorted Array of Congregate Living Facilities Providing Various Levels of Treatment, Case Management, Partial Hospitalization, Assertive Community Treatment (ACT), Day Treatment Program, Psychosocial Clubs, and a Range of Treatment Modalities
- Week #8 Study of the National Institute of Drug Abuse's Position on Vaporizing and on E-cigarettes and efficacy for Smoking Cessation; Dripping, Heating and Resulting Aerosol and adverse Health Implications; Review of the Health Care System: Features of an HMO: Primary Care Physician, Role of Gatekeeper
- Week #9 Efficacy of Non-pharmacological (counseling/therapies) and the Use of the Pharmacological Agent and the Anti-depressant, Bupropion, for the Treatment of Nicotine Addiction
- Week #10 Study of Phases of Pharmacological Treatment Designed to Prevent Recurrence; Federal and State Contributions to Medicaid its Impact on Behavioral Health/Substance Use Disorders: Third-Party Reimbursement; Substance Use Disorder Diagnoses and Health Insurance Reimbursement for Providers
- Week #11 Drug Use: Yesterday and Today, (ATOD); Diagnostic-Related Groups (DRGs) and the Medicare Recipient; Cost-sharing Concepts Explored, Deductibles Medicaid Reimbursement Rates; Medicare and SSDI vs. Medicaid and Supplemental Security Income; Survivors Benefits

- Week #12 Prescription and Over-The-Counter Medications; Aspects of The Affordable care Act and their Implications, Utilization Review, Capitation, Fee-For-Service; Analysis of Faith-Based Substance Abuse Programs as Occupying a Unique niche: Faith-Based Programs Rooted in Spirituality; Review of Course
- Week #13 Study of Opiates Derived from Opium; Opioids as Synthetic Opiates Use, and Implications for Alternative Pharmacological Treatment; Suboxone, Buprenorphine
- Week #14 Comprehensive Course Review

Required Readings

Center for Substance Abuse Treatment. (2015) *Addiction Counseling Competencies: The Knowledge, Skills and Attitudes of Professional Practice*.
<https://store.samhsa.gov/product/TAP-21-Addiction-Counseling-Competencies/SMA15-4171>.

Mignon, S. I., Faiia, M.M., Myers, P.L., and Rubington, E. (2009). *Substance use and abuse: Exploring alcohol and drug issues*.
<https://www.vitalsource.com/products/substance-use-and-abuse-exploring-alcohol-and-sylvia-i-mignon-marjorie-v9781626371804>

Reiner. Hart, C., Ksir, C, & Ray, O. (2018). *Drugs, society, and human behavior*(17thed.). McGraw-Hill.
<https://www.vitalsource.com/products/drugs-society-and-human-behavior-carl-hart-v9781260241006>

CASAC #002**Syllabus**

Course Title: **CASAC #2 Overview of Substance Abuse and Chemical Dependency Treatment Within the Context of Family**
Instructor's Name: TBA
Course Schedule: Provided Within a 3.25 Hour period Weekly/14 Weeks
Delivery Mode: Instructor Led Classroom, Experiential Activities

COURSE DESCRIPTION:

This course examines the essentials of Substance Abuse Disorder counseling with individuals, including the theory and practice of clinical management of the individual recovery process, and the application of diagnostic criteria. This course explores skills development in a variety of evidence-based practices to include Cognitive Behavioral Therapy, Motivational Enhancement Therapy, Motivational Interviewing; life skills and techniques that address vocational habitation, other multiple rehabilitation needs, stress management/relaxation, communication, assertiveness, and refusal skills.

The course covers the biological, psychological, social, emotional, and spiritual aspects of recovery and how to integrate these to prevent the onset of active Alcohol, Tobacco and Other Drugs (ATOD) use, relapse/recurrence of symptoms planning, and long-term recovery; and, counseling individuals about the use of addiction medications (including but not limited to methadone, buprenorphine, alcohol dependence medications, and psychiatric medications).

Basic theory and skills needed by substance use disorder counselors to work effectively with individual family members, significant others, and whole families including family counseling theories, dynamics, and roles will be studied. This course focuses on observing and responding to family interaction; education of family members on the biological, psychological/emotional, and the social impact of substance use disorder. The course also examines issues relating to children of persons with substance use disorder; assisting family members to understand and apply healthy boundaries; how substance use disorders affect society and the family of the substance user; and, genograms. In addition, this course examines relapse/recurrence of symptoms topics such as awareness of relapse/recurrence of symptoms, maintaining commitment to recovery, and utilizing available resources aimed to assist the families and significant others of substance use disorder clients.

This course examines the residual effects of substance use as it affects recurrence of symptoms/relapse; recognizing client manifestations of recurrence of symptoms/relapse; assessing a client's risk factors for recurrence of symptoms/relapse and need for recovery supports. The course evaluates educating the client in understanding their individual recurrence of symptoms/relapse signs and symptoms; assisting the client in intervening in the recurrence of symptoms/relapse process; recovery and recurrence of symptoms/relapse process to include prevention planning; risk factors associated with recurrence of symptoms/relapse; and, the dynamics of recurrence of symptoms/relapse.

This course explores the medical issues and health consequences common to individual with Substance Use Disorders, including diabetes, heart disease, cirrhosis, other effects of chemical substances on the body, HIV and AIDS, STDs, TB, hepatitis, and other communicable diseases, as well as interventions which promote health and wellness. The course examines the significance of diagnostic reports from laboratory tests; integrated service delivery within the continuum of care of care including: referring to appropriate medical personnel, and ways in which medical consultation and treatment support the recovery process. The course focuses on screening, brief intervention, and referral to treatment (SBIRT). The course evaluates co-occurring mental health disorders; and referring to appropriate mental health personnel, and ways in which mental health consultations and treatment support the recovery process.

This course focuses on both life-threatening and non-life-threatening crisis situations and impact on recovery. The course examines crisis situations/incidents that need an immediate response and how to triage; methods to respond to client and/or family in crisis; utilizing crisis intervention techniques and documenting results. This course also focuses on emergency procedures associated with overdose and acute withdrawal symptoms; and utilizing crisis situations to facilitate the recovery process.

Course drawn from Section 2: Individual Counseling; Counseling and Communicating with Families and Significant Others; Integrated Care; Crisis Management, and, Recurrence of Symptoms/Relapse Prevention of the NYS OASAS, Credentialed Alcoholism and Substance Abuse Counselor (CASAC) 350-Hour Education and Training Standardized Curriculum

LEARNING OBJECTIVES:

At the end of this course, the student will have the following knowledge and abilities:

- ✓ Understand theory and practice of clinical management of the recovery of individuals and counselor communication skills
- ✓ Analyze Motivational Enhancement Therapy (MET) which utilizes Motivational psychology with a strong client feedback component
- ✓ Describe the idea of building a wedge rather than electing crisis in Cognitive Behavioral Therapy (CBT)
- ✓ Understand the goal of CBT as helping clients change faulty thinking and thereby modifying behavior by teaching clients how to identify and challenge these faulty beliefs cognitively (thinking)
- ✓ Understand the rationale for client-treatment matching and the potential for beneficial treatment results
- ✓ Discuss how relaxation training provides the client with a coping strategy for dealing with stress
- ✓ Describe therapeutic procedures and therapeutic techniques of cognitive behavioral therapy
- ✓ Understand Motivational Interviewing as a treatment intervention based on principles from Humanistic Psychology and as both client-centered and directive
- ✓ Understand counseling theories as logical constructions that help to explain natural phenomena

- ✓ Evaluate vocational services that may be of potential benefit for recovering clients
- ✓ Discuss the prospect of vocational habilitation and work in and of itself as rehabilitative
- ✓ Describe the goal of stress management as a complex of activities (comprehensive)
- ✓ Understand the importance of a working knowledge of counseling individuals about the use of addiction medications (including but not limited to methadone, buprenorphine, alcohol dependence medications, and psychiatric medications)
- ✓ Understand the importance of educating family members on the biological, psychological/emotional, and social impact of Substance Use Disorders
- ✓ Describe the family counseling theories of “Family Systems Theory” and “Attachment Theory” and their convergence
- ✓ Identify approaches family members use in living with a substance dependent person including façade that all is well in the family
- ✓ Describe coping styles that family members may develop as survival techniques (e.g., the responsible one, adjuster, placater)
- ✓ Discuss relapse/recurrence of symptoms aimed to assist families/significant others of substance use disorders
- ✓ Understand the ways in which addiction is considered a family disease
- ✓ Understand the various roles individual family members play in the dynamics of the family (i.e., mascot, hero, scapegoat)
- ✓ Understand policies and services specific to significant others in alcoholic/substance-abusing family.
- ✓ Understand the concept of adult children of alcoholics (ACOA)
- ✓ Describe common features of the family with an addicted member
- ✓ Understand psychodynamic systems and cognitive/behavioral theories and techniques of interventions with families
- ✓ Understand the impact of effective communication in the family
- ✓ Describe the importance of building healthy boundaries and healthy support networks with shared family goals
- ✓ Describe how genograms help in understanding family dynamics
- ✓ Identify group counseling skills as the most popular approach to relapse prevention
- ✓ Understand “episode” as symptom when diagnostic criteria has been met for a substance use disorder
- ✓ Understand that when the symptoms (episode) are over, the event is referred to as remission
- ✓ Understand that when the “remission” is a result of substance abuse treatment, the event is referred to as a “response”
- ✓ Understand that when there is a full remission for a specified period of time, the event is referred to as “recovery”
- ✓ Understand that “relapse” describes a return to the symptoms, and “recurrence” describes a new episode after a recovery
- ✓ Understand the multiplicity of definitions for “relapse” generally, and for facilitating the recovery process for individuals with substance use disorders more specifically
- ✓ Identify determinants of relapse (e.g., environmental, behavioral, cognitive, affective, interpersonal determinants)
- ✓ Identify models of relapse planning and management and the concepts of triggers and cues

- ✓ Identify substance use disorders as having a variable course that are characterized by periods of remission and relapse
- ✓ Understand essential features of prevention planning
- ✓ Understand the importance of adapting group counseling skills as appropriate to prevent relapse
- ✓ Understand malleable risk factors for relapse
- ✓ Understand the importance of the applicability of screening, brief intervention, and referral to treatment (SBIRT) to a range of population groups
- ✓ Understand the increased risks of substance use for HIV/AIDS, STDs, TB, HEP, and other communicable disease
- ✓ Discuss familiarity with brief screening instruments
- ✓ Describe a brief screen as a “rapid, proactive procedure to identify individuals who may have a condition or be at risk for a condition before obvious manifestations occur”
- ✓ Discuss how SBIRT has been adopted from its use in primary care and emergency departments in the medical field
- ✓ Understand that SBIRT is a public health approach as well as a preventive service in that it may reduce the likelihood that a risky substance user may not develop health/medical conditions or exacerbate health/medical conditions in addition to providing appropriate interventions
- ✓ Discuss Interventions which promote health and wellness
- ✓ Describe the relationship of substance use to health
- ✓ Discuss the utility of SBIRT’s referral component in supporting recovery in substance use/mental health settings with regards to co-occurring disorders
- ✓ Identify the dimensions of health and describe how they relate to total wellness
- ✓ Describe factors that shape health behaviors
- ✓ Describe how substance use can be associated with risk-taking behaviors for contracting communicable, infectious diseases
- ✓ Understand the interplay between the various dimensions of health and substance abuse
- ✓ Understand the multiplicity of definitions for “crisis” generally, and for facilitating the recovery process for individuals with substance use disorders more specifically
- ✓ Analyze the concept of “balance,” “equilibrium,” and “homeostasis” as being basic to crisis theory and that this theoretical approach can be used with families, groups, and communities as well as with individuals
- ✓ Discuss crisis management as an essential counselor function and methods for responding to client and or family in crisis
- ✓ Understand the goal of crisis management which is to help the client cope with immediate problem, regain equilibrium, and function anew
- ✓ Understand the work of crisis management as time-limited
- ✓ Identify models/tasks for crisis intervention: Continuous (assessment, safety, support) as being those that are addressed throughout the entire intervention process; and Focused (contact, re-establishing control, defining the problem, and follow-up) as being time-encapsulated
- ✓ Familiarity with community-based crisis management teams/resources and emergency procedures associated with overdose and acute withdrawal symptoms
- ✓ Understand that crisis theory proposes that people exist in an emotional homeostasis that can be disrupted when they encounter an event with which they perceive to be

beyond their coping ability

Learning Assessment

Assessment will be based on:

- Attendance
- Achievement of course objectives as shown by:
 - Class Participation
 - Reaction Papers
 - Oral Presentations
 - Term Paper based on the integration of theory and practice
 - Quizzes and Exams

COURSE OUTLINE:

