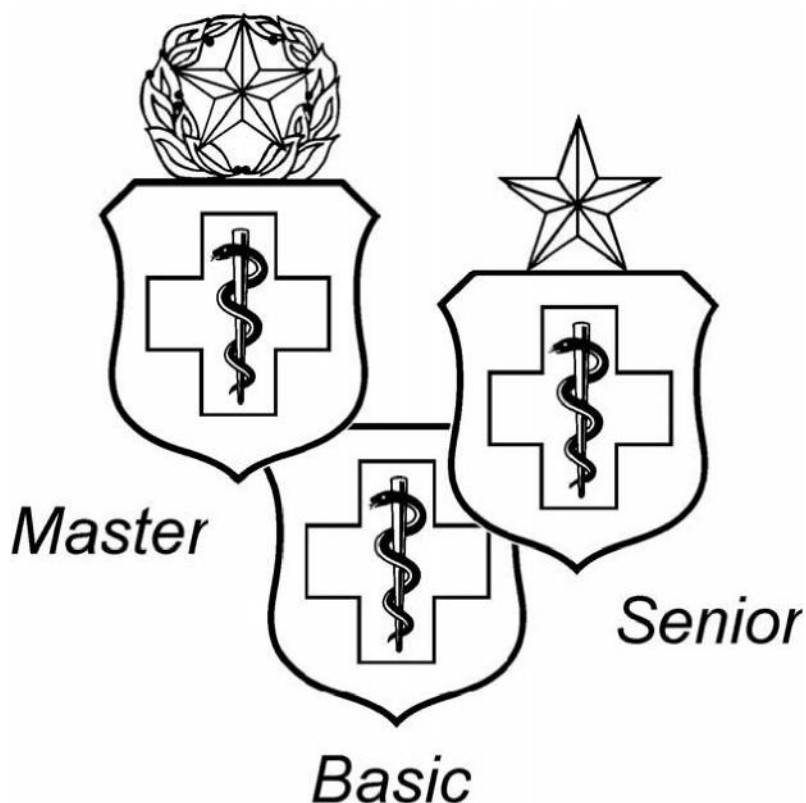


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MENTAL HEALTH SERVICE SPECIALTY



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CAREER FIELD EDUCATION AND TRAINING PLAN
MENTAL HEALTH SERVICE SPECIALTY

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**MENTAL HEALTH SERVICE SPECIALTY
AFSC 4C0X1
CAREER FIELD EDUCATION AND TRAINING PLAN**

Part I

Preface

1. The Career Field Education and Training Plan (CFETP) is the primary document used to identify life-cycle education and training requirements. It serves as a road map for career progression and outlines requirements that must be satisfied at appropriate points throughout the career path. The CFETP also specifies the mandatory task qualification requirements for award and maintenance of an Air Force Specialty Code (AFSC).

2. The CFETP consists of two parts. Supervisors will use both parts to plan, manage, and control training within the specialty.

2.1. Part I provides Air Force Specialty (AFS) information in five sections: Section A explains how everyone will use the plan. Section B explains AFS progression and information and it provides AFS duties and job progression information within five paragraphs: paragraph 1 identifies Specialty Description information; paragraph 2 identifies Skill and Career Progression information; paragraph 3 identifies Training Decisions; paragraph 4 identifies Community College of the Air Force (CCAF) requirements; and paragraph 5 explains career field path requirements. Section C associates each level with specialty qualifications (knowledge, education, experience, training, and other). Section D indicates resource constraints. Some examples are funds, manpower, equipment and facilities. Section E is not used. There is currently no transition training requirement.

2.2. Part II is subdivided into five sections: Section A identifies the specialty training standard (STS) and includes: core tasks, wartime and technical references to support training, Air Education and Training Command (AETC) conducted training, 3-, 5-, and 7-skill level formal or career development course (CDC) requirements; and the proficiency levels. Section B, contains the Course Objective List (COL) and training standards for supervisors to use as an evaluation tool for course graduates. Section C contains support materials; this course does not require qualification training packages (QTPs) to support upgrade training (UGT) or qualification training. Section D contains the training course index; lists include all mandatory Air Force in-residence, field, Air Force Institute of Advanced Distributed Learning (AFIADL), and exportable courses available to support this AFSC. Section E is not used. There are currently no MAJCOM unique requirements.

2.2.1. At unit level, supervisors and trainers will use Part II to identify, plan, and conduct training commensurate with the overall goals of this guide.

3. The CFETP ensures individuals in this specialty receive effective and efficient training at the appropriate points in their career.

Abbreviations and Terms Explained

Air Force Medical Service (AFMS). The AFMS supports the USAF through the provision of full spectrum medical readiness to the 200,000 Airmen currently engaged in operations around the world, and by delivering health care to 2.6 million patients through a system of 239 clinics at 76 installations worldwide. The AFMS mission is to ensure medically fit forces, provide expeditionary medics, and improve the health of all they serve to meet our Nation's needs. Today, more than 700 medical Airmen are deployed in more than 30 nations, supporting warfighters in a variety of ongoing and emergent contingency operations. The AFMS strives to provide reliable access to safe, quality care for all that they serve, promoting positive patient experiences and outcomes. To achieve this goal, they are committed to providing Trusted Care Anywhere, around the globe at every Air Force medical facility.

Air Force Records Information Management System (AFRIMS). AFRIMS is a mandatory AF-wide system. It provides AF Records Managers, at all levels of organization, a tool to manage and prepare file plans and associated records management products. AFRIMS also provides real-time access and management of the USAF Records Disposition Schedule (RDS).

Alcohol and Drug Abuse Prevention and Treatment (ADAPT). A program that promotes readiness, health, and wellness through the prevention and treatment of substance abuse.

Advanced Distributive Learning (ADL). Anytime, anyplace learning within Department of Defense (DoD) consisting of instructional modules comprised of sharable content objectives in an internet/intranet environment.

Advanced Training (AT). Formal course that provides individuals who are qualified in one or more positions of their Air Force Specialty (AFS) with additional skills and knowledge to enhance their expertise in the career field. Training is for selected career Airmen at the advanced level of an AFS.

Air Education and Training Command (AETC). Conducts basic training for all Air Force (AF) enlisted personnel, produces skilled flying and ground personnel, and trains many of the world's military forces. Along with basic military, technical, and flying training, AETC provides other types of training, such as aircrew transitional, special, advanced, lateral, and survival training.

Air Force Career Field Manager (AFCFM). The Air Force focal point for the designated career field within a functional community. Serves as the primary advocate for the career field, addressing issues, and coordinating functional concerns across various staffs. Responsible for the career field policy and guidance.

Air Force Enlisted Classification Directory (AFECD). This is the official directory for all military enlisted classification descriptions, codes, and identifiers. It identifies the duties and responsibilities and specialty qualifications for all enlisted AFSCs.

Air Force Job Qualification Standard/Command Job Qualification Standard (AFJQS/CJQS). A comprehensive task list that describes a particular job type or duty position

used by supervisors to document task qualifications. The tasks on the AFJQS/CJQS are common to all persons serving in the described duty position.

Air Force Reserve Component (AFRC). The branches of the Air Force composed of both Air Force Reserves (Ready Reserve, Standby Reserve, and Retired Reserve) and the Air National Guard of the United States.

Air Force Specialty (AFS). A group of positions (with the same title and code) that require common qualifications.

Air Force Training Record (AFTR). The AFTR is an enterprise-wide custom training management system designed to replace the paper-based training records system. It is the electronic equivalent of an Air Force Form 623, *Individual Training Record Folder*, and is used by career fields within the Air Force Medical Service (AFMS) to document all training actions.

Airman Leadership School (ALS). Level of enlisted professional military education (EPME) delivered at resident schools, and available through distance learning courses. EPME provides career-long learning opportunities to prepare enlisted members for positions of greater responsibility and to increase their commitment to the military profession.

Air Reserve Component (ARC). An overarching term referring to both the Air National Guard (ANG) and Air Force Reserve Component (AFRC) together.

Air University/Air Force Career Development Academy (AU/AFCDA). Provides instructional opportunities for customers beyond the confines of the formal classroom. AU/AFCDA has an enrollment, distribution, tracking, and testing system in place for distance learning courses.

Career Development Course (CDC). A self-study correspondence course providing Airmen with fundamental knowledge of their AFS.

Career Field Education and Training Plan (CFETP). A CFETP is a comprehensive core training document that identifies life-cycle education and training requirements; training support resources; and minimum core task requirements for a specialty. The CFETP aims to give personnel a clear path and instill a sense of industry in career field training.

Commercial off The Shelf (COTS). Commercially-procured training products.

Community College of the Air Force (CCAF). College activated in 1972 to gain academic recognition for technical training conducted by AF schools. CCAF awards the Associate in Applied Science (AAS) degree to active duty AF, ANG, and AFRC enlisted members.

Comprehensive Medical Readiness Program (CMRP). Highly specialized initial, sustainment, and theater-specific training to respond to varied missions and environments. The training system includes AFSC-awarding training courses, clinical currency platforms, courses for deployment platforms, local courses and briefings, and exercises.

Computer-Based Training (CBT). A self-paced, stand-alone computer product used to deliver interactive subject and task knowledge.

Continuation Training. Additional advanced training exceeding the minimum upgrade training requirements with emphasis on present and future duty assignments.

Core Tasks. Tasks the AFCFM identifies as minimum qualification requirements for everyone within an AFSC, regardless of duty position. Core tasks are specified for a particular skill level or in general across the AFSC. Guidance for using core tasks can be found in the applicable CFETP narrative.

Course Objective List (COL). A publication derived from initial and advanced skills course training standard (CTS), identifying the tasks and knowledge requirements, and respective standards provided to achieve a 3-, 5-, and 7-skill level in this career field. Supervisors use the COL to assist in conducting graduate evaluations in accordance with AFI 36-2201, *Air Force Training Program*.

Course Training Standard (CTS). Identifies a specific course's training and proficiency level. The CTS is used to identify optional supplemental training requirements, and may be used to identify officer CFETP mandatory and optional course requirements.

Critical Task. A task that requires specific training and certification prioritized above other tasks. Tasks may be defined as critical either through Air Force Instructions, Technical Orders, higher headquarters, or at any level in the unit.

Developmental Special Duty (DSD). Enlisted developmental positions identified for their unique leadership roles and the Airman's responsibility to mentor and mold future leaders. To ensure the highest quality Airmen are assigned to these positions, the Air Force has implemented a nomination process. The nomination process will provide commanders an opportunity to nominate their best Airmen to fill these critical positions while providing a developmental career path. This program focuses on nominations for Staff, Technical and Master Sergeants. DSDs are temporary in nature and are performed by Airmen for a period of up to four years.

Distance Learning (DL). Includes Video Tele-seminar, Video Tele-training, and CBT. Formal courses that a training wing or a contractor develops for export to a field location (in place of resident training) for trainees to complete without the on-site support of the formal school instructor. For instance, courses are offered by Air Force Institute of Technology, Air University, and Training Detachment.

Duty Position Task. The tasks assigned to an individual for the position currently held. These include as a minimum all core tasks, critical tasks, and any other tasks assigned by the supervisor.

Enlisted Specialty Training (EST). A mix of formal training (technical school) and informal training (on-the-job) to qualify and upgrade Airmen in each skill level of a specialty.

Exportable Training. Additional training via computer-assisted, paper text, interactive video, or other necessary means to supplement training.

Eyes-on Supervision. Defined as the direct contact with the patient of sufficient length and interaction to validate the assessment and recommendation.

Field Technical Training (Type 4 and Type 7). Special or regular on-site training conducted by a Field Training Detachment (Type 4) or by a Mobile Training Team (Type 7).

Initial Skills Training. AFS-specific training an individual receives upon entry into the Air Force or upon retraining into this specialty for award of the 3-skill level. Normally, this training is conducted by AETC at one of the technical training wings.

Instructional System Development (ISD). A deliberate and orderly, but flexible, process for planning, developing, implementing, and managing instructional systems. It ensures personnel are taught in a cost-efficient way the knowledge, skills, and attitudes essential for successful job performance. MAJCOM MFMs work with the AFCFM to develop, implement, and maintain the CFETP.

