Young People and Drugs - Issues for Workers
Project Outline

This project, an initiative of the National Illicit Drug Strategy, has developed teaching and learning resources to assist frontline workers address the need of young people on issues relating to illicit drugs. They will support a training organisation in the delivery of training. The modules explore work with young people, drug use and suitable intervention approaches.

Project Management

The development of the resources has been managed by:

- New South Wales Technical and Further Education Commission (TAFE NSW) through the Community Services, Health, Tourism and Hospitality Educational Services Division
- Drug and Alcohol Office (Western Australia)
- The Northern Territory Health Service.

Acknowledgements

The original consultations, writing, practitioner review and revision of the materials has involved a large number of services including:

- Alison Bell Consultancy
- Centre for Community Work Training, Association of Children’s Welfare Agencies (NSW)
- Community and Health Services (Tas)
- Community Education and Training (ACT)
- Curtin University
- Department of Community Services (NSW)
- Department of Juvenile Justice (NSW)
- Drug and Alcohol Office (WA)
- Health Department of NSW
- National Centre for Education and Training in Addictions
- New England Institute of TAFE, Tamworth Campus
- Northern Territory Health Service
- NSW Association for Adolescent Health
- Ted Noff’s Foundation (NSW)
- The Gap Youth Centre (NT)
- Turning Point (Vic)
- Youth Substance Abuse Service
- Youth Action Policy Association (Vic)

*This project was funded and supported by the National Illicit Drugs Strategy through the Australian Government Department of Health and Ageing.*
The Materials

The final product, provided for distribution on CD-Rom, consists of:

- a facilitator and learner guide for 12 modules,
- a support text for workplace learning.
- Overhead transparencies using Microsoft PowerPoint for each module to support facilitators who choose face-to-face delivery.

Each document has been provided in

- Acrobat (pdf) format to ensure stability
- A Microsoft Word version to enable organisations to amend, add and customise for local needs

The primary user would be a facilitator/trainer/training organisation that would distribute the learning materials to the learners. They can be used in traditional face to face or through a supported distance mode.

Materials have been prepared to allow direct colour laser printing or photocopying depending on the size and resources of the organisation. It is not envisaged that learners would be asked to print materials.

Assessment

Where assessment of competence is implemented training organisations are reminded of the basis principles upon which assessment should be based:

Assessment is an integral part of learning. Participants, through assessment, learn what constitutes effective practice.

Assessment must be reliable, flexible, fair and valid.

- To be reliable, the assessment methods and procedures must ensure that the units of competence are applied consistently.
- To be flexible, assessment should be able to take place on-the-job, off-the-job or in a combination of both. They should be suitable for a variety of learning pathways including work-based learning and classroom based learning.
- To be fair, the assessment must not disadvantage particular learners
- To be valid, the assessment has to assess what it claims to assess.
Training Frontline Workers
Young People, Alcohol & Other Drugs

Section A
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Background

The project *Training Frontline Workers – Young People, Alcohol and Other Drugs* is part of a broad strategy to support the educational and training needs of frontline workers. The training and support needs of frontline workers not designated as alcohol and other drug workers to enable them to work confidently with young people on illicit drugs is well recognised. This project attempts to meet this need. It was funded by the Australian Government Department of Health and Ageing under the National Illicit Drug Strategy (NIDS).

Target occupational groups

This training resource has been developed specifically for the following groups of frontline workers:

- Youth workers
- Accommodation and crisis workers
- Counsellors (including school-based)
- Primary and community health and welfare workers
- Juvenile justice workers
- Teachers
- Police
Approaches to service delivery

The development of the resources brings together two approaches to service delivery:

- work with young people
- alcohol and other drug work

The two approaches which underpin these resources are summarised as follows:

Working with young people

A **systems approach** is the most appropriate model to understand and work with young people. A systems approach assumes that no aspect of behaviour occurs in isolation, rather it occurs within a wider context. In other words, to understand young people we need to consider the individual, their family, the wider community and society as a whole as well as how they interact with each other.

The systemic youth-focused approach assumes that:

- Young people deal with challenges in ways similar to other people in society (some well, others not so well). Young people develop their coping strategies and skills by learning from others around them, through their own personalities and through trial and error.
- The term ‘youth’ is a social construction. Societal values and beliefs about young people determine the way in which they are treated within society (for example, young people are viewed differently in different cultures).
- Young people are not an homogenous group. Although young people share some common developmental issues, their backgrounds, experiences and cultures are as diverse as the rest of the population.
- Young people participate actively in their lives, make choices, interact with others, initiate changes and participate in our society. They are not passive victims of a dysfunctional society, family or peer group.
The following **social justice principles** guide work with young people:

- **Access** - equality of access to goods and services
- **Equity** - overcoming unfairness caused by unequal access to economic resources and power
- **Rights** - equal effective legal, industrial and political rights
- **Participation** - expanded opportunities for real participation in the decisions which govern their lives.
Alcohol and other drug work

Harm minimisation is the most appropriate approach for working with alcohol and illicit drug issues. The goal of harm minimisation is to reduce the harmful effects of drugs on individuals and on society. Harm minimisation assumes that while we cannot stop drug use in society, we can aim to reduce the harm related to using drugs. Harm minimisation has three components: harm reduction, supply reduction and demand reduction.

A variety of drugs, both legal and illegal, are used in society. There are different patterns of use for drugs and not all drug use is problematical.

Large proportions of young people try alcohol or other drugs, including illicit drugs, without becoming regular or problem drug users.

Drug use is a complex behaviour. Interventions that try to deal with single-risk factors or single-risk behaviours are ineffective.

Drug use represents functional behaviour for both young people and adults. This means that drug use can best be understood in the broader context of the lives of the young people using them. Any interventions need to take the broader context into account.

Training approach

These training resources are based on the following principles:

- Training is consistent, supports a national qualification and provides a pathway to a qualification.

- Training is based on adult learning principles. It should:
  - build on learners’ existing knowledge, skills and experience
  - utilise problem-based learning and skills practice, and
  - develop critical thinking and reflection.

- Training is to be flexible and available through a variety of methods. Examples include workshops, self-directed learning, distance learning supported by a mentor/facilitator and work-based learning.
Work-based learning provides participants with the opportunity to reflect on current work practices, apply their learning to the work situation and to identify opportunities for organisational change and development in their workplaces.

A key learning strategy of the resources, supported by individual, group and work-based activities, is reflection: alone and with peers and supervision. To reflect upon and evaluate one’s own work, the types of intervention used and the assumptions they are based on is crucial to working more effectively.

Project resources

The Young People, Alcohol and Other Drugs program aims to provide the core skills and knowledge that frontline workers need to respond to the needs of young people with alcohol and drug issues, particularly illicit drugs.

This training resource, which comprises 12 modules, has been developed to provide a qualification and/or specific units of competence. The resource can also be used as a test or reference document to support the development of a specific knowledge or skill.

Each module (except Module 1) comprises a Learner Workbook and a Facilitator Guide. Each Learner Workbook is a self-contained resource that can be used for both distance and work-based learning or to support face-to-face learning (including workshops).

Relationship to the Community Services Training Package (CHC02)

The training modules were initially developed to support four units of competence from the Community Services Training Package (CHC99). These were:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>CHCYTHA</td>
<td>Work effectively with young people</td>
</tr>
<tr>
<td>CHCAOD2A</td>
<td>Orientation to the alcohol and other drugs sector</td>
</tr>
<tr>
<td>CHCAOD5A</td>
<td>Provide support services to clients with alcohol and other drugs issues</td>
</tr>
<tr>
<td>CHCAOD6A</td>
<td>Work with clients who are intoxicated.</td>
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</tbody>
</table>
Following the release of the revised Community Services Training Package (CHC02) in April 2003, the modules were revised to support the following units of competence from the revised Training Package:

<table>
<thead>
<tr>
<th>Unit of Competence</th>
<th>Module</th>
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</table>
| CHCYTH1C Work effectively with young people | • Perspectives on Working with Young People  
• Young People, Risk and Resilience  
• Working with Young People |
| CHCAOD2B Orientation to the alcohol and other drugs sector | • Young People, Society and AOD  
• How Drugs Work  
• Frameworks for AOD Work |
| CHCCS9A Provide support services to clients | • Helping Young People Identify their Needs  
• Working with Young People on AOD Issues  
• Working with Families, Peers and Communities  
• Young People and Drugs – Issues for Workers |
| CHCAOD6B Work with clients who are intoxicated | • Working with Intoxicated Young People |

The twelfth module **Planning for Learning at Work** is designed to support participants in their learning.

The four units of competence listed above contribute to national qualifications in both Youth Work and Alcohol and Other Drug Work and are electives in a range of other qualifications. Since these units by themselves will not deliver a qualification, the additional units listed in the Community Services Training Package Qualification Framework would need to be completed.

To achieve any of the above units a learner must complete all the modules comprising that unit and be assessed by a qualified assessor from a registered Training Organisation. While it is possible to complete individual modules, this will not enable you to achieve a unit of competence. Individual modules will contribute towards gaining the unit of competence and over a period of time all modules needed for the unit could be completed.
Each of the units of competence has a different focus and has been customised within national guidelines to meet the needs of frontline workers in working with young people with illicit drug issues. The modules each provide a learning pathway with stated learning outcomes to help achieve each particular unit of competence.

Since the modules associated with each unit of competence progressively build on each other, they can be delivered and assessed in an integrated manner. This provides learners with a ‘total view’ of the essential theory and required skills for their work roles.
Using the Facilitator Guide

Each Facilitator Guide is a comprehensive teaching tool that contains the information, resources and activities required to meet the learning outcomes of a particular module. It is designed to be used in conjunction with the Learner Workbook for that module which contains detailed information that facilitators may wish to refer to. The Facilitator Guide and the Learner Workbook are suitable for a variety of delivery modes, including face-to-face learning, distance and work-based learning.

The Facilitator Guide is divided into two sections.

Section A provides general information about the training resources and guidelines on how to support learners and assist them in developing a learning pathway and plan.

