

Curriculum Map with Sample Learning Objectives For the Behavioral Health Support Specialist Clinical Training Program

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PURPOSE

The following document provides the meta-competencies (MCs), competencies, and learning objectives (LOs) created for the UW BHSS Clinical Training Program Curriculum.

The sample LOs capture a high level of detail and use measurable verbs to capture the spirit of what evidence, via assessment, would indicate that a BHSS learner has met this objective by the end of the BHSS curriculum. The BHSS Project Team has provided this level of detail to be supportive, not prescriptive, to education partners as they learn about the BHSS Clinical Training Program curriculum and begin planning to implement a BHSS curriculum into their program.





DEFINITIONS

The numbering of the MCs, competencies, and learning objectives is not indicative of sequence of learning or difficulty. Instead, the learning objectives were created through the framework of Bloom's Taxonomy, beginning with knowledge, progressing to skills, then attitudes, progressing from lower- to higher-order thinking where appropriate. Each learning objective has a suffix of "K", "S", or "A". This indicates if the learning objective addresses knowledge (K), skill (S), or attitude (S).

Suggested sequencing is noted across a BHSS curriculum timeline:

- Pre-BHSS: Prerequisite learning and assessment that is assumed to have already occurred prior to the BHSS curriculum.
- **Foundations**: Learning and assessment that will happen earlier within the BHSS curriculum. Topics or content are foundational and will be built upon further in the curriculum.
- Advanced: Learning and assessment that will happen later within the BHSS curriculum. Topics or content are more complex and build upon learning that occurred in Pre-BHSS and Foundations learning.
- **Practicum**: Learning and assessment that will occur at an internship or practicum site while working with a site supervisor.

Sequencing is indicated in phases (Hundey & Watson, 2019):

- Introduce (I): "Key ideas, concepts, or skills related to the learning objective are introduced and demonstrated at an introductory level. Instruction and learning activities focus on basic knowledge, skills, and affect/attitudes and entry-level complexity".
- **Reinforce (R)**: "Learning objective is reinforced with feedback; learners demonstrate the learning objective at an increasing level of proficiency. Instruction and learning activities concentrate on enhancing and strengthening existing knowledge and skills, as well as expanding complexity".
- **Proficient (P)**: "Learners demonstrate the learning objective with the degree of competence or skill expected upon completion of the program, ideally via independent practice. Instruction and learning activities concentrate on enhancing and strengthening existing knowledge and skills, as well as expanding complexity".
- Not Addressed or Assessed (NA)

CREATIVE COMMONS

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FEEDBACK

If you would like to submit feedback about this BHSS Curriculum Map and its contents to the BHSS Project Team, please use the BHSS Curriculum Feedback Form. A member of the BHSS Project Team will follow up with you.





MC1: HEALTH EQUITY

				BHS	S Curricu	ılum	
Competency	Sample	Learning Objectives	Pre-BHSS	Foundations	Advanced	Practicum	Assessment Examples
1-a: Recognize the impact of	health d	isparities on patient engagement.					
Keywords: Care Coordination Health Equity Interviewing Skills	1а3-К	Describe methods for identifying SDOH.	I	R	Р		Quizzes
 Patient Engagement Patient-Centered Care Population Health Psychoeducation 	1a9-S	Incorporate knowledge of a patient's SDOH into interventions as appropriate.	NA	NA	I	R, P	 Analysis of case via class discussion or written paper Role play use of a screening tool with other students
 Screening Social and Cultural Diversity Social Determinants of Health (SDOH) Team-Based Care 	1a11-A	Value that everyone has equal opportunity for health and that reducing disparities benefits all.	I	R	Р		Shadowing providers in practicum Observed in practicum
1-b: Practice use of inclusive	commur	nication that supports healthcare equity.					
Keywords: • Documentation • Health Equity	1b5-K	Articulate the importance of using plain language and familiar concepts, words, numbers, and images in ways that make sense to a patient.	NA	I, R	Р		Classroom discussion Responding to case scenarios
Interviewing Skills Patient-Centered Care	1b11-S	Use language that is accessible and meaningful to the unique needs of a patient.	NA	I	R	Р	Role play scenarios Practice clinical documentation for case
Psychoeducation Social and Cultural Diversity	1b15-S	Use inclusive and bias-free language in writing and clinical practice.	NA	I	R	Р	scenario