- | | |
|---------|--|
| Week #1 | Motivational Enhancement Therapy (MET) Components: Structured Feedback from the Initial Assessment, Future Plans, Motivation for Change; Effects of Alcohol/Drugs on the Family: An introduction; The Biologic View: Exploring Of Alcohol-dependent Parents and those of Non- Dependent Parents with Respect to Genetic Predisposition |
| Week #2 | MET and Opportunity for Counselor to Reinforce Progress, Encourage Re-assessment; Counseling Theories that Explain Natural Phenomena; Biological Vulnerability in Developing Substance Use Disorder; Enhanced Sensibility to ATOD; Six Explanatory Stages that Occur as a Family Deals with Addiction: 1) Denial, 2) Attempts to Eliminate, Disorganization and Chaos, 4) Reorganization in Spite of the Problem, 5) Efforts to Escape, 6) Family Reorganization |
| Week #3 | Challenging “Stinkin Thinkin”: Cognitive Behavioral Therapy; Faulty Beliefs, Cognitive Distortion: Overgeneralization, Minimizing, Magnification; Family Coping Styles as Survival Technique, the responsible one, adjuster, placate; Mascot, Hero, Scapegoat, Lost Child: Family Member Roles |
| Week #4 | Cognitive Distortion ...Continued: Personalizing Events, Arbitrary Inferences- Reaching Conclusions Without Evidence, Labeling One’s self, Polarized Thinking (Black or White Thinking); Prevention Planning: Identifying Triggers and Cues and the Role of Group Work; “Lapse,” “Slip,” and Relapse; Malleable Risk Factors; Stages of Group Development Specific to Recurrence of Symptoms/Relapse; Forming, Storming, Norming, Adjourning for Relapse; Substituting Meaningful Pastimes For Substance Use |
| Week #5 | Therapeutic Procedures of CBT (Challenging the Client’s Thought Process); Therapeutic Techniques of CBT; The Psychological/Emotional View of Substance Use Disorders-the Family; Ten Rules of Communication; Bowen’s Family Systems Theory; Introduction to Integrated Care; Commonly Used Pre-Screens and Rationale: Procedure for Identifying Individuals Who May Have |

Conditions Before Manifestation occur. AUDIT-C, DAST-1, NIDA; SBIRT Components: Screening, Brief Intervention, Referral to Treatment; SBIRT: Use as a Stand-Alone Intervention, Substance Use Problems as Over-Represented in Populations Seeking Medical Care; SUD Disorders and Three Stages of Liver Disease: Fatty Liver, Alcoholic Hepatitis, Cirrhosis; Reducing Health-Related Diseases and Consequences; Brief Intervention: Open the Conversation, Share Feedback, Share Concerns, Increase Motivational Interviewing Techniques, Set a Goal, and Referral and follow-up Plan

- Week #6 Overview of Motivational Interviewing: Theory, Principles, Skills; The Tenet of Adopting Voluntary Behavior Changes: Through Resolution of Ambivalence, Increase in Perceived Self-Efficacy; Co-occurring Mental Health Disorders; Integrated Care and Referring to Appropriate Mental Health Personnel; Using the Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST) as Brief-Screen Test for Individuals With Co-occurring Disorders; How People Change: Overwhelming Emotion Can Hamper or Destroy Coping Ability; Free Person to Use Coping Ability; Restoration of Functioning Ability; The Right for Remediation of Suffering; Task Model for Crisis Intervention: (Continuous) Assessment, Safety, Support
- Week #7 Integrating Psychological, Social, Biological, Emotional, Spiritual Dimensions in Preventing Onset of Active ATOD Use; Importance of the Spirit in Which MI is Delivered; Unconditional Positive Regard, Empathy, Genuineness
- Week #8 Adult Career and Continuing Education Services-Vocational Rehabilitation (ACCES-VR): Overview of Vocational Assessment Strategies; The Social Impact of Substance Use Disorders-the Family; Stepfamilies and Substance Use: Unique Treatment Consideration; Adult Children of Alcoholics (ACOA); Psycho-educational Model; An Abstinence Model of family therapy; Episode, Response, Recovery, Relapse, Recurrence: A Family Disease
- Week #9 Progressive Relaxation, Autogenic Training, Meditation; Life Skills, Community Placement, Independent Living and The “World of Work;” Significance of Diagnostic Reports and Laboratory Tests Four Crisis Management Implications Emanating From a Crisis Theory Approach: 1) Crisis Situation where Counselor must be Immediately Available at the Time of Crisis When the individual is Motivated to Deal with the Problem Because of Pain and Discomfort; Four Crisis Management Implications Emanating From a Crisis Theory Approach: 2) Focus on Present Problem; Old Scars Which Tend to Contribute; Four Crisis Management Implications Emanating From a Crisis Theory Approach: 3) Rational and Adaptive Capabilities of the Client are supported and Strengthened; Four Crisis Management Implications Emanating From a Crisis theory Approach: 4) During Crisis, the Counselor is More Active Than in Non-Crisis Situations; Counselor May Give Advice More Freely and be Authoritative Without Fear of Undermining The Client’s Feelings in Safe Situation; Method: Expressing Feelings about Present and Past Crises, Relating them to Facts; Operational

Principle: Facilitate Expression of Emotion

- Week #10 Building Blocks: Combining Skills with Socialization and Communication Tools; Acquiring New Skills and Work Readiness; Counselor Communication Skills in Work with Families and Significant Others; Introduction to Relapse Prevention; Relapse Prevention Group Counseling Skills; Determinants of Relapse; Generating Relapse Prevention Strategies; Social Supports In Preventing Relapse; Developing Skills to Deal With Relapse: Through Role Play; Identifying High Risk Situations for Relapse
- Week #11 Relapse: An Early Return of the Symptoms of Addiction; Alternative Model of the Relapse Process: Individual Factors (e.g., Gender); Alternative Model of the Level of Self-Efficacy; Alternative Model of the Relapse Process: Quality of Life; The Gorski Model: Transition, stabilization, Early Recovery, Middle Recovery, Late Recovery, Maintenance Development of the Relapse Precipitant Inventory (RPI); Episodes, Symptoms, Recurrence, Remission, Partial Remission, Recovery
- Week #12 Recurrence: A New Episode; Signs and Symptoms of Co-occurring Disorders; Treating substance use Disorder and Mental Health Disorder Concomitantly; Health Promotion: Activities Consisting of Efforts to Encourage Individuals to Engage in Health-Promoting Behaviors and Avoid or Disengage Health-Harming Substance Abusing Behaviors; Secondary Prevention (Screening): Activities to Detect Disease, Injury, or Disability Before Symptoms Appear Including Medical Examinations (such as taking the blood pressure) or Screenings for TB, STDs Hepatitis and other Communicable Disease; Integrated Service Delivery: Preventing a Fragmented Delivery of Care; Introduction to Crisis Management: An Essential Function of the Counselor; Co-occurring Mental Health Disorders; Integrated Care and Referring to Appropriate Mental Health Personnel Using the Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST) as Brief-Screen Test for Individuals With Co-occurring Disorders; How People Change: Overwhelming Emotion Can Hamper or Destroy Coping Ability; Free Person to Use Coping Ability; Restoration of Functioning Ability; The Right for Remediation of Suffering; Task Model for Crisis Intervention: (Continuous) Assessment, Safety, Support; Task Model for Crisis intervention: (Focused) Contact, Re-Establishing Control, Defining the Problem, Follow-up
- Week #13 Counseling Individuals about the Use of Addiction Medications; Familiarization with Psychotherapeutic Medications
- Week #14 Community Mobile Crisis: Concepts; Overdose Procedures; Naloxone Training, Acute Withdrawal Symptoms; Comprehensive Course Review

Required Readings

SAMSHA. (2015) *Addiction Counseling Competencies: The Knowledge, Skills and Attitudes of Professional Practice*.

<https://store.samhsa.gov/product/TAP-21-Addiction-Counseling-Competencies/SMA15-4171>

SAMSHA (2016). *TIP 39: Substance Abuse Treatment and Family Therapy*,

<https://store.samhsa.gov/product/TIP-39-Substance-Abuse-Treatment-and-Family-Therapy/SMA15-4219>

Goldenberg, I. & Goldenberg, H. (2017). *Family therapy: An overview* (9thed.). Cengage Learning.

<https://www.vitalsource.com/products/family-therapy-an-overview-irene-goldenberg-v9781305855649>

Recommended Readings

Bok, M. (1993) *Families living with drugs and HIV: Intervention and treatment strategies*. New York: Guilford Press.

Daley, D. C. (1988). *Relapse prevention: Treatment alternatives and counseling aids*, Human Services Institute.

Kaufman, E. & Kaufmann, P. (1998). *Family therapy of drugs and alcohol abuse* (2nded.), Mass: Allyn and Bacon, Inc.

Minuchin, S. (1974). *Families and family therapy*. Mass: Harvard University Press.

Seilhamer, R. A., Jacob, T. et al. (1993). The impact of alcohol consumption on parent-child relationships in families of alcoholics. *Journal Stud Alcohol*, (54), 189-198.

Straussner, S. L. A., (2014). *Clinical work with substance-abusing clients* (3rd ed.), New York: Guilford Press.

<https://www.vitalsource.com/products/clinical-work-with-substance-abusing-clients-shulamith-lala-ashenberg-v9781462512850?term=Clinical+work+with+substance-abusing+clients>

Wiebel, W. (1995). The outreach assisted peer-support model for controlling drug dependency. *Journal of Drug Issues*, 25(3), 507-529.

Hacker, J. (1993). From Al-anon to ACOA: co-dependency and its reconstruction of caregiving. *Journal of Women in Culture and Society*, (18), 321-345

CASAC#003**Syllabus**

Course Title:	CASAC #003 Signs, Symptoms, and Stages of Substance Abuse/Chemical Dependency, Problem/Pathological Gambling and Co-Existing Disorder Counseling
Instructor's Name:	TBA
Course Schedule:	Provided within a 3.25 Hour period Weekly/14 Weeks
Delivery Mode:	Instructor Led Classroom, Experiential Activities

COURSE DESCRIPTION:

This course covers the theory and application of the best or evidenced-based intervention and treatment approaches; therapy models and their methods that address ATOD-related problems and diagnoses, and emerging trends in treatment. Medication supported recovery/medication assisted treatment including client informed choice relating to MATS, and the difference between MAT (Short Term) with the goal of abstinence versus Medication Supported Recovery MSR (Long Term) maintenance will be analyzed. This course evaluates non-traditional treatment methods. This course also examines a continuum of care and resources available to develop an understanding of prevention, intervention, treatment, and recovery. Additionally, this course focuses on developing knowledge of OASAS-Funded Block Grant Basics.

This course examines various assessment instruments and diagnostic tools for Substance Use Disorder treatment, including but not limited to the current Diagnostic and Statistical Manual (DSM), International Classification of Diseases (ICD) standards and the Addiction Severity Index (ASI), as well as level of care determination tools. Such tools include the most recent version of the OASAS LOCADTR and A.S.A.M. Patient Placement criteria. This course examines the history, theory/philosophy, principles, and practices of the 12 Steps and other types of mutual aid groups. This course explores basic concepts of toxicology screening options.

This course also discusses limitations and legal implications as well as reporting language and meaning of toxicology reports. This course examines the essentials of Substance Abuse Disorder counseling with individuals, including the theory and practice of clinical management of the individual recovery process, and the application of diagnostic criteria. This course explores skills development in a variety of evidence-based practices to include Cognitive Behavioral Therapy, Motivational Enhancement Therapy, Motivational Interviewing; life skills and techniques that address vocational habitation, other multiple rehabilitation needs, stress management/relaxation, communication, assertiveness, and refusal skills. The course finally covers the biological, psychological, social, emotional, and spiritual aspects of recovery and how to integrate these to prevent the onset of active Alcohol, Tobacco, Tobacco and Other Drugs (ATOD) use, relapse/recurrence of symptoms planning, and long-term recovery; and, counseling individuals about the use of addiction medications (including but not limited to methadone, buprenorphine, alcohol dependence medications, and psychiatric medications).

This course includes the evaluation of vocational-related skills. Additionally, this course

focuses on developing knowledge of OASAS-Funded Block Grant Basics.

Course work drawn from Section 1. Diversity of Intervention and Treatment Approaches, Introduction to Diagnostic Criteria, Knowledge of 12 Step AND Mutual Aid Groups, Toxicology Testing/Screening; and, from Section 2. Individual Counseling of the NYS OASAS, Credentialed Alcoholism and Substance Abuse Counselor (CASAC) 350-Hour Education and Training Standardized Curriculum.