Section B provides the facilitator instructions for the module.

The Facilitator Guide provides an overview of the module, the learning outcomes and any links to other modules. It provides a summary of the Learner Workbook content topic by topic and suggested facilitator-led discussions and learning exercises. While an approximate timing of activities is suggested, facilitators are encouraged to use their judgement, taking into account the knowledge and skill level of the learners. Each Guide contains overheads, a glossary and a list of references and resources. Icons are used in both the Facilitator Guide and the Learner Workbook to highlight instructions and activities suitable for work-based learning, application and reflection.

It is recommended that facilitators read both the Facilitator Guide, the Learner Workbook and key references.

Prior to commencing the module with learners, facilitators should be familiar with the:

- Learning outcomes
- Module content by topic area
- Learning activities within each topic
- Structure and flow of the module
- Learner workbook
- References and resources listed
Supporting distance learners

These training resources have been developed with the understanding that learners should not undertake these modules without the support of an appropriately qualified facilitator. This is especially the case for distance learners who undertake their learning outside of a classroom or workshop setting.

Distance learners have specific needs in relation to:

- Isolation
- Conflicting priorities and time pressures.

A variety of strategies may be used to accommodate learner needs and support learning. These include:

- providing alternative activities or additional tasks to achieve the learning outcomes. Some activities may be unrealistic in some locations (e.g. asking learners to visit other agencies when they are in a remote location)
- developing a learning plan to clarify what topics are to be completed, by when and how
- maintaining contact with learners to monitor their progress and assist with learning
- establishing a learning community through group teleconferences, e-mail or list servers to help learners process issues through discussions and ideas/feedback from other learners.
Contact with distance learners

It is important for facilitators to establish and maintain contact with distance learners.

The amount of contact will depend on:

- nature of the topic being undertaken
- learner’s available resources including availability of other learners, mentors or colleagues
- learner’s desire for interactivity
- learner’s motivation and other learning needs.

Developing a learning plan

In order to develop a learning plan with a learner you will first need to identify their learning needs. From these needs you will be able to formulate learning goals and develop a plan to meet these goals. The learning plan should contain details on what will be learned, how it will be learned, by when, what criteria will be used to evaluate the learning and how the learning will be validated. A learning plan is best prepared by the learner with the guidance and support of a mentor or facilitator. Topic 4 in the module Planning for Learning at Work contains detailed information on preparing a learning plan.

Once learner needs have been identified they can be matched up with the units of competence and the resources available.

The following steps will assist you to develop a learning plan with a learner:

3. Assessment of learning needs

This may include analysis of:

- learner’s values
- skills
- strengths and weaknesses
- preferred learning style
- suitability of learner’s work situation as a work-based learning environment (Is there a quiet place to read/write/consider? Are study leave provisions available? Is management supportive of work-based learning?).
4. Identification of learning goals

It is important to identify learning objectives both from a learner’s perspective and from an organisational perspective. Those learners who are undertaking learning as part of a process initiated by their organisation may well have different needs and motivations to those learners who have elected or volunteered to undertake further learning. Once established, learning goals can be reviewed against the learning outcomes of the module/s in this resource. This will assist the selection of appropriate modules.

3. Identify learning resources, supports and strategies. Evaluate the availability of the following resources and the learner’s confidence in accessing them.

- people (facilitator, other learners, mentors, supervisors etc)
- resources (e.g. texts/libraries)
- technology (e.g. phones, Internet/e-mail, video-conferencing)

4. Specify what constitutes evidence of learning

How will you and the learner know that learning has occurred? Assessment of learning could include a portfolio, case notes, role plays and/or case studies.

5. Specify target dates

Specify dates for progress reviews and for module/task completion. Agree on how this will occur.

Target dates for contact with facilitators should specify:

- Informal query or concerns (How can a learner access you if they have a query or concern? For example, e-mail, telephone etc)

- Progress review dates (When will formal contact be initiated to check on progress and how will this be done? For example, by telephone, face-to-face meeting etc.)

- Assessment event due dates (When are assessment events due and how will they be submitted? (For example, by post, e-mail etc)

- Feedback. When will feedback be available on assessment performance and how will that be delivered?
Many learners will want to develop knowledge and skills in a number of areas. Overlapping content across the units has been identified in the individual modules.

**NOTE:** CHCAOD2B provides key underpinning knowledge on AOD work and reflection on personal values and attitudes to alcohol and other drugs. It is recommended that this unit be completed before undertaking the other units in alcohol and other drug work. In particular, the module **How Drugs Work** provides underpinning knowledge about the action of a drug on the individual. It is recommended that learners completing CHCCS9A and CHCAOD6B also complete this module.
### DEVELOPING A LEARNING PATHWAY

When you have worked with your learners to identify their skill/knowledge gaps, the following guide may assist you in developing a learning pathway for each learner or group of learners. Learners’ may choose to do one, several or all of the units, depending on their needs.

<table>
<thead>
<tr>
<th>If learners want information about young people and ways of working with young people.</th>
<th>If learners want information about the alcohol and other drug sector and a greater understanding of drug use in society.</th>
<th>If learners want skills in identifying AOD drug impacts on young people to develop responses to alcohol and drug issues for the young people.</th>
<th>If learners want skills and information to work with young people who are intoxicated.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>UNIT CHCYTH1C</strong></td>
<td><strong>UNIT CHCAOD2B</strong></td>
<td><strong>UNIT CHCCS9A</strong></td>
<td><strong>UNIT CHCAOD6B</strong></td>
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</tbody>
</table>
| Perspectives on Working with Young People  
Explores the stage of adolescence and a range of factors that impact on the development of young people | Young People, Society and AOD  
Looks at ways of understanding drug use in society and by young people in particular and presents an overview of patterns and trends of AOD use by young people. Broad societal factors that influence work on AOD issues are also explored. | Helping Young People Identify their Needs  
Develops skills in identifying alcohol and other drug issues for young people at an individual, group and community level. | Working with Intoxicated Young People  
Provides information and skills in working with intoxicated young people. |
| Young People, Risk and Resilience  
Provides a framework for understanding and working with young people | How Drugs Work  
Provides information about drugs and how they act on the body. | Working with Young People on AOD Issues  
Provides skills in working with young people with AOD issues on a one-to-one basis. The emphasis is on young people who are experiencing problems because of their AOD use. | If learners want advice about planning learning and how to learn |
| Working with Young People  
Provides a broad framework for understanding and working with young people, explores goals of working with young people and the development of specific skills. | Frameworks for AOD Work  
Provides an overview of the range of AOD interventions, from prevention through to treatment and explores their relevance to work with young people on AOD issues. | Working with Families, Peers and Communities  
Provides a framework and skills for working with young people on AOD issues at a community and family level. | Planning for Learning at Work |
| | | Young People and Drugs - Issues for Workers  
Explores a range of issues that workers may encounter when working with young people on AOD issues. These include personal values, ethical issues and issues surrounding confidentiality and accountability. | |
Supporting Distance Learners in Developing a Learning Plan

1. Assessment of learning needs

Learners should be assisted to assess their:
- Values
- Skills
- Strengths and weaknesses
- Learning style
- Learning environment
- Reason for attending
- (e.g. compulsory - organisation initiated or voluntary – individually initiated)

2. Identification of learning goals

- Learners goals (SMART)
- Organisational goals (if applicable)
- Module learning outcomes

3. Identification of learning resources, supports and strategies

Includes availability and confidence to access:
- People (facilitator, other learners, mentors, supervisors, colleagues, other professional and services etc)
- Resources (texts/references, libraries etc)
- Technology (Internet/websites, e-mail, video-conferencing etc)

4. Identification of forms of evidence of learning

NOTE: Remember that learning is part of a cyclical process and the development and implementation of the learning plan will form the basis of analysis, reflection and further planning.

5. Specify timeframes and mode of contact

Includes time frames for:
- Informal contact (e.g. if the learner has a query)
- Review of progress
- Assessment events
- Finalising module requirements

Mode of contact could include:
- Telephone call
- E-mail
- Group teleconference (e.g. with other learners)
- Face-to-face meetings
**Assessment**

Example assessments are provided for these resources. However, individual Registered Training Organisations (RTOs) will determine assessments for the modules/units offered. Assessments will be responsive to learner needs and resources available and comply with Australian Quality Training Framework (AQTF) 2001 requirements.

**Assessment Principles**

Principles upon which assessment should be based include:

- Assessment is an integral part of learning and developing an understanding of what constitutes effective practice

- Assessment must be reliable, flexible, fair and valid
  - To be reliable, the assessment methods and procedures must ensure that the units of competence are applied consistently.
  - To be flexible, assessment should be able to take place on-the-job, off-the-job or a combination of both. It should be suitable for a variety of learning pathways including work-based learning and classroom-based learning.
  - To be fair, assessment must not disadvantage particular learners
  - To be valid, assessment has to assess what it claims to assess.

**Facilitator qualifications and knowledge**

It is recommended that the facilitator possesses at least:

- the unit of competence or a qualification containing the topic area being taught
- Certificate IV in Workplace Assessment and Training
- experience in the delivery of services to young people

Ideally, a facilitator should also have tertiary qualifications relating to the module being taught.

Under the AQTF (2001) Registered Training Organisations are required to provide appropriately qualified facilitators/trainers.
Resource requirements

Minimum resources required for the different modes of delivery are outlined below. Details of specific resources are contained in each topic.

Face-to-face training requirements

One large room (preferably with break out rooms for small group work) with the following resources:

- Whiteboard and markers
- Overhead projector and screen
- Butchers paper and markers
- Learner Workbook
- Blu tak

Distance learning requirements

- Learner Workbook

Mixed mode delivery requirements

One large room (preferably with break-out rooms for group work) with the following resources:

- Whiteboard and markers
- Overhead projector and screen
- Butchers paper and markers
- Learner Workbook
- Blu tak
The following icons are used in the Learner Workbook and Facilitator Guide to assist you in using the resources.