Integrated Operational Support (IOS). IOS is the integration of medical personnel, training, human factors engineering, environment, safety, occupational health, habitability, and personnel survivability considerations into high-risk line units to ensure all weapon systems are operationally suitable and effective for the human weapon system (HWS). IOS optimizes the HWS operational capabilities (such as physiological and psychological health, emotional well-being, cognitive functions) to achieve mission success under the conditions in which the weapon system will be employed while identifying hazard and managing risk.

Major Command (MAJCOM) Functional Manager (MFM). A person appointed as the senior representative for an AFS within a specific MAJCOM. Among other responsibilities, MFMs work with the AFCFM to develop, implement, and maintain the CFETP.

Noncommissioned Officer Academy (NCOA). Level of Enlisted Professional Military Education (EPME) delivered at resident schools, and available through distance learning courses. EPME provides career-long learning opportunities to prepare enlisted members for positions of greater responsibility and to increase their commitment to the military profession.

Occupational Analysis Report (OAR). A detailed report showing the results of an occupational survey of tasks performed within a particular AFS.

On-the-Job Training (OJT). Hands-on, over-the-shoulder training conducted to certify personnel in both upgrade (skill-level award) and job qualification (duty position certification) training.

Operational Medical Element (OME). The OME employs primary and secondary prevention tactics to mitigate occupational and operational stressors, enhance resilience, prevent injury/illness and facilitate access to the healthcare system when needed. In addition to primary and secondary prevention, the embedded medics will advise operational unit commanders on the health of unit

members and facilitate policies with impact on human performance—such as shift work schedules, work station/cockpit ergonomics and other human factors to improve performance.

Operational Support Team (OST). The base Operational Support Team (OST) is an AFMS resource to directly support the Line of the Air Force (LAF) mission. The OST is focused on improving mission performance by employing psychological and/or physical resilience enhancement and military occupational injury prevention techniques at the unit level.

Optimal Training. The ideal combination of training settings resulting in the highest levels of proficiency on specified performance requirements within the minimum time possible.

Proficiency Training. Additional training, either in-residence, exportable advanced training courses, or OJT training provided to personnel to increase their skills and knowledge beyond the minimum required for upgrade.

Qualification Training (QT). Hands-on performance-based training designed to qualify a trainee in a specific duty position. This training occurs both during and after upgrade training to maintain qualifications.

Qualification Training Package (QTP). An instructional package designed for use at the unit to qualify, or aid qualification in a duty position or program, on a piece of equipment, or on a performance item identified for competency verification within this CFETP. QTPs establish performance standards and are designed to standardize skills verification and validation of task competency. It may be printed, computer based, or other media.

Readiness Training Package (RTP). Establishes standard levels of knowledge and proficiency for common Disaster Preparedness and Readiness subject areas by providing instructors with training references, materials, and lesson objectives used in teaching and evaluating the course subject matter.

Resource Constraints. Resource deficiencies, such as money, facilities, time, manpower, or equipment that precludes desired training from being delivered.

Senior Noncommissioned Officer Academy (SNCOA). Level of enlisted professional military education (EPME) delivered at resident schools, and available through distance learning courses. EPME provides career-long learning opportunities to prepare enlisted members for positions of greater responsibility and to increase their commitment to the military profession.

Skills Training. A formal course resulting in the award of a skill level.

Specialty Training. A mix of formal training (technical school) and informal training (on-the-job) to qualify and upgrade Airmen in the award of a skill level.

Specialty Training Standard (STS). Describes skills and knowledge that Airmen in a particular AFS need on the job. It further serves as a contract between the Air Education and Training

Command (AETC) and the user to show the overall training requirements for an AFS taught in the resident and nonresident courses.

Standard. An exact value, a physical entity, or an abstract concept, established and defined by authority, custom, or common consent to serve as a reference, model, or rule in measuring quantities or qualities, establishing practices or procedures, or evaluating results; a fixed quantity or quality.

Subject Matter Experts (SMEs). Individuals in a particular AFS deemed as the most knowledgeable with the most experience.

Supplemental Training. Training for a portion of an AFS without a change in AFSC. Formal training on new equipment, methods, and technology that are not suited for OJT.

Total Force. All collective AF components (active duty, Reserve, Guard, and civilian elements) of the United States Air Force (USAF).

Training Capacity. The capability of a training setting to provide training on specified requirements based on the availability of resources.

Training Planning Team (TPT). Comprised of the same personnel as a Utilization and Training Workshop (U&TW); however, TPTs are more intimately involved in training development and the range of issues is greater than is normal in the U&TW forum.

Training Requirements Analysis. A detailed analysis of tasks for a particular AFS to be included in the training decision process.

Upgrade Training (UGT). Mandatory training which leads to attainment of a higher level of proficiency.

Unit Training Manager (UTM). The UTM is the commander's key staff member responsible for overall management of the training program. UTMs serve as training consultants to all unit members and determine if all sections have quality training programs.

Utilization and Training Workshop (U&TW). A forum of the AFCFM, MFMs, SMEs, and AETC training personnel that determines career ladder training requirements.

Weighted Airman Promotion System (WAPS). Airmen compete and test under WAPS in their career AFSC held on the promotion eligibility cut-off date.

Section A - General Information

4. **Purpose.** This CFETP provides the information necessary for AFCFM, MFM, commanders, training managers, supervisors, and trainers to plan, develop, manage, and conduct an effective career field training program. This plan outlines the training that individuals in the AFS should receive in order to develop and progress throughout their career. This plan identifies initial skills,

upgrade, qualification, advanced, and proficiency training. Initial skills training is the AFS specific training an individual receives upon entry into the Air Force or upon retraining into this specialty for award of the 3-skill level. This training is conducted at the Medical Education Training Campus (METC), Joint Base San Antonio (JBSA) Fort Sam Houston, Texas. Upgrade training identifies the mandatory courses, task qualification requirements, and correspondence course completion requirements for award of the 3-, 5-, 7-, 9-skill level. Qualification training is actual hands-on task performance training designed to qualify an Airman in a specific duty position. This training program occurs both during and after the upgrade training process. It is designed to provide the performance skills and knowledge required to do the job. Advanced Training is formal specialty training used for selected Airmen. Proficiency training is additional training, either in-residence or exportable advanced training courses, or on-the-job training provided to personnel to increase their skills and knowledge beyond the minimum required for upgrade. The CFETP has several purposes-some are:

4.1. Serves as a management tool to plan, manage, conduct, and evaluate a career field training program. In addition, it is used to help supervisors identify training at the appropriate point in an individual's career.

4.2. Identifies task and knowledge training requirements for each skill level in the specialty and recommends education and training throughout each phase of an individual's career.

4.3. Lists training courses available in the specialty, identifies sources of training, and training delivery methods.

4.4. Identifies major resource constraints that impact full implementation of the desired career field training process.

5. Use of the CFETP. The plan will be used by MFMs and supervisors at all levels to ensure comprehensive and cohesive training programs are available for each individual in the specialty. They will also work with the AFCFM to develop acquisition strategies for obtaining resources needed to provide the identified training.

5.1. METC personnel will develop or revise formal resident, nonresident, field, and exportable training based upon requirements established by the users and documented in Part II of the CFETP. They will also work with the AFCFM to develop acquisition strategies for obtaining resources needed to provide the identified training.

5.2. MFMs will ensure their training programs complement the CFETP mandatory initial, upgrade, and proficiency requirements. OJT, resident training, contract training, or exportable courses can satisfy identified requirements. MAJCOM-developed training to support this AFS must be identified for inclusion into the plan.

5.3. UTM's and supervisors must ensure each individual completes the mandatory training requirements, including MAJCOM supplemental requirements, for the upgrade training specified in this plan.

5.4. Each individual will complete the mandatory training requirements specified in this plan. The list of courses in Part II will be used as a reference to support training.

6. Coordination and Approval. The AFCFM is the approval authority for the CFETP. Also, the AFCFM will initiate an annual review of this document to ensure currency and accuracy. MAJCOM representatives and AETC personnel will identify and coordinate on the career field training requirements.

Section B - Career Field Progression and Information

7. Specialty Description

7.1. Specialty Summary. Supports mental health services in psychiatry, psychology, social work, family advocacy, substance abuse prevention, treatment and aftercare, integrated operational support, and other mental health programs. Manages mental health service resources and activities. Assists mental health professional staff with developing and implementing treatment plans. Performs specified mental health counseling. Reports and documents patient care. Related DoD Occupational Subgroup: 130200.

7.2. Duties and Responsibilities

7.2.1. Performs outpatient and inpatient mental health patient care activities. Screens patients for program admission, which includes triage; evaluating psychological, physiological, and social signs/symptoms; mental status examinations; and obtaining and recording vital signs. Performs intakes, which include gathering demographics and completing required admission forms. Provides program orientation procedures to new patients. Performs assessment procedures, which include clinical interviewing to gather biopsychosocial, mental health, and substance abuse histories; administering standardized psychological testing; using appropriate assessment tools to assist in identifying mental health and nursing diagnoses; and identifying patients' strengths, weakness, problems and needs. Performs patient counseling by utilizing trained skills to assist individuals, families, and groups in achieving treatment goals through exploration of problems; establishing treatment plans; maintaining therapeutic relationships; examining attitudes and affective responses; providing alternative solutions; assisting in decision-making/disposition planning; and executing the treatment plan under the guidance/supervision of a privileged provider. Participates in case management/coordination activities to include, but not limited to coordinating and participating in treatment team meetings; communicating high interest enrollment/disenrollment; duty limitations; providing safety recommendations to commanders and primary care providers; and coordinating mental health services for patients in transition. Recognizes patients in acute emotional and physical distress and provides crisis intervention techniques and precautionary measures. Assists patients with nutritional needs, hygiene, and comfort measures. Provides mental health and substance abuse outreach, prevention, and education. Identifies patient needs that can't be met by the counselor or program and refers the patient to the appropriate support system. Assists in, or arranges patient referral to public, private, and military community agencies. Charts the assessment results, treatment plans, reports, progress notes, discharge summaries and other patient care documentation. Consults with other professionals and subject matter experts to assure comprehensive quality care for the patient. Contacts military and community agencies to obtain

collateral information. Utilizes their skills, expertise, and insight into emotional, behavioral, and social functioning to assist with improving health and human performance. Consults with unit leaders and unit members on topics relevant to adapting and responding to the unique operational and combat related challenges of their unit. Employs primary and secondary prevention tactics to mitigate occupational and operational stressors, enhance resilience, prevent injury/illness and facilitate access to the healthcare system when needed. Performs aeromedical evacuation procedures when needed.

7.2.2. Plans and supervises mental health service activities. Coordinates with appropriate agencies regarding specified care, treatment, prevention, rehabilitation, and administrative functions. Ensures staff provide for safe, ethical, and reliable patient care. Performs clinical supervision on subordinates in relation to their skill level.

7.2.3. Manages enlisted resources. Establishes priorities based on knowledge of interchangeable skills among assigned enlisted personnel. Reviews procedures and requirements within specialty services to preclude duplication and to free personnel for more direct service work with patients. Defines requirements and utilizes emerging knowledge, research, and technology. Integrates quality communications, fosters partnerships, ensures flexible and responsive resource processes, optimizes force management and development, and empowers continuous process improvement. Establishes, maintains, and evaluates specific mental health, family advocacy, and substance abuse training programs. Conducts in-service and readiness trainings. Schedules recurring training and conducts task evaluations.

7.2.4. Performs Disaster Mental Health (DMH) and Combat and Operational Stress Control (COSC) activities. Provides psychological first aid to individuals and groups who may have had direct exposure to an all-hazard incident. Prevents and manages battle related stress before, during, and after deployments. Supervises and assists with care of individuals experiencing acute and post-traumatic stress reactions.

7.2.5. Supervises and performs administrative duties. Monitors preparation, maintenance, and disposition of mental health, family advocacy, and substance abuse electronic and paper copy treatment records. Receives patients and schedules appointment. Evaluates and effectively manages mental health service activities. Collects and updates administrative and statistical data. Conducts unit self-assessments. Compiles and prepares medical and administrative reports. Briefs patients on safety and evacuation procedures.

8. Skill and Career Progression. Adequate training and timely progression from the apprentice to the superintendent level play an important role in the AF's ability to accomplish its mission. It is essential that everyone involved in training must do his or her part to plan, manage, and conduct an effective training program. The guidance provided in this part of the CFETP will ensure each individual receives proper training at appropriate points in their career.