MC2: HELPING RELATIONSHIP

				BHSS	S Curricu	lum	
Competency	Sample	Learning Objectives	Pre-BHSS	Foundations	Advanced	Practicum	Assessment Examples
		working alliance with patients and their support	network	ĸs.			, , ,
Keywords:	2a3-K	Describe the facilitative conditions of an effective working alliance.	NA	I, R, P			 Articulate purpose of supportive listening Quiz In-class assignments and reactions to role play sessions.
Interviewing Skills Patient-Centered Care	2a6-S	Explore a patient's perspective using supportive listening.	NA	NA	I, R	R, P	
Social and Cultural DiversityTherapeutic Skills	2a8-A	Appreciate the qualities of attending, genuineness, positive regard, and empathy when initiating relationships with patients.	NA	NA	I, R	R, P	
2-b: Engage patients to enha	ance part	icipation in care.					
Keywords: Care Coordination Case Management Crisis Intervention	2b4-K	Describe adaptive strategies of patient engagement for persons with disabilities.	NA	I, R	Р		
 Health Equity Intervention Interviewing Skills Motivational Interviewing (MI) Patient Engagement 	2b6-S	Support a patient in voicing their own care goals and challenges.	NA	NA	I	R, P	
 Patient Engagement Patient-Centered Care Population Health Shared Decision-Making Social and Cultural Diversity Therapeutic Skills 	2b9-A	Appreciate the impact of early engagement on improved patient outcomes.	NA	I, R	R, P		
2-c: Facilitate group psychoe	education						
Keywords: • Assessment	2c3-K	Identify stages of group formation, interaction, and adjournment.	NA	NA	I, R, P		Team based assignment to design a brief psychoeducation group including steps
 Care Coordination Group Skills Patient-Centered Care	2c9-S	Initiate a group, including establishing boundaries and norms for group process.	NA	NA	I, R	Р	psychoeducation group including steps with implementation, selection of best-fit techniques, and methods of evaluation.





		BHSS Curriculum				
		Pre-BHSS	Foundation	Advanced	Practicur	
Competency	Sample Learning Objectives	S	S	d	3	Assessment Examples
PsychoeducationTherapeutic SkillsTrauma-Informed Care	2c15-A Appreciate differences between individual and group dynamics in the helper relationship.	NA	NA	I, R	R, P	 Co-lead or lead a brief psychoeducation group with opportunities to analyze group process with supervisor at key steps: group design, group start, mid-point, and end of group.

MC3: CULTURAL RESPONSIVENESS

	BHSS			S Curricu	ılum		
Competency	Learnin	g Objectives	Pre-BHSS	Foundations	Advanced	Practicum	Assessment Examples
3-a: Develop knowledge of				1			
Keywords: • Assessment	3a4-K	Explain how identity and culture impact a patient's attitude about and approach to healthcare, healing, and recovery.	NA	I	R, P		
Interviewing SkillsPatient-Centered Care	3a7-S	Explore with patients their culture and social identity(ies) by asking open ended questions.	NA	NA	I	R, P	Demonstrate foundational knowledge of diverse cultures and intersectional
 Professional Development Social and Cultural Diversity Therapeutic Skills Whole Person Care 	3a10-A	Recognize culture as an integral and inseparable aspect of whole person healthcare.	NA	ı	R, P		 identities through a classroom paper or discussion of case example. Discussion on "cycle of socialization"