<table>
<thead>
<tr>
<th>Icon</th>
<th>Description</th>
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<tbody>
<tr>
<td>FAC</td>
<td>Facilitator direction</td>
</tr>
<tr>
<td>WPL</td>
<td>Workplace learning activity</td>
</tr>
<tr>
<td>Case Study</td>
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<tr>
<td>Task</td>
<td>Task</td>
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<tr>
<td>Writing exercise</td>
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<tr>
<td>Group activity</td>
<td></td>
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<tr>
<td>Links to other modules</td>
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<tr>
<td>WWW</td>
<td>Web resources</td>
</tr>
<tr>
<td>Video</td>
<td></td>
</tr>
<tr>
<td>Question</td>
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<tr>
<td>Answer</td>
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<tr>
<td>A good point for student to contact facilitator</td>
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<tr>
<td>Brainstorm</td>
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<td>Suggested time</td>
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<tr>
<td>OHT</td>
<td>Overhead transparency</td>
</tr>
</tbody>
</table>
Training Frontline Workers
Young People, Alcohol & Other Drugs

Section B
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Topic 1

Introduction

This module will help learners to make the best decisions possible for the young people with whom they work, which comply with the guidelines of their agency, and which sit comfortably with their own values systems wherever possible. Sometimes these interests will conflict with one another.

As learners work through this module they will be asked at various points to apply the learning to their work situation. If learners are experienced, they may find it helpful to discuss issues from their workplace (while maintaining confidentiality) and to generate some solutions with the help of other learners. If they are just starting out as a learner or as a worker, they may choose to answer more straightforward questions. Learners will be guided through this module step-by-step.

Overview
1.2 Learning outcomes

When learners have completed this module they will be able to:

- **L0** Develop and maintain professional boundaries when working with young people on AOD issues
- **L0** Maintain confidentiality when working with young people on AOD issues
- **L0** Work in an ethical manner with young people on AOD issues
- **L0** Ensure duty of care when working with young people on AOD issues
- **L0** Develop comprehensive case notes
- **L0** Outline appropriate supervision processes for work with clients
- **L0** Specify self-care strategies used to support work with clients.

It is suggested that you remind learners of these learning outcomes as they work through the module. At different stages ask whether they think they have achieved each of the learning outcomes. This will help them keep track of their progress, and what they still need to learn to successfully complete the module.
1.3 Assessment events

- Provide all learners with information on any assessment activities they might be required to undertake. Ensure that contact is made with distance learners as soon as possible.

- Discuss these with learners and provide time for questions, feedback and examples.

- Reflect on assessment events throughout training sessions to enhance learners’ understanding and conceptualisation of what is required. All assessments match Learning Outcomes competencies.

- Suggested assessment events are provided after Topic 8.
This module will help you to make decisions which are best for the young AOD users with whom you work, which comply with the guidelines of your agency, and sit comfortably with your own value systems wherever possible. It is important to note that sometimes these interests conflict with one another. You will also have an opportunity to develop some strategies for dealing with some of those conflicts.
2.1 professional conduct?

Working with young AOD users and young people involves making decisions about how to act in particular situations. Often these decisions need to be made quickly. For example, if an intoxicated young person is threatening to harm him or herself, a worker must take action immediately.

What is professional conduct?

What is your understanding of what is meant by the term ‘professional conduct’?

Professional conduct dictates that workers behave in ways which:

- comply with the law
- comply with the rules and regulations of their agency
- are in accordance with the code of ethics of their professional body
- are in the best interest of the client or young person
- if possible, involve the participation of the young person.
2.2 Professional behaviour

- The newspapers are often full of stories about people who have behaved in ways that are clearly unethical or unprofessional. These stories range from cases of sexual harassment to white-collar crimes such as embezzlement and fraud.

Professional and unprofessional behaviour

*Can you suggest some behaviours that you would consider to be professional and some behaviours that you would consider to be unprofessional or inappropriate in your work with young people with AOD issues?*

<table>
<thead>
<tr>
<th>Professional behaviours</th>
<th>Unprofessional behaviours</th>
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<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional behaviours</td>
<td>Unprofessional behaviours</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>• Applying your agency’s policy on managing people with AOD issues</td>
<td>• Having a sexual relationship with a young person</td>
</tr>
<tr>
<td>• Respecting the parameters of your role in relation to young people with AOD issues</td>
<td>• Having a strong emotional attachment to a young person</td>
</tr>
<tr>
<td>• Developing a clear understanding with young people about boundaries</td>
<td>• Having a coercive relationship with a young person</td>
</tr>
<tr>
<td></td>
<td>• Obtaining drugs from a young person</td>
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<td></td>
<td>• Supplying drugs to a young person</td>
</tr>
<tr>
<td></td>
<td>• Sharing intimate details of your life with a young person</td>
</tr>
<tr>
<td></td>
<td>• Asking a young person to help solve your problems.</td>
</tr>
</tbody>
</table>
2.3 Developing and maintaining professional boundaries

- The relationship between young people and worker is essentially one of trust and this can lead to situations where a young person may develop some level of emotional dependence.

- Frontline workers often develop close relationships with young people and it is sometimes difficult to draw precise lines about what sort of behaviour is appropriate.

- As workers, we cannot hope to be effective if our relationship with clients is too cold or distant, so it is often a matter of striking just the right balance.

- Appropriate relationships with clients are those, which recognise that workers have enormous power in the lives of their clients. Young people with AOD problems are especially vulnerable and we should seek to maintain relationships which empower them as much as possible.

- In all our relationships we set limits. Each of us has a boundary around us that defines who we are as individuals. The strength of our boundary depends on our relationship with the other person and on the context of that relationship. One of the key issues for workers is to be able to recognise when we may be crossing the invisible line which separates a client from a worker and which defines our relationship as professional and therefore workable.

- Example: A welfare worker worked with a young person for two years. They built up a good working relationship after some initial hostility and distrust. The young person moved to another area and the case was transferred to another office and another caseworker. It has been six months since the first worker and the young person have had contact.
The first worker decides that they would like to know how that young person is doing. They use the client information system from their service to look up recent case notes and find out how that young person is.

**Q**  
Is this professional/unprofessional? Why?

**NOTE** – You may wish to extend the discussion by asking learners to outline some strategies whereby the worker could make appropriate enquiries about the progress of a young person.

**Q**  
Would it ever be appropriate to contact the young person directly? If not, why not?

**Q**  
What are the implications for the worker to continue checking on the progress of ex-clients?

**Q**  
What are the implications for the young person?
Example: Two teachers are in a tea room at the local primary school and they teach kindergarten and second class. They have two little girls that are sisters, one in each of their classes. They both find it difficult to interact with the mother of these children who is often hostile and yells at them at times. This morning the mother attended the school and grabbed one of the teachers by the arm, threatening to slap her if she didn’t teach her child more effectively. Both the teachers were distressed by this incident, and are in the tea room ‘debriefing’ and talking about the family and what they should do. There are other teachers in the tearoom on their break.

Is this professional/unprofessional? Why?

NOTE – You may wish to discuss ways in which the incident could be debriefed more appropriately. Should other staff be involved in the process in any way?

Personal reflection

Consider the following questions and write down your ideas. Discuss your answers with other learners.

Young people often ask you about your personal life or your drug use. How do you deal with these types of questions?
You are talking with a client in a designated smoking area at your workplace. Your client knows you are a smoker and offers you a cigarette. Is it appropriate to accept?

You are working in a residential rehabilitation centre. A young client of the same sex embraces you in a non-sexual hug. What should you do?

It is a good idea to avoid self-disclosure unless you are confident that this will be helpful to the young person. For example, if a client asks you if you have ever had a drug problem they might be trying to find out if you can really understand their situation. Whatever you decide to tell them, it is important to focus on the need behind the question. You should avoid revealing irrelevant information about your personal life and try to keep the focus on the young person.

Many workers feel that it is important to provide positive role models for young people and that this can be best achieved by not smoking with clients. Even if a client knows that you smoke you can usually show restraint without offending. However, there is quite a lot of debate about this issue. What is the view of your fellow learners or fellow workers?

Some people say that physical contact with young people is never appropriate because it might be misinterpreted. Other workers say that young people are vulnerable and therefore it is appropriate to touch them in a non-sexual way. Keep in mind that young people who have suffered sexual or physical abuse may regard physical contact as intrusive and unwelcome. Ideally the client should always initiate physical contact. Physical contact of a sexual nature is never appropriate.
Additional discussion questions

Take some time to reflect on your own work experience.

Have there been any situations where physical contact with a young person has been an issue for you or for another member of your team? (For example, some young female clients are especially prone to hugging or showing affection and this can sometimes be inappropriate, but rejecting and alienating young people is also not desirable.) How did you deal with the situation?

Could you have handled the situation more effectively? How?

Does your organisation have a policy in regard to physical contact?

Is it possible to regulate physical and emotional relationships between clients and workers?
Q

Does the current climate of litigation mean that workers need legal protection in their day-to-day work?

Q

In what ways can workers protect themselves from accusations of misconduct?

FAC

In your work with young people your goal should be to establish and maintain a professional and effective working relationship. The boundaries between you and your clients should be clear to both parties. Sometimes we need to be very explicit when we work with young people, especially if they are vulnerable or very manipulative. The question for workers is how to recognise when these boundaries might be shifting or breaking down.
Maintaining professional boundaries

Consider the following questions and write down your ideas. Discuss your answers with other learners.

**Q**  
**Suggest some signs that might indicate that boundaries are shifting?**

**A**

You might consider that your relationship is drifting into something less than professional if you find yourself:

- setting aside a lot of time for one particular client
- staying back after hours with a particular client on a regular basis
- meeting a client socially on a regular basis
- finding yourself giving personal or irrelevant details about your own life
- becoming aware that a client will do whatever you suggest, without question
- becoming aware of sexual attraction to a client
- becoming aware of strong attachment to a client
- becoming aware of strong feelings of dislike for a client.

**Q**  
**If you recognise that your relationship with a client is becoming too intimate or that you have too much power and control over a young person, what can you do?**
Review your relationship with the young person

Re-establish boundaries with the young person by clarifying your role

Discuss the issue during your supervision session

Alter workplace arrangements so that the client is moved to a new worker

Arrange to share the case with another worker.