LEARNING OBJECTIVES:

At the end of this course, the student will have the following knowledge and abilities:

- ✓ Identify two substance use disorders for which medications are available
- ✓ Discuss the disposition of physicians who are not associated with an OTP to prescribe Buprenorphine
- ✓ Distinguish between physical dependence and addiction
- ✓ Understand Federal substance abuse prevention and treatment (SAPT) Block Grant requirements of Interim services and waiting list
- ✓ Understand the importance of the application of evidence-based intervention and treatment approaches
- ✓ Discuss the ways in which MAT has utility for each stage of change in the Transtheoretical Model
- ✓ Describe the various medication that have been approved to treat alcohol and opioid use disorders
- ✓ Make distinction between Medication Supported Treatment (short term) with the goal of abstinence versus Medication Supported Recovery (long term) maintenance
- ✓ Evaluate the purpose of interim services for intravenous substance users on waiting list
- ✓ Review the relevant literature on non-traditional treatment methods
- ✓ Employ the essentially appropriate and culturally competent knowledge and skills
- ✓ Understand recurrent concerns in the substance abuse service-delivery system and NYS's support of local prevention, treatment and recovery programming efforts
- ✓ Investigate priority admissions to specific population groups
- ✓ Describe Federal block grant funding requirements
- ✓ Understanding the principles and logic behind LOCADTR
- ✓ Understand the importance of matching clients with levels of care or need to improve outcomes
- ✓ Appraise determination tools such as the OASAS LOCADTR and A.S.A.M Patient Placement Criteria
- ✓ Describe the American Society of Addiction Medicine (ASAM) criteria
- ✓ Understand DSM diagnostic criteria for substance use disorders including severity and specifiers
- ✓ Explain how to use the Diagnostic and Statistical Manual DSM
- ✓ Develop familiarity with the DSM and its harmonizing with International Classification of Disease (ICD)
- ✓ Identify Substance eleven criteria for substance use disorder
- ✓ Use the appropriate terminology, and DSM diagnostic criteria when referring to multiple drug use

- ✓ Understand levels of care determination that various diagnostic tools can provide
- ✓ Understand semi-structured interviews
- ✓ Understand and the utilizing the A.S.A.M Placement Criteria
- ✓ Discuss the role of social support in mediating the association between mutual aid participation and subsequent substance use for dually diagnosed persons
- ✓ Analyze participation in 12-step mutual help organization (MHO) as a continuing care recommendation
- ✓ Demonstrate knowledge of ancillary and adjunct services to formal substance abuse treatment including the principles and practices of the 12 Steps and other types of mutual aid groups
- ✓ Explore 12 Steps, 12 Traditions, and Big Book text as philosophies of Alcoholics Anonymous
- ✓ Distinguish among the self-help programs including Alcoholics Anonymous (AA), Narcotics Anonymous (NA), Adult Children of Alcoholics (ACoA), Al-Anon for family and friends
- ✓ Describe the concepts of “spirituality” and “existentialism” that embodies the fellowship of AA and NA.
- ✓ Discuss both traditional AA and Dual Recovery Anonymous meetings
- ✓ Understand the history of Alcoholics Anonymous
- ✓ Discuss the importance of performing, interpreting and basing treatment decisions on toxicology testing
- ✓ Understand and discuss the use of toxicology and screening tools to assess drug ingestion
- ✓ Describe drug-testing methods and screening tools used to identify substance abuse problems and screening options
- ✓ Describe the difference in meaning of the results depending on testing modality
- ✓ Understand the importance of screening as a diagnostic and clinical tool
- ✓ Describe screening instruments to aid in treatment planning
- ✓ Analyze how the establishment of a toxicology profile is essential in the client-counseling experience

Learning Assessment

Assessment will be based on:

- Attendance
- Achievement of course objectives as shown by:
 - Class Participation
 - Reaction Papers
 - Oral Presentations
 - Term Paper based on the integration of theory and practice
 - Quizzes and Exams

Course Outline:

Week #1 Introduction: Alcohol and Opioid Dependent Clients; Identification of Workforce, Organizational, Environmental, Regulatory Issues that Facilitate or Impede implementation; Introduction to LOCADTR/Health Commerce System; A

“Goodness of Fit” and Matching People with Levels of Care

- Week #2 Evidence-Based Practice; The use of Medication Assisted Treatment in Conjunction With Evidence Based Interventions; The Tool: Speed, Relevance, Reliability, Credibility, Clinical Support
- Week #3 Evidenced-Based Psychosocial Intervention; Tailoring Medications Based on Stages of Change Model; Prescribing Buprenorphine: Physician and Client Limitations; Physician Waive The Tool: Speed, Relevance, Reliability, Credibility, Clinical Support
- Week #4 Medications: Effects to Reinforce initial Success of Treatment; Reducing Cravings and Post-Acute Withdrawal Symptoms; LOCADTR Schematic: Preliminary Assessment: Analysis of Questions on Preliminary Assessment that Parallels Criteria for Substance Use Disorder in the DSM; LOCADTR Schematic: Crisis/Detox; Risk; Resources; LOCADTR Schematic: Over-ride Level of Care Options; Additional Considerations
- Week #5 Characterization of Maintenance Medications; Methadone Maintenance Treatment Program (MMTP); Long Term Maintenance; Dosing
- Week #6 Non-traditional Treatment Approaches for Substance Abuse: Nutrition, Exercise, Relaxation, Recreation and Adventure-based Activities; The Skilled Interviewer and the Addiction Severity Index (ASI); Scoring, Psychometrics, and Clinical Utility of Instrument; ASI Formatting and Several Potential Problem Areas in Substance Abusing Clients: Medical status, Employment, Legal status, support, Alcohol and Drug Use, Family/Social Status, and Psychological Status
- Week #7 Treatment Methods/Holistic Techniques and other Methods including Meditation Based in the Social and Behavioral Science Literature
- Week #8 Review: Disulfiram, Acamprosate, Naltrexone; Medication Supported Recovery (MSR); Acute Withdrawal, Acute Detox; Legal Implications of Toxicology Results for Purpose of Random Parole, Random Probation Drug Testing and Reporting; Testing Modalities; Urine Drug Testing (UDT) and False Positives; False Negatives; Urine Drug Testing (UDT): Procedures and Compliance; Framework for Using Test Results in Positive Way; Scope of Breathalyzer Use; ETOH Ingestion Period; Screening Opioid; Testing to Enhance Positive Outcomes; Review of Principles of Drug Testing
- Week #9 Priority Admissions to Specific Group Categories; Analysis of the Ambivalence of Group Upon Initial Contact with Treatment Programs; Overview of Likert-Type Scales and Self-Reports; ICD and Current Procedural Terminology (CPT) Codes: Familiarization; The use of ASAM to Inform Treatment Planning; Underlying Concepts: Assessment Dimensions; The Biopsychosocial Dimensions of the ASAM; Problems/Priorities; Assessment, Progress; How to Organize

Assessment Data; The ASAM and a Continuum of Care

- Week #10 Appraisal of Array of Chemical Dependency Services Including Residential Services, children Services, and Chemical Dependence Outpatient and Opioid Treatment Programs
- Week #11 Analyze: OASAS Local Services Bulletins 2012-01 and 2014-11; Federal (SAPT) Interim Services, Waiting List and Outreach; Introduction to 12-Step Mutual Aid Groups; Research; Literature on Older Age Composition at Meeting as Barrier to Engagement and Benefits; Spirituality and Existentialism: Limitation of Being and Reaching Full Potential Through Fellowship; Resolving Basic Character Problems (e.g. Grandiosity, Self-centeredness) that Maintain Substance Use Problems in 12-Step Programs; Theories Highlighting “Acceptance” and “Powerlessness” in Mutual Aid Groups; Theories Highlighting the “Disease Concept” in Mutual Aid Groups
- Week #12 Pregnant Intravenous Substance Abusers; Pregnant Substance Abusers, Intravenous Substance Abusers; Theories Highlighting “Acceptance” and “Powerlessness” in Mutual Aid Groups; Theories Highlighting the “Disease Concept of Addiction in Mutual Aid Groups; Critique Other Mutual Aid Groups: Al-Anon, ACoA, Alateen, Nar-Anon, Overeaters Anonymous, Gamblers Anonymous, Cocaine Anonymous, Dual Recovery Anonymous Meetings; NA Literature and Basic Text; Shifts that Occur Through Surrender and Conversion Experiences Through AA/NA/Dual Recovery Membership; Bill Wilson 1935: The Idea of “Carrying the Message to Alcoholics:” Historical View
- Week #13 Analyze: Learning Thursday/Prioritizing Admissions; Purpose of interim Services; Reducing Adverse Health risks; “How it Works” From “Rarely”: Heart of the Twelfth Step; The American Temperance Movement; Emerging Trends in Dual Diagnoses Anonymous; Introduction to Toxicology Testing/Screening, Immunoassay versus Gas or Liquid Chromatography; Impact of Drug Metabolites on Results with Opioids and with Cocaine and Poppy Seeds; Legal Implications of Toxicology Results for Purpose of Union Assistance Programs (UAPs), Employee Assistance Programs (EAPs)
- Week #14 Comprehensive Review of Course

Required Readings

Ruiz, P., Strain, E., Langrod, J. (2007). *The Substance Abuse Handbook*(4th Ed.)
New York: Wolters Kluwer/Lippinotte, Williams & Wilkins

Julier, R. M. (2008). *A Primer of drug action*(11thed.). New York: Worth Publishers.

Royce, J. E. (1989). *Alcohol problems and alcoholism: A comprehensive survey* (revised.). New York: The Free Press.

Recommended Readings

SAMSHA. (2015) *Addiction Counseling Competencies: The Knowledge, Skills and Attitudes of Professional Practice*.

<https://store.samhsa.gov/product/TAP-21-Addiction-Counseling-Competencies/SMA15-4171>

SAMSHA (2018). *Opioid Use Disorder Facts*.

<https://store.samhsa.gov/shin/content/SMA18-4742/opioid-use-disorder-facts.pdf>

SAMSHA (2013). Substance Abuse Treatment For Persons With Co-Occurring Disorders

<https://www.store.samhsa.gov/shin/content/SMA13-3992/SMA13-3992.pdf>

SAMSHA. Tips for Teens Series (2004-2018)

<https://store.samhsa.gov/list/series?name=Tips-for-Teens>

Straussner, S. L. A., (2014). *Clinical work with substance-abusing clients* (3rd ed.), New York: Guilford Press.

<https://www.vitalsource.com/products/clinical-work-with-substance-abusing-clients-shulamith-lala-ashenberg-v9781462512850?term=Clinical+work+with+substance-abusing+clients>

Miller, N. S., Gold, & Millman, R. B. (1989). Cocaine: General characteristics, abuse and addiction, *New York Journal of Medicine*, (7),390-395.

Shulman, G. (1987). Alcoholism and cocaine addiction: Similarities, differences, and treatment implications, *Alcoholism Treatment Quarterly* ,4(3), 31-40.

Burton, L. M. (1992). Black grandparents raising children of drug addicted parents: Stresses, outcomes, and social needs. *Gerontologist*.,32(6),744-751.

Bok, M. (1993). *Families living with drugs and HIV: Intervention and treatment strategies*. New York: Guilford Press.

Seilhamer, R. A.,Jacob, T. et. al. (1993). The Impact of alcohol consumption on parent-child relationships in families of alcoholics, *Journal Stud Alcohol*. (54),189-198.

Wiebel,W.(1995).The Outreach assisted peer-support model for controlling drug dependency, *JournalofDrugIssues*.,25(3),507-529.

Hacker, J. (1993). From Al-anon to ACOA: Co-dependency and its reconstruction of caregiving, *Journal of Women in Culture and Society*, (18),321–345.

Lengua, L. J., Rosa, M. W. et.al. (1992). Using focus groups to guide development of a parenting program for difficult to reach, high-risk families, *Family Relations*.,41(2),163-168.

CASAC#004**Syllabus**

Course Title: **CASAC #4 Group Counseling Skills/Techniques Utilized in addressing Substance Abuse/Chemical Dependency**
Instructor's Name: TBA
Course Schedule: Provided within a 3.25 Hour period Weekly/14 Weeks
Delivery Mode: Group Role Play, Instructor Led Classroom, Experiential Activities

COURSE DESCRIPTION:

This course provides the essentials of Substance Use Disorder counseling with groups of individuals including: different types of groups to include both therapeutic and support groups, their purposes, function, and parameters; various facilitator roles and techniques. This course further focuses on group theory including stages of group development and tasks of the counselor at different stages of the process; group dynamic techniques and interventions used in group settings and group techniques designed for or modified for, specific populations and orienting clients for group counseling.

The course examines managing membership issues (e.g., turnover, dropout, adding new members); establishing an environment to support trust among group members; developing cohesiveness and identity among group members; and, using group dynamics for individual and group growth. In addition, this course explores the education of group members on the use of addiction medications, including but not limited to methadone; buprenorphine; alcohol; dependence medications; and psychiatric medications.

This course examines knowledge of the therapeutic alliance as a unique relationship between counselor and client, integrating basic counseling skills, critical thinking, ethical standards, and professional responsibilities to the client. Topics include, but are not limited to: clinical boundaries, transference and countertransference, counselor self-disclosure, recovery issues, sexual harassment; and, self-awareness regarding cultural bias and the need for cultural competency within the counselor/client relationship. This course focuses on knowledge of the purpose of and responsibility to seek and utilize clinical supervision; professional scope of practice in substance use disorder counseling; staying consistent in the professional role at all times both with colleague and/or client interactions and in professional and community settings; client rights; and, potential conflicts of interest. This course focuses on the knowledge of current federal (42CFR Part 2, Health Insurance Portability and Accountability Act [HIPAA] Sections 160 & 164), and state laws governing the appropriate delivery of alcohol and substance use disorder services.

The course explores the ability to explain the rationale for decisions affecting confidentiality; confidentiality best practices and administrative rules, including jurisdictional specific rules and regulations regarding best practices for handling confidential client information; emphasis on

program specific policies/procedures involving confidentiality, as well as legal issues that relate to substance use disorder clients; an understanding to seek clinical supervision on complex issues relating to confidentiality and legal matters; information which addresses confidentiality and legal issues associated in work with clients impacted by HIV/AIDS; and, consequences of violating codes of ethics, confidentiality laws, and client rights.

Course work drawn from Section 2. Group Counseling, and Section 4. Counselor-Client Relationships; and, Confidentiality/Legal Issues of the NYS OASAS, Credentialed Alcoholism and Substance Abuse Counselor (CASAC) 350-Hour Education and Training Standardized Curriculum.