				BHSS Curriculum		ılum	
Competency	Learnin	g Objectives	Pre-BHSS	Foundations	Advanced	Practicum	Assessment Examples
3-b: Provide services respon		· ·					
Keywords: • Assessment	3b4-S	Integrate values, traditions, and activities that are relevant to patients, into interventions.	NA	NA	I, R	R, P	
Care CoordinationPatient-Centered CareSocial and Cultural Diversity	3b7-S	Collaborate with patients to assess and incorporate cultural healing methods they practice into interventions, as relevant.	NA	NA	I	R, P	 Reflection paper or other written response or oral presentation in class Supervisor and self-evaluations of practicum experiences
Tuesday and of Debay deval	3b9-A	Value the importance of culturally responsive, individualized whole health care plans.	NA	I	R	Р	
3-c: Practice cultural humilit	ty in helpi	ng relationships.					
Keywords: • Health Equity	3c1-K	Explain the meaning of cultural humility in the context of helping relationships.	I	R, P			 In-class assessment such as essay or test question; complete target/agent identities exercise in class Practice repairing a rupture or cultural disconnect in role play Supervisor and self-evaluations of practicum experiences Reflection paper in class or practicum
Interviewing SkillsPatient-Centered Care	3c9-S	Address and repair the helping relationship when disconnects – cultural or other – occur.	NA	I	R	Р	
Reflective PracticeSocial and Cultural DiversityTherapeutic Skills	3c14-A	Acknowledge power dynamics in multicultural interactions specific to the context of the helping relationship.	NA	I, R	R	Р	
3-d: Strive to address own b	iases in w	ork with patients.					
	3d1-K	Explain the impact of implicit and explicit bias on care quality and patient experience.	I	R, P			Harvard implicit bias training Reflection paper or verbal reflection on
Keywords: Health Equity Reflective Practice	3d5-S	Engage in self-examination of how own biases may influence interactions with patients.	NA	I, R	R	Р	 material describing implicit bias, microaggression, and impact on helper relationship Supervisor evaluation, including rating of openness to exploration of personal and social bias.
Reflective PracticeSocial and Cultural Diversity	3d10-A	Commit to minimizing the impact of own values, assumptions, and biases during interactions with patients and care delivery.	NA	I	R, P		





MC4: TEAM-BASED CARE AND COLLABORATION

	BHSS Curriculum						
Competency	Learnir	ng Objectives	Pre-BHSS	Foundations	Advanced	Practicum	Assessment Examples
4-a: Integrate professional i	dentity a	nd scope of practice within a healthcare team.					
Keywords: • Law and Ethics	4a3-S	Describe the BHSS's role in team-based care to a patient.	NA	I	R	Р	
Patient-Centered CareReflective PracticeStepped Care	4a5-S	Explain the stepped care model to care teams and its relationship to positive outcomes for patients.	NA	I	R	Р	
SupervisionTeam-Based Care	4a8-A	Value team-based care.	NA	Ι	R	Р	
4-b: Practice interprofession	nal comm	unication.					
	4b2-K	Describe how communication affects team processes and patient care and outcomes.	NA	I, R, P			Class discussion and reflection on communication components
Keywords:Professional DevelopmentSupervisionTeam-Based Care	4b4-S	Effectively and succinctly share information with the interprofessional team using a team-appropriate process (For example, SBAR (Situation-Background-Assessment-Recommendations).	NA	NA	I, R	Р	Demonstrate in practicum via observation (e.g., setting- and org-specific acronyms and terminology) Practice SBAR in a mock team meeting and
	4b6-A	Value brief, clear, concise, and timely communication between team members.	NA	I	R	Р	include description of one evidence-based strategy in recommendation
4-c: Contribute to teams and	d teamw	ork.					
Keywords: • Professional Development	4c3-K	Identify team-based processes that support patient safety and improved outcomes.	NA	I	R	Р	
Recovery ModelReflective Practice	4c6-S	Demonstrate flexibility and adaptability while working with a care team.	NA	NA	I, R	R, P	
SupervisionTeam-Based Care	4c8-A	Value continuing education in team-based processes related to patient safety and improved outcomes.	NA	NA	l	R, P	