Take time to reflect on the quality of relationships outside of work. Do you have time to develop and nurture these relationships?

Think carefully about the best interests of the client. Are they being served?

Additional discussion questions

- You may know of situations where you or other workers have been concerned that boundaries were shifting or breaking down.

  How were you able to identify that this was occurring?

  How did you respond to this awareness?
What could you have done differently?

What would you do next time you sense that this is an issue for you or one of your team?

In some work environments, it is possible that the general topic of boundary crossing can be raised at team meetings so that all workers can be sensitive to the issue and can deal with any problems before they develop into major issues. Is this a possibility at your workplace? If not, why not?
2.4 Dealing with conflicts of interest

- Frontline workers face a wide variety of situations where conflicts of interest can occur. There are three main areas where this type of issue can arise:

  - **Interpersonal conflicts** occur between individual workers. For example, when two workers are trying to make a decision about the best course of action for their client, or when workers conflict about the purpose and direction of their work.

  - **Intrapersonal conflicts** occur when your personal values conflict with the guidelines of the agency, or when two of your personal values conflict with one another.

  - **Rights conflicts** occur when the rights of an individual conflict with the rights of people in the wider community. For example, when you know that one young person is putting the health or safety of other young people at risk.

Conflicts of interest

**Q** Where do conflicts of interest arise in your workplace?
Purpose of the exercise

► To explore the problematic nature of behaving professionally when faced with situations where there are conflicting interests.

Running the exercise

► Workers face a wide variety of situations where conflicts of interest can occur. Facilitator could continue the discussion by giving the following hypothetical scenarios to promote discussion or build on the discussions of the previous exercise.

Example 1: A case meeting where two workers disagree about the best course of action for a client. What can they do?

Example 2: If you are case managing a client from a harm minimisation perspective and another worker is coming from an organisation with a policy of promoting abstinence

Example 3: Youth workers smoking outside at an accommodation service with young people who are underage smokers.

► Draw on the experiences of learners to promote discussion about conflicts of interest by asking them to brainstorm examples of conflicts of interest in the workplace. Write responses on whiteboard and discuss.

► How can you work effectively together? Ask the learners to generate ideas about managing these situations.

► Suggest that they might consider that each worker has their own personal agenda. It can be useful to focus on why they feel strongly about a particular course of action. Are the best interests of the client really being served?

► It is also useful to consider the agendas of other people with whom they work. Good communication skills are required to resolve these conflicts. Workers may need to use their conflict resolution skills or find ways to develop these skills in their workplace.
Ask learners to share examples from their work and discuss strategies to resolve or manage their conflicts. Remind learners to maintain confidentiality when discussing their experiences.

Remember that workers have a responsibility to protect themselves emotionally and professionally, while also acting in the best interests of their clients.

Where do conflicts of interest arise in your workplace?

Can you suggest ways to resolve or manage these conflicts of interest?

Each worker has his or her own personal agenda. It can be useful to focus on why you feel strongly about a particular course of action. Are the best interests of the client really being served?

It is also useful to consider the agendas of other people with whom you work. Good communication skills are required to resolve these conflicts. You may need to use your conflict resolution skills or find ways to develop these skills in your workplace.

Keep in mind that you have a responsibility to protect yourself emotionally and professionally, whilst also acting in the best interests of your clients.

Other conflicts can develop when workers have different perspectives or policies on AOD use. If you are case managing a client from a harm minimisation perspective and another worker is coming from an organisation with a policy of promoting abstinence, can you work effectively together?
**Task**

*If you are working with others, discuss conflicts that have occurred in your workplace and strategies to resolve or manage their conflicts. (Remember to maintain confidentiality when discussing your experiences.)*
Workers often develop close relationships with young people. It is important that workers have a clear idea of ‘professional behaviour’ and do not abuse their positions of power.

Workers need to establish and maintain appropriate boundaries in their relationships with young people. Workers should not disclose unnecessary personal information and should minimise physical contact as this can be misinterpreted by young people. Contact of a sexual nature is never appropriate.

Conflicts of interest can occur when working with young people. The interests of young people sometimes need to be weighed against the interests of parents and the wider community.
It is important as a frontline worker to be aware of your own values, ideals and biases in particular when working with young people. Our own values may affect the way we work if we are not careful to modify our behaviour to fit our work situation. This next topic will explore these significant factors.

NOTE: The issue of worker values may already have been covered quite well in the other modules in this unit. You may wish to reduce the time spent on this depending on the needs of the group.
3.1 The significance of values and attitudes

- Values are beliefs or assumptions about what is good and desirable for people. This includes what we consider good and desirable for ourselves, for others and for the wider community.

- Each worker has a unique perspective on the world and has their own set of values. These can often be traced back to our experiences as children and the messages that we get from our parents and friends as we grow into adults. We bring to the workplace a whole range of life experiences that define who we are.

- It is neither possible nor desirable to separate ourselves into a ‘work’ self and another ‘social’ or ‘family’ self. We may modify our behaviour to fit work or social situations, but it is not psychologically healthy to alter our whole personality or to split our psyches into separate selves.

- Our identity is not fixed, but is constantly evolving as a result of our interactions with friends, family co-workers and clients. We are also influenced by our interactions with employers and with social institutions.

- Learners will be aware that they bring to their work a whole range of life experiences that define who they are.

- Values are beliefs or assumptions about what is good and desirable for people. This includes what we consider good and desirable for ourselves, for others and for the wider community.
Each worker has a unique perspective on the world and has their own set of values. These can often be traced back to our experiences as children and the messages that we received from our parents and friends as we grew up. As we mature we develop our own attitudes towards life. We discard some parts of our value system and adopt new values.

It is neither possible nor desirable to separate ourselves into a ‘work’ self and another ‘social’ or ‘family’ self. We may modify our behaviour to fit work or social situations, but it is not psychologically healthy to alter our whole personality or to split our psyches into separate selves.

In order to work effectively with young people it is useful to reflect on our personal values and be aware of how they might impact on young people.

It is important to be conscious of our values because it helps us to:

1. ask ourselves why we are doing what we are doing
2. identify what the consequences of our actions will be for ourselves and the young person or colleague
3. consider other and better options.

Our values can impact in positive and negative ways when we interact with young people.

Example: We may attempt to influence the choices and decisions of young people on the basis of our own experiences, rather than looking at the individual situation of each young person.
The significance of values and attitudes

Purpose of the exercise

- To reflect on the diversity of specific values and attitudes from person to person and worker to worker.

Running the exercise

- Ask the learners to write down an immediate response to the following three tasks. They should try to be spontaneous in their answers, rather than try and give the ‘right’ answer.

- Ask learners for their responses to each of the tasks and process them one at a time, documenting responses as you go. Lead a discussion focusing on the diversity of responses that these simple tasks can generate and thus the differences in values and beliefs between workers.

- Use the summary on the following page.

If you are completing this course by distance ask at least two other people for their responses to these questions and compare them to your own. Try to write down the first response that comes to mind and encourage others to do the same.

What three words describe what you think about young people today?

In one or two sentences describe the role of parents in today’s society?
Write down three words that describe what you think of young people who use AOD?

Being aware of our values and attitudes is important because it helps us to:

- identify why we are doing what we are doing
- identify what the consequences of our actions will be for ourselves or for the young person or colleague
- consider other or better options
- be more aware of the reasons for our responses to situations.
3.2 Values and work with young people

Values and work with young people

Purpose of the exercise

► The aim of this exercise is to consider some of your beliefs and values about young people, which may impact on the way you interact with them.

► Explain to learners that you are going to read out a series of statements one by one. They are to consider whether they strongly agree, agree, are neutral, disagree or strongly disagree with each statement. Explain that after you have read each statement you want them to place themselves somewhere along the ‘imaginary’ continuum line.

► Suggest there is an ‘imaginary’ continuum line with one end of the room being strongly agree and the other end of the room being strongly disagree (cards with ‘strongly agree’ and ‘strongly disagree’ written on them can be placed at the two ends of the continuum).

Strongly Disagree   Disagree   Neutral   Agree   Strongly Agree

► There are no right or wrong answers to this exercise. Their responses purely represent their opinions and beliefs that stem from their own experiences in working with young people.

► After learners have placed themselves on the imaginary continuum line for the first statement, have them discuss in the group why they placed themselves where they did.

► Do the same for each of the statements one by one.
Life was easier for young people when you were an adolescent.

Young people have too many options today.

Young people can’t make good decisions for themselves.

There is no safe level of drug use for young people.

It is preferable for a young person to use some substances over others.

Young people who are voluntary clients are easier to work with than those who are involuntary.

The family is a safe environment for young people.

Young people only think about themselves.

► As a significant part of their personal development, young people will naturally challenge society’s norms, beliefs and values. This may mean experimentation with a whole range of things that we might view as high risk.

► The importance of being aware of your own values and beliefs about young people and AOD use can have a significant impact on the way you view, understand and work with young people and cannot be underestimated.

► Ask learners if this raised any issues for them (i.e. are there issues or areas that are problematic?) For example, if you believe young people shouldn’t try AOD at all, how will this impact upon the way you work with them? What strategies could you develop to avoid these issues impacting on young people in your work with them?
Can you identify any emerging themes in your responses to the questionnaire? (e.g. whether you have strong views on any particular topics or issues) Can you draw any conclusions about your attitudes?

Discuss (with a colleague or learning group) how your values and attitudes might impact on your work with young people. Are there any problematic areas or issues?

Write down some strategies you could develop to avoid these issues impacting on the young people you work with.
3.3 Personal values in the workplace

Not only can our values impact on the young people with whom we work, they can also impact on our relationships with other workers.

Purpose of the exercise

To provide learners with an opportunity to consider how values might impact on relationships with other workers.

Running the exercise

Read the following scenario to the learners and ask them to discuss their ideas and strategies for dealing with this situation for five minutes in groups of 3-4 people. They may wish to allocate a spokesperson to report back to the larger group.