LEARNING OBJECTIVES:

At the end of this course, the student will have the following knowledge and abilities:

- ✓ Understand and describe the essentials of substance use disorder counseling for groups of individuals, including support groups
- ✓ Describe the essential issues that characterize the development of a group and the group developmental stages involved
- ✓ Understand theoretical approaches to group counseling
- ✓ Describe the ongoing assessment of group dynamic and the adjustments that often accompany group counseling
- ✓ Understand the importance of educating group members on the use of addiction medications (including but not limited to methadone, buprenorphine, alcohol dependence medications, and psychiatric medications)
- ✓ Familiar with the value of the use of different group counseling methods, leadership styles, and facilitation styles
- ✓ Describe strategies congruent with enhancing both process and content to meet group needs
- ✓ Understand and appreciate the function of group members and of group leaders in the group process with respect to various facilitator roles and techniques
- ✓ Identify the difference between the group content and the group process
- ✓ Identify methods and techniques of group problem-solving, decision-making, and group conflict
- ✓ Understand the trust dynamic that must be established and maintained in group work
- ✓ Understand the group process to prepare group members for transition and to resolve transition problems
- ✓ Understand and appreciate the contribution of new and continuing group members in the group process
- ✓ Describe group features, such pre-group preparation, structure and safety
- ✓ Select, apply, and evaluate a variety of interpersonal and communication skills in order to develop and maintain empowering relationships with and between group members
- ✓ Identify when and how to use appropriate power in group
- ✓ Understand the importance of adapting group counseling skills as appropriate for the group type
- ✓ Understand the risk and protection factors that characterize individuals and groups and their living environment

- ✓ Understand the ways in which a therapeutic alliance is an agreement between counselor and client on goals, treatment tasks or methods, and the relational bond
- ✓ Identify the strategies that help to define and create therapeutic alliance
- ✓ Become knowledgeable about building effective counselor-client relationship with the use of the skills of attending
- ✓ Understand the impact of effective communication in the client-counselor relationship
- ✓ Understand clinical boundaries for establishing effective counselor/client relationships
- ✓ Identify specific issues of sexual harassment
- ✓ Describe reflection of feeling and reflection of content in the counseling relationship
- ✓ Understand issues of self-awareness with respect to cultural bias
- ✓ Become knowledgeable about aspects of transference, and counter-transference
- ✓ Discuss the therapeutic value of counselor self-disclosure
- ✓ Discuss the counselor-client relationship as being primary, with specific techniques being secondary
- ✓ Discuss the importance of maintaining of ethical standards in the counselor-client relationship
- ✓ Explain federal regulations pertaining to substance abuse/chemical dependency and describe the processes related to court ordered subpoenas seeking a consumer/client's case record, CFR Part 2, HIPPA regulations
- ✓ Describe the various sections of a Consent for Release of Information document (e.g., the time period for which the Release covers)
- ✓ Discuss two reasons why the confidentiality of client identity is protected by law
- ✓ Explain the technique and purposeful use of disclosure and its benefits and liabilities
- ✓ Explain at least four specific conditions which prohibit the disclosure of records or other information concerning any consumer/client in a federally assisted substance abuse/chemical dependency program
- ✓ Discuss the components of State HIV confidentiality laws as they pertain to alcoholism and substance abuse clients

Learning Assessment

Assessment will be based on:

- Attendance
- Achievement of course objectives as shown by:
 - Class Participation
 - Reaction Papers
 - Oral Presentations
 - Term Paper based on the integration of theory and practice
 - Quizzes and Exams

COURSE OUTLINE:

Week #1 Introduction to Group Counseling/Dynamics; Overview of Group Theory: The Psychoanalytic Approach to Group, Adlerian Group Counseling, Psychodrama in Groups, Choice Theory/Reality Therapy in Groups

- Week #2 Overview of Group Theory: The Existential Approach, To Group, The Person-Centered Approach to Groups, Gestalt Therapy in Groups, Cognitive Behavioral Approaches to Group, Rational Emotive Behavior Therapy in Groups, Transactional Analysis in Groups, Choice Theory/Reality Therapy in Groups
- Week #3 Formation Stage and Pre-Group Issues: Open versus Closed Group? Homogeneous versus Heterogeneous Groups; Relationships Matter: Building Authentic Rapport that Generates Trust Needed to Facilitate Healing; Strategies for Creating Therapeutic Alliance; Therapeutic Alliance as Strong Predictor of Treatment Outcome
- Week #4 Formation Stage: Group Size, Frequency and Length, Short-term versus Long-term Groups, Guidelines for Orientation and Preparation of Group Members; The Importance of Building Rapport: Methods and Issues; Impact of Demographic Characteristics on Therapeutic Alliance; Dual Relationship; Client factors: General Social Support; Cautious Personality; Problem Orientation; Recovery Environment Risks; Counselor Attributes For Therapeutic Alliance: Genuineness, Unconditional Positive Regard, Recovery Status; Truthfulness
- Week #5 Initial Stage: Primary Tasks of the Orientation Stage, Establishing Trust, Ways of Maintaining Trust, Member Functions, Leader Functions
- Week #6 Stage: Reluctance, Guardedness, Member and Leader Functions; Structure and Safety; Attrition Dropout, Adding New Group Members, Screening, Recruiting Members
- Week #7 Working Stage of Group Work; Consolidation Stage of Group Work; Education of Group Members on the use of Addiction Medications and Psychiatric Medications
- Week #8 Working Stage of Group Work; Consolidation Stage of Group Work; Education of Group Members on the use of Addiction Medications and Psychiatric Medications
- Week #9 Characteristics of Group Facilitator; Person-centered: Facilitator as “Change Agent;” Counselor Attributes For Therapeutic Alliance: Genuineness, Unconditional Positive Regard, Recovery Status; Warmth, Truthfulness...Continued Techniques: Empathy, Reflection of Content, reflection Feeling; Techniques: Empathy, Reflection of Content, reflection Feeling...Continued Sexual Harassment; Self-Awareness; Transference and Counter-Transference
- Week #10 Types of Group: Group Psychotherapy, Psychoeducational Groups, Task Facilitation Groups, Counseling Group, Brief Group Work; Power-differential and Counselor/Client Boundary

- Week #11 Exploration of Facilitation Styles; Systematic Evolution of Groups, Predicting Problems, and Intervening Therapeutically; Title 42 Code of Federal Regulations Part 2; Exceptions to Consent for Release of Information, Informed Consent; Health Insurance Portability and Accountability of 1996 (HIPAA) and the Addiction Counselor Responsibilities, Handling HIV/AIDS Reporting Requirements; Components of Consent for Release of Information; Informed Consents; Re-disclosures; Safeguarding Health and Welfare of Clients; Seeking Clinical Supervision on Complex Issues of Confidentiality; Exceptions When Client's Signed Consent is Not Needed: Medical Emergency; Exceptions When Client's Signed Consent is Not Needed: Intra-Agency Communication; a Reporting of an Incident of child Abuse and Neglect
- Week #12 Inclusion and Identity: Finding an Identity in the Group and determining the Degree to Which One Would Become Active Member; Third-Party Health Insurance/Consent for Release of Information; Legal Mandates: With Child and Adult Protective Services/Confidentiality; Mandates: With Parole/Probation; Confidentiality/Legal Issues and Best Practices
- Week #13 Facilitation; Application of Various Theoretically-Based Techniques Critiqued
- Week #14 Comprehensive Review of Course

Required Readings

SAMSHA. (2015) *Addiction Counseling Competencies: The Knowledge, Skills and Attitudes of Professional Practice*.

<https://store.samhsa.gov/product/TAP-21-Addiction-Counseling-Competencies/SMA15-4171>

SAMSHA. (2015) *Substance Abuse Treatment: Group Therapy*

<https://store.samhsa.gov/product/TIP-41-Substance-Abuse-Treatment-Group-Therapy/SMA15-3991>

Straussner, S. L. A., (2014). *Clinical work with substance-abusing clients* (3rd ed.), New York: Guilford Press.

<https://www.vitalsource.com/products/clinical-work-with-substance-abusing-clients-shulamith-lala-ashenberg-v9781462512850?term=Clinical+work+with+substance-abusing+clients>

Brandler, S. (2015). *Groupwork: Skills and strategies for effective interventions* (3rd ed.). Routledge.

<https://www.vitalsource.com/products/group-work-sondra-brandler-v9781317653301>

Toseland, R. W. (2017). *An introduction to groupwork practice* (8th ed.). Pearson.

<https://www.vitalsource.com/products/introduction-to-group-work-practice-an-ronald-w-toseland-v9780134059051>

CASAC #005**Syllabus**

Course Title: **CASAC #5 Professional Ethics and Confidentiality in Substance Abuse/Chemical Dependency Counseling**
Instructor's Name: TBA
Course Schedule: Provided Within a 3.25 Hour period Weekly/14 Weeks
Delivery Mode: Instructor Led Classroom, Experiential Activities

COURSE DESCRIPTION:

This course examines the various theories on human growth and development to include cognitive, physical, psychological, emotional, and spiritual development of human beings with the emphasis on substance use. This course focuses on both life-threatening and non-life-threatening crisis situations and impact on recovery. The course examines crisis situations/incidents that need an immediate response and how to triage; methods to respond to client and/or family in crisis; utilizing crisis intervention techniques and documenting results. A primary aspect of screening is the integration of theories on human growth and development in identifying clients with possible substance misuse or abuse problems.

This course also focuses on emergency procedures associated with overdose and acute withdrawal symptoms; and utilizing crisis situations to facilitate the recovery process. This course provides presentation utilizing cultural and age appropriate training techniques that address how to provide relevant information about substance use disorders and related problems to patients, families, and communities to encourage wellness and increase understanding of addiction; and, presentation and training techniques that address and support substance use disorder prevention, treatment, and the recovery process.

This course also focuses on the knowledge of the connection of the theories and models of Substance Use Disorders and Gambling prevention to current best practices, including OASAS' Risk and Protection framework, SAMHSA's Strategic Prevention Framework, model programs, and environmental strategies; and, knowledge of the importance of life skills to the prevention and treatment of substance use disorders.

This course provides knowledge of the use of critical thinking and analysis in effective ethical decision-making; examines the differences between virtue ethics and ethical decision-making by formal code of ethics; provides knowledge of professional and ethical responsibilities of Addictions Counselors; includes formal canons of ethical principles. Must include but is not limited to, the CASAC Canon of Ethical Principles, the American Psychological Association Code of Ethical Principles and Code of Conduct, the ethical codes of the American Counseling Association and of the National Association of Social Workers, the American Association for Marriage and Family Therapy and the National Organization for Human Service Education. The course also examines clinical supervision as an ethical obligation throughout the career of a

counselor; and provides knowledge of the ethical concerns and need for clear client/counselor boundaries related to the use of technology including text messaging, social media, and E-Mail. This course focuses on the knowledge of current federal (42CFR Part 2, Health Insurance Portability and Accountability Act [HIPAA] Sections 160 & 164), and state laws governing the appropriate delivery of alcohol and substance use disorder services. The course explores the ability to explain the rationale for decisions affecting confidentiality; confidentiality best practices and administrative rules, including jurisdictional specific rules and regulations regarding best practices for handling confidential client information; emphasis on program specific policies/procedures involving confidentiality, as well as legal issues that relate to substance use disorder clients; an understanding to seek clinical supervision on complex issues relating to confidentiality and legal matters; information which addresses confidentiality and legal issues associated in work with clients impacted by HIV/AIDS; and, consequences of violating codes of ethics, confidentiality laws, and client rights.

Course work drawn from Section 2. Theories of Human development and the Relationship to Substance Use, Crisis Management, from Section 3. Patient, Family, and Community Education and Prevention, and from Section 4. Ethical Decision Making & Conduct of the NYS OASAS, Credentialed Alcoholism and Substance Abuse Counselor (CASAC) 350-Hour Education and Training Standardized Curriculum.

