



FACT-Alberta
FEDERATION OF ASSOCIATIONS OF COUNSELLING THERAPISTS IN ALBERTA

Competencies for Entry to Practice for the Profession of
Addictions Counselling
For Alberta

September 14, 2018

Preface

Introduction and Acknowledgements

The Competency Profile for Addiction Counsellors was developed from the long-standing work of the Canadian Centre on Substance Use and Addiction (www.ccsa.ca). We wish to acknowledge that these competencies come from the “**Competencies for Canada’s Substance Abuse Workforce: Section I – Behavioural Competencies Report**” (CCSA, 2014A) and the “**Competencies for Canada’s Substance Abuse Workforce: Section VII - Technical Competencies Report**” (CCSA, 2014B).

The CCSA “started researching competencies for the substance abuse treatment field in 2006, [and] realized that extensive work was needed to define them” (CCSA, 2014B, p. 2). The research involved focus groups across Canada to review each competency. “Most of the focus groups were composed of frontline treatment service and program delivery staff. However, because of the importance of including concurrent disorders, CCSA hosted focus groups of mental health workers and nurses” (CCSA, 2014B, p. 2) as well as, “a focus group of probation officers and another of people with lived experience” (CCSA, 2014B, p. 2). This research done with 12 focus groups totally 110 participants helped to provided consistent terminology and give greater clarity and definition to each competency, especially regarding the treatment of concurrent disorders. We thank the CCSA for their important work in this area.

This profile was made by an Addictions Counselling Subcommittee of the Federation of Associations of Counselling Therapists - Alberta (FACT-AB) for establishing an entry to practice baseline in Addictions Counselling in Alberta.

Conceptual Framework

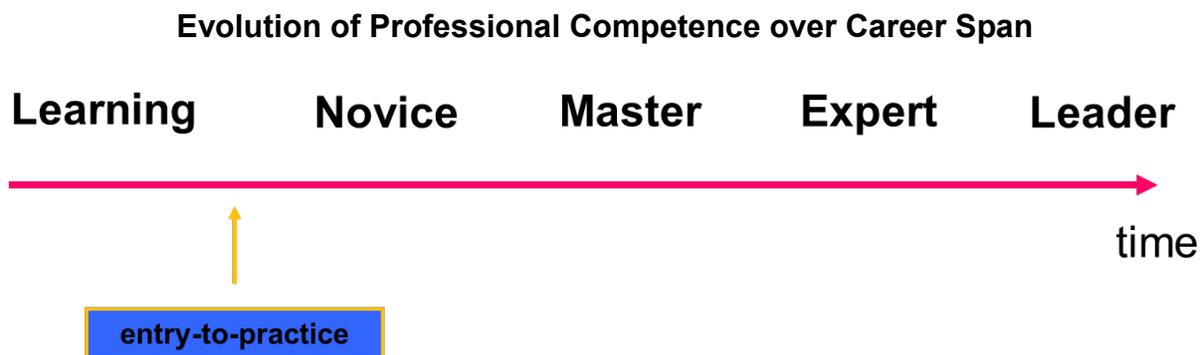
Competence and Competencies

As stated in the Competency Profile for Counselling Therapists, competence in the professional workplace is generally agreed to be a complex and subjective quality that is highly context-specific (Kane, 1992; Epstein & Hundert, 2002) and which does not lend itself to objective assessment in the abstract. To circumvent this difficulty and to enable reliable and objective education and assessment prior to entry to the profession, it is commonly assumed that competence is enabled by the possession of “competencies”, where:

A competency is defined as the ability to perform a practice task with a specified level of proficiency.

An entry-to-practice competency profile identifies the set of competencies expected at entry to the profession which is deemed to enable competent entry-level practice and to provide a foundation for ongoing development.

As well as being context-specific, workplace competence is developmental and impermanent. Over the span of a career a practitioner’s knowledge and skills develop as a result of experience and continuing education. Levels of proficiency increase in regularly-performed practice tasks; new practice tasks may be learned. Levels of proficiency in practice tasks that are not utilized may decrease. Added to this, practitioners may specialize in narrow areas of practice rather than general practice. As a result of these forces, practitioner competency sets evolve over time (Benner, 1984, Kaslow, 2007; Snell, 2014), and tend to individualize, as illustrated in the figure below.



