



**Australian Government**

**Department of Education, Employment and Workplace Relations**

# **CHCAOD408B Assess needs of clients with alcohol and-or other drugs issues**

**Release: 1**

## CHCAOD408B Assess needs of clients with alcohol and-or other drugs issues

### Modification History

CHC08 Version 3	CHC08 Version 4	Comments
CHCAOD408A Assess needs of clients with alcohol and/or other drugs issues	CHCAOD408B Assess needs of clients with alcohol and/or other drugs issues	Unit descriptor updated. Significant changes to range statement. ISC upgrade changes to remove references to old OHS legislation and replace with references to new WHS legislation. Amended related unit HLTFA311A and HLTFA412A.

### Unit Descriptor

#### Descriptor

This unit describes the knowledge and skills required to assess client needs in the context of identifying options for delivery of community services to support their needs

This unit includes applying standard processes and procedures to providing a comprehensive assessment of clients' alcohol and/or other drugs (AOD) and other needs, including referring clients to other services, as required

### Application of the Unit

#### Application

The skills and knowledge of this unit of competency are used by workers to conduct an assessment and determine eligibility for service provision

### Licensing/Regulatory Information

Not Applicable

## **Pre-Requisites**

Not Applicable

## **Employability Skills Information**

**Employability Skills**                      This unit contains Employability Skills

## **Elements and Performance Criteria Pre-Content**

Elements define the essential outcomes of a unit of competency.

The Performance Criteria specify the level of performance required to demonstrate achievement of the Element. Terms in italics are elaborated in the Range Statement.

## Elements and Performance Criteria

### ELEMENT

### PERFORMANCE CRITERIA

1. Prepare for *assessment*
  - 1.1 Conduct discussions with the client to identify reasons for seeking help and *other related information* that may assist in establishing a basis for further work
  - 1.2 Explain to *client* organisation parameters of confidentiality and policy/procedures
  - 1.3 Inform the client of the purpose and process of the assessment
  - 1.4 Confirm the client's understanding of the purpose and process of assessment
2. Conduct assessment
  - 2.1 Take *client's drug use history* in accordance with organisation policies and procedures
  - 2.2 Identify and clarify any previously identified co-morbidity / dual diagnosis in consultation with relevant health or community services professionals
  - 2.3 Assess the *current status of the client* using standardised AOD screens and from discussion with client
  - 2.4 Use established assessment procedures and protocols to identify issues related to client health in collaboration with relevant health professional as required
  - 2.5 Assess patterns of use with established assessment procedures and protocols
  - 2.6 Assess level of dependence with established assessment procedures and protocols
  - 2.7 Identify *indicators of other issues* that may affect work with the client through observation and questioning
  - 2.8 Provide a suitable and comfortable environment for the assessment
  - 2.9 Comply with the guidelines when conducting the assessment
  - 2.10 Conduct assessment in a fair manner
3. Identify and respond to need for referral
  - 3.1 Identify client issues that are outside the scope of the service and/or the scope of the worker
  - 3.2 Identify *appropriate service and other support options*

**ELEMENT****PERFORMANCE CRITERIA**

- 3.3 Inform the client of possible options
  - 3.4 Inform the client of the reasons for seeking other service and support options
  - 3.5 Confirm the client's understanding of options
  - 3.6 Work with the client to determine referral options and responsibilities
  - 3.7 Where appropriate, make referral with client consent and within organisation policy and procedures
4. Interpret and report on assessment results
- 4.1 Record assessment results according to defined guidelines
  - 4.2 Interpret assessment results according to defined guidelines
  - 4.3 Apply organisation criteria to determine entry or exclusion to services
  - 4.4 Prepare assessment report based on guidelines and organisation policy and procedures
5. Provide assessment feedback and information
- 5.1 Provide feedback to the person according to organisation policy and procedure
  - 5.2 Provide assessment information to others, including relevant health and/or community services professionals according to consent requirements and organisation policy and procedure

## Required Skills and Knowledge

### REQUIRED SKILLS AND KNOWLEDGE

This describes the essential skills and knowledge and their level required for this unit.

#### *Essential knowledge:*

The candidate must be able to demonstrate essential knowledge required to effectively do the task outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the identified work role

These include knowledge of:

- Aspects of working with clients, including:
  - common relapse precipitants
  - a range of strategies for working with clients
  - case management principles
  - client empowerment/disempowerment
  - client-centred approach
  - different lifestyles
  - protocols around use of interpreters
  - range of cultural contexts (e.g. lifestyle, set of beliefs and customs)
  - rights of workers and clients
  - self-esteem, abuse issues, self-awareness, own biases, ethical obligations relating to helping relationships
  - strategies to promote participation in programs
  - types of counselling (e.g. motivational interviewing, brief and intensive intervention, and relapse prevention)
- Co-morbidity issues relating to assessment of people with AOD issues
- Effects of AOD use, including:
  - basic health issues relating to AOD use (e.g. malnutrition, blood borne diseases, skin infestations, effects of drug use on health, cognitive, social, emotional development and impact on others)
  - basic pharmacology (e.g. types of drugs, dose levels, effects of specific drugs, tolerance, and treatment approaches broadly)
  - consequences and effects of drug substitution/replacement
  - effects of prescribed drugs on the use of other drugs
  - patterns of drug use in Australia and the local community
  - range of use and use scenarios (e.g. lifestyle context of illegal drug use)
  - signs and symptoms of medical risk associated with AOD use

