

MID-SOUTH SUBSTANCE ABUSE COMMISSION

Minimum Knowledge Standards for Substance Abuse Professionals - Communicable Disease – Related

ATTACHMENT A

A basic knowledge of HIV/AIDS, TB, Hepatitis, STD and the relationship to substance abuse is expected for program staff. The following are the minimal standards of knowledge necessary to meet this **Level 1** requirement.

At a minimum, **all** substance abuse program staff should have basic knowledge regarding communicable diseases, including:

- HIV/AIDS, TB, Hepatitis (especially A, B, and C) and STDs as they relate to the agency target population
- Modes of transmission (risk factors, myths and facts, etc.)
- Linkage between substance abuse and these communicable diseases
- Overview of treatment possibilities
- Local resources available for further information/screening
- Universal precaution procedures – basic knowledge of universal precautions for blood-borne and body fluids transmission of pathogens.

It is anticipated the above could be adequately covered in a two-hour session, with update trainings every two years, and may be provided by agency staff who have completed Level 2 training.

In addition to the above basic knowledge training, clinicians serving clients in a treatment setting are required to have an expanded level of training on HIV/AIDS, TB, Hepatitis and STD. This expanded **Level 2** of training is to include:

1. Expanded basics of HIV/AIDS, TB, and Hepatitis C
 - A. Statistics (statewide and local geographic area, modes of transmission, how to interpret)
 - B. HIV/AIDS, TB and Hepatitis C (what they are, cause, definition, types)
 - C. Stages/Phases of HIV/AIDS and Hepatitis infection (immune response and viral load, impact on other body organs, co-factors, signs and symptoms of related disease, including those specific to women and children, related infections and cancers)
 - D. Factors for assessing risk and willingness and/or ability for client behavior change (ways to eliminate/reduce risk; infection control)

2. Treatment options/possibilities (antiretrovirals, prophylaxis, anti-infectives, immune-modulators, clinical trials, nutrition, complementary/alternative treatments, impact of substance use on medication/treatment effectiveness)
3. Testing
 - A. HIV Antibody testing (philosophy, goals, legal requirements, benefits/risks, types (i.e., serum, OraSure), laboratory tests used, limitations, overview of testing processes)
 - B. Hepatitis testing and vaccines
 - C. TB testing and treatment
 - D. Options for STD screening/testing
4. Overview of psychosocial issues
 - A. Psychosocial framework (issues for people with HIV/AIDS)
 - B. Overview of psychological issues (social isolation, alteration in quality of life, self-esteem, intensity of emotion, control, denial, financial and employment issues)
5. Professional challenges (discussion on what some key issues may be for clinicians in a substance abuse treatment program, conceptions, attitudes/values, etc.)
6. Confidentiality, especially for HIV/AIDS (felony, partner notification, testing, reporting, ADA, HIPPA)
7. Resources (local, state, federal)

It is anticipated the above could be adequately covered in a three-hour session, with two-hour update trainings every two years. This level of training would require a more advanced level of expertise for the trainer, which could be achieved through the MDCH/HAPIS HIV Specialist training certification process. Targeted and focused training on one or two specific topics from the above list may be appropriate based on need identified within a region or specific agency, once basic level of training has been achieved.