LEARNING OBJECTIVES:

At the end of this course, the student will have the following knowledge and abilities:

- ✓ Gain insight into human developmental and into one's own developmental milestones concerns
- ✓ Describe substance abuse in the context of the influences of and the impact on developmental milestones
- ✓ Understand the way in which substance abuse has a genetic basis
- ✓ Understand some of the basic influences on human development
- ✓ Understand development as a continuing process throughout the lifespan
- ✓ Differentiate among psychoanalytic, behavioral, cognitive, and humanist models
- ✓ Define lifespan development
- ✓ Examine the social-environmental determinants on lifespan development
- ✓ Identify aspects of human development in terms of cognitive, social, physical, psychological, emotional, spiritual and behavioral and the various theories on human growth and development (e.g., Social Cognitive Theory concept of self-efficacy)
- ✓ Explore the ways that developmental theories are used to describe, understand, predict, and control or modify behavior
- ✓ Explain the utility for a screening process over the scope of the lifespan development areas
- ✓ Understand the multiplicity of definitions for "crisis" generally, and for facilitating the recovery process for individuals with substance use disorders more specifically
- ✓ Analyze the concept of "balance," "equilibrium," and "homeostasis" as being basic to crisis theory and that this theoretical approach can be used with families, groups, and communities as well as with individuals
- ✓ Discuss crisis management as an essential counselor function and methods for responding to client and or family in crisis

- ✓ Understand the goal of crisis management which is to help the client cope with immediate problem, regain equilibrium, and function anew
- ✓ Understand the work of crisis management as time-limited
- ✓ Identify models/tasks for crisis intervention: Continuous (assessment, safety, support) as being those that are addressed throughout the entire intervention process; and Focused (contact, re-establishing control, defining the problem, and follow-up) as being time-encapsulated
- ✓ Familiarity with community based crisis management teams/resources and emergency procedures associated with overdose and acute withdrawal symptoms
- ✓ Understand that crisis theory proposes that people exist in an emotional homeostasis that can be disrupted when they encounter an event with which they perceive to be beyond their coping ability
- ✓ Describe how the socio-cultural nature of substance use disorders is an important aspect in providing relevant age-appropriate information to patients, families, and communities
- ✓ Describe risk factors that inhibit healthy youth development in three domains (patient and peer, community, school) and foster substance use
- ✓ Develop an understanding that evidenced-base family skills training is based on solid theory that include the process and mechanism that will be employed in reducing risks and building protection, promoting prosocial behaviors
- ✓ Discuss types (fear appeal messages used with adolescents) and essentials in designing prevention messages
- ✓ Understand the importance of life skills to the preventions of substance use disorders
- ✓ Describe SAMHSA's Strategic prevention framework, model programs, and environmental strategies
- ✓ Understand that the dissemination of substance abuse prevention information must be backed up with a values exploration, skills building, responsible decision-making, negotiation, and refusal skills
- ✓ Understand that with increased risk factors (transitions and mobility, community disorganization, low neighborhood attachment) there is an increased likelihood of substance use
- ✓ Discuss youth gambling problem and prevention
- ✓ Evaluate OASAS's Risk and Protection framework as a roadmap to guide planning and program development in order to promote health
- ✓ Describe aspects of addiction counseling as unique in the helping professions
- ✓ Explain the difference between values, morals, professional ethics and legal responsibilities
- ✓ Describe the ethical issues that arise with the use of short Message Service (SMS) or text messaging (TM) as it relates to confidentiality, documentation. Appropriateness of use and misinterpretations
- ✓ Describe situations involving values, morals, or professional ethics which arise in working with clients and explain approaches to handling them. In addition, understand clinical boundaries, regarding transference, and counter-transference, and counselor self-disclosure. To include knowledge and use of critical thinking and understand differences between virtue ethics and ethical decision making
- ✓ Explain specific conditions which prohibit the disclosure of records or other information concerning any consumer/client in a federally assisted substance abuse/chemical

- dependency program
- ✓ Understand CASAC Canon Code of Ethics, as well as APA ethics and codes of conduct and understand supervision as an ethical obligation throughout the counselor's career, including sexual harassment, self-disclosure, and the need for cultural competency. Will also become familiar with ethical codes of American Counseling Association, NASW, and National Association for Human Services Education
 - ✓ Understand the difference between stress and burnout
 - ✓ Understand the various types of stress management
 - ✓ Discuss the reporting requirements for the HIV/AIDS population
 - ✓ Explain the technique and purposeful use of disclosure and its benefits and liabilities
 - ✓ List and explain exceptions where a substance abuse client's information may be released without the client's signed consent for release of information
 - ✓ Understand the use of critical thinking and analysis in ethical decision making
 - ✓ Understand disclosures to third-party payers
 - ✓ Describe informed consent versus consent for release of information
 - ✓ Understand how to respond to subpoenas and warrants
 - ✓ Explain federal regulations pertaining to substance abuse/chemical dependency and describe the processes related to court ordered subpoenas seeking a consumer/client's case record, CFR Part 2, HIPPA regulations
 - ✓ Describe the various sections of a Consent for Release of Information document (e.g., the time period for which the Release covers)
 - ✓ Discuss two reasons why the confidentiality of client identity is protected by law
 - ✓ Explain the technique and purposeful use of disclosure and its benefits and liabilities
 - ✓ Explain at least four specific conditions which prohibit the disclosure of records or other information concerning any consumer/client in a federally assisted substance abuse/chemical dependency program
 - ✓ Discuss the components of State HIV confidentiality laws as they pertain to alcoholism and substance abuse clients

Learning Assessment

Assessment will be based on:

- Attendance
- Achievement of course objectives as shown by:
 - Class Participation
 - Reaction Papers
 - Oral Presentations
 - Term Paper based on the integration of theory and practice
 - Quizzes and Exams

COURSE OUTLINE:

Knowledge of material presented in readings and class discussions will be assessed on exams, written assignments, and class participation:

Week #1 Introduction of Theories of Human Development and the Relationship to

- Substance Use: Theoretical Perspectives on Lifespan development; Introduction of Theories of Human Development and the Relationship to Substance Use: Theoretical Perspectives on Lifespan development; Teratogenic Impact on Development; Maternal Substance Use; Behavioral and Environmental Risk of ATOD; The Process of Screening in Human Growth and Development Areas such as emotional and psychological
- Week #2 Teratogenic Impact on Development; Maternal Substance Use; Behavioral and Environmental Risk of ATOD; Assessing The Humanistic Perspective: Concentrating on the Unique Qualities of Human Beings; The Behavioral Perspective; Physical Development and Substance Use; Meeting Developmental Milestones; Jean Piaget's Social Cognitive Development; Bandura's Social Cognitive Theory; Erikson's Psychosocial Stages of Development: Implications for Working with Substance Abuse/Chemical Dependency Clients; Limitations Erikson's Theory
- Week #3 Assessing The Humanistic Perspective: Concentrating on the Unique Qualities of Human Beings; Spirituality: Development of a Sense of Attachment to a Higher Power; Individuative-Reflective Stage of Faith; Development of Conjunctive Stage of Faith; Psychodynamic Developmental Milestones; Social and Personality Development; Life Review and Reminiscence: The Common Theme of Personality Development
- Week #4 The Behavioral Perspective; Physical Development and Substance Use; Meeting Developmental Milestones
- Week #5 Jean Piaget's Social Cognitive Development; Bandura's Social Cognitive Model; Life Span; Age Stratification Approaches to Late Adulthood; Older adults and Substance Use Disorders/Chemical Dependency; Human Growth and Development Across lifespan Critiqued; Understanding the Process of Dying: Elizabeth Kubler-Ross
- Week #6 Erikson's Psychosocial Stages of Development: Implications for Working with Substance Abuse/Chemical Dependency Clients; Limitations Erikson's Theory; Four Crisis Management Implications Emanating From a Crisis Theory Approach: 1) Crisis Situation where Counselor must be Immediately Available at the Time of Crisis When the individual is Motivated to Deal with the Problem Because of Pain and Discomfort
- Week #7 Spirituality: Development of a Sense of Attachment to a Higher Power; Individuative-Reflective Stage of Faith; Development of Conjunctive Stage of Faith
- Week #8 Psychodynamic Developmental Milestones; Introduction to Crisis Management: An Essential Function of the Counselor; Four Crisis Management Implications Emanating From a Crisis Theory Approach: 2) Focus on Present Problem; Old

Scars Which Tend to Contribute; Four Crisis Management Implications Emanating From a Crisis Theory Approach: 3) Rational and Adaptive Capabilities of the Client are supported and Strengthened; Four Crisis Management Implications Emanating From a Crisis theory Approach: 4) During Crisis, the Counselor is More Active Than in Non-Crisis Situations; Counselor May Give Advice More Freely and be Authoritative Without Fear of Undermining The Client's Capacity to Act

- Week #9 Social and Personality Development; Utilizing Crisis Intervention Techniques: Ventilation of Feelings in Safe Situation; Method: Expressing Feelings about Present and Past Crises, Relating them to Facts; Operational Principle: Facilitate Expression of Emotion; How People Change: Overwhelming Emotion Can Hamper or Destroy Coping Ability; Free Person to Use Coping Ability; Restoration of Functioning Ability; The Right for Remediation of Suffering; Task Model for Crisis Intervention: (Continuous) Assessment, Safety, Support; Task Model for Crisis intervention: (Focused) Contact, Re-Establishing Control, Defining the Problem, Follow-up
- Week #10 Life Review and Reminiscence: The Common Theme of Personality Development; Community Mobile Crisis: Concepts; Overdose Procedures; Naloxone Training, Acute Withdrawal Symptoms; Educating Patients, Families, and the Community About the Effect of Substance Use Disorders on the Family, Patient, or Significant Other; Domains: Community, Family, School, Individual and Peer; Risk Factors: Increase the Likelihood of Problem Behaviors; Protective Factors: Decrease the Likelihood of Problem Behaviors; Matching Life Skills to Age Level and Effectiveness In Preventing Substance Use; Prosocial Behaviors; Community Domain: Extreme Economic Deprivation, Transition and mobility; Family Domain: Family History of the Problem Behavior, Family Management Problems, parental Attitudes; School Domain: Academic Failure, Low commitment to School Individual and Peer Domain: Peer Rewards for substance use
- Week #11 Life Span; Age Stratification Approaches to Late Adulthood; Older adults and Substance Use Disorders/Chemical Dependency; Protective Factors: Community Opportunities for Prosocial Involvement; Protective Factors: Family Opportunities for Prosocial Involvement and Rewards; Factors: School Opportunities and Rewards; Protective Factors: Social Skills, Belief in Moral Model, Prosocial Involvement; At-Risk Youth Gambling Problem; SAMHSA's Strategic Prevention Framework, Model Programs, and Environmental Strategies; A Five Step Prevention Approach; Addiction Field Clients' Identifying Information is Protected by Law; An Introduction: Set of Principles which Guide Substance Abuse Counseling; NYS CASAC Counselor Canon of Ethics; Ethical Concerns and Technology; Implications of Clinical Services via Online Real Time Chat Text-based Communication and Clients and Implications for Best Practice; Values Clarification; Ethics is Not Black or White but Many Gray Areas; Knowing Your Limitations

- Week #12 Human Growth and Development Across lifespan Critiqued; Comparable Codes of Ethics in the Helping Profession: Social Work and Other Allied Health Professions; Multiple Relationships; Ethical Dilemmas; Ethical Decision-Making Clinical Supervision as an Ethical Obligation; Virtue Ethics (values, morals, right/wrong) and Professional Ethics-Nuances; Virtue Ethics (values, morals, right/wrong) and Professional; Title 42 Code of Federal Regulations Part 2, Exceptions to Consent for Release of Information, Informed Consent Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Addiction Counselor Responsibilities, Handling HIV/AIDS Reporting Requirements; Components of Consent for Release of Information; Informed Consents; Re-disclosures; Safeguarding Health and Welfare of Clients
- Week #13 Understanding the Process of Dying: Elizabeth Kubler-Ross; Seeking Clinical Supervision on Complex Issues of Confidentiality; Exceptions When Client's Signed Consent is Not Needed: Medical Emergency; Exceptions When Client's Signed Consent is Not Needed: Intra-Agency Communication; a Reporting of an Incident Of child Abuse and Neglect; Third-Party Health Insurance/Consent for Release of Information; Legal Mandates: With Child and Adult Protective Services/Confidentiality; Legal Mandates: With Parole/Probation; Confidentiality/Legal Issues and Best Practices;
- Week #14 Comprehensive Review of Course

Required Readings

SAMSHA. (2015) *Addiction Counseling Competencies: The Knowledge, Skills and Attitudes of Professional Practice*.

<https://store.samhsa.gov/product/TAP-21-Addiction-Counseling-Competencies/SMA15-4171>

Corey, G. (2015). *Issues and ethics in the helping professions* (9th ed.). Cengage.

<https://www.vitalsource.com/products/issues-and-ethics-in-the-helping-professions-with-gerald-corey-v9781305479838>

Legal Action Center, (2018) *Confidentiality and communication: A guide to the federal drug and alcohol confidentiality law and HIPPA*. Legal Action Center of the City of New York.

<https://lac.org/online-store-2/>

Credentialed Alcoholism and Substance Abuse Counselor (CASAC) Canon of Ethical Principles

https://www.oasas.ny.gov/sqa/credentialing/casac_canon.cfm

American Counseling Association (ACA) Code of Ethics (2014)

<https://www.counseling.org/knowledge-center/ethics>

National Association of Social Workers (NASW) Code of Ethics (2017)

<https://www.socialworkers.org/About/Ethics/Code-of-Ethics>

American Psychological Association (APA) Code of Ethics (2016)

<http://www.apa.org/ethics/code/>

Recommended Readings

White, W. L., & Popovits, R. M., (2001). *Critical incidents: Ethical issues in the prevention and treatment of addiction*. (2nd ed). Bloomington, Illinois: Lighthouse Institute.

Straussner, S. L. A., (2014). *Clinical work with substance-abusing clients* (3rd ed.), New York: Guilford Press.

<https://www.vitalsource.com/products/clinical-work-with-substance-abusing-clients-shulamith-lala-ashenberg-v9781462512850?term=Clinical+work+with+substance-abusing+clients>

CASAC #006**Syllabus**

Course Title:	CASAC #006 Diverse Populations, Cultural Competence and Multicultural Issues In the Treatment of Substance Abuse and Chemical Dependency
Instructor's Name:	TBA
Course Schedule:	Provided within a 3.25 Hour period Weekly/14 Weeks
Delivery Mode:	Instructor Led Classroom, Experiential Activities

COURSE DESCRIPTION:

This course explores recognizing, identifying, interpreting, assessing and understanding verbal and non-verbal behaviors; enhancing client engagement, also known as building rapport, through empathy, active listening, authenticity, appropriate self-disclosure, development of unconditional positive regard, and consideration of the stages of change. The course covers the various manifestations of client ambivalence related to readiness to change and stage of change; determining relevant therapeutic approaches appropriate to stages of change/recovery and specific client needs.

This course covers counseling approaches including counseling communication skills such as developing the therapeutic alliance. The effective use of open and closed ended questions and other interview techniques are studied. Responding appropriately to ambivalence, defensive mechanisms, and resistance is explored. This course focuses on feedback procedure such as reflection, reframing, interpretation, and clarification use, method; eliciting feedback to assure understanding of information given.