MC5: Screening & Assessment

				BHSS	S Curricu	ılum	
Competency	Learnin	g Objectives	Pre-BHSS	Foundations	Advanced	Practicum	Assessment Examples
5-a: Utilize appropriate stan	dardized	screening tools to identify common behavioral hea	alth cond	itions.			
Keywords: • Assessment • Health Equity	5a3-K	Describe evidence base for screening and implications for preventative care across diverse populations.	NA	I, R	Р		Choose a BH screening tool and write about its strengths/ weaknesses Quiz/test about screening tools
InterventionMeasurement-Based CarePopulation HealthPsychoeducation	5a8-S	Administer evidence-based screening tools, utilizing aids to improve accessibility as appropriate.	NA	NA	I, R	Р	 Role play with student Practice documentation of screening tool score interpretation with summary of next step.
Scope of PracticeScreeningSocial and Cultural Diversity	5a10-S	Discuss the results of the evidence-based screening tool with a patient.	NA	NA	I, R	Р	 Supervisor review of chart notes/appropriate documentation using screening tools.
5-b: Conduct a suicide risk a	ssessmen	nt and provide appropriate intervention under supe	ervision				
Keywords: • Assessment	5b2-K	Identify elements of a structured interview for suicide risk assessment.	NA	I	R	Р	Examination Case example discussion
 Crisis Intervention Interviewing Skills Measurement-Based Care	5b4-S	Administer a standardized screening tool such as the CSSR-S and identify level of suicide risk.	NA	I	R	Р	 Observation in role play Practice documentation of screening tool interpretation with summary of next step
Population HealthScreeningShared Decision-Making	5b7-S	Design a collaborative safety plan with a patient.	NA	I	R	Р	 Instructor and practicum site supervisor endorsement of student preparedness to conduct a suicide assessment.
5-c: Conduct a patient-cente	red biops	sychosocial assessment.			<u> </u>		
Keywords: • Assessment	5c3-K	Explain how the biopsychosocial assessment informs the diagnostic process.	NA	I	R, P		
 Documentation Interviewing Skills Social and Cultural Diversity 	5c5-S	Gather information supporting a biopsychosocial assessment using a common template or framework in healthcare.	NA	I	R	Р	Examination/quizzes Observation of role play; Case study including options for course of action
 Social Determinants of Health (SDOH) Team-Based Care Whole Person Care 	5c8-S	Generate follow-up questions for symptoms needing further exploration or clarification, based on a biopsychosocial framework.	NA	I	R	Р	including options for course of action.





				BHSS	Curricu	ılum	
Competency		ng Objectives	Pre-BHSS	Foundations	Advanced	Practicum	Assessment Examples
5-d: Use measurement-base	ed care to	support stepped care approaches and adjust the t	ype and i	ntensity	of serv	ices to	the needs of the patient.
Keywords:AssessmentCase ManagementMeasurement-Based Care	5d1-K	Explain the purpose of systematic use of behavioral health measures.	NA	I, R	Р		
Patient-Centered CarePopulation HealthPsychoeducationScreening	5d5-S	Review symptom checklist with patient for accuracy.	NA	I	R	Р	Observation by supervisor
Shared Decision-MakingSupervisionTherapeutic SkillsTreatment to Target	5d7-S	Negotiate new care goals with patient based on progress.	NA	NA	I, R	Р	





MC6: CARE PLANNING AND CARE COORDINATION

				BHS	S Curric	ulum	
Competency	Learnin	ng Objectives	Pre-BHSS	Foundations	Advanced	Practicum	Assessment Examples
		of a whole health care plan and stay well plan with	the pat	ient, the	patient	's suppo	
Keywords: Assessment Care Coordination Case Management Recovery Model Shared Decision-Making Team-Based Care Treatment Planning Whole Person Care	6a2-K 6a8-A	Describe the components of shared decision-making in the care planning process. Recognize the importance of involving the patient actively in both whole health care planning and stay well planning.	NA NA	R, P	P		Examination questions on whole health care and stay well plans Observation of whole health care plan & stay well plan discussion with patient Observation of professional disclosure and transparency related to treatment plan Observation of student attitudes in discussion and demonstration of care planning skill
6-b: Maintain a registry to s	ystemati	cally track patient treatment response to interven	tions.				p. 4
Keywords: • Measurement-Based Care	6b4-S	Use a registry to record symptom measures from validated behavioral health screening tools (such as the PHQ-9 and GAD-7).	NA	NA	I	R, P	
Population HealthScreeningSupervision	6b6-S	Use registry data to identify and prioritize patients to discuss as part of supervision, team meetings, or case review sessions.	NA	NA	I	R, P	
Treatment to Target	6b7-A	Endorse use of a registry to facilitate population-based care.	NA	I	R	Р	
6-c: Ensure the flow and ex	change of	information among patients, patients' support ne	etworks,	and link	ed prov	iders.	
Keywords: • Care Coordination	6c1-K	Explain privacy and confidentiality policies, rules, and laws in healthcare as they relate to information exchange.	NA	I			 Examination questions related to HIPAA, privacy, information exchange, and confidentiality
Case ManagementDocumentation	6c5-S	Enact confidential communication standards in all acts of healthcare information exchange.	NA	NA	NA	I, R, P	Observation of privacy and confidentialit discussion in role play or practice
Law and EthicsTeam-Based Care	6c7-A	Demonstrate confidence in setting limits based on privacy and confidentiality policies, rules, and laws.	NA	NA	NA	I, R, P	 Observation of care plan discussion with patient Observation of case presentation