Entry-Level Proficiency

The following statement characterizes the level of proficiency in the competencies expected at entry-to-practice:

When presented with commonly occurring practice situations, the entry-level Addictions Counsellor applies relevant competencies in a manner consistent with generally accepted standards in the profession, independently, and within a reasonable timeframe. The entry-level Addictions Counsellor selects and applies competencies in an informed manner, anticipates what outcomes to expect in a given situation, and responds appropriately.

The entry-level Addictions Counsellor recognizes unusual, difficult to resolve and complex situations, and takes appropriate steps to address them based on ethics and standards of practice; this includes seeking consultation or supervision, reviewing research literature, and referring the client.

Structural Framework

This competency profile includes 191 competencies organized under functional headings within four practice areas as follows:

Area 1. Knowledge and Understanding 1.1 Understanding Addiction 1.2 Understanding Concurrent Disorders 1.3 Understanding Medications 1.4 Program Development, Implementation and Evaluation	Area 4. Professionalism 4.1 Ethical Conduct 4.2 Client Centered Change 4.3 Client Service Orientation 4.4 Diversity and Cultural Responsiveness 4.6 Effective Communication 4.7 Adaptability and Flexibility 4.8 Analytical Thinking and Decision Making
Area 2. Counselling Therapy 2.1 Screening and Assessment 2.2 Treatment Planning 2.3 Crisis Intervention 2.4 Counselling 2.5 Trauma Specific Care 2.6 Case Management 2.7 Record Keeping and Documentation 2.8 Client Referral 2.9 Group Facilitation 2.10 Family and Social Support	Area 5. Team Collaboration 5.1 Planning and Organizing 5.2 Collaborating and Network Building 5.3 Interpersonal Rapport 5.4 Team Work and Cooperation 5.5 Developing Others 5.6 Leadership
Area 3. Community Engagement 3.1 Outreach 3.2 Community Development 3.3 Prevention and Health Promotion	Area 6. Reflective Practice 6.1 Self Care 6.2 Self Management 6.3 Self Motivation 6.4 Creativity and Innovation 6.5 Continuous Learning

The competencies listed in the profile should be regarded as an integrated set of abilities, each competency informing and qualifying the others; competencies are not intended to be used in isolation. They do not constitute a protocol for the practice of addictions counselling.