Accommodating diverse communication styles and systems (e.g., providing both oral and written instructions, tailoring vocabulary to the client's level of understanding, utilizing different techniques based on the client's learning style) is studied. The use of positive reinforcement such as identifying client strengths, instilling hope, identifying client potential and affirming behaviors is also covered. Demonstrating and maintain a non-judgmental attitude; conveying respect for personal differences and individual needs of the client; presenting technical information in a manner appropriate to the client; explaining difficulty or contradicting concepts to clients in language that helps them understand differences in approaches to recovery; and, evaluating the reception of the information provided is covered in this course. This course also focuses on educating, communicating, and protecting client rights through the application of advocacy techniques for client specific needs; grievance processes, and the termination process: techniques and procedures for both individual and group counseling.

This course emphasizes specific population as defined by race, minority/protected status, ethnicity; gender, religion, legal status, age, and other status to include content specific to veterans, trauma survivors, criminal justice-involved, sexual orientation, domestic violence, co-existence psychiatric disorders, compulsive behavior disorders or other disabilities.

This course examines the specific ATOD prevention/treatment needs of particular populations,

the different patient feelings and behaviors that may result from their respective culture including those about substance use, resources available to diverse populations, and development of the skills necessary to effectively counsel individuals in those populations.

The course covers cultural competency and the ability of the counselor to understand diversity in order to, communicate with, and effectively interact with people across diverse cultures.

“Cultural competence” has three key components: (a) Knowledge of different cultural practices and worldviews, (b) skills to determine and use proficient intervention strategies, and (c) recognize one’s own cultural worldview or cultural conditioning. In addition, this course examines how culture, demographics, and other client characteristics affect response to client’s treatment and how counselor’s bias can impact response to treatment; and the use of the Cultural Formation Outline in the current edition of the DSM.

Course work drawn from Section 2. Foundational Counseling skills of Individual and Group Counseling; and, Counseling Special Populations/Cultural Competency of the NYS OASAS, Credentialed Alcoholism and Substance Abuse Counselor (CASA) 350-Hour Education and Training Standardized Curriculum.

LEARNING OBJECTIVES:

At the end of this course, the student will have the following knowledge and abilities:

- ✓ Analyze the concept of readiness to change as having a high degree of both importance and confidence
- ✓ Analyze the importance of the idea that the client may not perceive that change is important, in which case the benefits of the behavior (drug use) outweighs the perceived consequences, or because they are not confident that they are able to make the change
- ✓ Understand that the skilled work of recognizing, identifying, interpreting, assessing, and understand verbal and non-verbal behaviors can effectuate the building of a rapport with the client
- ✓ Describe the concept of the decisional balance of ambivalence
- ✓ Describe the importance and strategies of raising ambivalence in the client population
- ✓ Understand that the strength of the therapeutic alliance is a source of increased self-efficacy for client
- ✓ Discuss effective feedback (communication) versus roadblocks to communication
- ✓ Discuss the termination process as an important aspect of the therapeutic alliance
- ✓ Describe the ways in which many learners stay within their “comfort zone” by utilizing their dominant learning style
- ✓ Describe the importance of “autonomy” for clients and their rights through the application of advocacy and grievance process
- ✓ Describe hope based language versus fear based language
- ✓ Understand race and ethnicity as well as the role of culture and cultural competency in addictions interventions, treatment, and recovery support
- ✓ Identify special populations, defined by race, ethnicity, gender, religion, legal status, age, as well as veterans. Also, identify special populations related sexual orientation, domestic violence, trauma survivors, and those with psychiatric disorders, and other

- disabilities
- ✓ Explain the ways in which cultural competence is a dynamic, ongoing developmental process that requires a long-term commitment and is achieved over time
 - ✓ Explain DSM's "Cultural Formulation" outline as a way of understanding and appreciating the importance of cultural context of illness experience as essential for effective diagnostic assessment and clinical management
 - ✓ Explain specifically the utility of assessing information (using CFI) about cultural features of an individual's mental health problem and how it relates to a social and cultural context and history
 - ✓ Define "culture" in its manifold dimensions
 - ✓ Identify an awareness of one's own cultural worldview and a sociological imagination
 - ✓ Describe a continuum of cultural competence, which characterizes various possible responses from cultures other than their own
 - ✓ Evaluate three key components of cultural competence: 1) knowledge of different cultural practices and world views, 2) skills to determine and use proficient intervention strategies, and 3) recognize one's own cultural worldview or culture conditioning
 - ✓ Understand different cultural practices and worldviews
 - ✓ Understand differences in the delivery of substance abuse services to adolescents and the elderly
 - ✓ Employ the essentially appropriate and culturally competent knowledge and skills necessary to work effectively with diverse populations
 - ✓ Understand multicultural trends and pluralistic trends affecting development, including characteristics and concerns between and within diverse groups and special populations

Learning Assessment

Assessment will be based on:

- Attendance
- Achievement of course objectives as shown by:
 - Class Participation
 - Reaction Papers
 - Oral Presentations
 - Term Paper based on the integration of theory and practice
 - Quizzes and Exams

COURSE OUTLINE:

- | | |
|---------|--|
| Week #1 | Introduction to Rogerian Constructs; Enhancement of Client Engagement; Clarification of Terms: Empathy, Non-judgmental, Genuineness; Culture Defined; Cultures as Dynamic Systems; Counseling with Diverse Populations; Importance of the Delivery of Culturally Responsive Services to Clients |
| Week #2 | Clarification of Terms Continued...Unconditional Positive Regard, Warmth, Immediacy, Self-efficacy Ambivalence; Resolving Ambivalence by Increasing Internal Motivation and increasing of Self-efficacy; Introduction to Outline for Cultural Formulation (DSM; Understanding the Basics of Race, Ethnicity, and Culture; Define Culture in its Several Dimensions; Cultural Formulation |

	Interview (CFI); Culture Identity of the Individual; Cultural Conceptualization of Distress
Week #3	The Essentials of Rapport as Trusting and Safe; Rapport: A Key to Treatment Success; Psychosocial Stressors and Cultural Features of Vulnerability and Resilience; Cultural Features of the Relationship Between the Individual and the Clinician; Overall Cultural Assessment How Culture Affects a Client's Pattern of Substance Use; Social Identity Plus Belonging Equal Ethnicity; Beliefs Plus Norms Plus Values Equal Culture
Week #4	Decisional Balance: Reasons to Change/Reasons Not to Change; Proper and Skillful use of the Stages of Change to Raise Ambivalence
Week #5	Developing Discrepancies; Eliciting Self-Motivating Statements from Client; Introduction to OARS; "Change Talk"
Week #6	Strength of Therapeutic Alliance as Source of Self-Efficacy; Rolling with Resistance, Resistance as a Misalliance in the Counselor-Client Relationship; Knowledge of Different Cultural Practices and World Views: Hispanics and Latinos; Africans and Black Americans; White Americans; Asian Americans, Native Hawaiians, and other Pacific Islanders; Native Americans; Skills to Determine and Use Proficient Intervention Strategies: Framing Issue in a Way that is Culturally Relevant; Self-Evaluate; Know Your Community-based Resources Hispanics and Latinos; Africans and Black Americans; White Americans; Asian Americans, Native Hawaiians, and other Pacific Islanders; Native Americans; LGBT individuals; Religious Populations
Week #7	Voice Inflections: Open-ended, Closed-ended Questions and a Combination; Structured, Unstructured, and Unstructured; Identifying Strengths, Instilling Hope, And the Use of Hope-Based Language
Week #8	Defining Reflection of Feeling, Reflection of Content; Communication Skills that Facilitate Change; Reframing, Interpretation, Clarification
Week #9	"Sustain Talk": Strategic Techniques in Responding; Roadblocks to Communication; Recognizing One's Own Cultural Worldview/Cultural Conditioning; Special Populations: Working with Disabled Clients/Consumers; Dual Diagnosed Sensitivities; Special Populations: Differences in the Delivery of Substance Use/Chemical Dependency Services to Adolescents and the Elderly; LGBT clients; Religious Populations
Week #10	Client Learning Styles: Independent, Dependent, Collaborative, Avoidant, Facilitative, Competitive; Learning Styles that are Inclined to Coincide with Teaching Styles; Avoiding Mismatches; Adult Learning
Week #11	The Importance of the Termination Process for Both Individual/Group

Counseling; Cultural Competence: Working with the LGBT and Transgender Populations; Compulsive Behaviors; Working With the Criminal Justice Involved Population; Services to Victims of Domestic Violence; Veterans; Brief Introduction to Trauma-Informed Education; Religious Minorities; Self-Assessment; Discussion of Biases

Week #12 Advocacy on Behalf of the Client as a Core Function; Formulation of client “Bill of Rights”

Week #13 Clinical Vignettes on Grievance Process

Week #14 Comprehensive Course Review

Required Readings

Sue, D.W. & Sue, D. (2016). *Counseling the culturally diverse: Theory and practice* (7th ed.). New York: John Wiley & Sons.

<https://www.vitalsource.com/products/counseling-the-culturally-diverse-theory-and-derald-wing-sue-david-sue-v9781119084372>

SAMSHA. (2015) *Addiction Counseling Competencies: The Knowledge, Skills and Attitudes of Professional Practice*.

<https://store.samhsa.gov/product/TAP-21-Addiction-Counseling-Competencies/SMA15-4171>

SAMSHA. (2018) A Provider's Introduction to Substance Abuse Treatment for Lesbian, Gay, Bisexual, and Transgender Individuals.

<https://www.store.samhsa.gov/product/A-Provider-s-Introduction-to-Substance-Abuse-Treatment-for-Lesbian-Gay-Bisexual-and-Transgender-Individuals/SMA12-4104>

SAMSHA. (2015). Improving Cultural Competence.

<https://store.samhsa.gov/product/TIP-59-Improving-Cultural-Competence/SMA15-4849>

Recommended Readings

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders*- (5th ed.). Washington DC: American Psychiatric Association.

https://www.appi.org/Course/Book/Subscription/JournalSubscription/id-3322/Diagnostic_and_Statistical_Manual_of_Mental_Disorders_%28DSM-5%C2%AE%29

NIDA. (2014, April 18). Principles of Drug Abuse Treatment for Criminal Justice Populations - A Research-Based Guide.

<https://www.drugabuse.gov/publications/principles-drug-abuse-treatment-criminal-justice-populations-research-based-guide>

Atkinson, D., Morten, G. & Sue, D.W. (2003). *Counseling American minorities* (6thed.). New York: McGraw-Hill.

Bell, P. (2002). *Chemical dependency and the African-American* (2nd ed.). Minneapolis: Hazelden.

Corey, G. (2017). *Theory and practice of counseling and psychotherapy* (10th ed.). Cengage.
<https://www.vitalsource.com/products/theory-and-practice-of-counseling-and-gerald-corey-v9781305855953>

Doweiko, H. (2015). *Concepts of chemical dependency* (9^h ed.). Cengage.
<https://www.vitalsource.com/products/concepts-of-chemical-dependency-harold-e-doweiko-v9781305177406>

Panaigua, F. (2014). *Assessing and treating culturally diverse clients* (4th ed.). California: Sage Publications.
<https://www.vitalsource.com/products/assessing-and-treating-culturally-diverse-clients-freddy-paniagua-v9781483320823>

Straussner, S. L. A., (2014). *Clinical work with substance-abusing clients* (3rd ed.), New York: Guilford Press.
<https://www.vitalsource.com/products/clinical-work-with-substance-abusing-clients-shulamith-lala-ashenberg-v9781462512850?term=Clinical+work+with+substance-abusing+clients>

CASAC #007**Syllabus**

Course Title: **CASAC #007 Theories and Principles of Substance Abuse/Chemical Dependency Counseling**
Instructor's Name: TBA
Course Schedule: Provided within a 3.25 Hour period Weekly/14 Weeks
Delivery Mode: Instructor Led Classroom, Experiential Activities

COURSE DESCRIPTION:

This course examines the practical knowledge, and develops skills in case management, monitoring, ongoing assessment, and referral of the client to the appropriate level of care; and, knowledge on service coordination activities throughout the continuum of care and the ability to apply placement, continued stay, and discharge criteria for each modality on the continuum of care; assessing client's needs for referral to outside services and the process for making a referral: identifying appropriate resources for specific client needs; documentation procedures for referral and follow-up including appropriate consent forms; planning and facilitating referral; referral rationale for group, individual, and family counseling; and, follow-up process with referral sources.

Students will examine the appropriate practices and agency policies reading case consultation; gathering, organizing, and interpreting data case presentation; seeking and responding to information from other professionals relative to own knowledge of the case; identifying appropriateness of request for information from consultation source; utilizing of consultation results; collaborating with outside resources and other professionals to maximize support for the recovery process; understanding importance of service coordination; and, the establishing trust and rapport with colleagues and developing and maintain collaborations with other professionals and community resources.

Opportunities will allow the student to analyze knowledge about the importance of self-care for the substance use disorder counselor, and the relationship between a healthy body, a healthy mind, and counselor wellness, and techniques for fostering that relationship (examples include but are not limited to, nutrition awareness, relaxation techniques, personal growth and clinical supervision).