After five minutes discussion time regroup and process the responses from the different groups focusing on strategies for managing situations like these.

Emphasise the importance of awareness about our own values, beliefs and agendas and the focus of our work which is the best interests of young people.

Right and wrong

You are working in a government run youth health centre. Your boss has a strong belief in religion and has definite ideas about right and wrong, sin and guilt. She frequently requests that meetings start with a prayer and quotes the Bible to try and instil the fear of damnation into the young people with whom you work.

She believes that abstinence from using AOD is the only way to be ‘free’ of AOD problems and that this should be the goal of all interventions with young people.
Task

Q Would you be able to have an effective relationship with this person?

Q What values does this example bring up for you?

Q How might your boss’s attitude impact on young people?

Q How would you manage this conflict?

It can sometimes be difficult to recognise when we are projecting our own values on to others. It is often easier to notice when this is happening with our co-workers.
Scenario – Managing personal reactions to work situations

You are in a case meeting with another worker discussing the situation of a 15-year-old client who has just been thrown out of home because of her drug use. She has been your client for about one year and you feel you know her well. The other worker has suggested that you should try to reconcile this young woman with her parents but you feel reluctant to do this.

Your client is confused and not sure what she should do. You insist that things be given time to settle down before any action is taken. Your co-worker believes that something should be done as soon as possible. You spend all night worrying about the client and ring your co-worker early the next morning to discuss this case. You become angry with your co-worker when she suggests that maybe your ongoing poor relationship with your parents is influencing your decision.

Learners should complete the task with a colleague.

Describe in a few lines what you think is happening for you as ‘the worker’ in the above situation.
Personal reflection

1. **How can you tell if you are projecting your values?**

2. **Do you have any particular physical or emotional reactions that might indicate that you are over-involved in a case or not thinking objectively?** (e.g. sleeplessness, stomach aches, being pre-occupied with a particular case, being defensive, losing your cool.)

3. **Can you identify any issues that invoke strong or intense reactions for you?**

4. **Can you think of any strategies to help you recognise when you might be taking too much on board emotionally?**

5. **What action could you take to manage these situations?**
You could make an agreement with another worker that they tell you if they think you are over-reacting.

You could discuss these issues during your supervision session.

You could arrange to have the case transferred to another worker.

We all have personal values and attitudes that can impact significantly on the way we work with young people.

Conflicts of interest are a normal part of human interactions and the key is to handle them in a professional, respectful way.

Reflecting upon our values and attitudes can assist us develop strategies to manage work with young people.

The nature of work with young AOD users can evoke emotional and personal responses.

Developing strategies for managing those responses is critical both for yourself and for the quality and effectiveness of your work with young people.

Distance learners have been advised to make contact with you, the facilitator, to check their learning progress.
This topic introduces students to the concept of professional ethics as standards of practice. Many organisations have written codes of conduct which embody the principles of ethical practice. Learners should be encouraged to identify the written and unwritten codes of conduct which exist in their agency and compare these with codes they have developed themselves.
4.1 Ethical principles

All workers in the community welfare and health industry base their work on a broad platform of ethical principles. These principles act as a guide to how we should treat clients and one another.

Identifying ethical principles for working with clients

**Q** What ethical principles might be applied when working with young people?

**A**

- a respect for basic **human rights**
- a respect for the individual and the right to **self-determination**
- a respect for different **cultures and religions** in society
- a commitment to **empowerment** and **participatory democracy**
- a commitment to **collaborative** working relationships and **collective action**
- an acknowledgement that all relationships and activities with young people are based on their **consent** (whenever possible).

The following document ‘Ethical Principles in Youth and Community Work’ explains the above principles in a broader detail.

**Task**

*Check whether there is a similar document at your workplace. Read through it and discuss it with other learners or colleagues.*
Ethical Principles in Youth and Community work

Respect for basic human rights

Basic human rights include the right to food and shelter, the right to a fair trial and the right to free speech.

Respect for the individual and rights to self determination

Each young person should be regarded as unique, and not be judged on the basis of their membership to a particular group. For example, young people should not be categorised on the basis of their particular drug use. Young people have the right to make choices and decisions about their own lives.

Respect for different cultures and religions in society

Workers should value cultures and religions different to their own, they should not ridicule them or promote one religion over others.

A commitment to empowerment and participatory democracy

Young people should have a say in decision-making. This includes decisions which affect them personally, and decisions about how society should be.

A commitment to collaborative working relationships and collective action

Workers should value the skills and ideas of other workers and of the young people with whom they work. Workers should understand that working together for a common cause is more effective than working alone.

An acknowledgement that all relationships and activities with young people are based on their consent

This principle is a more specific example of the principle regarding self-determination. Workers need to acknowledge the unequal power relationship that exists between workers and clients and seek to ensure that young people have their rights and safety protected at all times.
Ethical principles in youth and community work

- Respect for basic human rights
- Respect for the individual and rights to self-determination
- Respect for different cultures and religions in society
- A commitment to empowerment and participatory democracy
- A commitment to collaborative working relationships and collective action.
- An acknowledgement that all relationships and activities with young people are based on their consent.

Reflection on the ethical principles of your organisation

Discuss your answers with other learners.

Does your organisation demonstrate respect for the above principles? Can you think of an example of each principle in action? (e.g. how does your organisation demonstrate that it is committed to empowering young people?)
Are all your clients given equal respect, regardless of their age or social background?

How does your organisation demonstrate its respect for people of different cultural backgrounds?

The above document has clearly been aimed at working with young people in the general community, not specifically in an AOD context. In your workplace, can young people always have a say in what happens to them? Why? Why not?

In your opinion, if young people are intoxicated or under the influence of other drugs, are they still entitled to participate in the decision-making process? If yes, how might this occur and when would it be appropriate/inappropriate?
4.2 Codes of ethics

Your organisation or professional body probably has a written code of ethics. Sometimes these are called codes of conduct. They are an important part of your policy and procedures manual.

**In your own words, what do you think a code of ethics is for?**

Try to obtain a copy of your organisation’s code document to discuss with colleagues or other learners.

**A**

- A code of ethics makes it clear what sort of behaviour is expected from workers
- A code of ethics protects the privacy and rights of clients
- A code of ethics attempts to ensure consistency and credibility in professional practice.

**FAC**

- Keep in mind that a code of ethics cannot attempt to cover every conceivable situation and is designed as a framework for practice.

- Different industry sectors have their own codes, which are applicable to each particular type of work.

- All of these codes share the same basic principles but have different emphases.
Developing a code of conduct for AOD workers

▶ Ask learners to complete the following exercise in groups. In this exercise they will draft their own code of ethics for people who work with young people with AOD issues.

What should a code of ethics for people who work with adolescents with AOD issues contain?

Are there specific areas that need to be addressed?

If your workplace has produced a code of ethics for AOD workers, analyse it and add your own comments. (For example, what does it cover? What should it cover?)
Draft your own code of ethics for workers who respond to the needs of young people with AOD issues including at least four major principles.

1.

2.

3.

4.

To be effective, a code of conduct would need to address the needs and rights of young people, the needs and rights of workers and the needs and rights of the employer.

Instructions about how to behave in specific situations are dealt with by creating specific policy documents. These should be located in your policy and procedures manual.
4.3 The code of ethics for alcohol and other drug workers

By the end of the last exercise you should have developed a rough draft of your own code of ethics for your organisation. After discussion with other workers, you have hopefully improved the existing document for your organisation.

The following Code of Ethics for Alcohol and Other Drug Workers is presented as an example. It was developed in 1993 after consultation with a range of treatment agencies and many have adapted it to suit their work and client groups. Note the combined emphasis on the quality and effectiveness of service delivery.

Review and reflection

Inform learners that people who work in the alcohol and other drugs field come from diverse backgrounds and professions. While individuals bring their own personal and professional ethics to their work, clients have a right to expect high ethical standards which are consistent across different services and workers.

The code of ethics for Alcohol and Other Drug Workers was developed in 1993 after consultation with a range of treatment agencies. Many have adapted it to suit their work and client groups.

The facilitator should read through the code of ethics with learners, noting the combined emphasis on the quality and effectiveness of service delivery.
It has been provided as an example of the way codes are developed to fit with the requirements of a particular field.

Learners should be encouraged to comment on the differences between this document and the one they have created. What did they miss?

What did they include in their code that is missing from this 'official' version?

Do the young people with whom learners work have special needs or issues that have not been addressed by this code of ethics? What are they?

Ask learners to compare this document with the code of ethics they developed and if possible with the code of ethics from their own organisation. Can they come up with a definitive document (i.e. the best possible combination)?
The Code Of Ethics for Alcohol and other Drug Workers

Equity and access is important in service provision

Clients should have ready access to the services they need and should receive equal treatment for equal need. This is particularly important for people who have dual or multiple problems as they are often referred from one service to another without receiving appropriate treatment.

Services should be responsive to the individual's needs

Services should be relevant and responsive to the individual needs of clients. They should be appropriate for the client's gender, social circumstances, ethnic and cultural background and take into account any other problems or disabilities the person may have (for example: mental illness; intellectual, physical or sensory disability; brain injury or chronic illness). The client's values, expectations and belief systems should be respected.

Services should provide opportunities for clients and ex-clients to participate in the planning, development, management and evaluation of services which will help ensure that services are relevant and responsive to clients.

Services should be effective

Services should deliver a positive outcome for the client. The overall effectiveness of services should be measured from the perspective of the client. Services should hold regular planning and evaluation sessions. Programs that are not effective should be revised and amended so they do provide a positive outcome.

Services should be cost efficient

Services should be efficient and use the available resources to achieve the best possible effect.
Compare this document to your own draft ‘code’. Discuss the following questions with other learners.

Q Does your document clearly address the realities of working with young people with AOD issues?

Q Is your document workable? Does it give clear directions about what type of behaviour is expected?

Q Is it an improvement on your current workplace document? If so, could you present it at a staff meeting?