8.1. Apprentice (3-Level)

8.1.1. Initial skills training in this specialty consist of the task and knowledge training provided in the 3-skill level resident course L5ABJ4C031 01AA, located at JBSA-Fort Sam Houston, Texas. The decision to train specific tasks and knowledge items in the initial skills course is based on a

review of OAR data, training requirements analysis (TRA) data, and 4C0X1 SME input. Task and knowledge training requirements are identified in the specialty training standard, at Part II, Section 4B. Individuals must complete the initial skills course to be awarded AFSC 4C031.

8.1.2. Utilize the CDC, QTPs and other exportable courses for subject and task fundamentals in the career field.

8.1.3. Once trained and task certified, a trainee may perform the task unsupervised. A privileged Mental Health (MH) provider is responsible for eyes-on supervision before a patient departs the appointment.

8.1.4. After all upgrade training requirements are completed, supervisors and UTM's coordinate upgrade procedures.

8.1.5. NOTE: All trainees are automatically enrolled in the CCAF when awarded their primary AFSC.

8.2. Journeyman (5-Level)

8.2.1. Upgrade to the 5-skill level in this specialty consists of: (1) Completing all core tasks specified by an asterisk (*) in column 2 of the STS, (2) Completing a minimum of 12 months of upgrade training (9 months for retrainees), (3) Completing the CDC (4C051) and (4) Recommendation of supervisors and meet all other requirements as outlined in AFI 36-2101, *Classifying Military Personnel (Officer and Enlisted)*. Please refer to AFI 36-2201 for further information. Once upgraded to the 5-skill level, a journeyman will maintain proficiency by completing all continuation training required or specified by command or local policies. The journeyman is eligible for application and selection as an instructor for the Mental Health Service Apprentice course; however, they must possess an SEI-475 and be selected through the Developmental Special Duty (DSD) program to qualify. Additional qualification training may become necessary when personnel transfer to another duty position, when a new piece of equipment is introduced, when new techniques or procedures are introduced, or when a need for increased training occurs.

8.2.2. Use CDCs and other reference material to prepare for WAPS testing.

8.2.3. To further enhance their skills, technicians should continue pursuit of the CCAF degree in Mental Health Services.

8.2.4. After all upgrade training requirements are completed supervisors and UTM's coordinate upgrade procedures.

8.3. Craftsman (7-Level)

8.3.1. Upgrade to the 7-skill level in this specialty consists of: (1) Selection to SSgt, (2) Completion of 100% core task training, (3) Completion of a minimum 12 months of OJT (6 months for retrainees), and become a Certified Alcohol and Drug Counselor (CADC). Upon

receiving 7-skill level upgrade, the maintenance of current CADC certification is required for retention within the AFSC, in accordance with (IAW) *Air Force Enlisted Classification Directory*. **Note:** AFRC members are not required to obtain their CADC certification.

8.3.2. Mental Health Service Craftsmen can be expected to fill various supervisory and management positions within mental health services. Craftsmen should take courses or obtain additional knowledge on management of resources and personnel.

8.3.3. Craftsmen are expected to maintain their CADC certification through the AF Substance Abuse Counselor Certification Board (AFSACCB). Craftsmen will follow recertification procedures outlined in the current edition of the AF Substance Abuse Counselor Certification Handbook.

8.3.4. Continued academic education through CCAF and higher degree programs is encouraged.

8.3.5. Complete EPME commensurate with grade.

8.3.6. After all upgrade training requirements are completed supervisors and UTMs coordinate upgrade procedures.

8.4. Superintendent. (9-Level)

8.4.1. A 9-level can be expected to fill leadership positions at flight, squadron, and group levels.

8.4.2. Must be a SMSgt for award of the 9-skill level. Maintenance of a current CADC certification is required for retention within the AFSC IAW *Air Force Enlisted Classification Directory*. **Note:** AFRC members are not required to obtain their CADC certification.

8.4.3. Additional training in the areas of budget, manpower, resources, and personnel management should be pursued through continuing education. Additional higher education and course work outside the AFSC are also recommended.

8.5. Chief Enlisted Manager (CEM)

8.5.1. 4C000. Awarded after promotion to Chief Master Sergeant. Performs duties as functional manager at various command levels, group or squadron superintendent, and flight chief. Additional training in the areas of resources, leadership skills, and management should continue. Completion of higher degree programs is recommended.

8.6. CADC Certification Requirements. Mental Health technicians serve in clinical roles as CADCs. They provide services in the following Twelve Core Functions/Four Domains outlined by the International Certification & Reciprocity Consortium (IC&RC): screening, intake, orientation, assessment, treatment planning, counseling, case management, crisis intervention, education, referral, report and record keeping, and consultation.

8.6.1. The AFSACCB issues the certification and has the authority to revoke certification for cause. The education and certification requirements include a minimum of 300 hours of formal classroom education, for enlisted applicants, technical training graduation satisfies this requirement. A cumulative 6,000 work-related hours within the Twelve Core Functions/Four Domains of substance abuse counseling, 300 of which must be accomplished within the ADAPT Program, under direct supervision of another fully qualified CADC or privileged Mental Health Provider (MHP), and have a signed agreement to practice under strict AF ethical guidelines. Ethical guidelines are state or board specific. Applicants must demonstrate competence by submission of a written case presentation of Global Criteria of the Twelve Core Functions/Four Domains. Applicants must also demonstrate a working knowledge of substance abuse theories, procedures, and concepts by passing the IC&RC written examination administered by the AF or an approved civilian testing center.

8.6.2. Recertification Requirements. All CADCs must apply for recertification every 3 years. Counselors are to complete 60 contact hours of professional education within the Twelve Core Functions/Four Domains, (three hours must include Ethics training). Hours for recertification can be derived from distance learning, CBT, on-line classes, and formal education. **NOTE:** 4C0X1 personnel completing special duty assignments outside Career Air Force Specialty Code (to include Military Training Leader, Military Training Instructor, EPME, etc.) are required to maintain their certification while performing those duties. All continuing education for these individuals will be accrued at unit's expense.

8.6.3. Expiration of Certification. Individuals who allow their CADC certification to expire are not permitted to independently perform their duties as a substance abuse counselor. The technician will conduct all Twelve Core Functions/Four Domains only when supervised by a CADC or privileged MHP, and must have direct supervision during patient contact. See AFI 44-121 for additional guidance.

9. Training Decisions. The CFETP uses a building block approach (simple to complex) to encompass the entire spectrum of training requirements for the Mental Health Service career field. The spectrum includes a strategy for when, where, and how to meet the training requirements. The strategy must be apparent and affordable to reduce duplication of training and eliminate a disjointed approach to training. The following decisions were made at the career field Specialty Training Team Requirements meeting held at JBSA-Fort Sam Houston in March 2017.

9.1. Initial Skills Training. The initial skill course was reviewed for content. Additions, deletions, and modifications were made to the course. Additional contingency training was also identified.

9.2. Five-Level Upgrade Training Requirements. Existing CDCs were reviewed and updated to ensure only current material remained and new technology information was added. Completion of the CDC is mandatory for upgrade to the 5-skill level.

9.3. Seven-Level Upgrade Training Requirements. Must possess CADC certification and SEI 475. No 7-level CDCs exist for the 4C0X1 career field.

9.4. Proficiency Training. Any additional knowledge and skill requirements that were not taught through initial skills or upgrade training are assigned as continuation training. Purpose of continuation training is to provide training exceeding minimum upgrade training requirements with emphasis on present and future duty positions. MAJCOMs must develop a continuation-training program that ensures personnel in the Mental Health Service career field receive the necessary training at the appropriate point in their careers. The training program will identify both mandatory and optional training requirements.

9.5. Comprehensive Medical Readiness Program (CMRP) Training Requirements. Training tasks, which are identified in the MH CMRP checklist, are the catalyst for training program development (checklist is located at <https://kx2.afms.mil/kj/kx7/MentalHealthRSVP/Pages/training-resources.aspx>). CMRP skill-set materials are training resources provided on this website to assist with upgrade training requirements found in the CFETP.

9.6. Training for Unit Type Code (UTC) Requirements. All 4C0X1s assigned to deployable UTCs or deployable positions will complete UTC-specific training, field training, and other requirements as directed in AFI 41-106, *Medical Readiness Program Management*. Training for these tasks normally will be conducted via medical unit readiness training, field training, readiness exercises, or annual ancillary unit training.

9.7. Other Training. Active duty units, as well as those in the ARC, will establish appropriate 4C0 training to meet unit-specific disaster response training.

10. Community College of the Air Force (CCAF). CCAF is one of several federally chartered degree-granting institutions; however, it is the only 2-year institution exclusively serving military enlisted personnel. The college is regionally accredited through Air University by the Commission on Colleges of the Southern Association of Colleges and Schools (SACS) to award AAS degrees designed for specific AF occupational specialties and is the largest multi-campus community college in the world. Upon completion of Basic Military Training and assignment to an AF career field, all enlisted personnel are registered in a CCAF degree program and are afforded the opportunity to obtain an AAS degree. In order to be awarded, degree requirements must be successfully completed before the student separates from the AF, retires, or is commissioned as an officer. See the CCAF website for details regarding the AAS degree programs at: <http://www.airuniversity.af.mil/Barnes/CCAF/>.

10.1. CCAF Degree Requirements. Degree programs consist of a minimum of 64 semester hours (SH) with requirements typically as follows: A student needs to hold the journeyman (5) level in the appropriate AFSC at time of program completion. The following requirements must be met: leadership, management and military studies; physical education; general education; and program elective requirements are identical for all programs. A student needs to hold the journeyman (5) level in the appropriate AFSC at time of program completion. Attaining the journeyman level is waived for a student in occupational specialties that do not have journeyman levels.

Course

Semester Hours

| | |
|---|----|
| Technical Leadership | 24 |
| Leadership, Management, and Military Studies..... | 6 |
| Physical Education..... | 4 |
| General Education..... | 15 |
| Program Electives..... | 15 |
| Technical Education; Leadership, Management, and Military Studies; or General Education | |
| Total | 64 |

10.1.1. Technical Education (24 Semester Hours): Completion of the career field apprentice course satisfies some semester hours of the technical education requirements. A minimum of 24 semester hours of Technical Core subjects/courses must be applied and the remaining semester hours applied from Technical Core/Technical Elective courses. Refer to the current *CCAF General Catalog* for specific degree requirements for your specialty.

| | |
|------------------------------------|-------------------------------|
| Technical Core Requirements | Maximum Semester Hours |
|------------------------------------|-------------------------------|

| | |
|---|----|
| Abnormal Psychology | 3 |
| Behavioral Health Practicum | 4 |
| CCAF Internship | 18 |
| Drug and Alcohol Abuse | 6 |
| Guidance and Counseling | 9 |
| Human Growth/Lifespan Development | 6 |
| Human Relations | 3 |
| Interpersonal Communication | 3 |
| Interviewing Skills | 4 |
| Mental Health Care | 24 |
| Psychology of Adjustment | 3 |
| Psychopathology/Psychiatric Interventions | 12 |

| | |
|----------------------------|-------------------------------|
| Technical Electives | Maximum Semester Hours |
|----------------------------|-------------------------------|

| | |
|--|---|
| Computer Science | 6 |
| Drug & Alcohol Abuse Counselor Certification | 6 |
| Emergency Medicine | 3 |
| General Biology | 4 |
| General Chemistry | 4 |
| General Psychology | 3 |
| Human Anatomy and Physiology | 4 |
| Human Biology | 4 |
| Medical Readiness | 3 |
| Nursing (Mental Health Related) | 6 |

10.1.2. Leadership, Management, and Military Studies (6 Semester Hours): The leadership, management and military studies (LMMS) requirement may be satisfied by applying enlisted professional military education, civilian courses accepted in transfer, and/or by testing credit.

However, the preferred method of fulfilling the LMMS requirement is through completion of Airman Leadership School, NCO Academy and/or the Air Force Senior NCO Academy.

10.1.3. Physical Education (4 Semester Hours): Completing basic military training satisfies the 4-semester-hours physical education requirement. Civilian courses do not apply to this requirement.

10.1.4. General Education (15 Semester Hours): Applicable courses must meet the criteria for application of courses to the general education requirements and be in agreement with the definitions of applicable general education subjects/courses as provided in the *CCAF General Catalog*.

