

## **Addiction Consultant in Training (ACIT)**

### **Scope of Practice**

#### **DOMAIN 1: Scientific Principles of Substance Use and Co-Occurring Disorders**

- A. Learn how addiction affects the brain (e.g., disease model, reward pathways, tolerance, and cravings).
- B. Begin to be able to identify risk factors for developing substance use disorders (e.g., trauma, family history)
- C. Identify behavior, patterns, and progressive stages of substance use disorders and mental health situations.
- D. Begin to differentiate between common substances used and their characteristics.
  - 1. Pharmacology (e.g., drug classifications, interactions, cross-tolerance).
  - 2. Signs and symptoms of intoxication and overdose.
  - 3. Stages and symptoms of withdrawal.
  - 4. Physiological, psychological, and social effects.
- E. Learn about signs and symptoms of co-occurring mental health conditions in a both trainings and in direct services
- F. Become educated regarding the signs and symptoms of co-occurring medical conditions (e.g., cirrhosis, respiratory deficits, sexually transmitted infections).

#### **DOMAIN 2: Evidence-Based Screening and Assessment**

- A. Recognize and begin to use established interviewing techniques (e.g., Motivational interviewing, probing, questioning).
- B. Learn how established screening and assessment methods and instruments identify life skills strength and growth areas.
- C. Learn how substance use testing functions in a treatment setting
- D. Learn the established diagnostic criteria for substance use and mental health diagnosis (i.e., DSM) to assist with proper support for the clients' individual needs related to their diagnosis.

1. Begin to use said knowledge to assist with skills development to minimize symptoms.

E. Identify life skills needed by the client based upon diagnosis, client reported needs and support healthy lifestyle habits based upon life skills taught to improve daily living.

F. Learn about what a comprehensive client life history consists of (e.g., health, family, employment, collateral sources, previous treatment experiences etc.).

G. Gain insight into the courses of action that may meet the individual's immediate and ongoing needs.

H. Learn about how life skills development increases the likelihood of client success.

### **DOMAIN 3: Evidence-Based Treatment, Counseling, and Referral**

A. Learn about the verbal and non-verbal communication skills clients may exhibit in treatment setting.

B. Learn about the importance of building a therapeutic rapport with clients and observe methods and opportunities of building rapport.

C. Begin to identify client behavior patterns and how they impact treatment interventions.

D. Learn about what constitutes an emergency or crisis and what an appropriate, professional response would be.

1. This includes mandatory reporting laws, wellness checks, and verbal de-escalation skills.

E. Learn about appropriate referral policies and procedures.

F. Gain awareness about how different specific populations may benefit from specific interventions (i.e. pregnant clients, veterans, etc)

G. Collaborate with multidisciplinary team, other professionals, and client supports (e.g., family) to determine and provide care.

H. Receive training and exposure to the relationship between behavioral health and trauma.

1. Effect on client (e.g., adverse childhood experiences, domestic violence)

2. Effect on professionals (e.g., vicarious trauma, burnout)

I. Learn about and begin to identify the stages of change and ambivalence.

J. Receive training and education best practices in developing and updating skills development and/or case management plans.

1. Learn about the SMART model of goal development.
2. Identify how SMART goals may be used in a treatment plan.

K. Learn about the necessary and available resources to meet client needs.

L. Gain training in evidence-based approaches specific to group sessions.

1. Structured curriculum and process to skills development approaches.
2. Group dynamics and cohesiveness to group service delivery.

M. Learn about the importance of beginning discharge planning at intake and how to engage the client in the process.

N. Learn about the multiple pathways of recovery (e.g., MAT, holistic health, support groups, non-abstinence-based approaches)

O. Learn the difference between general communication and providing appropriate feedback (e.g., reflection, reframing, clarification).

P. Learn about the process of terminating the professional relationship.

#### **DOMAIN 4: Professional, Ethical and Legal Responsibilities**

A. Learn about the crucial nature of professional boundaries and practice self-awareness regarding:

1. Dual relationships.
2. Self-disclosure.
3. Ethical service delivery based upon certification code of ethics expectations.

B. Develop and utilize an appreciation of multiple perspectives throughout the treatment process.

C. Learn about the continuum of care and the role of the ACIT/ACIT II within that.

D. Learn about best practices and the legalities of professional documentation.

1. Record keeping.
2. Storage.

- E. Learn about confidentiality and privacy laws.
- F. Gain insight into the potential conflicts of interest that may exist in a treatment setting.
- G. Be able to fully describe the importance of informed consent guidelines.
- H. Routinely engage in obtaining supervision and consultation.
- I. Learn about state and programmatic grievance process and appropriate response to client grievances.
- J. Identify a person-centered approach to care.
- K. Be able to discuss established client/patient rights.

**Additional clarification items:**

- A. Obtainment of the ACIT certification DOES NOT authorize any of the following:
  - 1. Administration of a biopsychosocial assessment to determine any disorder.
    - a. An ACIT certification holder must also meet Indiana state statute requirements to administer said assessments.
  - 2. Administration of any medications.
    - b. An ACIT certification holder can support self-efficacy for a client related to self-medication management.
  - 3. This stated scope of work does not supersede any reimbursement expectations from various funding sources.