References

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COMPETENCIES FOR ADDICTIONS COUNSELLING

1. Knowledge & Understanding	
1.1 Understanding Physiology and Process of Addictions: Background or contextual knowledge of substance use and behavioural addiction, encompassing abuse, dependency, disorder, misuse, and addiction, with individuals, families, and communities.	
a	Applies knowledge of the bio-psycho-social-spiritual model of addiction and factors that contribute to or protect against addiction
b	Applies knowledge the continuum and process of addiction and recovery
c	Explains the range of factors that can aggravate or protect against the development of addiction problems, and works with clients to identify such factors in their cases, for example: <ul style="list-style-type: none"> • Age, gender, gender identity and sexual orientation • Social support • Biological markers and genetic vulnerability • Historical, social and cultural factors
d	Understands how mental illness and mental health issues affect the prevention, diagnosis and treatment of addiction
e	Explains the prevalence of concurrent disorders and histories of trauma in addicted clients, and applies this knowledge in working with clients
f	Applies a working understanding of how clients are impacted by stigma, trauma, cultural and historical events to all clinical work
g	Recognizes and applies the concepts of the family and social supports as systems with the potential to either support or undermine the client, and the type of impact a client's addiction often has on the family as a system
h	Applies knowledge of withdrawal management and treatment and relapse prevention approaches as it relates to a diversity of clients
i	Understands and applies concepts for harm reduction approaches
j	Consults evidence-informed resources, including the <i>Diagnostic and Statistical Manual of Mental Disorder</i> , to develop and apply an enhanced understanding of clients with concurrent disorders
k	Monitors information about current research to update and enhance the knowledge base applied when interacting with clients
l	Applies evidence-informed approaches to identify the severity of the client's substance use, addiction, and any other issues (e.g., problem gambling, tobacco use)
1.2 Understanding Concurrent Disorders: Knowledge and skills required to properly inform more specific aspects of a professional's work with clients with co-occurring addiction and mental illness or substance use and mental health issues.	
a	Understands and can explain to clients a clear understanding of what is meant by mental health and mental illness and the difference between them
b	Understands the factors that contribute to the presence of concurrent disorders in general and in specific populations and cultures
c	Understands and addresses the stigma that is often associated with mental illness and mental health issues, and how that may vary in different populations and cultures
d	Explains the relationship between mental illness and mental health issues and co-occurring substance use, abuse, and/or addiction
e	Applies an understanding regarding how many substance and behaviorally addicted clients have co-occurring mental illness or mental health issues
f	Explains an understanding of how many clients with addictions have histories of trauma, which can have an impact on their substance use and treatment
g	Describes how concurrent disorders impact of behavioural addictions, including outlining how substance use problems, mental illness and mental health issues affect the prevention, diagnosis and treatment of behavioural addictions
h	Knowledge and application of the most important evidence-informed references and resources that should inform their learning, including for example, the <i>Diagnostic and Statistical Manual of Mental Disorders</i> , and the <i>Mental Health Act</i>
i	Understand that family, social support and a host of other broad determinants of health can either contribute to or protect against the development of concurrent disorders
j	Understands ethical practice remaining within their knowledge and competencies and consult and collaborate with others as required

k	Engages with all clients, their families and social supports courteously, responsively and non-judgmentally.
1.3 Understanding Medications: The knowledge and skills required to understand psychopharmacology in the treatment of clients with substance use, behavioural addiction or concurrent disorders and to understand and respond to the impact that medications could have on the client.	
a	Explains in general terms the type of medications that are: <ul style="list-style-type: none"> • Useful in treating substance use, behavioural addiction or concurrent disorders • Used to address mood, behaviour and cognitive processes • Frequently used to treat pain • Most prone to overuse or abuse • Used to treat related conditions, like hepatitis
b	Recognizes the signs and symptoms of adverse drug reactions, and consults with medical professionals if adverse reactions are suspected
c	Explains in general terms how and why medications are used in the treatment of addiction and integrates a practical and level-appropriate knowledge of medications when working with clients
d	Understands the impact medications and other drugs can have on one another, and applies this understanding in working with clients
e	Explains the common effects of over-the-counter products and the potential impacts of using them incorrectly
f	Consults with professionals prescribing medications and monitors clients for signs of incorrect use of medication
g	Explains the way that drugs that alter mood, behaviour and cognitive processes are: <ul style="list-style-type: none"> • Categorized or classed (e.g., stimulant, sedative) and cites the proper and the street names for key drugs within those categories or classes • Administered • Likely to affect a client and the impact they are likely to have on a client if combined with other substances, including alcohol, or if use of the drug is stopped • Misused and what the impact of misuse is likely to be
h	Reviews research information about medications, such as methadone or buprenorphine, that are used in treating substance use, behavioural addiction and/or concurrent disorders
i	Informs clients of their right to use or not use medications, and incorporates client's decision into treatment approach
j	Supports client access to prescribed medications where barriers are present
1.4 Program Development, Implementation and Evaluation: Developing and implementing new addiction treatment programs, modifying existing programs to respond to identified needs and evaluating the outcomes of new or revised programs.	
a	Explains in general terms what is meant by needs assessment, program development, implementation and evaluation
b	Understands in general terms the rationale for each of these four components and the relationship among them
c	Supports others in their needs assessment, program development, implementation and evaluation efforts
d	Gathers information or assists in information gathering for reports and research, including evaluation
2. Counselling Therapy	
2.1 Screening & Assessment: Selecting, administering and interpreting the results of evidence-informed tools and methods to measure a client's addiction severity and related concerns, and inform the care and treatment plan.	
a	Explains in general terms that: <ul style="list-style-type: none"> • Screening begins the process of identifying and addressing client concerns and could lead to further investigation or not • Assessment is an ongoing process that evaluates client progress and provides a rationale for changing the treatment plan, as necessary • The relationship of screening and assessment to one another and to the range of other processes and services provided to the client
b	Acquires basic client information, adhering to all relevant templates or guides to ensure completeness and accuracy
c	Provides each client with an environment that feels safe in light of the client's needs, background and culture

