Corey’s Nuggets

1. First – Where should I start the process? NEXT and FIRST are synonymous
2. Best – In some cases, this is the all-encompassing answer.
3. Medical / Substance abuse (acute withdrawal) needs supersede psychiatric needs.
4. **Avoid the answer that is based on your personal values. Always consider what diagnostic criteria, ethical standard, best practices approach, or legal standard supports your answer. Stay in TEST WORLD. The real world doesn’t always translate to the ASWB exams.**
5. Clinical exam – Most of Section III of the NASW Code of Ethics applies to the clinical exam. We will also review supervision roles. Moreover, be mindful of resolving conflicts with supervisees and instances when your subordinates are dating. You will also need to ensure that the policies of your agency align with the NASW Code of Ethics. Additionally, you will be responsible for helping supervisees resolve countertransference. Moreover, we will discuss EAP programs.
6. Cultural question – choose the cultural answer. Exception – safety and the law supersede your cultural beliefs

**Substance Abuse Levels of Care**

1. Detox – acute withdrawal symptoms
2. Inpatient – extensive SA HX + acute, untreated MI
3. Residential – extensive SA HX. Susceptible to environmental triggers
4. Outpatient – least restrictive. Client has a support network. Escalating *concerns* about substance use.

\*\*12 Step Groups (NA, AA, MA, CA, etc)

Common Relapse Triggers

1. Environment (people, places, things)
2. Emotional Triggers (Stress, anxiety, grief, marital issues, unresolved trauma, guilt, shame)
3. Physical Pain
4. Untreated Mental Illness