The code of ethics for alcohol and other drug workers includes:

- Equity and access is important in service provision
- Services should be responsive to the individual's needs
- Services should be effective
- Services should be cost efficient.
• A code of conduct deals with general standards of conduct. It acts as a set of guidelines or ground rules.

• To be effective, a code of conduct needs to address the needs and rights of young people, the needs and rights of workers and the needs and rights of the employer.
Topic 5

Confidentiality

Overview

Confidentiality is a key aspect of work practice. The next topic will explore the definition of confidentiality and look at how workers may apply it appropriately in particular with young people, and when writing case notes.

Key Issues

- What is confidentiality?
- Writing case notes
- Confidentiality and case records

Resources

The Youth Worker as a Confidante. Morgan & Banks (2001) Chapter 9
5.1 What is confidentiality?

As a worker you will probably have a clear idea about confidentiality and many of you will have signed confidentiality agreements with your agencies. Many organisations deal with the issue of confidentiality in their policy and procedures manual. Privacy legislation also requires that you ensure that a client’s family and health history are kept in a secure and confidential manner.

Confidentiality

Can you suggest some of the ways that information about clients is exchanged?

A

- databases
- client files
- case notes
- letters and referrals
- by phone
- electronically
- verbally.

Keep in mind that the courts can subpoena client files.

When information is exchanged in correspondence between services (for example, when you make a request or make a referral), it is important to ask for the client’s signed ‘permission to exchange information’ so that you do not breach confidentiality.
Do you think that parents should have access to a young person’s file notes? Are there any situations when this might be appropriate?

If the young person is your client and not the family, how does this impact on your confidentiality agreement with the young person?

Sometimes the young person’s right to self-determination (the right to make their own choices and decisions) can conflict with their need to be parented. Can you come up with possible solutions to this dilemma?

One way of dealing with these dilemmas is to discuss them with the young person concerned. You might be able to help them identify the advantages and disadvantages of telling their parents about the issues. This keeps the choice in the hands of the client.

Are there any situations where the principle of confidentiality must be broken to protect the interests of the client?
What confidentiality issues have been raised in your workplace (e.g. have you had a problem with paperwork going astray or has the receptionist discussed private information when other clients are listening)? How were these issues dealt with?

How might these issues have been dealt with them more effectively?

Are there any workplace procedures that prevent workers from maintaining the confidentiality of clients? For example, is confidentiality maintained during case meetings?

How might these procedures be altered to give clients more protection?
Task

Case Study

Read the following case study and discuss your answers with another colleague. Write your answers down and then discuss with the large group.

A youth worker in an inner city youth centre had been working with a group of about 20 young people aged 14-20 who congregated on street corners near the centre. They had a passion for rave music, and over half of the group admitted to using drugs (mainly Ecstasy and LSD). The group complained of boredom, so a contract was drawn up with them to enable them to use the centre twice a week to play their music. They agreed that no illegal substances would be brought into the centre and that they would not attend the centre under the influence of drugs.

With the odd exception, this agreement was kept and the worker began helping a sub group on issues around drugs. Problems emerged when a drug dealer known to some of the people started hanging around outside the centre. Due to his close contacts with the young people, the worker had information which could lead to the arrest of the dealer. Colleagues and the majority of the members of the centre’s management committee urged the worker to go to the police. The worker knew that this would mean losing contact with the young people and being labelled a ‘grass’. He felt he had been making some headway with them on harm reduction strategies.

(Re-printed from Morgan & Banks, 2001)

Task

What do you think the worker should do in this situation?

- Is there a range of options?

- Whose interests are the most important to you as a worker?

- Is it possible to balance these competing interests?
Have you faced similar situations in your own work? How have you solved these dilemmas?

- Learners should be encouraged to discuss strategies for dealing with these types of situations.
5.2 Writing case notes

As a health worker or a youth worker you are normally required to keep case notes. A young person should be told that case notes and other records will be kept about them and they should be able to access them on request.

Why do you think we keep case notes?

Q

A

- **Accountability** (so that we can demonstrate we are providing an appropriate and effective service)
- **Legal responsibility** (case records can be subpoenaed as court documents)
- **To keep a history** of the client (so that we can provide appropriate therapy/care)
- **To make referrals** to other agencies.

What sort of information do you keep in your case notes?

Q
Most case notes contain the same general information, which includes:

- the personal details of the client (these are on a referral sheet/cover sheet)
- family history
- type of contact (whether you phoned the client or saw them at home, at a centre or in a formal counselling situation?)
- details of major issues
- action plans (detailing who is responsible for which action)
- arrangements for the next meeting.
Learners should read these examples in their Learner’s Workbook.

Examples of case notes

Example 1. 20/10/02 – Accommodation service

Client interviewed for first time in the Office. Was referred from local child protection agency. Seemed very angry and hostile at the beginning of the interview, but seemed more settled once I had indicated that her involvement with the agency was to be on a voluntary basis only, and that she could choose to leave whenever she wanted. Seems to have had a number of involvements with agencies over the years, some of which she seemed OK about, some of which seems to have acted as a negative reinforcement. Stated that she feels that everyone else seems to be in control of her life except her. Parents and boyfriend have been ‘giving her grief’ about her using.

Client stated that cocaine is her current drug of choice and that her use is limited to weekends because of financial restraints. Stated that weekends are ‘fairly heavy’ and that she is struggling to get through the week. Outlined policy regarding AOD use on these premises. Client told that she would have to leave the program if she uses on the premises. She agreed to come back next Friday at 2 p.m. to discuss the issues in more detail and whether she wants to commit to this program.

Example 2. 20/10/02 – Outreach service

Phoned client to check how things were going in relation to problems with transport to visit various specialists at the local hospital. Client said that family is unable to assist. Said that I had been in contact with local community transport group who are happy to assist. However, client will need to contact them to make the arrangements and provide details of dates and times. Client indicated that this was fine and that he would get in touch with them in the next few days. Indicated that I would see him next week as arranged.
Do you think that these case notes are useful? If not, why not?

Improving case notes and records

Consider the case notes you are currently writing. Would they be useful to another case worker if you were to leave the organisation? Do they give an accurate picture of the client’s history and current situation?

Can you think of ways in which you could write better case notes than the ones you are currently writing? Consult the following checklist in your Learner’s Workbook see where you can improve.

- Do you always use language that is non-judgemental (i.e. neutral)?
- Do you avoid making assumptions about the client and always stick to the facts?
- Do you always indicate clearly when a comment is an observation (e.g. she seemed upset)?
- Do you make it clear when you are recording the client’s own words (by using quotation marks or by writing ‘the client stated that...’)?
The courts can subpoena records and other reports and you need to be very careful about what you say about a client. Take care to record only what you have observed about a client.

You can also be subpoenaed by the court to explain your case notes. Since you need to be able to justify every entry in your case records, ensure that your notes are not ambiguous in any way. You can ensure this by only recording observations and relevant statements made by you or the client.

Write your case notes as soon as possible after you have seen or spoken with a client.

Clients have the right to access their records so they should always be written as accurately and clearly as possible.

Are there any guidelines in your policy and procedure manual regarding critical incidents? How are these reports filed at your organisation? Are they kept in a secure place?

Writing for other organisations

Workers are often required to send reports or letters of referral to other agencies. This information needs to be presented in a way that is:

clear
concise
accurate
reliable
relevant to the request
presented appropriately.
Referral letters

Read the following referral letter and underline the places where the worker has used inappropriate language.

Example: Referral letter

Sunnyvale Rehab Centre

Tuesday

Dear Jimbo,

Ben is one of my clients and he’s asked me to see if he can come into your program sometime soon. He is very immature and has poor social skills. I think that his parents are to blame for this as they moved around a lot when he was young.

Ben comes to our centre quite a lot and he told me that he fancies Mary, one of our other young clients. I don’t think she fancies him. He is always off his face when he arrives and usually causes fights by punching and hitting the other boys.

I don’t think that he would fit in very well at your service, so I would think twice before accepting him into your residential program.

Call me if you want more info.

Cheers

Fred Nerk

p.s. Fred has three younger sisters living at home.

Write your own version of this letter, using appropriate language.
5.3 Confidentiality and case records

Read the following scenario in your Learner's Workbook with another learner. Make note of the places where confidentiality may have been breached.

A DAY IN THE LIFE OF THE ‘HENRY SMITH’ RECORD:
A HORROR STORY

This is the story of a case record for a young man called Henry Smith. It contains case notes and other confidential information about Henry. For example, it contains his drug use history and details of the court decision about his possession of cocaine.

9.00 am. Henry’s record is resting quietly in a locked cabinet in the back room. The record is aged four. (In other words Henry Smith has been a client for four years). The record is nice and fat. It bulges out of the sides of its manila folder with various reports from doctors, psychiatrists, youth workers and drug and alcohol workers. At present Henry’s case is in the hands of Susan, a Drug and Alcohol Worker at the Sunnyvale Rehabilitation Centre.

9.30 am Susan arrives at work and takes the record from the locked cabinet and carries it to her desk to leaf through. In comes the admin person (Sam) who borrows it, takes it to his desk and files some new pages in it and removes some others for copying. The ‘Henry’ file is left on his desk while he goes off to do the copying in another part of the building. When he’s finished Sam returns the file to Susan’s desk.
10.00 am  Susan is reading the file and discovers that an important document is missing. She asks Sam if he’s seen it. Sam panics and runs to the copying room hoping to find it still in the photocopier. It isn’t!! Sam spends the next 15 mins looking for the document and eventually finds it with the admin person of the section next door. One of the staff from that section had found the report and read it, but couldn’t figure out who it belonged to, so he left it on the desk of the admin person for his section.

12.00 noon  Henry’s file remains on Susan’s desk while she goes to lunch.

1.30 pm  Another worker enters the room and shuffles through the papers on Susan’s desk. He takes the file to his desk to write down some phone numbers he needs for making a referral for one of his own clients. On the way to his desk a piece of paper falls out of the file and lands on the floor. It goes unnoticed. The other worker returns the file to Susan’s desk.