d	Conducts screening and assessment using evidence-informed tools shown to lead to the best outcomes and validated for the client population being served
e	Conducts screening and assessment interviews exploring the client's underlying thoughts and emotions using: <ul style="list-style-type: none"> • A range of questioning techniques • Non-judgmental, open-ended questions • Inconsistencies (e.g., between verbal and non-verbal communication) to elicit accurate information • Language appropriate to the client's level of understanding
f	Delivers brief interventions for clients during screening or assessment services
g	Engages with each client to: <ul style="list-style-type: none"> • Identify relevant cultural and historical influences • Respond to that client's needs and build rapport • Enhance motivation to access relevant programs and services
h	Selects and applies screening and assessment tools and interprets data they yield to prioritize the client's issues and inform the development of treatment plans
i	Assesses the client's readiness to change on an on-going basis, noting any changes that occur and adapting the treatment plan accordingly
j	Identifies clients who might be at risk of suicide, self-harm or of harming others, and provides necessary support and interventions
k	Consults and collaborates with other professionals to clarify or enhance client provided information and identify risks that might not otherwise have emerged (e.g., incompatible medications, double-doctoring)
l	Refers clients who will not be involved further with the professional's organization to other community resources that could be helpful
m	Monitors current trends and information about research related to screening and assessment
2.2 Treatment Planning: Collaboratively developing a treatment plan based on screening and assessment findings, ensuring that activities and resources reflect the client's needs, strengths and goals. The process also includes monitoring, evaluating, planning for discharge and updating the treatment plan so that it reflects the client's evolving needs and goals.	
a	Assesses the client's current stage-of-readiness to commit to and engage in treatment plan activities
b	Collaborates with the client to establish a basic understanding of treatment planning
c	Collaborates with the client to identify realistic and achievable short and long-term goals
d	Collaborates with the client to identify cultural, contextual and personal factors that should be considered in the plan
e	Collaborates with the client to develop a holistic treatment plan based on best or promising practices and the client's goals, age, gender, cultural and contextual background, and so on
f	Collaborates with the client to adapt the plan over time, so it continues to respond to the client's motivation to change and other life circumstances
g	Establishes realistic expectations about the treatment plan with the client and the client's family, including client conduct, meeting attendance and active engagement in treatment activities
h	Keeps clear and accurate records of all key information gathered during the treatment planning process
i	Assesses the relative severity of the client's addiction and mental health issues, if present, and adjusts the treatment plan to reflect the relative priority of each providing an integrated addiction and mental health treatment plan
2.3 Crisis Intervention: Recognizing and responding effectively when an addiction or concurrent disorders client or associated group or community is in an unstable, risky, dangerous or potentially dangerous situation.	
a	Establishes a physically and emotionally safe environment for each client in crisis based on that client's unique needs
b	Communicates risks associated with addiction to clients
c	Collaborates with clients and their families to create plans for crisis prevention and intervention
d	Collaborates with clients and their families to assess and improve the skills they can use to cope during times of crisis
e	Monitors client's emotional state and responds appropriately
f	Calms escalating and potentially volatile situations, using a range of verbal and non-verbal communication skills