				BHS	S Curric	ulum	
Competency	Learnin	g Objectives	Pre-BHSS	Foundations	Advanced	Practicum	Assessment Examples
6-d: Facilitate external refer	rals to so	cial and community-based services (housing assist	tance, fo	od bank	s, vocat	ional re	habilitation, substance use disorder
treatment, etc.).							
Keywords: • Assessment • Care Coordination	6d4-K	Identify components of a high-quality and supportive referral.	NA	I, R	Р		Identify the components of a high-quality, supportive, and effective referral using
 Case Management Documentation Health Equity 	6d9-S	Document, track, and follow up with patients regarding referrals.	NA	ı	R	Р	 case examples Initiate a relationship with a new referral source or update an existing referral source on behalf of the healthcare team
 Social and Cultural Diversity Social Determinants of Health (SDOH) Team-Based Care 	6d11-A	Value the impact that a quality referral has on the health and well-being of all patients.	NA	I	R	Р	Observation of the BHSS explaining a referral or following up with a referral.
6-e: Demonstrate accurate d	locument	ation of services provided and summaries of cont	act with	linked p	rovider	s in the	patient record.
Keywords:	6e4-K	Explain the relationship between documentation, medical necessity, and regulatory standards.	NA	I, R, P			 Examination questions regarding common frameworks, policy, rules, and laws related to documentation Completed samples of documentation based on video-observation, in vivo role
 Care Coordination Case Management Documentation Law and Ethics 	6e6-S	Document patient healthcare records in a way that respects individual requests as well as standard confidentiality guidelines.	NA	NA	I	R, P	
Patient-Centered Care	6e10-A	Invest in timely and accurate documentation of patient encounters.	NA	NA	I	R, P	plays, and patient encounters in training
6-f: Recognize the interactio	n betwee	n behavioral health conditions, chronic physical h	ealth co	nditions	, and th	eir asso	ciated symptoms.
Keywords: • Assessment	6f3-K	List commonly prescribed medications and their side effects for behavioral health conditions.	NA	I	R, P		Activity explaining basic pharmacological treatment
 Care Coordination Health Equity Psychoeducation Reflective Practice Team-Based Care Treatment of Behavioral Health Conditions Treatment Planning 	6f6-S	Reinforce education provided by other healthcare providers on self-managing chronic conditions.	NA	NA	I	R, P	 Quiz or matching activity Observed practice session providing psychoeducation on health behaviors and link to physical, mental, and emotional
	6f8-A	Endorse the concept that behavioral health and physical health are interconnected.	I	R	Р		 Role play about discussing medications with a classmate





MC7: Intervention

				BHS	S Curric	ulum	
Competency	Learnin	g Objectives	Pre-BHSS	Foundations	Advanced	Practicum	Assessment Examples
7-a: Integrate motivational i	nterview	ing strategies into practice.					
Keywords: Care Coordination Intervention Interviewing Skills	7a5-S	Identify appropriate stage of change for patient goals of care.	NA	I, R, P			
 Law and Ethics Motivational Interviewing (MI) Patient-Centered Care Shared Decision-Making Social and Cultural Diversity 	7a7-S	Support patients in creating a detailed plan for change.	NA	I	R	P	Identify specific stage of change for unique patient scenarios List change talk strategies Role play, patient interactions (practicum)
 Team-Based Care Therapeutic Alliance Therapeutic Skills Treatment of Behavioral Health Conditions 	7a9-S	Articulate patient values and treatment preferences to the care team.	NA	I	R	Р	_ (practicum)
7-b: Provide psychoeducatio	n to pati	ents and their support network about behavioral	health co	ondition	s and tre	eatmen	t options consistent with
recommendations from the	healthca	re team.					
	7b2-K	Describe the basic components of psychoeducation.	NA	I, R, P			Comprehensive exam questions for BHSS
 Keywords: Intervention Interviewing Skills Psychoeducation Social and Cultural Diversity 	7b4-S	Provide psychoeducation to patients on common health conditions, behavioral health conditions, and self-management strategies, as appropriate.	NA	I	R	Р	 program. Role play, live demonstration or video recording of student providing psychoeducation to individual patients and their support networks Observation of student attitudes in demonstration of psychoeducation skills
	7b9-A	Value the role of psychoeducation in promoting self- management.	NA	I	R	Р	
7-c: Apply brief, evidence-ba	sed strat	egies for common mental health presentations, b	ased on	cognitiv	e behav	ioral pri	inciples and behavioral activation.
Keywords: Intervention Interviewing Skills	7c1-K	Recall the common elements of brief treatment and its overarching stages.	NA	NA	I, R, P	•	 Comprehensive exam questions for BHSS program. Role play