## REQUIRED SKILLS AND KNOWLEDGE

- stages and symptoms of AOD withdrawal
- the effects of alcohol-related brain injury
- Established processes and protocols for determining:
  - health status
  - length of dependence
  - level of dependence
  - patterns of use
- Legal and organisation knowledge, including:
  - legal and organisation requirements for client registration, allocation and referral
  - organisation policies and procedures for documenting work with clients
  - organisation policies on reporting and confidentiality
  - range of AOD specific treatment intervention options, including detoxification, inpatient treatment programs, outpatient treatment services and brief interventions
  - understanding agency role, agency target group and the impacts on the local community
- Legal issues, including:
  - legal issues surrounding AOD use
  - legal status of drugs
- Policy issues, including:
  - harm minimisation, including a range of approaches (e.g. prevention, early intervention, abstinence, specialist treatment, supply control and safer drug use)
  - public health model (e.g. interaction of impact of drugs, individual and the environment)
- Risk management in relation to interventions for people with AOD and co-morbidity issues
- Theoretical frameworks about motivation to change AOD use
- Working with clients at risk of self-harm, including:
  - legal and ethical obligations regarding clients at risk of self-harm or with mental illnesses
  - links between predisposing factors for self-harm, drug use and mental health problems
  - no-suicide contracts and other protective strategies
  - suicidal or self-harming behaviour, ideation or intention

### *Essential skills:*

It is critical that the candidate demonstrate the ability to:

- Conduct assessments using established processes and protocols
- Work with clients:

## REQUIRED SKILLS AND KNOWLEDGE

- with a range of issues
- in a range of settings
- from different cultural backgrounds
- in a non-judgemental way
- in emergency situations

In addition, the candidate must be able to effectively do the task outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the identified work role

These include the ability to:

- Demonstrate first aid certification or equivalent skills (as per unit *HLTFA311A Apply first aid*) including:
  - cardio pulmonary resuscitation (CPR)
  - bandaging
  - managing toxic substances
  - managing bleeding
  - managing broken bones
  - managing consciousness
  - managing choking and knowledge of coma positions
- Establish rapport
- Use active listening including questioning
- Interpret verbal and non-verbal communication
- Work with a range of clients
- Contract with clients
- Demonstrate application of skills in:
  - conflict resolution
  - negotiation
  - crisis intervention
  - protective intervention
  - advocacy
  - networking and liaison with other agencies
  - identification of support structures
- Maintain documentation as required, including effective use of relevant information technology in line with work health and safety (WHS) guidelines

## Evidence Guide



## EVIDENCE GUIDE

The evidence guide provides advice on assessment and must be read in conjunction with the Performance Criteria, Required Skills and Knowledge, the Range Statement and the Assessment Guidelines for this Training Package.

*Critical aspects for assessment and evidence required to demonstrate this unit of competency:*

- The individual being assessed must provide evidence of specified essential knowledge as well as skills
- Competency must be demonstrated in a real work environment
- Competence in this unit must be assessed over a period of time in order to ensure consistency of performance across contexts applicable to the work environment
- Consistency in performance should consider the work environment, worker's role and responsibilities in the workplace

*Access and equity considerations:*

- All workers in community services should be aware of access, equity and human rights issues in relation to their own area of work
- All workers should develop their ability to work in a culturally and linguistically diverse (CALD) environments
- In recognition of particular issues facing Aboriginal and Torres Strait Islander communities, workers should be aware of cultural, historical and current issues impacting on Aboriginal and Torres Strait Islander people
- Assessors and trainers must take into account relevant access and equity issues, in particular relating to factors impacting on Aboriginal and/or Torres Strait Islander clients and communities

*Context of and specific resources for assessment:*

- Assessment of this competency will require human resources consistent with those outlined in the Assessment Guidelines
- In cases where the learner does not have the opportunity to cover all relevant aspects in the work environment, the remainder should be assessed through realistic simulations, projects, previous relevant experience or oral questioning on 'What if?' scenarios

*Method of assessment:*

- Assessment of this unit of competency will usually include observation of processes and procedures, oral and/or written questioning on essential knowledge and skills and consideration of required attitudes
- Where performance is not directly observed and/or is

## EVIDENCE GUIDE

required to be demonstrated over a 'period of time' and/or in a 'number of locations', any evidence should be authenticated by colleagues, supervisors, clients or other appropriate persons

*Related units:*

This unit of competency is recommended to be assessed in conjunction with a first aid unit

Depending on jurisdiction and job role, this may be:

- HLTFA311A Apply first aid
- or
- HLTFA412A Apply advanced first aid

## Range Statement

### RANGE STATEMENT

The Range Statement relates to the unit of competency as a whole. It allows for different work environments and situations that may affect performance. Add any essential operating conditions that may be present with training and assessment depending on the work situation, needs of the candidate, accessibility of the item, and local industry and regional contexts.