General Education Subjects/Courses

Semester Hours

Written Communication..... 6

-or-

Oral Communication (Speech)..... 3

AND Written Communication (English Composition).....3

Mathematics 3

Intermediate Algebra or a college-level mathematics. Three semester hours of mathematics are required for graduation. However, if an acceptable general education college-level mathematics course is applied as an applicable technical course, a natural science course may be substituted for mathematics.

Social Science 3

Courses from the following disciplines are acceptable: anthropology, archaeology, culture, economics, geography, government, history, political science, psychology and sociology designed to impart knowledge, develop skills, and identify goals concerning elements and institutions of human society.

Humanities..... 3

Courses in fine arts (criticism, appreciation, historical significance), foreign language, literature, philosophy and religion are acceptable.

10.1.5. Program Elective (15 Semester Hours): Satisfied with applicable technical education, LMMS, or general education requirements; natural science courses meeting the general education requirement application criteria; courses in biological, physical and earth space science are acceptable. Appropriate natural science courses are freshman and sophomore courses that satisfy the delivering institution's natural science requirement for graduation; foreign language credit earned at Defense Language Institute; maximum of nine semester hours of CCAF degree-applicable technical course credit otherwise not applicable to this program may be applied with students permission. See the *CCAF General Catalog* for details regarding the AAS degree for this specialty.

10.1.6. Residency Requirement (16 Semester Hours): A student must have a minimum of 16 semester hours of resident CCAF credit applied to his or her degree program to graduate. The 16

semester hours residency requirement is only satisfied by credit earned for coursework completed in a CCAF affiliated school or through CCAF Specialty Internship credit awarded for progression in an Air Force occupational specialty.

10.2. Professional Credentialing. Credentialing assists the professional development of our Airmen by broadening their knowledge and skills. Blending Air Force technical training and education with industry-based skill sets and professional credentialing processes benefits the Air Force by molding more diverse and qualified technicians to maintain critical and valuable national defense assets. Airmen benefit by being provided the education and credentials needed by highly technical Air Force career fields. Airmen will also possess highly valued skills needed by the industry when they transition from the Air Force. Certification is a credential normally issued by non-governmental agencies, associations, schools or industry-supported companies. A certification is issued to individuals who meet specific education, experience and qualification requirements. These requirements are generally established by professional associations, industry or product-related organizations. To learn more about professional credentialing programs offered by CCAF, visit <http://www.au.af.mil/au/barnes/ccaf/certifications.asp>. In addition to its associate degree program, CCAF offers the following certification programs and resources:

10.2.1. CCAF Instructor Certification (CIC) Program. CCAF offers the three-tiered CIC Program for qualified instructors teaching at CCAF-affiliated schools who have demonstrated a high level of professional accomplishment. The CIC is a professional credential that recognizes the instructor's extensive faculty development training, education and qualification required to teach a CCAF course, and formally acknowledges the instructor's practical teaching experience.

10.2.2. CCAF Instructional Systems Development (ISD) Certification Program. CCAF offers the ISD Certification Program for qualified curriculum developers and managers who are formally assigned at CCAF-affiliated schools to develop and manage CCAF collegiate courses. The ISD Certification is a professional credential that recognizes the curriculum developer's or manager's extensive training, education, qualifications and experience required to develop and manage CCAF courses. The certification also recognizes the individual's ISD qualifications and experience in planning, developing, implementing, and managing instructional systems.

10.2.3. CCAF Professional Manager Certification (PMC). CCAF offers the PMC Program to qualified SNCOs. The PMC is a professional credential awarded by CCAF to formally recognize a senior NCO's professional accomplishments and advanced level of education and experience in leadership and management. The program provides a structured professional development track that supplements EPME and the CFETP.

10.2.4. Air Force Credentialing Opportunities On-Line (AF COOL). AF COOL is a valuable resource for enlisted Airmen. The AF COOL Program is managed by CCAF and provides a research tool designed to increase an Airman's awareness of national professional credentialing and funding opportunities available for all Air Force enlisted occupational specialties. AF COOL also provides information on specific occupational specialties, civilian occupational equivalencies, specialty-related national professional credentials, credentialing agencies, and professional organizations. AF COOL includes information such as:

- Background information about civilian credentials, including eligibility requirements and resources to prepare for an exam.

- Identify credentials relevant to an AFSC, Special Duty Identifier (SDI), and Reporting Identifier (RI).
- Learn how to fill gaps between Air Force training, experience, and civilian credentialing requirements.
- Information on AF COOL funding opportunities to pay for credentialing coursework, textbooks, exams, associated fees, and recertification.
- Resources available to Airmen that can help them gain civilian job credentials.

10.3. Contact your local education office for a current list of examinations and AFIADL courses for CCAF degree requirements.