3.00 pm  Susan has to attend a staff meeting with the rest of her team. She takes Henry’s file with her so that she can talk about some of the problems she is having with his case. At the meeting the file is passed around to various workers to illustrate her point.

5.00 pm  It is time for Susan to go home. She has decided to take home some of her case files and catch up on some paper work. She catches the bus home and fills in the journey by reading over her case notes. The bus is very crowded.

6.00 pm  Henry’s file arrives at Susan’s house where she is greeted by three children, two dogs, and her partner. The file is deposited hastily on the dining room table where it sits while Susan starts making dinner. Meanwhile her two-year-old is restless. He heads for the table and amuses himself by drawing nice pictures on the cover of the file.

7.00 pm  Susan’s teenage daughter arrives home. She is bored and hungry. Her eye falls upon Henry’s file. It soon becomes the most fascinating reading she has seen in ages.
8.00 am   The next day the file travels to work by car. Upon arrival, Susan is told that they are having a clean-up day. Henry’s file is accidentally included in the box of papers to be discarded and it arrives at the tip where its pages are caught by the wind and blown all around.

11.00 am   Later that morning, Bob the businessman picks up one of the pages, sees that they belong to the Sunnyvale Rehabilitation Centre and rings to let them know that confidential information flying around the tip. Sam is horrified. He hastily arranges for a maintenance crew to go down and retrieve as much information as possible. This needs to be done quickly, so as to avoid a major lawsuit.

Answer the following questions and discuss your answers with other learners.

Q How could Susan have kept this record confidential and still kept up with her paperwork?

Q Can you suggest ways to keep electronic records confidential (e.g. computer files, emails)?
The ‘Henry Smith’ Horror story is an extreme example of what can happen to client records but similar incidents can, and do, occur from time to time. Have you had any similar incidents at your workplace? How could the incident have been avoided?

Does your workplace have a policy on protecting client information? How specific is it?

- Confidentiality requires that we ensure a client’s family and health history are kept in a secure and confidential manner
- Case notes can be brief or detailed, depending on your organisation’s requirements
- Young people are legally able to access case notes
- Case notes need to be kept simple and relevant
- You may be subpoenaed to court to explain your case notes. Hence they need to be accurate.

Distance learners have been advised to make contact with you, the facilitator, to check their learning progress.
This topic covers some of the issues around your responsibilities to your clients and to other workers. As a worker, you have a legal and moral responsibility to keep your clients safe from harm whilst they are using a service. This responsibility is known as ‘duty of care’.

There are several aspects of duty of care. These will be discussed in more depth throughout this topic.
6.1 Duty of care

Can you suggest some ways in which young people might come to harm at your organisation or in your work context?

**Q**

**A**

- physical injury (from an unsafe environment)
- physical injury (as a result of violence from other clients or workers)
- sexual abuse (by another client or a worker)
- infectious disease
- misinformation.

- Workers have a responsibility to their clients to **reduce or limit** the amount of harm or injury they may experience. This responsibility is known as ‘duty of care’ and it can sometimes seem overwhelming. For example, our responsibility to one party (for example, our employer) might conflict deeply with our responsibility to our clients. It helps to remember that duty of care is a balancing act.
There are several aspects to duty of care:

**Legal** - What does the law suggest we do?

**Professional/ethical** – What do other workers expect us to do?

**Organisational** – What does our organisation and its funding body say we should do?

**Community** – What do the parents of our clients and other community members expect us to do?

**Personal** – What do our own beliefs and values suggest we do.

We need to balance the safety of the young person against other concerns such as:

- the safety of other people/our personal safety
- other rights young people (e.g. the right to privacy)
- the aims of the service (e.g. to empower young people)
- the limits of our organisation (e.g. money and other resources).
Please read the scenario in your Learner’s Workbook and write down some options for the worker. Discuss your answers with a colleague.

SULA

Sula visits your centre on a regular basis for counselling. One day she arrives and is clearly very unwell. You think she needs medical attention but she says that she does not want to see a doctor. Are you carrying out your duty of care if you call the doctor yourself?

What do you think is the right course of action?

Describe the process by which you would come to a decision. What factors would you need to consider? For example, would the quality of your relationship impact on your decision?

How do you perceive the rights of young people? Are your values reflected in your practice?
**Case Study**

**Jack**

You are a worker at a youth accommodation service and Jack, one of your residents, arrives one night after curfew. He is clearly under the influence and demands to be let in. You know that he will not go away because he has nowhere else to go and you feel reluctant to call the police because of his history. You decide to let Jack in but he quickly becomes more and more aggressive. He wakes the other residents and verbally abuses one of them. It emerges that he has a weapon and he threatens to harm himself and take you all with him.

**Task**

1. **What do you think is the right course of action?**

2. **How can we balance the right of young people to control their own lives with our duty to prevent them from coming to harm?**

3. **Where does our primary responsibility lie?**

4. **How do we balance our own safety with the safety of others?**
When you are faced with situations where there are conflicting responsibilities, how do you come to a decision? Can you think of an example from your own workplace?

Can you think of some situations from your workplace where you have had to make decision which complies with the policy of your organisation but which sits uncomfortably with your own value system?

- What was the situation?

- What did you do?

- What could you do if this situation arises in the future?

Always consider guidelines of your organisation
Balance these with your own values and commonsense
The law does not expect perfect care, rather what is considered ‘reasonable’ care.
What types of skills and knowledge do you think a worker should have?

We can reasonably expect that workers will:

- act within the law
- have knowledge of workplace policies
- have the skills and training to work with young people
- have knowledge about legal and illicit drugs and their effects
- use their common sense.

The principle of duty of care is that you have an obligation to avoid acts or omissions, which could be reasonably foreseen to injure or harm other people. This means that you must anticipate risks for your clients and take care to prevent them coming to harm. Remember that harm encompasses both physical and emotional harm.
6.2 Duty of care, the law and young people

- Young people who use illicit drugs are obviously taking risks with their health and wellbeing and we need to think carefully about their interests. We have an obligation to tell young people about the effects of a particular drug. We have a duty of care to educate young people about ‘safer’ use and harm minimisation.

- Sometimes we are faced with situations where there is conflict between protecting people from harm and impinging on their rights. We need to make judgments about how important these rights are to our clients. For example, if a young person tells us about their drug use in confidence, do we have an obligation to tell other workers or their parents?

- Young people with drug and alcohol issues will also want to talk about other areas of their life such as their relationships with family and friends. Young people expect the worker to maintain confidentiality about these discussions.

- Sometimes the law requires that we break the confidentiality of clients. In these circumstances, we should always tell the client that this is going to happen.

The law and young people

There are a number of laws which impact on young people.

What laws impact on the lives of young people?
- the age of consent
- the sale of alcohol and cigarettes to young people
- the sale and possession of illicit drugs
- the requirement for young people to attend school
- the safety and protection of young people.

Laws may vary from state to state. They can also change very quickly.

For example, in NSW the age of consent for sexual activity is 16 years for girls. For boys, the age of consent for heterosexual sex is 16 and for homosexual sex is 18.

In NSW The Children and Young Persons (Care and Protection) Act 1998 requires all community services and health workers to contact their Community Services Department if they have concerns for the safety, welfare or well being of a child. The Act differentiates between children (under 16) and young people (16–17 years). This is an important distinction to make, as it recognises that older adolescents may be physically and emotionally mature and heading towards financial and social independence.

In most states, you must let your Community Services Department know if you suspect that a child is being physically, emotionally or sexually abused. Mandatory reporting means that you don't have a choice. The law says you must make a report. You may report a young person if you think they are at risk, but you won't be penalised if you choose not to. You can use your discretion.
The law generally requires workers to protect the confidential information of their clients. The Commonwealth Privacy Act, 1988 and the Privacy and Personal Information Act, 1998 (NSW) strengthen this protection. This legislation states that an individual's personal and family history cannot be divulged to other organisations without their consent, and that these records must be kept in a secure place.

Other laws prevent disclosure of a person's HIV status. In most cases you mustn't reveal that someone is HIV positive without their permission.

A young person who knows that they are HIV positive or has AIDS is obliged to disclose their status if they are:

- planning to have sex with someone
- donating blood

They do not have to tell anyone else.

There are other laws that actually require workers to break confidentiality.

You must inform the police if someone tells you they have committed a serious crime or if they intend to commit a serious crime.

You also have a duty to warn that someone may be harmed. If someone tells you that they intend to assault another person, you have a duty of care to tell that person, even if you don't know them.
Read the scenarios in your Learner's Workbook and write down what you think the worker should do in each case. Discuss your responses in small groups.

Case Study 1

Peter is a 17-year-old client in your detox centre. He is in a relationship with Robyn, a 16 year old girl who occasionally comes to the centre to attend support groups. During a routine medical check-up, Peter discovers that he has herpes. He reveals this to you in a counselling session and says that he has not told anyone else. You are concerned that he might be having unprotected sex with Robyn.

Case Study 2

You are working in a rehabilitation program for young people. Mandy is a 15-year-old girl who discloses to you that she was raped six months ago. The man who raped her is still part of her social network. Mandy does not want you to tell anyone because she is afraid that he might retaliate.

Case Study 3

Jim is a 13-year-old client who has been seeing you for drug and alcohol counselling. He discloses to you that he is currently homeless and has been sleeping rough in the park.

Case Study 4

Anton is a 15-year-old client at a Youth Drop-In Centre. One night he casually discloses to you that he recently witnessed the severe bashing of a shop assistant during a robbery of a jewelry store. You are aware that the police have not solved this crime.
Case Study 1

You would be breaching confidentiality if you told Robyn about Peter's condition without his permission. Your responsibility is to educate Peter about the transmission of herpes and explore the advantages and disadvantages of telling his partner. You might also use the support group as another avenue of discussing safe sex.

Case Study 2

To be consistent with the child protection legislation, you are required to notify Community Services against Mandy's wishes. Workers from Community Services do not interview the alleged perpetrator. Their role is to interview the young person to confirm there is a case of sexual abuse before referring the matter to the police who would then investigate. Unless the perpetrator is charged, they would not be told the identity of the accuser.