g	Supports clients in crisis, promoting safety and stability for them and their families
h	Implements crisis prevention plans where required
i	Assesses and monitors clients at risk of suicide and other substance-use related harms, and initiates appropriate interventions or referral, as required
2.4 Counselling: Applying a comprehensive range of evidence-informed counselling styles, techniques and methodologies aimed at improving the overall well-being of addicted and concurrent disordered clients.	
a	Collaborates with clients to establish and maintain a non-judgmental therapeutic relationship
b	Uses clear and concise written and oral communication
c	Creates and maintains a safe therapeutic environment
d	Collaborates with clients to understand the impact that the family as a system can have on the client's addiction process
e	Collaborates with clients to enhance their motivation and readiness to change by effectively applying skills such as rolling with resistance, being empathetic and supporting self-efficacy
f	Collaborates with clients to develop coping strategies to deal with challenging circumstances
g	Matches client's unique needs and life challenges to appropriate treatment and support options (e.g., harm-reduction approaches, outpatient or aftercare programs)
h	Effectively uses appropriate therapeutic client-centered interventions
i	Integrates evidence-informed counselling approaches based on each client's comprehensive assessment and treatment plans, when working with individuals and with groups
j	Adapts counselling approach to meet each client's unique needs
k	Collaborates with clients to identify relapse risk and protective factors
l	Develops and implements evidence-informed relapse prevention plans
m	Collaborates with clients to develop the skills associated with the recovery process
n	Collaborates with other practitioners to provide integrated care for clients
o	Reflects on his or her own personal and professional attitudes and cultural biases, and the impact they might have on the ability to interact with clients in a nonjudgmental way
p	Engages in self-analysis with clinical supervisor to recognize personal or professional limitations that can impede ability to work constructively with clients and mediate and resolve those limitations
2.5 Trauma Specific Care: Interacting with clients to identify and consider the impact that overwhelmingly negative events have on functioning and the ability to cope, and then developing and delivering interventions that emphasize safety, choice and personal control.	
a	Conducts screening and assessments to identify the presence of trauma-related symptoms
b	Engages clients in exploring the connection between trauma, addiction and mental illness or mental health issues
c	Creates treatment plans that integrate an understanding of the relationship between trauma, their addiction and mental illness or mental health issues
d	Collaborates with clients to create an integrated treatment approach for addiction, trauma, and concurrent disorders
e	Collaborates with clients to develop strategies that minimize the impact of triggers, vulnerabilities or other factors that contribute to re-traumatization
f	Supports client's self-efficacy, self-determination, dignity and personal control
2.6 Case Management: Facilitating client's movement within and between service providers. It includes maintaining accurate documentation, sharing client information appropriately and collaborating with other services providers	
a	Engages and works collaboratively with other service provider professionals
b	Understands the process for referral to and from other service providers

c	Initiates and engages in case conferencing when appropriate for best client care
d	Establishes and maintains treatment plans as part of a multi-disciplinary team
e	Evaluates ongoing treatment plans with clients, adjusting plans as appropriate
f	Establishes constructive relationships with a broad range of internal and external services and supports, using these relationships to facilitate client referrals
2.7 Record Keeping and Documentation: Creating and maintaining accurate, up-to-date, comprehensive client records able to withstand legal scrutiny.	
a	Adheres to all requirements and protocols about where, when and how client records are to be safeguarded
b	Ensures clarity and legibility of records in a timely manner
c	Obtains informed consent from clients and documentation required for exchanging information
d	Recognizes and addresses factors affecting the transfer of information and/or records to others
e	Uses appropriate terminology and approved abbreviations in client records and documentation
f	Records all client and related professional interactions in an objective and accurate manner that reflects organizational protocols, established professional practices and record keeping guidelines
2.8 Client Referral: Collaborating with clients, services and supports to identify and access the best available resources to meet clients' needs.	
a	Develops knowledge of and maintains relationships with referral resources
b	Builds and maintains a network of resources available for meeting client needs
c	Collaborates with the client about potential referral options, discussing priorities, expectations and required actions
d	Helps complete documents required for the referral process
e	Differentiates between the functions of other services providers and organizations
f	Assesses clients' readiness and motivation to participate in referral services and works with the client to enhance readiness
2.9 Group Facilitation: Using evidence-informed approaches to work effectively with clients in group.	
a	Understands the role of group intervention approaches in working with clients
b	Supports behaviours that lead to positive change
c	Utilizes a range of group facilitation approaches
d	Facilitates psycho-educational groups
e	Co-facilitates therapy groups
f	Screens and assesses group members for suitability and compatibility
g	Encourages the development of healthy social skills in all group members
h	Engages with group clients and develops rapport by using a range of therapeutic techniques
i	Recognizes and fosters the development of safe and healthy group dynamics
j	Adjusts facilitation style and approach to address client behaviours likely to impede group function
2.10 Family and Social Support: Working with clients and individuals and groups most affected by the client's addiction/mental health issue(s) and who are most able to either support or undermine the client's treatment goals.	
a	Recognizes the role of family and social supports for effective treatment and relapse prevention planning
b	Understands the impact that addiction and mental health issues can have on a client's family and the impact family can have on a client's addiction and mental health issues
c	Explains community resources available to the client and the client's family