Figure 11. Career Field Path

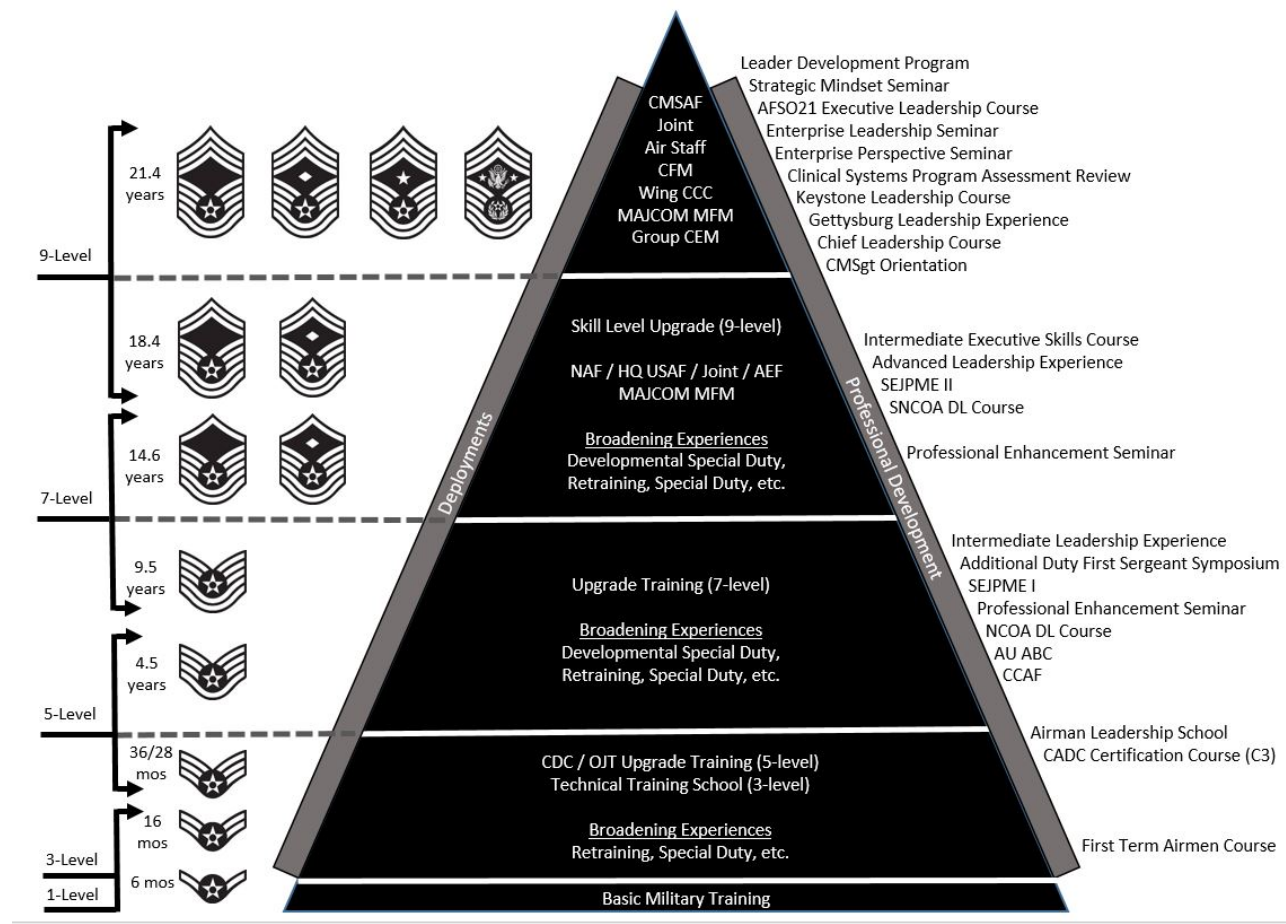


Figure 12. Enlisted Force Development

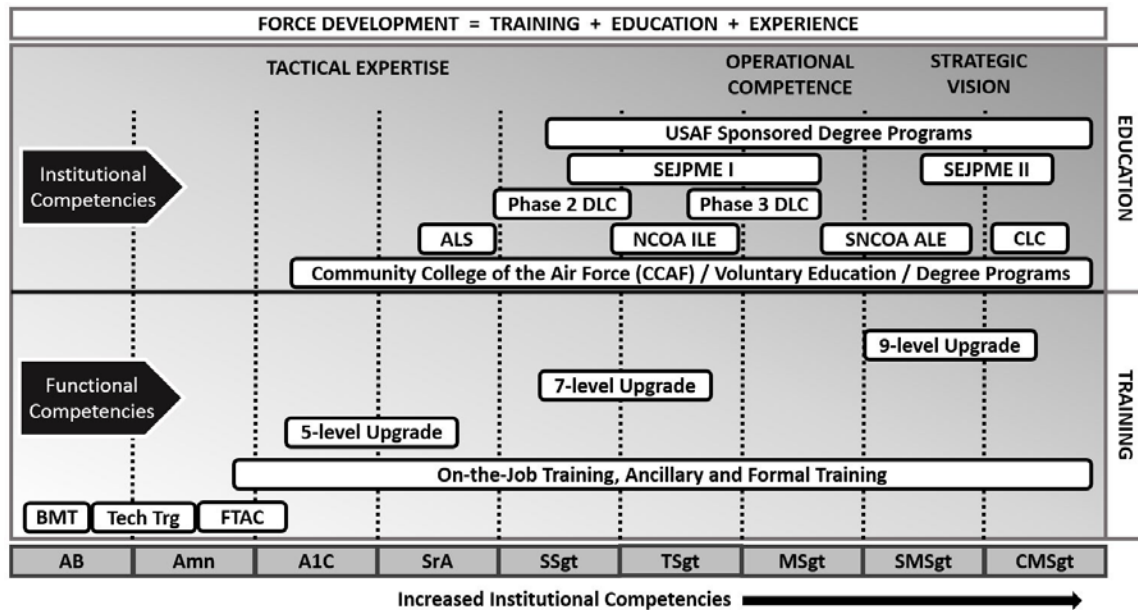


Table 13. Continuum of EPME

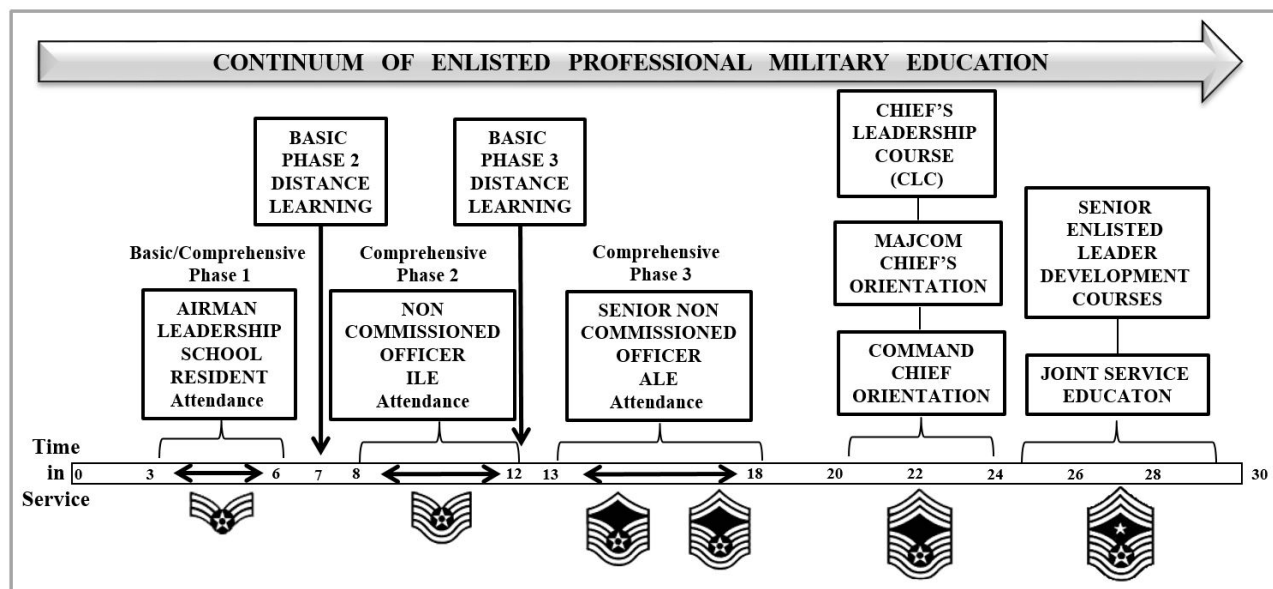
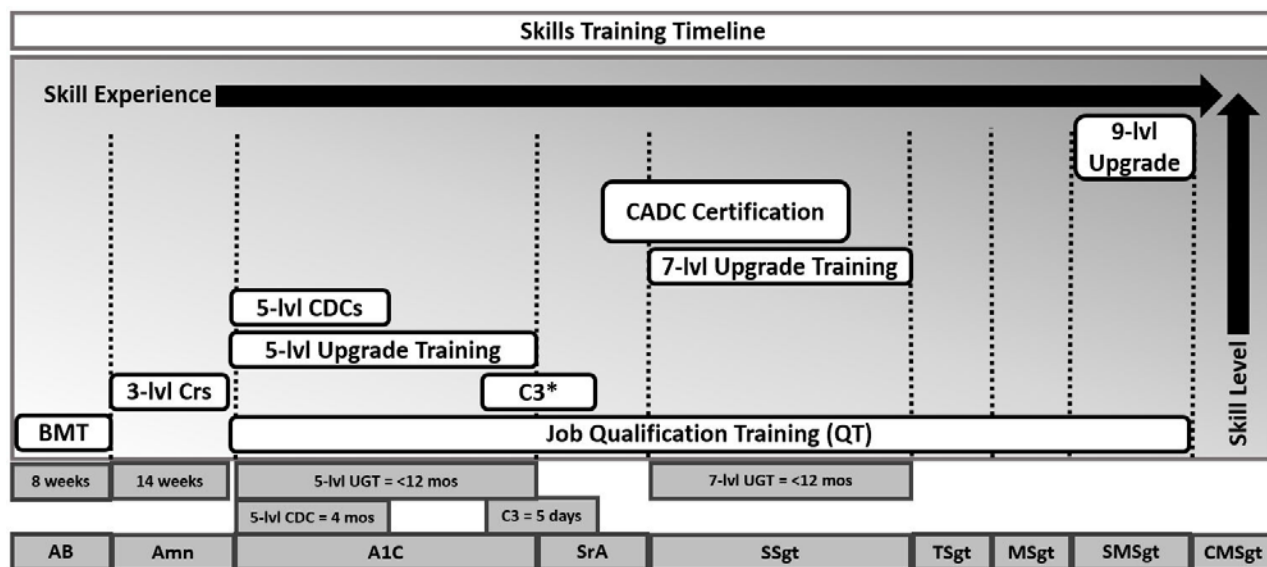


Figure 14. Skills Training Timeline



* CADC Candidate Course (C3) is optional, but highly encouraged.

| Table 15. Enlisted Career Path | | | | |
|---|---|----------------------|-----------------|---------------------|
| Education and Training Requirements: | Rank | Average Sew-On | Earliest Sew-On | High Year Of Tenure |
| Basic Military Training School | | | | |
| Apprentice Technical School (3-Skill Level) | Amn A1C | 6 mos 16 mos | | |
| Upgrade To Journeyman (5-Skill Level) - Minimum 12 months in upgrade training (9 mos for retrainees) - Complete appropriate CDC (4C051) and all duty position training requirements | SrA | 3 yrs | 28 mos | 8 yrs |
| Airman Leadership School (ALS) - Must be SrA with 3-6 years time in service or be SSgt select - Resident graduation is a prerequisite for SSgt sew-on (AD Only) | Trainer - Recommended by their supervisor - Qualified to perform the task being trained - Completed the Air Force Training Course | | | |
| Upgrade To Craftsman - (7-Skill Level) - Minimum rank of SSgt - 12 months OJT (6 months for retrainees) - Complete appropriate CDC (4C071) and all duty position training requirements | SSgt | 4.5 yrs | 3 yrs | 15yrs |
| | Certifier - Be a person other than the trainer - Must be at least a SSgt (E-5) with a 5-skill level or civilian equivalent - Capable of evaluating the task being certified - Completed the Air Force Training Course | | | |
| Senior Enlisted Joint Professional Military Education I (SEJPME-I) | SSgt - MSgt | | | |
| Phase 2 Distance Learning Course (DLC) - 7-12 years time in service | | | | |
| Phase 2 Noncommissioned Officer Academy (NCOA) ILE - 8-12 years time in service | TSgt | 9.5 yrs | 5 yrs | 20 yrs |
| Phase 3 Distance Learning Course (DLC) - 12-18 years time in service | | | | |
| Phase 3 Senior NCO Academy (SNCOA) ALE - 13-18 years time in service | MSgt SMSgt | 14.6 yrs 18.4 yrs | 8 yrs 11 yrs | 24 yrs 26 yrs |
| Upgrade To Superintendent (9-Skill Level) | SMSgt | 18.4 yrs | 11 yrs | 26 yrs |
| Senior Enlisted Joint Professional Military Education II (SEJPME-II) | SMSgt - CMSgt | | | |
| Chief Enlisted Manager (CEM) (4C000) – Selected for promotion to the rank of CMSgt | CMSgt | 21.4 yrs | 14 yrs | 30 yrs |

Section C - Skill Level Training Requirements

1. Purpose. Skill level training requirements in this career field are defined in terms of tasks and knowledge requirements. This section outlines the specialty qualification requirements for each skill level in broad, general terms, and establishes the mandatory requirements for entry, award and retention of each skill level. The specific task and knowledge training requirements are identified in Part II, STS, Sections A and B of this CFETP.

2. Specialty Qualifications

2.1. Apprentice Level Training

2.1.1. Knowledge. Knowledge is mandatory of: psychiatry, psychology, social work, family advocacy, and nursing principles, procedures and theories; confidentiality and legal aspects of patient care; understanding of medical, nursing, and mental health terminology; psychopathology; adjustment mechanisms; substance abuse pathology; Twelve Core Functions/Four Domains for substance abuse counselor certification; combat and disaster casualty care management; communication processes; Disaster Mental Health, specialized mental health and nursing treatment techniques; anatomy and physiology; deviant and unacceptable behavior; principles of interpersonal relationships; counseling and interviewing techniques; diagnostic nomenclature; psychopharmacology; administration and scoring of psychological tests; medical and mental health ethics; medical and clinical records administration; principles of milieu therapy; personnel, unit and clinic management; and budgeting and acquisition of supplies and equipment.

2.1.2. Education. For entry into this specialty, completion of high school is mandatory. Completion of college courses in psychology, social or behavioral sciences such as psychology, counseling, substance abuse treatment, sociology, and marriage and family is desirable.

2.1.3. Training. For award of AFSC 4C031, completion of the mental health service apprentice course is mandatory.

2.1.4. Experience. The following experience is mandatory for award of the AFSC indicated.

2.1.4.1. 4C051. Qualification in and possession of AFSC 4C031. Also, experience administering, scoring, and reporting psychological test results; interviewing patients to obtain biopsychosocial history, personal information; and assisting professional staff to carry out prescribed treatment plan. Completion of the USAF 4C0X1 Ethics training (located in SWANKHealth and documented in AFTR) and adherence to the 4C0X1 Code of Ethics.

2.1.4.2. 4C071. Qualification in and possession of AFSC 4C051. Also, experience conducting briefings, performing or supervising psychological test administration; interviewing; assisting in patient treatment, and substance abuse prevention and counseling. Certified Alcohol and Drug Counselor (CADC) certification (SEI 475) will be required by 01 January 2020 for upgrade to 7-level. **Note:** AFRC members are not required to obtain their CADC certification. Completion of the USAF 4C0X1 Ethics training (located in SWANKHealth and documented in AFTR) and adherence to the 4C0X1 Code of Ethics.

2.1.4.3. 4C091. Qualification in and possession of AFSC 4C071. Also, experience managing mental health service activities. Certified Alcohol and Drug Counselor (CADC) certification (SEI 475) will be required by 01 January 2020 for upgrade to 9-level. **Note:** AFRC members are not required to obtain their CADC certification.

2.1.4.4. Reference the Enlisted Classification Directory, located on myPers, for mandatory entry requirements into this specialty.

2.1.4.4.1. Must complete the Minnesota Multiphasic Personality Inventory (MMPI) assessment.

2.1.4.4.2. Must undergo a standardized entry interview with senior 4C0X1 (preferred) or any credentialed/privileged Mental Health provider at respective installation.

2.1.4.4.3. No history of psychiatric hospitalization.

2.1.4.4.4. No evidence of emotional instability, impulsive behaviors or misconduct that is contrary to the standards of the mental health and substance abuse counseling profession (e.g., alcohol/drug misuse, binge eating, intentional self-injury, antagonism, apathy, difficulty controlling/intense anger or sadness, etc.).

2.1.4.4.5. No history or evidence of personality disorder, substance use disorder, or other significant disorders incompatible with the mental health or substance abuse profession.

2.1.4.4.6. No evidence or history of civilian conviction, Letter of Reprimand, Article 15, or courts martial conviction as a result of illicit drug or alcohol use, driving under the influence/impaired, financial irresponsibility, promiscuity, physical or sexual assault or misconduct, or domestic violence.

2.1.4.4.7. No evidence or history of disruptive conduct, behavior, attitude, or communication resulting in civilian conviction, Letter of Reprimand, Article 15, or courts martial conviction as a result of prejudice, discrimination, harassment, threats, or reprisal.

2.1.4.4.8. No presence of speech impediment—must possess the ability to read aloud and speak distinctly.

2.1.4.4.9. No unresolved mental health problems (e.g., failure to engage in help-seeking behaviors, chronic mental health disorders, a pattern of relapse in symptoms/illness, unwillingness or inability to overcome mental health disorder).

2.1.5. Training Sources and Resources. Completion of the Mental Health Service Apprentice, (3-level) Course at JBSA-Fort Sam Houston, TX satisfies the knowledge and training requirements specified in the specialty qualification section (above) for award of the 3-skill level.

2.1.6. Implementation. Entry into upgrade training is initiated when an individual graduates from the 4C0X1 Apprentice Course at JBSA-Fort Sam Houston, TX. There will be no by-pass specialist or local OJT to the 3-skill level in this AFS. Individuals retraining into the 4C0X1 AFS will be screened in accordance with specialty qualifications standards in the AFECd. Resident

training is mandatory for 3-level upgrade. After graduation, job qualification training starts when an individual is assigned to his or her first duty station. Thereafter, it is initiated anytime an individual is assigned duties he or she is not qualified to perform.

2.2. Journeyman Level Training

2.2.1. For the award of the 4C051, must be capable of administering, scoring, and reporting psychological test results; interviewing patients to obtain biopsychosocial history, personal information; and assisting professional staff to carry out prescribed treatment plan.

2.2.2. Knowledge. In addition to the knowledge required for a 3-level, knowledge in the following subjects is mandatory: Integrated Operational Support, trusted care, mental health business practice guidelines, clinical supervision, diseased model of addiction, biopsychosocial model of addiction, pharmacology of abused drugs, pharmacology of alcohol use, family dynamics of addiction, dynamics of abuse and neglect, the nervous system, theories of personality development, life span development, counselor sustainment, psychopharmacology, commander directed mental health evaluations, military treatment facility accreditation, victim safety, American Society of Addiction Medicine Criteria, therapeutic approaches, group dynamics, case management, crisis intervention, medical terms, operational support concepts, and redeployment cycle.

2.2.3. Education. To assume the grade of SSgt, individuals must be graduates of ALS. Completion of advanced mental health courses or college courses in psychology, psychiatry, social work, substance abuse, social psychology, and organizational psychology is desirable. Obtaining a CCAF degree is highly encouraged. Individuals applying for resident course instructor duty must possess an associate degree or higher or be within 1 year of completion to be considered for this duty position. Certified Alcohol and Drug Counselor (CADC) certification (SEI 475) is required for application and selection for resident course instructor duty.