This course examines mandated reporting of suspected child abuse and maltreatment to New York State Central Registry and criminal justice systems. On-line training in child abuse identification and reporting will be required. Course provides instructions on how to access "Free Learning and Development Opportunities" through New York State Office for Children and Family Services (OCFS) Mandated Reporter Resource Center to take On-line Course

COURSE OBJECTIVES:

At the end of this course, the student will have the following knowledge and abilities:

- ✓ Understand foundations for best practice in case management
- ✓ Understand discharge criteria for each modality on the continuum of care
- ✓ Understand the importance of developing practical knowledge and skills in case management as a process for assessing the individual's total situation and addressing needs and problems found in the assessment
- ✓ Understand that after assessment, there is an expectation to develop a plan that is comprehensive that includes thorough awareness of the services, social activities, and resources in the community
- ✓ Describe as connecting clients to people or agencies where they will receive the help or service they need
- ✓ Discuss case management in terms of assessing, planning, linking, monitoring, advocating as brokering service for the client
- ✓ Discuss the benefits and limitations non-treatment recovery resources such as 12 Steps
- ✓ Understand the importance of establishing trust and rapport with colleagues and developing and maintaining collaborations with other professionals and community resources
- ✓ Understand the importance of discovering appropriate practices and agency policies regarding case consultation
- ✓ Understand the purpose for clinical supervision including viewing it as part of professional development in order to work optimally with clients
- ✓ Describe an effective supervisory alliance as being characterized by a high level of trust, increased self-efficacy, increased comfort, higher level of motivation for growth, greater satisfaction with counselor role, and improved counselor performance
- ✓ Identify life-long learning as often a personal and professional goal as there is an interplay between the two
- ✓ Discuss and appreciate the array of definitions for professional growth (e.g., the cultivation of competence and confidence)
- ✓ Describe how professional growth requires an understanding of growth-producing experiences that are important to the personal transformation of the counselor
- ✓ Conduct a review of the literature on professional growth and identify a dearth in some aspects in the relevant literature
- ✓ Identify uncertainties or fears about professional growth in reaching developmental milestones (e.g., from novice to seasoned counselor)
- ✓ Recognize vicarious trauma or "secondary trauma" as a common reaction in professionals who work closely with individuals or group who have directly experienced trauma
- ✓ Describe the reactions that counselors sometimes experience in the process of helping others
- ✓ Understand early studies of the impact of stress on professional helpers with the use of the term "burnout" to describe the physical and emotional reactions that impede effective practice
- ✓ Describe stress theory and research

- ✓ Understand the difference between stress and burnout
- ✓ Understand the various types of stress management
- ✓ Understand the purpose of counselor wellness for the purpose of remaining well adjusted
- ✓ Describe their own values relating to counseling people with addictions and understand counselor burnout and other stresses to counseling
- ✓ Discuss the frustration, and emotional exhaustion that can occur as a result of working with clients who do not seem to be changing
- ✓ Articulate a personal need for self-care as an essential component of ongoing professional development
- ✓ Describe an understanding of what “compassion fatigue” is including the emotional depletion that professional caregivers such as addiction counselors often endure
- ✓ List three types of activities that have the potential for ameliorating the impact of stress in the helping profession (e.g., autogenic training, imagery)
- ✓ the various types of stress management
- ✓ Identify signs and symptoms of stress and burnout
- ✓ Identify common defense mechanisms to eliminate anxiety and conflict
- ✓ Describe how an addiction professional who is experiencing “compassion fatigue” may express distress with clients who he/she perceives are not changing
- ✓ Understand the exact physiology pathways of stress
- ✓ Describe vulnerabilities for burnout
- ✓ Describe the consequences of drug abuse as acute on both a personal and societal level
- ✓ Characterize prevention models including primary prevention of alcohol and other drugs
- ✓ Demonstrate knowledge of drug use to include initiation; intoxication; harmful use; abuse; dependence; withdrawal; relapse and recovery
- ✓ Understand that risk factors occur before substance abuse
- ✓ Understand the treatment and recovery continuum
- ✓ Describe the essentials of features of “Identification” and “assessment” on a continuum of care
- ✓ Describe the concept of “stabilization” on a continuum of care and the juxtaposition with the concept in the Gorski Developmental Stages of recovery
- ✓ Understand the scope of the drug dilemma and how social, political, economic, and cultural systems impact substance use
- ✓ Have a working knowledge of third-party reimbursement generally, and with regard to ICCD-10/DSM diagnoses specifically
- ✓ Distinguish between government health insurance plans, Health Maintenance Organization (HMOs), Preferred Provider Organizations (PPOs), other managed care plans, and indemnity plans
- ✓ Understand the importance of concrete services (e.g., benefits and entitlements) for substance abuse services
- ✓ Distinguish between Supplemental Security Benefits (SSI), Social Security Disability (SSDI), and Social Security Income
- ✓ Understand the integral role of faith based organization in the addictions field
- ✓ Understand the Gorski Developmental Model of Recovery
- ✓ Understand the importance of the applicability of screening, brief intervention, and referral to treatment (SBIRT) to a range of population groups
- ✓ Understand the increased risks of substance use for HIV/AIDS, STDs, TB, HEP, and

- other communicable disease
- ✓ Discuss familiarity with brief screening instruments
- ✓ Describe a brief screen as a “rapid, proactive procedure to identify individuals who may have a condition or be at risk for a condition before obvious manifestations occur”
- ✓ Discuss how SBIRT has been adopted from its use in primary care and emergency departments in the medical field
- ✓ Understand that SBIRT is a public health approach as well as a preventive service in that it may reduce the likelihood that a risky substance user may not develop health/medical conditions or exacerbate health/medical conditions in addition to providing appropriate interventions
- ✓ Discuss Interventions which promote health and wellness
- ✓ Describe the relationship of substance use to health
- ✓ Discuss the utility of SBIRT’s referral component in supporting recovery in substance use/mental health settings with regards to co-occurring disorders
- ✓ Identify the dimensions of health and describe how they relate to total wellness
- ✓ Describe factors that shape health behaviors
- ✓ Describe how substance use can be associated with risk-taking behaviors for contracting communicable, infectious diseases
- ✓ Understand the interplay between the various dimensions of health and substance abuse

Learning Assessment

Assessment will be based on:

- Attendance
- Achievement of course objectives as shown by:
 - Class Participation
 - Reaction Papers
 - Oral Presentations
 - Term Paper based on the integration of theory and practice
 - Quizzes and Exams

COURSE OUTLINE:

- | | |
|---------|--|
| Week #1 | Case Management Broken into Four Basic Categories: Assessment, (2) Planning, (3) Linking, (4) Monitoring; Introduction to Health and Wellness for the Addiction Counselor Aspects of Health: Emotional, Physical, Psychological, Spiritual, Intellectual Health; Homeostasis, Personal Stressors; Common Defense Mechanism Used to Alleviate and Eliminate and Conflict, Autogenic Training and other Methods for Ameliorating the Impact of Stress, Staying Well-Adjusted in Working with Clients in Recovery |
| Week #2 | Assessment: the Initial Problem and the Background of That Problem; the Client’s Current Situation; Functional Life Areas; What Client Needs to make Life More Stable; Strengths Including Those the Client Brings to the Problem and Those in Client’s Environment that Would be Useful in Resolving the Situation; Recommendation for a Service Plan |

- Week #3 Planning: Generate Initial Plan to address Issues Raised in Assessment; Keeping Abreast of Trends in the Substance Use Field; The Importance of Continuing Education; Importance of Evidence-Based Practices to the Counseling Process; Promoting Professional Socialization Behaviors In Counselors
- Week #4 Linking: Formal Agencies, Generic Resources, Support Groups, Peer Support, Informal Resources and Social Support Systems; Health Promotion: Activities Consisting of Efforts to Encourage Individuals to Engage in Health-Promoting Behaviors and Avoid or Disengage Health-Harming Substance Using Behaviors; Reducing Health-Related Diseases and Consequences; Secondary Prevention (Screening): Activities to Detect Disease, Injury, or Disability Before Symptoms Appear Including Medical Examinations (such as taking the blood pressure) or Screenings for TB, STDs Hepatitis and other Communicable Disease; Integrated Service Delivery: Preventing a Fragmented Delivery of Care
- Week #5 Monitoring: Occurring After Referrals and Links Indicated in Service Plan; Utility of Professional Portfolios for Fostering Professional Growth; Uncertainties and Fears About Professional Growth: Cultivation of Competence and Confidence; Professional Growth: Cultivation of Competence; Developmental Milestones: From Novice to Seasoned Counselor
- Week #6 ...Continued Monitoring: Occurring After Referrals and Links Indicated in Service Plan; Honing Clinical Skills; In-Service, Professional Conferences, Career Ladder; Continuing Education Credits (CEUs)
- Week #7 Advocacy: Brokering Services on Client's Behalf; Counselor's Own Emotional Resources Become Depleted: Compassionate Fatigue; Signs of Compassionate Fatigue: Irritability, Expression of Anger When Asked to Help; Making Disdainful or Negative Remarks About a Client's Distress or Avoiding Discussing Another Person's Painful Story; Professional Resilience: Commitment to Achieving Balance Between Occupational Stressors and Life Challenges; Juggling Life's Major Responsibilities; Professional Support Systems
Maladaptive Coping Strategies: Overworking, Avoiding Others; Shutting Down of Emotions; Practicing Self-Care; Employee Assistance Programs (EAP); Union Assistance Programs (UAP); Stress Physiology; Compassion Fatigue; Chronic Strain v. Daily Hassles; Acute Stress Disorder; Homeostasis; Eustress; Distress
- Week #8 Service Coordination: Working with other Agencies and Systems in the Client's Life; Overview of Risk Factors for Substance Use and its Precursors; Eliminating, Reducing, Mitigating Precursors; Investigation of Two Categories of Risk Factors: Broad Societal and Cultural (Contextual Factors); Normative Expectations; Risk Factors Lying Within Individuals; Individuals' Principal Interpersonal Environment (i.e., peer group)
- Week #9 Case Management, Supportive Case Management, Blended Case Management;

How Substance Use Disorders are Prevented; Primary Prevention: Promoting Abstinence, Developing Refusal Skills, Promoting Viable Alternatives or Activities; Introduction of Gorski and Miller; The Developmental Stages of Recovery: Transition, Stabilization, Early Recovery, Middle Recovery, Late Recovery, Maintenance; Gorski's Nine Principles to Facilitate Relapse Prevention; Detoxification as a Beginning Stage of Treatment in Stabilization; Managing Feelings in Early Recovery; Late Recovery and Maintenance Stages Studied; Exploring Ideas of a Balanced Lifestyle in Middle Recovery: of Dual-Diagnosis, Relapse, Lapse Risk Factors for Substance Use in Context of Individual and Group, Environment Levels of Care and Interventions:

- Week #10 Referral Rationale for Group, Individual, and Family Counseling, individual and Family Dynamics as a Knowledge Base for Case Management; In Alcohol and Drug Treatment, The Stepped Care Programs, Outpatient Substance Abuse Treatment, MMTP, MTA, In-patient Rehab, and an Assorted Array of Living Facilities Providing Various Levels of Treatment; Case Management, Partial Hospitalization, Assertive Treatment (ACT), Day Treatment Program, Psychosocial Clubs and a Range of Treatment Modalities
- Week #11 Documentation Procedures for Referral and Follow-Up/Appropriate Consent Forms; Features of an HMO: Primary Care Physician, Role of Gatekeeper; Federal and State Contributions to Medicaid its Impact on Behavioral Health/Substance Use Disorders: Third-Party Reimbursement; Substance Use Disorder Diagnoses and Health Insurance Reimbursement for Providers; Diagnostic-Related Groups (DRGs) and the Medicare Recipient: Cost-sharing Concepts Explored, Deductibles Medicaid Reimbursement Rates; Medicare and SSDI vs. Medicaid, Supplemental Security Income; Survivors Benefits; Aspects of The Affordable care Act and their Implications, Utilization Review, Capitation, Fee-For-Service; Analysis of Faith-Based Substance Abuse Programs as Occupying a Unique niche: Faith-Based Programs Rooted in Spirituality;
- Week #12 Preparing for Service Planning Case Conference; Disposition Planning Meeting; Review of the Health Care System: Problems as Over-Represented in Populations Seeking Medical Care; SUD Disorders and Three Stages of Liver Disease: Fatty Liver, Alcoholic Hepatitis, Cirrhosis; Introduction to Integrated Care; Commonly Used Pre-Screens and Rationale: Procedure for Identifying Individuals Who May Have Conditions Before Manifestation occur; AUDIT-C, DAST-1, NIDA; SBIRT Components: Screening, Brief Intervention, Referral to Treatment; SBIRT: Use as a Stand-Alone Intervention, Substance Use
- Week #13 ...Continued Preparing for Service Planning Case Conference; Disposition Planning Meeting; Brief Intervention: Open the Conversation, Share Feedback, Share Concerns, Increase Motivational Interviewing Techniques, Set a Goal, and Referral and follow-up Plan; Co-occurring Mental Health Disorders; Integrated Care and Referring to Appropriate Mental Health Personnel; Using the Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST) as Brief-Screen

Test for Individuals With Co-occurring Disorders; Significance of Diagnostic Reports and Laboratory Tests; Signs and Symptoms of Co-occurring Disorders; Treating substance use Disorder and Mental Health Disorder Concomitantly.