				BHSS Curriculum		ulum	
Competency	Learnin	ng Objectives	Pre-BHSS	Foundations	Advanced	Practicum	Assessment Examples
Motivational Interviewing (MI)Patient EngagementPatient-Centered Care	7c8-S	Set an agenda collaboratively with the patient as first topic of the meeting, or as early as possible.	NA	NA	I, R	Р	Supervisor evaluation of students (practicum) Student self-eval/ reflection
 Therapeutic Skills Treatment of Behavioral Health Conditions Treatment to Target 	7c12-A	Value fidelity to brief evidence-based intervention strategies for treating common behavioral health conditions.	NA	NA	I, R	Р	To Stade in each y remediation
7-d: Apply brief, evidence-b	ased stra	tegies for mild-to-moderate depression, based on	cognitive	e behavi	ioral pri	nciples a	and behavioral activation.
 Keywords: Assessment Intervention Psychoeducation Therapeutic Skills Treatment of Behavioral 	7d1-K	Describe the Behavioral Activation (BA) model of depressive symptoms.	I	NA	I, R, P		Certificate of completion for BA training; Comprehensive exam questions for BHSS program Written assignment demonstrating a (basic) case formulation and treatment plan Videotaped BA role plays assessed via fidelity checklists Simulated and real-world patient scenarios Self-assessment of attitudes toward depressive disorders and/or of own roleplay skills
	7d3-K	Describe how to develop a case formulation for a patient experiencing elevated depressive symptoms.	NA	NA	I, R, P		
	7d5-K	Describe how to evaluate the outcome of patients' behavioral activation efforts.	NA	NA	I, R, P		
7-e: Apply brief, evidence-ba	ased stra	tegies for mild-to-moderate anxiety, based on cog	nitive be	haviora	l princip	les and	behavioral activation.
Keywords: Assessment Intervention Psychoeducation Treatment of Behavioral Health Conditions	7e2-K	Describe the CBT model of anxiety (CBT-A) symptoms.	NA	NA	I, R, P		 Certificate of completion for CBT-A training Comprehensive exam questions for BHSS program. Videotaped CBT-A role plays assessed via fidelity checklists. Self-assessment of attitudes toward anxiety disorders Observation of helper behavior and attitudes in demonstration of CBT-A.
	7e4-S	Provide tailored patient psychoeducation on the CBT-A model of anxiety symptoms.	NA	NA	I, R	Р	
	7e6-S	Apply anxiety management strategies.	NA	NA	I, R	Р	





				BHSS Curriculum		ulum	
Competency	Learnin	g Objectives	Pre-BHSS	Foundations	Advanced	Practicum	Assessment Examples
		tion, and referral (SBIRT) approach appropriate t	o natient	alcohol	or subst	ance us	e nrohlems
Keywords:	7f1-K	Identify the principles of harm reduction and the relationship to negotiating an action plan.	NA NA	NA	I, R, P	lance us	Quizzes within the State of WA required SBIRT training and educational institution LMS Certificate of completion for SBIRT training
 Intervention Interviewing Skills Motivational Interviewing (MI) Patient-Centered Care Population Health Recovery Model 	7f10-S	Demonstrate proficiency in delivering a BNI.	NA	NA	I, R	Р	Comprehensive exam questions for BHSS program Role play video or live demonstration of SBIRT process of a standardized case scenario with a patient risky levels of alcohol use, assessed by instructor using
 Reflective Practice Screening Substance Use Disorders Therapeutic Alliance Therapeutic Skills 	7f13-A	Demonstrate optimism for a patient's ability to change in their own time frame.	NA	NA	I, R	Р	a standardized instrument Self-assessment of attitudes toward substance use disorders with a journal reflection Observation of helper behavior and attitudes in demonstration of SBIRT.
		ing of the evidence base for brief intervention str	T -	ı	_	ptom re	eduction.
Keywords:AssessmentCare Coordination	7g3-K	Identify strategies for helping patients adapt to changes in symptom intensity.	NA	NA	I, R, P		Quiz on knowledge of core learning objective
 Intervention Law and Ethics Measurement-Based Care Professional Development Reflective Practice 	7g5-S	Assess patient progress to identify barriers to improvement, problem solve options with patient, and revise care planning, including stepping up to high-intensity interventions.	NA	NA	I, R	Р	 Completion of State of Washington required training for telehealth Comprehensive exam questions. In-class practice of stepped care discussions with patients
 Shared Decision-Making Stepped Care Supervision Team-Based Care Therapeutic Skills Treatment of Behavioral Health Conditions Treatment to Target 	7g8-A	Acknowledge the value of a stepped care model.	NA	NA	I, R	Р	 Practicum-based assessment of skills through live or recorded observation by site supervisor Observation of stepped care practice in practicum Observation of fidelity to low-intensity interventions in practicum.