2.2.4. Training. Completion of the following requirements is mandatory for award of the 5-skill level AFSC, (a) CDC 4C051 and (b) be certified on all STS core tasks for the assigned duty position and on all core tasks specified by an asterisk (*) in column 2 of the STS.

2.2.5. Experience. Prior qualification as a Mental Health Services Apprentice is mandatory. Experience is also mandatory in patient interviewing, screening for signs and symptoms, screening for appropriateness for services, assessing biopsychosocial history, performing Clinical Institute Withdrawal Assessment for Alcohol (CIWA), treatment planning, conducting counseling, conducting therapeutic and psychoeducational groups, staffing cases with multi-disciplinary teams, conducting discharge planning, crisis intervention, referral, performing SOAP documentation, processing through the AF Substance Abuse Counselor Certification requirements, and transferring psych patients.

2.2.6. Skill-level Award and Retention Requirements. No presence of speech impediment—must possess the ability to read aloud and speak distinctly. No unresolved mental health problems (e.g., failure to engage in help-seeking behaviors, chronic mental health disorders, a pattern of relapse in symptoms/illness, unwillingness or inability to overcome mental health disorder). No record of psychiatric hospitalization as a result of serious attempts at self-harm, threats to self or others, or self-mutilating behaviors. No history or evidence of personality disorder or other significant

disorders incompatible with the mental health or substance abuse profession. No evidence of emotional instability, impulsive behaviors or misconduct that is contrary to the standards of the mental health and substance abuse counseling profession (e.g., a pattern of alcohol misuse, drug misuse, binge eating, intentional self-injury, antagonism, apathy, difficulty controlling/intense anger or sadness, etc.). No evidence or history of civilian conviction, Article 15, or courts martial conviction as a result of illicit drug use; physical or sexual assault or misconduct; driving under the influence/impaired; or a pattern of--alcohol misuse, financial irresponsibility, promiscuity, or domestic violence. No evidence or history of disruptive conduct, behavior, attitude or communication resulting in civilian, Article 15, or courts martial conviction as a result of a pattern of prejudice, discrimination, harassment, threats, or reprisal. No record of ethical misconduct or violations of AFI 44-119 resulting in revocation of CADC certification as determined by the Air Force Substance Abuse Counselor Certification Board. Must maintain local network access IAW AFMANs 33-152, *User Responsibilities and Guidance for Information Systems* and 33-282, *Computer Security*.

2.2.7. Training Sources and Resources. Completion of CDCs 4C051, satisfies the knowledge requirements specified in the specialty qualification section (above) for award of the 5-skill level. The STS identifies all the core tasks required for qualification. A list of training courses is in Part II Section C of this CFETP. A qualified trainer must provide upgrade and qualification training.

2.2.8. Implementation. The 5-skill level is awarded when an individual: (1) possesses the 3-skill level; (2) completes a minimum of 12 months in UGT (9 months for retrainees); (3) completes required 4C051 CDCs and all STS core tasks specified in column 2 of all STS attachments for the assigned duty position, (4) meets skill-level award and retention requirements found in the AFECd, and (5) recommended by their supervisor and approved by the commander in accordance with AFI 36-2201. Qualification training is initiated anytime an individual is assigned duties they are not qualified to perform.

2.3. Craftsman Level Training

2.3.1. Specialty Qualifications. All 4C051 qualifications apply to the 4C071 requirements. Must also be capable of conducting briefings, performing or supervising psychological test administration; interviewing; assisting in patient treatment, and substance abuse prevention and counseling. Certified Alcohol and Drug Counselor (CADC) certification (SEI 475) will be required by 01 January 2020 for upgrade to 7-level. **Note:** AFRC members are not required to obtain their CADC certification.

2.3.2. Knowledge. The 7-level craftsman should possess an increased knowledge of all areas identified for 3-level and 5-level upgrade.

2.3.3. Education. To assume the grade of MSgt, an individual must have completed the required EPME outlined in AFI 36-2502 *Airman Promotion/Demotion Programs*. Certified Alcohol and Drug Counselor (CADC) certification (SEI 475) is required for application and selection for resident course instructor duty.

2.3.4. Training. Completion of the following training requirements are mandatory for the award of the 7-skill level: 1) all core tasks specified by an asterisk (*) in Column 2 of the STS; and (2) a

minimum of 12 months of OJT, (6 months for retrainees), and (3) award of CADC certification (SEI 475). Retrainees are eligible for CADC consideration upon completion of the above mention requirements. An additional 22 month is provided for retrainees to successfully acquire patient contact hours and professional education centered in the Twelve Core Functions/Four Domains. The maintenance of a current CADC certification is required for retention within the AFSC, IAW Air Force Enlisted Classification Directory. **Note:** AFRC members are not required to obtain their CADC certification. Continuation training is available locally and should be used based on the individual's particular training needs. Attendance of the CADC Candidate Course (C3) is optional, but highly encouraged. C3 attendance should be no later than 9 months prior to applying for CADC certification. Contact AFMOA/ADAPT Branch for further information on C3.

2.3.5. Experience. Qualification in and possession of AFSC 4C051. Minimum of 12 months of OJT and assumption of the rank of SSgt or higher is required for awarding of the 7-skill level. Also, increased experience in counselor activities and substance abuse certification.

2.3.6. Skill-level Award and Retention Requirements. No presence of speech impediment—must possess the ability to read aloud and speak distinctly. No unresolved mental health problems (e.g., failure to engage in help-seeking behaviors, chronic mental health disorders, a pattern of relapse in symptoms/illness, unwillingness or inability to overcome mental health disorder). No record of psychiatric hospitalization as a result of serious attempts at self-harm, threats to self or others, or self-mutilating behaviors. No history or evidence of personality disorder or other significant disorders incompatible with the mental health or substance abuse profession. No evidence of emotional instability, impulsive behaviors or misconduct that is contrary to the standards of the mental health and substance abuse counseling profession (e.g., a pattern of alcohol misuse, drug misuse, binge eating, intentional self-injury, antagonism, apathy, difficulty controlling/intense anger or sadness, etc.). No evidence or history of civilian conviction, Article 15, or courts martial conviction as a result of illicit drug use; physical or sexual assault or misconduct; driving under the influence/impaired; or a pattern of--alcohol misuse, financial irresponsibility, promiscuity, or domestic violence. No evidence or history of disruptive conduct, behavior, attitude or communication resulting in civilian, Article 15, or courts martial conviction as a result of a pattern of prejudice, discrimination, harassment, threats, or reprisal. No record of ethical misconduct or violations of AFI 44-119 resulting in revocation of Certified Alcohol and Drug Abuse Counselor (CADC) certification as determined by the Air Force Substance Abuse Counselor Certification Board. Must maintain local network access IAW AFMANs 33-152, *User Responsibilities and Guidance for Information Systems* and 33-282, *Computer Security*.

2.3.7. Training Sources and Resources. The STS identifies all the core tasks required for qualification. Upgrade and qualification training is provided locally by a qualified trainer using the same criteria as indicated for the Mental Health Journeyman.

2.3.8. Implementation. Entry into upgrade training is initiated when an individual possesses the 5-skill level and has been selected for promotion to the grade of SSgt. Retrainees who satisfy this rank requirement may enter into upgrade training immediately upon obtaining the 5-skill level. All time requirements for retrainees may be waived by the 4C0X1 AFCFM up to their previously held AFSC's skill level. The 7-skill level is awarded when an individual: (1) possesses the 5-skill level; (2) completes a minimum of 12 months in UGT (6 months for retrainees); (3) all STS core tasks specified in column 2 of all STS attachments for the assigned duty position, (4) meets skill-

level award and retention requirements found in the AFECD, and (5) recommended by their supervisor and approved by the commander in accordance with AFI 36-2201. Qualification training is initiated anytime an individual is assigned duties they are not qualified to perform.

2.4. Superintendent Level Training

2.4.1. Specialty Qualifications. Must be at least a SMSgt and meet mandatory requirements listed in the AFECD, be recommended by their supervisor and approved by their commander for award of the 9-skill level, and possess AFSC 4C071. Also, experience managing mental health service activities. Certified Alcohol and Drug Counselor (CADC) certification (SEI 475) will be required by 01 January 2020 for upgrade to 9-level. **Note:** AFRC members are not required to obtain their CADC certification.

2.4.2. Knowledge. Medical service organization and function, overall administrative, logistical managerial and technical Mental Health Service activities. Knowledge is also mandatory of personnel management and utilization, human relations techniques, medical regulations and directives, medical ethics and process improvement principles.

2.4.3. Education. To assume the rank of SMSgt individuals must be a graduate of the SNCOA. Completion of CCAF and undergraduate school in a related field is highly encouraged.

2.4.4. Training. Completion of the duty position training requirements is encouraged for award of the 4C091 AFSC.

2.4.5. Experience. Experience in directing mental health service functions such as flight management and training programs is mandatory.

2.4.6. Skill-level Award and Retention Requirements. No presence of speech impediment—must possess the ability to read aloud and speak distinctly. No unresolved mental health problems (e.g., failure to engage in help-seeking behaviors, chronic mental health disorders, a pattern of relapse in symptoms/illness, unwillingness or inability to overcome mental health disorder). No record of psychiatric hospitalization as a result of serious attempts at self-harm, threats to self or others, or self-mutilating behaviors. No history or evidence of personality disorder or other significant disorders incompatible with the mental health or substance abuse profession. No evidence of emotional instability, impulsive behaviors or misconduct that is contrary to the standards of the mental health and substance abuse counseling profession (e.g., a pattern of alcohol misuse, drug misuse, binge eating, intentional self-injury, antagonism, apathy, difficulty controlling/intense anger or sadness, etc.). No evidence or history of civilian conviction, Article 15, or courts martial conviction as a result of illicit drug use; physical or sexual assault or misconduct; driving under the influence/impaired; or a pattern of--alcohol misuse, financial irresponsibility, promiscuity, or domestic violence. No evidence or history of disruptive conduct, behavior, attitude or communication resulting in civilian, Article 15, or courts martial conviction as a result of a pattern of prejudice, discrimination, harassment, threats, or reprisal. No record of ethical misconduct or violations of AFI 44-119 resulting in revocation of CADC certification as determined by the AFSACCB. Must maintain local network access IAW AFMANs 33-152, *User Responsibilities and Guidance for Information Systems* and 33-282, *Computer Security*.

2.4.7. Training Sources and Resources. None applicable.

2.4.8. Implementation. Upgrade is initiated when an individual possesses the 7-skill level and is promoted to SMSgt. Qualification training is initiated anytime an individual is assigned duties they are not qualified to perform.

Section D - Resource Constraints

1. Purpose. This section identifies known resource constraints that preclude optimal/desired training from being developed or conducted, including information such as cost and manpower. Narrative explanations of each resource constraint and an impact statement describing what effect each constraint has on training are included. Also included in this section are actions required, office of primary responsibility, and target completion dates. Resource constraints will be, as a minimum, reviewed and updated annually.

2. Three-Level (Apprentice) Training

2.1.1. Constraints. None.

3. Five-Level (Journeyman) Training

3.1.1. Constraints. None.

4. Seven-Level (Craftsman) Training

4.1.1. Constraints. None.

Section E- Transitional Training Guide

There are no transition training requirements. (This area is reserved)

Part II

Preface

This portion of the CFETP provides a comprehensive listing of training courses and standards available to support career field training requirements. There are five sections to Part II: STS, COL, OJT Support Material, Training Course Index, and MAJCOM-unique requirements.

Section A – Specialty Training Standard

1. Implementation. This STS will be used for technical training provided by AETC for classes beginning after formal approval of this CFETP.

2. Purpose. As prescribed in AFI 36-2201, this STS:

2.1. Lists in column 1 (Task, Knowledge, and Technical Reference) the most common tasks, knowledge and technical references necessary for Airman to perform duties in the 3-, 5-, and 7-skill level. Column 2 (Core Tasks) identifies, by “5” or “7” skill level, specialty-wide training requirements.

2.2. Provides certification for OJT. Column 3 is used to record completion of tasks and knowledge training requirements. Use automated training management systems to document technician qualifications, if available. Task certification must show a certification/completion date. (As a minimum, use the following column designators: Training Complete, Certifier Initials).