Week #14 Comprehensive Course Review

Required Readings

Corey, G. (2017). *Theory and practice of counseling and psychotherapy* (10th ed.). Cengage. <https://www.vitalsource.com/products/theory-and-practice-of-counseling-and-gerald-corey-v9781305855953>

SAMSHA (2016). *Comprehensive Case Management for Substance Abuse Treatment*. <https://store.samhsa.gov/product/TIP-27-Comprehensive-Case-Management-for-Substance-Abuse-Treatment/SMA15-4215>

Recommended Readings

Straussner, S. L. A., (2014). *Clinical work with substance-abusing clients* (3rd ed.), New York: Guilford Press.

<https://www.vitalsource.com/products/clinical-work-with-substance-abusing-clients-shulamith-lala-ashenberg-v9781462512850?term=Clinical+work+with+substance-abusing+clients>

Zimberg, S., Wallace, J., & Blume, S., (1985). *Practical approaches to alcoholism psychotherapy* (2nd ed.). NY., NY.: Plenum Press.

Beck, A. T., Wright, F. D., Newman, C.F., Liese, B.S., (1993) *Cognitive therapy of substance abuse*. N.Y., N.Y.: Guilford Press.

<https://www.vitalsource.com/products/cognitive-therapy-of-substance-abuse-aaron-t-beck-v9781462504329>

National Institute on Drug Abuse. NIH Publication No. 99-4180 (2018). *Principles of drug addiction treatment: A research-based guide*.

<https://www.drugabuse.gov/publications/principles-drug-addiction-treatment-research-based-guide-third-edition/acknowledgments>

CASAC #008**Syllabus**

Course Title: **CASAC #008 Assessment, Treatment Planning with Substance Abusing/Chemically Dependent Consumers**
Instructor's Name: TBA
Course Schedule: Provided within a 3-Hour period Weekly/15 Weeks
Delivery Mode: Instructor Led Classroom, Experiential Activities

COURSE DESCRIPTION:

This course provides the knowledge sufficient to determine the presence and extent of a substance use disorder and make a determination of any needed initial services to include: rapport building and interviewing techniques using stages of change to promote engagement; screening and assessment instruments including how to appropriately select and administer them and the elements of a biopsychosocial assessment.

Students explore systematic data gathering, assessing, organizing, prioritizing and summarizing from client (including presenting symptoms) and collateral sources, including other professionals, concerning all functional areas to include cognitive functioning. Interpreting written reports from other professionals, recognizing the need for additional information from collateral sources, updating and synthesizing data related to the client, identifying discrepancies in information given by the client and collateral sources, and assessing the appropriateness of involving concerned others in the assessment process with special consideration for domestic violence concerns.

This course examines the knowledge of the cooperative process by which counselor and client devise a substance use disorder treatment plan using best practices: a collaborative process that reflects a verbal agreement between a counselor and client. This course analyzes the knowledge of the components of the treatment plan including goal setting, measurable objectives, time frames; activities, evaluation, recurrence of symptoms/relapse prevention and discharge planning including discharge criteria; and, knowledge of the roles and tasks of the interdisciplinary treatment team in carrying out the treatment and discharge plan. The course focuses on updating a treatment: assessing client progress and circumstances which may necessitate a change in the course of treatment or impact prognosis development; collaborating with client and, when appropriate, concerned others to discuss progress and negotiate adjustments to the treatment plan; and, documenting adjustment the treatment plan.

Course work drawn from Section 3. Screening, Assessment; Treatment Planning, Client Record Keeping, and Discharge Planning; and, Case Management of the NYS OASAS, Credentialed Alcoholism and Substance Abuse Counselor (CASA) 350-Hour Education and Training Standardized Curriculum.

LEARNING OBJECTIVES:

At the end of this course, the student will have the following knowledge and abilities:

- ✓ Understand the purpose of assessment and describe the broad categories of data collection methods and the various sources of assessment information
- ✓ Describe the competencies required for the effective use of assessment instruments
- ✓ Describe degrees of structure in interviews (e.g., semi-structured, structured, unstructured)
- ✓ Understand Screening for specific issues outside the scope of practice of a substance use counselor that require referral
- ✓ Explain the significance of assessment, why it is done, and the impact it has on treatment progress
- ✓ Understand the importance of exploring treatment options with the client in order to take into account client need and how a client's financial situation influences treatment options and eligibility requirements for funding
- ✓ Develop a diagnostic evaluation of the client's substance abuse /chemical dependency and other co-existing condition(s) based on the results of all assessments in order to provide an integrated approach to treatment planning based on client's strengths, weaknesses, and identified problems and needs
- ✓ Explain the assessment process and techniques used with the client
- ✓ Identify and demonstrate knowledge and appropriate utilization of assessment tools
- ✓ Explain assessment results as they relate to the development of a treatment plan
- ✓ Identify and rank the problems that appear in the individual assessment plan
- ✓ Describe Functional Life Areas of assessment
- ✓ Understand basic measurement concepts such as scales of measurement
- ✓ Discuss the importance of following exactly as specified the procedures for administering, scoring, and interpreting assessment instruments
- ✓ Identify components of client charts to include discharge summaries
- ✓ Describe skills to utilize new technologies in the production of client records
- ✓ Describe the relationship among the psychosocial assessment, treatment plan, and progress notes
- ✓ Describe each step in treatment planning, its rationale, and the similarities and differences in service and treatment planning
- ✓ Prepare treatment plan incorporating immediate and long-term goals, expressed in behavioral terms, measurable objectives and time frames
- ✓ Prepare a treatment plan incorporating immediate and long-term goals, expressed in behavioral terms, measurable objectives and time frames in
- ✓ Identify the knowledge base of the roles and tasks of the interdisciplinary team in carrying out the treatment and discharge plan
- ✓ Describe the importance of the recurrence of symptoms/relapse prevention with having active involvement and real choice in the treatment plan process
- ✓ Identify means of writing brief and useful progress notes that support movement toward positive outcomes
- ✓ Develop a diagnostic evaluation of the client's substance abuse and other co-existing condition(s) based on the results of all assessments in order to provide an integrated approach to treatment planning based on client's strengths, weaknesses, and identified

- problems and needs
- ✓ Describe the importance of obtaining client's agreement to the treatment plan
 - ✓ Be able to explain the importance of accurate record keeping, safeguarding of client records and disclosing of client information consistent with Federal Confidentiality Regulations outlined in 42 C.F.R Part 2
 - ✓ Chart results via client record-keeping to assist in service coordination activities to include discharge planning using online technology. Will understand tasks and roles of interdisciplinary team
 - ✓ Understand foundations for best practice in case management
 - ✓ Understand discharge criteria for each modality on the continuum of care
 - ✓ Understand the importance of developing practical knowledge and skills in case management as a process for assessing the individual's total situation and addressing needs and problems found in the assessment
 - ✓ Understand that after assessment, there is an expectation to develop a plan that is comprehensive that includes thorough awareness of the services, social activities, and resources in the community
 - ✓ Describe as connecting clients to people or agencies where they will receive the help or service they need
 - ✓ Discuss case management in terms of assessing, planning, linking, monitoring, advocating as brokering service for the client
 - ✓ Discuss the benefits and limitations non-treatment recovery resources such as 12 Steps
 - ✓ Understand the importance of establishing trust and rapport with colleagues and developing and maintaining collaborations with other professionals and community resources
 - ✓ Understand the importance of discovering appropriate practices and agency policies regarding case consultation

Learning Assessment

Assessment will be based on:

- Attendance
- Achievement of course objectives as shown by:
 - Class Participation
 - Reaction Papers
 - Oral Presentations
 - Term Paper based on the integration of theory and practice
 - Quizzes and Exams

COURSE OUTLINE:

- Week #1 Development of Sufficient Knowledge for Determining Extent of the Existence of a Substance Use Disorder; Introduction to Course; Treatment Plan Described as Contract by which Counselor and Client Identify and Rank Problems Needing Addressing; Goal Setting; Obtaining Client's Agreement to Treatment Plan;

- Week #2 Developing a Rapport; Degrees of Structure in Interviews: Unstructured Interview, Structured Interview, Semi-Structured Interview; The Clinical Interview; Elements of Treatment Planning; Problem Identification; Functional Life Area: Chemical Dependency; Functional Life Area: Social/Family/Leisure Immediate Short-Term Goals; Long-Term Goals; Functional Life Area: Legal Immediate, Short-Term Goals; long-Term Goals; Formulating Objectives: Measurable, Frequency, Time-Specific in Behavioral Terms; Considerations in Charting: Discharge Summaries, Progress Notes; Functional Life Area: Housing
- Week #3 Sources of Information for Comprehensive Bio-Psychosocial Assessment: Face-to-Face Interview; Documentation of Information: Objective, Legible, Concise, Release Forms, Referral Forms, Mandated Forms; Client Signature, Multidisciplinary Team Signatures, Functional Life Areas: Vocational/Educational; Coordinating Services via Case Management and Referrals
- Week #4 Sources of Information for Comprehensive Bio-Psychosocial Assessment: Observation; Formal and Informal Observation; Unobtrusive and Inconspicuous Observation which provide Information for Bio-psychosocial Assessment; Anecdotal Records
- Week #5 Sources of Information for Comprehensive Bio-Psychosocial Assessment: Archival Records; Functional Life Areas: Medical, Mental; Concurrent Documentation, Electronic Health Records; Recurrence of Symptoms/Relapse Prevention; Charting and Record Keeping which Adhere to Regulations; Aftercare; Linear Connections Between Assessment, Treatment Plan, Progress Notes
- Week #6 Sources of Information for Comprehensive Bio-Psychosocial Assessment: Collateral Sources; Case Management Broken into Four Basic Categories: Assessment, (2) Planning, (3) Linking, (4) Monitoring
- Week #7 Sources of Information for Comprehensive Bio-Psychosocial Assessment: the Initial Problem and the Background of That Problem; the Client's Current Situation; Functional Life Areas; What Client Needs to make Life More Stable; Strengths Including Those the Client Brings to the Problem and Those in Client's Environment that Would be Useful in Resolving the Situation; Recommendation for a Service Plan
- Week #8 Assessing for Domestic Violence Concerns, Suicidality, Violence, and Risk Potential; Planning: Generate Initial Plan to address Issues Raised in Assessment; Linking: Formal Agencies, Support Systems; Monitoring: Occurring After Referrals and Links Indicated in Service plan; Advocacy: Brokering Services on Client's Behalf; Service Coordination: Working With Other Agencies and Systems in the Client's Life

- Week #9 Screening in Several Functional Life Areas: Chemical Dependency; Mental, Medical, Legal, Vocational/Educational, Social/Familial, Housing; Scope of Practice
- Week #10 Screening in Several Functional Life Areas: Chemical Dependency; Mental, Medical, Legal, Vocational/Educational, Social/Familial, Housing...Continued
- Week #11 Likert-Type Instruments, Self-Reports, Psychometrics, Interpreting Assessment Results, Formulating Diagnostic Impression; Intensive Case Management, Supportive Case Management, Blended Case Management; Referral Rationale for Group, Individual, and Family Counseling, individual and Family Dynamics In as a Knowledge Base for Case Management; Documentation Procedures for Referral and Follow-Up/Appropriate Consent Forms; Preparing for Service Planning Case Conference; Disposition Planning Meeting
- Week #12 Shaping the Client's Reactions to and Encourage Appropriate Use of Assessment Information; Client Ambivalence During Assessment; Assessments which take into Account Client's Financial Circumstances
- Week #13 Shaping the Client's Reactions to and Encourage Appropriate Use of Assessment Information; Client Ambivalence During Assessment; Assessments which take into Account Client's Financial Circumstances
- Week #14 Comprehensive Course Review

Required Readings

- SAMSHA (2016). *Comprehensive Case Management for Substance Abuse Treatment*.
<https://store.samhsa.gov/product/TIP-27-Comprehensive-Case-Management-for-Substance-Abuse-Treatment/SMA15-4215>
- SAMSHA. (2015) *Addiction Counseling Competencies: The Knowledge, Skills and Attitudes of Professional Practice*.
<https://store.samhsa.gov/product/TAP-21-Addiction-Counseling-Competencies/SMA15-4171>
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders- (5th ed.)*. Washington DC: American Psychiatric Association.
[https://www.appi.org/Course/Book/Subscription/JournalSubscription/id-3322/Diagnostic and Statistical Manual of Mental Disorders %28DSM-5%29](https://www.appi.org/Course/Book/Subscription/JournalSubscription/id-3322/Diagnostic%20and%20Statistical%20Manual%20of%20Mental%20Disorders%20-%28DSM-5%29).
- Lewis, J. A., Dana, R. Q., & Blevins, G.A. (1994). *Substance abuse counseling: An individualized approach (2nd ed.)*. Pacific Grove, CA: Brooks/Cole Publishing Company.

Recommended Readings

Straussner, S. L. A., (2014). *Clinical work with substance-abusing clients* (3rd ed.), New York: Guilford Press.

<https://www.vitalsource.com/products/clinical-work-with-substance-abusing-clients-shulamith-lala-ashenberg-v9781462512850?term=Clinical+work+with+substance-abusing+clients>

Beck, A. T., Wright, F. D., Newman, C.F., Liese, B.S., (1993) *Cognitive therapy of substance abuse*. N.Y., N.Y.: Guilford Press.

<https://www.vitalsource.com/products/cognitive-therapy-of-substance-abuse-aaron-t-beck-v9781462504329>

Adams, N., & Greider, D. M. (2013). *Treatment planning for person centered care: The road to mental health and addiction recovery* (2nd ed.). Burlington, MA; Elsevier

<https://www.elsevier.com/books/treatment-planning-for-person-centered-care/adams/978-0-12-394448-1>