MC8: Law, Ethics, & Professional Practice

				BHSS Curriculum			
Competency	Learnir	ng Objectives	Pre-BHSS	Foundations	Advanced	Practicum	Assessment Examples
8-a: Identify and apply feder	ral and st	tate laws to practice.					
Keywords: • Crisis Intervention	8a1-K	Summarize HIPAA, HITECH, and CFR-42 related to privacy and confidentiality.	NA	I, R, P			Test or quiz in classState jurisprudence examination
Law and EthicsProfessional Development	8a6-S	Deliver informed consent consistent with the practice site and care modality.	NA	l	R	Р	Simulated practice or actual cases as they arise in practicum
Team-Based CareTreatment of Behavioral Health Conditions	8a7-S	Exercise duty to protect, duty to warn, and mandatory reporting obligations as cases occur.	NA	I	R	Р	Supervisor and team feedback in practicum
8-b: Integrate foundations of	f interpr	ofessional ethics into practice.					
Keywords: • Law and Ethics	8b1-K	Distinguish between law, ethics, rules, and policy.	NA	I, R	R	Р	 Test or quiz with both multiple choice and open-ended questions. Observed in supervision Supervisor, team, and patient feedback through evaluation tools in practicum.
Professional DevelopmentReflective PracticeSupervision	8b5-S	Apply ethical principles in day-to-day care delivery using an ethical decision-making model.	NA	I	R	Р	
 Team-Based Care Treatment of Behavioral Health Conditions 	8b7-A	Value role in protecting the welfare of others.	NA	NA I R	R	Р	
8-c: Utilize supervision and o	consultat	tion to guide practice.			L	ı	
Keywords:	8c4-S	Utilize strategies for risk reduction in day-to-day practice.	NA	NA	I	R, P	
 Intervention Law and Ethics Professional Development Reflective Practice Supervision Treatment of Behavioral Health Conditions 	8c6-S	Practice transparent communication with supervisor and patients when boundary crossings, violations, or risks of harm occur.	NA	NA	I	R	 Analyzing case examples Short answer quiz Evaluated in practicum assessment by supervisor Discussing cases during practicum supervision
	8c7-S	Integrate supervisor feedback into practice.	NA	NA	I	R, P	





				BHSS Curriculum			
			Pre-BH	Foundatio	Advanced	Practicu	
Competency	Learnir	g Objectives	SS	ns	ed	3	Assessment Examples
8-d: Engage in ongoing refle	ctive pra	ctice.					
Keywords: Law and Ethics Professional Development Reflective Practice	8d3-K	Describe the relationship between provider wellbeing and the impact on patient care.	NA	I, R	Р		Journal practice with instructor feedbace Group based journal sharing and
	8d6-S	Engage in self-reflection regarding one's personal and professional functioning.	I	I	R	Р	commentary Observed in supervision
Self-CareSupervisionTeam-Based Care	8d8-S	Identify support system for work with patients that includes supervisor, consultants, colleagues, and other forms of professional or peer support.	NA	NA	I	R	Student self-reportAttitude may be assessed both in classroom and supervision.

REFERENCES

Hundey, B., & Watson, G. (2019). Curriculum map instructions - student progression of learning with A and I methods. Western Canada University Centre for

Teaching & Learning. https://teaching.uwo.ca/pdf/curriculum/Curriculum%20Map%20Instructions%20-

 $\underline{\%20Student\%20Progression\%20of\%20Learning\%20with\%20A\%20and\%20I\%20Methods,\%202019.pdf}$