2.3. Shows formal training and correspondence course and QTP requirements. Column 4 shows the proficiency to be demonstrated on the job by the graduate as a result of training on the task/knowledge and career knowledge provided by the correspondence course. See CADRE/AFSC/CDC listing maintained by the UTM for current CDC listings. For a list of QTP volume numbers and titles, refer to Part II Section C.

2.4. Qualitative Requirements identified on page 33 contain the proficiency code key used to indicate the level of training and knowledge provided by resident training and career development courses.

2.5. The Part II STS listing is used to document task when placed in the ETR. Refer to AFI 36-2201 for further guidance on documentation, transcribing, decertification and recertification.

2.6. STS. Tasks (Part – 2) are trained and qualified to the go/no-go level. “Go” means the individual can perform the task without assistance and meets local demands for accuracy, timeliness, and correct use of procedures. “No-go” means the individual cannot perform the task without assistance and meets local demands for accuracy, timeliness, and correct use of procedures.

2.7. Enlisted Promotions References and Requirements Catalog (EPRRC). Specialty Knowledge Tests (SKT) is developed at the USAF Airman Advancement Division by Senior NCOs with extensive practical experience in their career fields. The tests sample knowledge of STS subject

matter areas judged by test development team members as most appropriate for promotion to higher grades. Questions are based upon study references listed in the EPRRC. WAPS is not applicable to the ARC or the ANG.

3. Recommendations

Comments and recommendations are invited concerning the quality of AETC training. Reference specific STS paragraphs and address correspondence regarding changes to 937 TRG/TGE, 2931 Harney, Fort Sam Houston, TX 78234. A Customer Service Information Line (CSIL) is available for the supervisor's convenience to identify graduates who may have received over or under training on task/knowledge items listed in this specialty training standard. For quick response contact the CSIL, DSN 420-1080 (commercial 210-808-1080) or email usaf.jbsa.937-trg.list.937-trg-tge@mail.mil.

BY ORDER OF THE SECRETARY OF THE AIR FORCE OFFICIAL

MARK A. EDIGER
Lieutenant General, USAF, MC, CFS
Surgeon General

| | | |
|--|---------------------------|----------------------|
| <i>This Block Is For Identification Purposes Only</i> | | |
| Name Of Trainee | | |
| Printed Name (Last, First, Middle Initial) | Initials (Written) | SSAN (last 4) |
| Printed Name Of Trainer, Certifying Official And Written Initials | | |
| N/I | N/I | |
| N/I | N/I | |
| N/I | N/I | |
| N/I | N/I | |
| N/I | N/I | |
| N/I | N/I | |
| N/I | N/I | |
| N/I | N/I | |

QUALITATIVE REQUIREMENTS

| Proficiency Code Key | | |
|---|-------------|--|
| | Scale Value | Definition: The individual |
| Task Performance Levels | 1 | Can do simple parts of the task. Needs to be told or shown how to do most of the task. (Extremely Limited) |
| | 2 | Can do most parts of the task. Needs only help on hardest parts. (Partially Proficient) |
| | 3 | Can do all parts of the task. Needs only a spot check of completed work. (Competent) |
| | 4 | Can do the complete task quickly and accurately. Can tell or show others how to do the task. (Highly Proficient) |
| *Task Knowledge Levels | a | Can name parts, tools, and simple facts about the task. (Nomenclature) |
| | b | Can determine step by step procedures for doing the task. (Procedures) |
| | c | Can identify why and when the task must be done and why each step is needed. (Operating Principles) |
| | d | Can predict, isolate, and resolve problems about the task. (Advanced Theory) |
| **Subject Knowledge Levels | A | Can identify basic facts and terms about the subject. (Facts) |
| | B | Can identify relationship of basic facts and state general principles about the subject. (Principles) |
| | C | Can analyze facts and principles and draw conclusions about the subject. (Analysis) |
| | D | Can evaluate conditions and make proper decisions about the subject. (Evaluation) |
| Explanations * A task knowledge scale value may be used alone or with a task performance scale value to define a level of knowledge for a specific task. (Example: b and 1b) ** A subject knowledge scale value is used alone to define a level of knowledge for a subject not directly related to any specific task, or for a subject common to several tasks. - This mark is used alone instead of a scale value to show that no proficiency training is provided in the course or CDC. X This mark is used alone in the course columns to show that training is required but not given due to limitations in resources. | | |

| 1. Tasks, Knowledge and Technical References | 2. Core Tasks | | 3. Certification For OJT | | | | | 4. Proficiency Codes Used To Indicate Training/Information Provided (See Notes) | | | |
|--|---------------|---------|--------------------------|----------------------|---------------------|---------------------|-----------------------|---|--------------|--------------|-----|
| | A | B | A | B | C | D | E | A 3-level | B 5-level | C 7-level | D |
| | 5 Level | 7 Level | Training Start | Training Complete | Trainee Initials | Trainer Initials | Certifier Initials | CRSE | CDC | CDC | QTP |
| 1. Mental Health Career Field Overview TR: DODI 6490.15; AFECDD; AFDD 4-02; AFI 40-301; AFI 41-210; AFI 44-121; AFI 44-172; AFI 48-149; AFI 90-501; CJCSM 3500.11; BHOP Manual; ACC Operational Element (OME) CONOPS; Operational Support Team (OST) CONOPS | | | | | | | | | | | |
| 1.1. Mental Health Clinic (MHC) | | | | | | | | B | - | - | |
| 1.2. Alcohol and Drug Abuse Prevention and Treatment (ADAPT) | | | | | | | | B | - | - | |
| 1.3. Family Advocacy Program (FAP) | | | | | | | | B | - | - | |
| 1.4. Integrated Operational Support (IOS) | | | | | | | | A | B | - | |
| 1.5. Behavioral Health Optimization Program (BHOP) | | | | | | | | B | - | - | |
| 1.6. Community Action Board (CAB) | | | | | | | | A | - | - | |
| 1.7. Community Action Team (CAT) | | | | | | | | A | - | - | |
| 1.8. USAF Medical Service | | | | | | | | B | - | - | |
| 1.9. Trusted Care https://kx2.afms.mil/kj/kx3/TC_Public/Pages/ home.aspx | | | | | | | | A | B | - | |
| 2. Mental Health Standards of Practice TR: DODI 6025.18; DODI 6490.08; AFI 40- 301; AFI 44-102; AFI 44-119; AFI 44-121; AFI 44-172; AFI 44-176; Clinical Supervision of the 4C0X1 Handbook; Mental Health Business Practice and Coding Guidelines Handbook | | | | | | | | | | | |
| 2.1. Standards of Ethics TR: AFI 36-2909; AFI 44-102; 4C0X1 Ethics Course in SWANKHealth; Advanced Ethics for Addiction Professionals; Air Force Alcohol and Drug Abuse Counselor Certification Handbook; Ethical Boundaries; The Book of Ethics | | | | | | | | | | | |
| 2.1.1. Professional Interactions with Staff | | | | | | | | B | - | - | |
| 2.1.2. Professional Interactions with Patients | | | | | | | | B | - | - | |
| 2.2. Legal Directives | | | | | | | | B | - | - | |
| 2.3. Mental Health Business Practice Guidelines | | | | | | | | - | A | - | |
| 2.4. Peer Review | | | | | | | | A | - | - | |
| 2.5. Clinical Supervision | | | | | | | | A | C | - | |

| 1. Tasks, Knowledge and Technical References | 2. Core Tasks | | 3. Certification For OJT | | | | | 4. Proficiency Codes Used To Indicate Training/Information Provided (See Notes) | | | |
|---|---------------|---------|--------------------------|----------------------|---------------------|---------------------|-----------------------|---|--------------|--------------|-----|
| | A | B | A | B | C | D | E | A 3-level | B 5-level | C 7-level | D |
| | 5-Level | 7-level | Training Start | Training Complete | Trainee Initials | Trainer Initials | Certifier Initials | CRSE | CDC | CDC | QTP |
| 3. Air Force Safety and Health Programs TR: AFI 44-172; AFI 91-203; VHA Handbook 1160.06; VHA Central Office Workplace Violence Prevention Program-Prevention and Management of Disruptive Behavior; Mosby's Textbook for Nursing Assistants | | | | | | | | | | | |
| 3.1. Infection Control | | | | | | | | B | - | - | |
| 3.2. Duress Response | | | | | | | | B | - | - | |
| 3.3. Mental Health Safety Measures | | | | | | | | B | - | - | |
| 4. Mental Health Fundamentals | | | | | | | | | | | |
| 4.1. Human Anatomy TR: Clinical Nursing Skills; Fundamentals of Nursing; Mosby's Textbook for Nursing Assistants; Straight A's in Anatomy and Physiology | | | | | | | | | | | |
| 4.1.1. Respiratory | | | | | | | | B | - | - | |
| 4.1.2. Cardiovascular | | | | | | | | B | - | - | |
| 4.1.3. Lymphatic | | | | | | | | B | - | - | |
| 4.1.4. Immune | | | | | | | | B | - | - | |
| 4.1.5. Nervous | | | | | | | | B | - | - | |
| 4.1.6. Digestive | | | | | | | | B | - | - | |
| 4.1.7. Sexual Reproductive | | | | | | | | B | - | - | |
| 4.1.8. Musculoskeletal | | | | | | | | B | - | - | |
| 4.2. Theories of Personality Development TR: Personality Theories: Development, Growth and Diversity; Theories of Personality | | | | | | | | | | | |
| 4.2.1. Psychoanalytic | | | | | | | | A | B | - | |
| 4.2.2. Humanistic | | | | | | | | A | B | - | |
| 4.2.3. Behavioristic | | | | | | | | A | B | - | |
| 4.2.4. Existential | | | | | | | | A | B | - | |
| 4.3. Life Span Development TR: Developing Person Through the Life Span; Fundamental Concepts and Skills for Nurses; Journey Across the Life Spans; Mosby's Textbook for Nursing Assistants, current edition; Psychiatric Mental Health Nursing, Concepts of Evidence Based Care; Personality Theories: Development, Growth, and Diversity; Principles and Practices of Psychiatric Nursing; Psychology: From Science to Practice; Theories of Personality | | | | | | | | | | | |
| 4.3.1. Biophysical Development | | | | | | | | A | B | - | |
| 4.3.2. Cognitive Development | | | | | | | | A | B | - | |
| 4.3.3. Psychosocial Development | | | | | | | | A | B | - | |
| 4.3.4. Psychobiology of Emotions | | | | | | | | A | B | - | |
| 4.3.5. Neurological Development | | | | | | | | A | B | - | |

| 1. Tasks, Knowledge and Technical References | 2. Core Tasks | | 3. Certification For OJT | | | | | 4. Proficiency Codes Used To Indicate Training/Information Provided (See Notes) | | | |
|--|---------------|---------|--------------------------|----------------------|---------------------|---------------------|-----------------------|---|--------------|--------------|-----|
| | A | B | A | B | C | D | E | A 3-level | B 5-level | C 7-level | D |
| | 5 Level | 7 Level | Training Start | Training Complete | Trainee Initials | Trainer Initials | Certifier Initials | CRSE | CDC | CDC | QTP |
| 4.4. Diagnostic and Statistical Manual of Mental Disorders (DSM) TR: Current DSM | | | | | | | | | | | |
| 4.4.1. Overview | | | | | | | | A | - | - | |
| 4.4.2. Approach to Clinical Case Formulation | | | | | | | | B | - | - | |
| 4.4.3. Mental Disorders | | | | | | | | A | - | - | |
| 4.4.4. Clinical Significance | | | | | | | | A | - | - | |
| 4.4.5. Elements of a Diagnosis | | | | | | | | A | - | - | |
| 4.4.6. Coding and Reporting Procedures | | | | | | | | A | - | - | |
| 4.5. Mental Disorders TR: Current DSM; DSM Case Book; DSM- Study Guide | | | | | | | | | | | |
| 4.5.1. Neurodevelopmental Disorders | | | | | | | | A | - | - | |
| 4.5.2. Schizophrenia Spectrum and Other Psychotic Disorders | | | | | | | | A | - | - | |
| 4.5.3. Bipolar and Related Disorders | | | | | | | | A | - | - | |
| 4.5.4. Depressive Disorders | | | | | | | | A | - | - | |
| 4.5.5. Anxiety Disorders | | | | | | | | A | - | - | |
| 4.5.6. Obsessive-Compulsive and Related Disorders | | | | | | | | A | - | - | |
| 4.5.7. Trauma and Stressor-Related Disorders | | | | | | | | A | - | - | |
| 4.5.8. Dissociative Disorders | | | | | | | | A | - | - | |
| 4.5.9. Somatic Symptom and Related Disorders | | | | | | | | A | - | - | |
| 4.5.10. Feeding and Eating Disorders | | | | | | | | A | - | - | |
| 4.5.11. Elimination Disorders | | | | | | | | A | - | - | |
| 4.5.12. Sleep-Wake Disorders | | | | | | | | A | - | - | |
| 4.5.13. Sexual Dysfunctions | | | | | | | | A | - | - | |
| 4.5.14. Gender Dysphoria | | | | | | | | A | - | - | |
| 4.5.15. Disruptive, Impulse-Control, and Conduct Disorders | | | | | | | | A | - | - | |
| 4.5.16. Substance-Related and Addictive Disorders | | | | | | | | A | - | - | |
| 4.5.17. Neurocognitive Disorders | | | | | | | | A | - | - | |
| 4.5.18. Personality Disorders | | | | | | | | A | - | - | |
| 4.5.19. Paraphilic Disorders | | | | | | | | A | - | - | |
| 4.5.20. Other Mental Disorders | | | | | | | | A | - | - | |
| 4.5.21. Medication-Induced Movement Disorders and Other Adverse Effects of Medication | | | | | | | | A | - | - | |
| 4.5.22. Other Conditions That May Be Focus of Clinical Attention | | | | | | | | A | - | - | |