d	Informs clients and families about their rights regarding their care
e	Engages with the client to identify all parties the client considers to be family
f	Engages with the client's family in a courteous, helpful and professional manner ensuring each of their rights are respected during all aspects of care
g	Identify and address risks to the safety and well-being of children and vulnerable adults
3. Community Engagement	
3.1 Outreach: Designing and delivering addiction and mental health services in the community to a broad range of clients, including those who might otherwise not seek or have access to those services.	
a	Recognizes what outreach is and the role it plays in prevention, early intervention and treatment
b	Supports the unique needs of marginalized, stigmatized or otherwise underserved populations
c	Recognizes the type of addiction and substance use issues typically seen in various populations
d	Understands the role of outreach workers within a multidisciplinary approach to care
e	Maintains professional relationships with representatives from community
3.2 Community Development: Working together to identify community needs and resources, and to plan and support or guide collective action.	
a	Accesses literature related to community development and addiction service delivery systems
b	Understands the principles of community capacity building
c	Supports the role of community members in initiating community development activities
d	Acts as first-line point of contact for community members
e	Maintains contact with community resources and referral sources
f	Works collaboratively and develops rapport with community members and groups
3.3 Prevention and Health Promotion: Engaging with addiction and mental health clients, their families and their communities to encourage the adoption of knowledge, behaviours, values and attitudes that promote personal and community well-being.	
a	Integrates the key social determinants of health in prevention and health promotion
b	Understands the continuum of prevention interventions from primary prevention to harm reduction
c	Applies understanding of risk and protective factors in substance use, behavioural addictions, and concurrent disorders
d	Recognizes the role of prevention outreach services as part of an effective prevention and health promotion strategy
e	Understands that prevention and health promotion efforts must be tailored to the culture, context and needs of target population
f	Assists in the delivery of a range of prevention programs and in coordinating communication between all involved parties
g	Engages with and responds to clients and community members and stakeholders
h	Empowers clients and their families in their abilities to reduce or eliminate the negative impact of addiction and/or concurrent disorders
4. Professionalism	
4.1	Ethical Conduct: <ul style="list-style-type: none"> • Provide professional services according to the principles and values of integrity, competence, responsibility, respect, and trust to safeguard both self and others. • Includes the development of professionalism and ethical behaviour in self and others (individuals, groups, organizations, communities). • Identifies and addresses ethical issues proactively • Adheres to all legislation, guidelines, procedures, protocols and professional ethics about privacy, confidentiality and human rights