*Clients include:*

- Families and personal network of the client

*Assessment may take place:*

- Face-to-face
- By telephone

## RANGE STATEMENT

*Other related information may include:*

- Co-morbidity (dual diagnosis) issues related to physical/sensory/intellectual/psychiatric disabilities
- Developmental issues
- Doctor's or other professional's reports
- Information provided by family or support network
- Information related to legal issues for persons under court/protective/statutory orders
- That provided by other services via referral
- Trauma issues, for example, for survivors of domestic violence, abuse, neglect or sexual assault

*Current status of the client includes:*

- Determining readiness to change
- Physical, emotional, financial, legal and psychosocial state and immediate needs in these areas
- Other drug use in the family
- Level of risk of deliberate self-harm behaviours and/or harm to others
- Levels of risk behaviour associated with AOD use including behaviours which expose clients to blood borne diseases

*Indicators of other issues may include:*

- A history of mental health issues
- Indicators of abuse, neglect or harm including self-harm
- Indicators of child abuse
- Having no accommodation, employment or money

*Options for meeting the range of client needs may include:*

- Referral to other services
- Community intervention

## RANGE STATEMENT

- Client's drug use history refers to collection of relevant information on:*
- Name, age, gender, and so on
  - Drug history
  - Social and legal history
  - Current status including housing status
  - Agency ability to cater for the client needs
  - Mental health issues
  - Other relevant related issues affecting clients
- Early or short-term programs refers to:*
- Less intensive, shorter term activities that are an alternative to longer and more intensive programs. These brief interventions carried out by a range of workers, often opportunistically, are usually offered to those individuals who are less severely drug dependent
- Current information on related issues includes information on:*
- Meeting physical, emotional, financial and social needs
  - Contacts for self-help groups
  - Resources on dependency
  - Resources on alcohol and other drugs issues for families or personal network
  - Advocacy groups
  - Information regarding mental health and self-harm
  - Crisis and emergency contacts
- Goals and action plans may be short and long term and should include:*
- Harm minimisation (including abstinence, controlled drinking, safer sex, safer drug use, safe injecting)
  - Strategies to target reducing at risk behaviours

## RANGE STATEMENT

*Goals and action plans may include:*

- Vocational goals (employment and training)
- Accommodation
- Meeting immediate physical needs
- Maintenance of stable social and emotional environment
- Reintegration within social context
- Ensuring personal safety
- Management of crisis
- Timelines and priorities

*Relapse prevention strategies may include:*

- Identification of drug use 'triggers' and working with the client to develop responses to deal with triggers
- Referral to self help groups
- Stress management advice
- Ongoing positive support
- Monitoring of the client's progress
- Facilitating use of community resources
- Encouraging client to develop a support network
- Role play
- Discussion of strategies for stress management, money management, goal setting, prioritising, problem solving, decision-making, disengagement

*Client exit (negotiation of with the client) will depend on the organisation policies and procedures and the individual clients needs and may include:*

- Negotiation of contract with client
- Providing information on what the client may expect when they leave
- Providing follow up
- Ending the client/worker relationship
- Ensuring personal safety of clients at risk of self-harm including availability of ongoing supports from appropriate agencies
- Access to harm reduction consumables e.g. Needles, syringes, and needle exchange programs

## RANGE STATEMENT

*Client exit (organisation requirements) may include:*

- Client questionnaire
- Documentation including reason for exit and condition of client at exit
- Organisation's documentation on treatment/assessment progress

*Supporting a client to make contact with other services may include:*

- Making an appointment for the client
- Accompanying client to first appointment
- Organising for another appropriate person to accompany the client to an appointment
- Organising interpreter services for the client

*Appropriate services and other support options may include:*

- Detoxification
- Inpatient counselling
- Outpatient counselling
- Self-help groups
- Proclaimed place, rehabilitation centres, residential etc
- Sobering up units
- Services which provide consumables (e.g. syringes, thiamine, needle exchange, methadone or other drug substitution/replacement services)
- Therapeutic communities
- Department of Social Security
- Accommodation
- Emergency services
- Mental health services

*Follow up will depend on the organisation's policies and procedures and the client needs and may include:*

- Obtaining feedback and reports on outcomes of referrals from other agency in accordance with organisation policies and procedures including those referring to client confidentiality
- Checking protective support for suicide risk is available if required
- Making an appointment for follow up
- Contact with client at referral agency
- Liaison between alcohol and other drugs worker and other services

**RANGE STATEMENT**

*Outcomes may include:*

- Measurement of harm minimisation
- Changes made during intervention and changes sustained over time
- Those negotiated with the client as part of a management plan
- Referral and acceptance to another treatment program or half-way house
- Both positive and negative outcomes
- Linkage with appropriate services
- Client being moved from institution or service
- Client changes - behaviour, attitudinal

*Review against care plan may be:*

- Within the organisation
- In consultation with other agencies

**Unit Sector(s)**

Not Applicable