Even with this information, Mandy might still be worried that the perpetrator will guess who accused him. She can tell the interviewers as little or as much as she chooses. You might help her by exploring the advantages or disadvantages of giving information.

Case Study 3

Unless you can resolve Jim's situation quickly, for example by referring him to a refuge, you must also report his case to Community Services. Children who are homeless are considered to be 'at risk' and you are mandated to report this situation.

Case Study 4

All people (except clergy, medical practitioners and legal advisers) are required to give the police any information they may have about a serious crime including arson, murder, assault and sexual assault.
• ‘Duty of care’ requires workers to keep clients, themselves and other workers safe from harm, where possible

• Young people with AOD issues are particularly at risk and this can result in conflicts of interest for workers who must balance the rights of young people against the need to protect them from harm

• A wide range of legislation impacts on the lives of young people and can vary from state to state.

• In most states, child protection legislation requires workers to report situations where children and young people are at risk.
People who choose to work directly with young people often find their work stressful and challenging. It is tempting for workers to believe that they should just ‘get on with the job’. However, it is important for you to have established support networks and to have adequate supervision so that you can perform to the best of your ability. This topic deals with ways to organise and maintain effective personal and professional support.
7.1 Identifying support networks

- It is important you receive adequate emotional support and allow time for debrief and supervision as part of your professional conduct. Workers need to make time for supervision on a regular basis.

Identifying support networks

- This exercise is designed to help learners identify their own personal support network. Provide learners with a large piece of paper to complete this exercise, A3 or bigger, and some different coloured pens. Encourage learners to be as creative as they like.

- Direct learners to their Learner’s Workbook to complete this exercise.

First, draw a picture or symbol of yourself in the centre of the paper. Then, draw pictures or symbols of all the people or things, which support you in learning or being creative at work. You might like to include behaviours like walking to work or having regular lunch dates with friends. You might include colleagues, books, team meetings, and friends. These all contribute to your creativity and productiveness at work.

Next, give an indication of the strength of these supports. Are they strong or weak links? Is this support regular or occasional? You can indicate this by drawing dotted lines to indicate occasional support and heavier lines to indicate strong or regular support.

Next, add the things that block your progress in a different coloured pen. What stops you from getting the support you need? You might include criticism from other people, self-doubt, or the unavailability of support.
When you have finished, share your map with a partner. Explain your work and then ask your partner to give you an overall impression of your map.

**Answer the following questions:**

- Is this the kind of support you want?
- Is it enough? What support is missing? How could you obtain such support?
- What support is really positive for you to the extent that you need to make sure you have it?
- Which blocks could you reduce?

Repeat the process in relation to your partner’s map.

You and your partner should then each develop an action plan for getting the support you need.

**Your personal action plan should identify:**

- what type of support you need
- how you are going to obtain this support
- when are you going to get this support
- who does it involve?
7.2 Negotiating and maintaining effective supervision

Supervision is a right of workers and many organisations have supervision policies and formal supervision arrangements in place.

The supervision process provides workers with the opportunity to:

- reflect and discuss challenging and confronting aspects of their work
- reflect on things that they have done well and work out ways of dealing with situations more effectively
- discuss client situations when they feel they are ‘stuck’ (while maintaining confidentiality, of course!)
- explore any issues arising out of their work role that need addressing
- Supervision is an important part of taking care of yourself and should be an ongoing process
- Supervision can be provided by managers (in house), by external providers (usually on a contract basis), or by peers (in a team supervision situation)
- Supervision provides a learning opportunity by allowing you to time to reflect on your work and develop your professional skills.
What items would you include in your contract?

- frequency of supervision (weekly, fortnightly)
- place where session will occur
- a description of what might be allowed to disrupt a supervision session (for example, can the session be cancelled if there is a crisis at work or at home?)
- the expectations of the worker
- the expectations of the supervisor.

Strategies for improvement

If you already have supervision arrangements in place (with or without a formal contract), reflect on ways in which the process could be improved or revised.

What strategies can you suggest that will improve the process for you and other members of your team?

What are some of the qualities that you would like your supervisor to have?
Supervisors should:

- demonstrate a high level of professional skills in their own work
- demonstrate the appropriate personal characteristics (e.g. they should be optimistic and encouraging, have a sense of humour, be empathic and sensitive to the needs of others and have good listening skills)
- have a good knowledge of individual differences with regard to gender, ethnicity, culture, age and sexual orientation
- have knowledge of the policies and procedures of the workplace and be familiar with the ethical, legal and regulatory aspects of the field of work
- be able to set clear goals for the supervision session in consultation with the worker
- provide immediate feedback relevant to the issue. This feedback should be honest, objective and constructive.

*Can you identify any specific shortcomings in your current supervision arrangements? For example:*

**Q**

*Do you have open communication with your supervisor?*

**Q**

*Does your supervisor concentrate on giving you support at the expense of constructive criticism?*
Does your supervisor define clearly what they expect from you?

Does your supervisor make time for you?

How could you be more proactive in resolving these and any other problems you are experiencing with your supervision?

Some possible strategies for improving supervision include:

- asking for a more direct response
- asking for constructive criticism
- making your own expectations clear
- being assertive in regard to appointment times
- being prepared for supervision with a written agenda
- asking for a different supervisor, if possible
- seeking out external supervision
- suggesting other supervision methods (e.g. team supervision).
Summary

• Working with young people can be demanding and workers need to develop support networks, including workplace supervision.

• Supervision should be regarded as a right and provides an opportunity to debrief and to develop strategies for dealing with issues.

• Supervision is more effective when it is planned and when the worker has set clear goals for the session.
At this point you should reflect with the learners on their learning experience and together assess whether the following learning outcomes have been met:

- Develop and maintain professional boundaries when working with young people on AOD issues
- Maintain confidentiality when working with young people on AOD issues
- Work in an ethical manner with young people on AOD issues
- Ensure duty of care when working with young people on AOD issues
- Develop comprehensive case notes
- Outline appropriate supervision processes for work with clients
- Specify self-care strategies used to support work with clients.
8.2 Summary of contents

- In this module we have identified that professional conduct involves a whole range of issues and responsibilities and that working with young people in an AOD setting has its own particular issues and problems in this regard.

- Young people are vulnerable and as a worker, you have a powerful influence over their lives. This power must be exercised with care.

- Workers are often placed in situations where they must weigh up the outcomes for clients and at all times you need to think through the consequences of your actions.

- Keep in mind that your relationship with a young client is essentially one of trust and that young people should be treated with respect. We need to maintain professional boundaries while still maintaining an attitude of care.

- As well as your moral obligation to work in the best interests of your clients, you are bound by ‘duty of care’ and by various legal constraints. You should endeavour to find out about the particular laws that apply to your state or territory. These can change rapidly.

- Workers often find themselves in stressful situations and you should try to put in place adequate support systems so that you can continue to work effectively.
8.3 Self-reflection activity

- Ask learners to take some time to reflect on what they have gained from this module and to complete the following questions. Allow time for feedback and discussion.

- **What aspect of this module do you feel is most relevant and useful in your work practice?**

- **What kinds of issues has this module raised for you in your work?**

- **Have you identified any further learning needs as a result of completing this module?**

- **If so, what are some ways you can achieve these learning needs?**
Overview

The suggested assessment events for this module have been mapped to the unit of competence CHCYTH1A and correspond with the learning outcomes listed at the beginning of this module, Young People and Drugs – Issues for Workers. Over the course of this program learners could be required to complete one of the following assessments:

Event 1: Workplace Journal

This assessment can be completed at work and at home. Consider the following questions and make notes while at work. The questions are designed to get you thinking about your workplace practice, how it may be improved and what you think are your strengths and weaknesses. You may also wish to include some examples of workplace practice, such as copies of case notes (ensure that all clients names are deleted). Copies of policies and procedures that are specific to confidentiality and duty of care and any other examples or notes that may support your answers.

For each question you should write around 300 words as a journal entry and include any supporting documents. Alternatively you may wish to present your answers to a small group.

1. While you are at work how do you develop and maintain professional boundaries when working with young people on AOD issues?

2. What types of issues do you need to discuss with young people with regard to confidentiality in your workplace?

3. How does your agency ensure duty of care when working with young people on AOD issues? How do you ensure this duty of care is carried out?
4. What type of case notes do you keep? How comprehensive are they?

5. Do you participate in formal supervision? When does this occur and what are your expectations? What are your supervisor’s expectations?

Assessment criteria

The following key areas are to assist you and the learners in providing a guide for marking the assessment for this particular unit:

- Demonstrates ability to critique and reflect on own work practices
- Demonstrates ability to incorporate work place practices with theoretical knowledge underpinning relevant issues in the workplace that are linked with professional conduct
- Ability to maintain clear, concise and neat information and provide workplace documents that support journal entries.
References


## Key terms

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Code of ethics</td>
<td>A statement of the values, principles and rules of a profession which regulates the conduct of its members.</td>
</tr>
<tr>
<td>Collective action</td>
<td>Based on the idea that people achieve more if they work together and combine their ideas, skills and strengths.</td>
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<tr>
<td>Confidentiality</td>
<td>Agreement by workers not to disclose information about clients without their permission. However, in some circumstances the law requires them to break this agreement.</td>
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<td>Democracy</td>
<td>Based on the idea that everyone should have the chance to be involved in making the decisions that affect them.</td>
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<tr>
<td>Duty of care</td>
<td>Obligation to prevent foreseeable harm coming to clients or co-workers.</td>
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<tr>
<td>Empowerment</td>
<td>Process of helping young people increase their personal, interpersonal, socio-economic and political strength to improve their lives</td>
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<tr>
<td>Ethical principles</td>
<td>Moral principles adopted by a culture, group or profession. They lead to the formation of rules on ethical conduct.</td>
</tr>
<tr>
<td>Participatory self-determination</td>
<td>Clients’ right to make their own choices and decisions without interference. However, self-determination is sometimes limited to prevent harm coming to people.</td>
</tr>
</tbody>
</table>