4.2	<p>Client-Centered Change:</p> <ul style="list-style-type: none"> Enhance, facilitate, support, empower, and otherwise increase client motivation for positive change. Positive change is achieved by involving the client actively in the change process and encouraging the client to take responsibility for the outcomes they achieve. Clients may be individuals, groups, communities and organizations.
4.3	<p>Client Service Orientation:</p> <ul style="list-style-type: none"> Provide service excellence to clients (which can include individuals, groups, communities and organizations). Includes making a commitment to serve clients and focusing one's efforts on discovering and meeting client needs within personal, professional and organizational capacities and boundaries.
4.4	<p>Diversity and Cultural Responsiveness:</p> <ul style="list-style-type: none"> Provide respectful, equitable and effective services to diverse populations, as defined by culture, age, gender, language, ethnicity, socio-economic status, legal status, health, ability, sexual orientation, type and mode of substance use and/or addictive behaviours, etc. Affirm and value the worth of all individuals, families, groups and communities; and protect the dignity of all.
4.5	<p>Effective Communication:</p> <ul style="list-style-type: none"> Articulate both verbally and in writing across a range of technologies in a manner that builds trust, respect and credibility and that ensures the message is received and understood by the audience. Includes active listening skills (attending, being silent, summarizing, paraphrasing, questioning and empathizing) and congruent non-verbal communication.
4.6	<p>Adaptability/Flexibility:</p> <ul style="list-style-type: none"> Willingly adjust one's approach to meet the demands and needs of constantly changing conditions, situations and people and to work effectively in difficult or ambiguous situations.
4.7	<p>Analytical Thinking and Decision Making:</p> <ul style="list-style-type: none"> Gather, synthesize and evaluate information to determine possible alternatives and outcomes and make well-informed, timely decisions. Includes critical thinking and reasoning skills.
5. Team Collaboration	
5.1	<p>Planning and Organizing:</p> <ul style="list-style-type: none"> Identify and prioritize tasks, develop and implement plans, evaluate outcomes, and adjust activities to achieve objectives.
5.2	<p>Collaboration and Network Building:</p> <ul style="list-style-type: none"> Identify and create informal and formal interdisciplinary networks and allied community groups to support the provision of client service delivery and achievement of the organization's objectives. Clients include individuals, groups, organizations and communities.
5.3	<p>Interpersonal Rapport:</p> <ul style="list-style-type: none"> Establish and maintain relationships based on mutual respect and trust, appropriate sensitivity and transparency, empathy, and compassion with clients, colleagues, professional associates and the greater community. Encompasses skills of tact, diplomacy and sensitivity in all encounters with others.
5.4	<p>Teamwork and Cooperation:</p> <ul style="list-style-type: none"> Work cooperatively and productively with others within and across organizational units to achieve common goals; demonstrate respect, cooperation, collaboration, and consensus-building.
5.5	<p>Developing Others:</p> <ul style="list-style-type: none"> Facilitate and motivate sustained learning and create learning opportunities and resources, as well as promote and respect others' needs for ownership of learning outcomes. Includes creation of a continuous learning environment that fosters positive growth in both work and public contexts among peers, clients, client families, communities, and other groups (recipients).
5.6	<p>Leadership:</p> <ul style="list-style-type: none"> Help others achieve excellent results and create enthusiasm for a shared vision and mission, even in the face of critical debate and adversity.
6. Reflective Practice	
6.1	<p>Self-Care:</p> <ul style="list-style-type: none"> Deliberately and continuously apply professional and personal self-care principles to oneself and, at times, others to sustain optimal productivity while maintaining physical, mental, spiritual and emotional health.
6.2	<p>Self-Management:</p>

	<ul style="list-style-type: none"> • Appropriately manage one's own emotions and strong feelings; maintain a calm and tactful composure under a broad range of challenging circumstances; and think clearly and stay focused under pressure. Encompasses self-regulation and mindfulness.
6.3	<p>Self-Motivation:</p> <ul style="list-style-type: none"> • Remain motivated and focused on a goal until the best possible results are achieved, with both passion for making a difference in the addictions field and persistence despite confronting obstacles, resistance and setbacks.
6.4	<p>Creativity and Innovation:</p> <ul style="list-style-type: none"> • Use evidence-based practices in innovative and creative ways to initiate both effective new ways of working and advances in the understanding of the field of practice. • Innovation and creativity are achieved in translating research into practice to optimize improvements in service delivery and professional practice.
6.5	<p>Continuous Learning:</p> <ul style="list-style-type: none"> • Identify and pursue learning opportunities to enhance one's professional performance and development and the effective delivery of high-quality programs and services.