| 1. Tasks, Knowledge and Technical References | 2. Core Tasks | | 3. Certification For OJT | | | | | 4. Proficiency Codes Used To Indicate Training/Information Provided (See Notes) | | | |
|---|---------------|---------|--------------------------|----------------------|---------------------|---------------------|-----------------------|---|--------------|--------------|-----|
| | A | B | A | B | C | D | E | A 3-level | B 5-level | C 7-level | D |
| | 5 Level | 7 Level | Training Start | Training Complete | Trainee Initials | Trainer Initials | Certifier Initials | CRSE | CDC | CDC | QTP |
| 4.6. Counselor Sustainment TR: Addiction Counseling Competencies-TAP 21; Mosby's Textbook for Nursing Assistants; The Book of Ethics; The Resilient Practitioner: Burnout and Compassion Fatigue Prevention and Self-Care Strategies for the Helping Professions | | | | | | | | | | | |
| 4.6.1. Burnout | | | | | | | | A | B | - | |
| 4.6.2. Self-Care | | | | | | | | A | B | - | |
| 4.6.3. Vicarious Trauma | | | | | | | | A | B | - | |
| 4.7. Cultural Competency Standards TR: Addiction Counseling Competencies-TAP 21; Cultural Diversity: A Primer for Human Services; Counseling Multicultural and Diverse Populations: Strategies for Practitioners; Transcultural Nursing: Assessment and Intervention | | | | | | | | B | B | - | |
| 4.8. Psychopharmacology TR: Drug Use and Abuse; Drugs, Society, and Human Behavior; Loosening the Grip: A Handbook of Alcohol Information; PDR; Principles and Practice of Psychiatric Nursing; Uppers, Downers, and All Arounders | | | | | | | | | | | |
| 4.8.1. Major Classes of Drugs | | | | | | | | A | B | - | |
| 4.8.2. Indications | | | | | | | | A | B | - | |
| 4.8.3. Desired Effects | | | | | | | | A | B | - | |
| 4.8.4. Side Effects | | | | | | | | A | B | - | |
| 4.8.5. Adverse Effects | | | | | | | | A | B | - | |
| 4.8.6. Drug Interaction | | | | | | | | A | B | - | |
| 4.9. Addiction TR: Chemical Dependency: A Family Affair; Concepts of Chemical Dependency; Drug Use and Abuse; Drugs, Society, and Human Behavior; Loosening the Grip: A Handbook of Alcohol Information; Substance Abuse Treatment and Family Therapy-TIP 39; Theory of Addiction; Uppers, Downers, and All Arounders | | | | | | | | | | | |
| 4.9.1. Disease Model of Addiction | | | | | | | | A | B | - | |
| 4.9.2. Biopsychosocial Model of Addiction | | | | | | | | A | B | - | |
| 4.9.3. Pharmacology of Abused Drugs | | | | | | | | A | B | - | |
| 4.9.4. Pharmacology of Alcohol Use | | | | | | | | A | B | - | |
| 4.9.5. Family Dynamics of Addiction | | | | | | | | A | B | - | |
| 4.10. Dynamics of Abuse and Neglect | | | | | | | | A | B | - | |

| 1. Tasks, Knowledge and Technical References | 2. Core Tasks | | 3. Certification For OJT | | | | | 4. Proficiency Codes Used To Indicate Training/Information Provided (See Notes) | | | |
|---|---------------|---------|--------------------------|----------------------|---------------------|---------------------|-----------------------|---|--------------|--------------|-----|
| | A | B | A | B | C | D | E | A 3-level | B 5-level | C 7-level | D |
| | 5 Level | 7 Level | Training Start | Training Complete | Trainee Initials | Trainer Initials | Certifier Initials | CRSE | CDC | CDC | QTP |
| 4.11. Support Activities TR: DODI 1402.05; DODI 6025.13; DODI 6025.18-R; DODI 6490.04; DODI 6490.07; DODI 6490.14; AFMAN 13-501; AFD 44-1; AFI 10-203; AFI 41-210; AFI 44-119; AFI 44-121; AFI 44-172; AFI 48-123; AFI 90-505; AFEC; BHPD User Guides; DoDSER Website; MHS Genesis User Guides; SPECAT Guide; USAF Medical Standards Directory; USCENTCOM Mod Twelve; Comprehensive Accreditation Manual: Behavioral Health Care (CAMBHC) | | | | | | | | | | | |
| 4.11.1. Screen Records for Suitability Factors | * | | | | | | | 2b | - | - | |
| 4.11.2. DoD Suicide Event Report (DoDSER) TR: DoDSER Website | | | | | | | | A | - | - | |
| 4.11.3. Commander Directed Mental Health Evaluations | | | | | | | | A | B | - | |
| 4.11.4. Electronic Health Records (EHRs) | | | | | | | | A | - | - | |
| 4.11.5. Behavioral Health Data Portal (BHPD) | | | | | | | | a | - | - | |
| 4.11.6. Military Treatment Facility Accreditation | | | | | | | | A | - | - | |
| 4.11.7. Limited Privilege Suicide Prevention (LPSP) Program | | | | | | | | A | - | - | |
| 4.11.8. Personnel Reliability Assurance Program (PRAP) Program | | | | | | | | A | - | - | |
| 4.11.9. Special Populations | | | | | | | | A | - | - | |
| 5. Counselor Activities | | | | | | | | | | | |
| 5.1. Perform Basic Cardiac Life Support TR: AFI 44-102; Basic Life Support (BLS) Provider Manual | | | | | | | | 3c | - | - | |
| 5.2. Obtain Vital Signs TR: Clinical Nursing Skills; Fundamental Concepts and Skills for Nursing; Fundamentals of Nursing, Mosby's Nursing Skills | * | | | | | | | 2b | - | - | |
| 5.3. Admissions Forms TR: AFI 41-210; AFI 44-102; AFI 44-121; AFI 44-172 | | | | | | | | A | - | - | |
| 5.4. Consent for Treatment TR: DODI 6490.08; AFI 44-102 | | | | | | | | B | - | - | |
| 5.5. Release of Information TR: Public Law 5 U.S.C. § 552a; DODI 6025.18-R; DODI 6490.08; AFI 33-332 | | | | | | | | B | - | - | |
| 5.6. Privacy Act of 1974 TR: Public Law 5 U.S.C. § 552a | | | | | | | | A | - | - | |
| 5.7. Explain Rights and Obligations to Patient TR: DODI 6000.14; AFI 44-102 | * | | | | | | | 2b | - | - | |

| 1. Tasks, Knowledge and Technical References | 2. Core Tasks | | 3. Certification For OJT | | | | | 4. Proficiency Codes Used To Indicate Training/Information Provided (See Notes) | | | |
|--|---------------|---------|--------------------------|----------------------|---------------------|---------------------|-----------------------|---|--------------|--------------|-----|
| | A | B | A | B | C | D | E | A 3-level | B 5-level | C 7-level | D |
| | 5 Level | 7 Level | Training Start | Training Complete | Trainee Initials | Trainer Initials | Certifier Initials | CRSE | CDC | CDC | QTP |
| 5.8. Patient Interview TR: AFI 40-301; AFI 41-210; AFI 44-121; AFI 44-172; AFI 44-176; AFI 48-123; BHOP Manual; VA/DOD Clinical Practice Guidelines; Addiction Counseling Competencies; Clinical Interviewing; Communication Mosaics; DSM; Dual Disorders; Global Criteria; IC&RC 4 Domains; Kaplan and Sadock's Synopsis of Psychiatry; Psychiatric Interviewing; Motivational Interviewing; Psychology: From Science to Practice; Screening, Assessment, and Treatment Planning for Persons with Co-Occurring Disorders; Synopsis of Psychiatry; The ASAM Criteria | | | | | | | | | | | |
| 5.8.1. Conduct Triage | * | | | | | | | 2b | c | - | |
| 5.8.2. Interview Patient | * | | | | | | | 2b | c | - | |
| 5.8.3. Establish Rapport | * | | | | | | | 2b | c | - | |
| 5.8.4. Create a Therapeutic Alliance | * | | | | | | | 2b | c | - | |
| 5.8.5. Orient to Services | | | | | | | | | | | |
| 5.8.5.1. Program Goals | * | | | | | | | 2b | - | - | |
| 5.8.5.2. Program Objectives | * | | | | | | | 2b | - | - | |
| 5.8.5.3. Program Operations | * | | | | | | | 2b | - | - | |
| 5.8.5.4. Program Rules | * | | | | | | | 2b | - | - | |
| 5.8.6. Screen for: | | | | | | | | | | | |
| 5.8.6.1. Signs and Symptoms | | | | | | | | | | | |
| 5.8.6.1.1. Psychological | * | | | | | | | 2b | c | - | |
| 5.8.6.1.2. Social | * | | | | | | | 2b | c | - | |
| 5.8.6.1.3. Physiological | * | | | | | | | 2b | c | - | |
| 5.8.6.1.4. Coexisting Conditions | * | | | | | | | 2b | c | - | |
| 5.8.6.1.5. Co-occurring Disorders | * | | | | | | | 2b | c | - | |
| 5.8.6.2. Services | | | | | | | | | | | |
| 5.8.6.2.1. Eligibility | * | | | | | | | 2b | - | - | |
| 5.8.6.2.2. Appropriateness | * | | | | | | | 2b | c | - | |
| 5.8.6.2.3. Available for Eligible Civilian Employees | | | | | | | | A | - | - | |
| 5.9. Assessment TR: AFI 44-121; AFI 44-172; AFI 48-123; BHOP Manual; VA/DOD Clinical Practice Guidelines; Addiction Counseling Competencies; Clinical Interviewing; Global Criteria; IC&RC 4 Domains; Interview Guide for Evaluating DSM-5; Interviewing and Change Strategies for Helpers; Psychiatric Interviewing; Motivational Interviewing; Psychology: From Science to Practice; Screening, Assessment, and Treatment Planning for Persons with Co-Occurring Disorders; Synopsis of Psychiatry; The ASAM Criteria; The Psychiatric Interview | | | | | | | | | | | |

| 1. Tasks, Knowledge and Technical References | 2. Core Tasks | | 3. Certification For OJT | | | | | 4. Proficiency Codes Used To Indicate Training/Information Provided (See Notes) | | | |
|---|---------------|---------|--------------------------|----------------------|---------------------|---------------------|-----------------------|---|--------------|--------------|-----|
| | A | B | A | B | C | D | E | A 3-level | B 5-level | C 7-level | D |
| | 5 Level | 7 Level | Training Start | Training Complete | Trainee Initials | Trainer Initials | Certifier Initials | CRSE | CDC | CDC | QTP |
| 5.9.1. Biopsychosocial History | | | | | | | | | | | |
| 5.9.1.1. Gather From Patient and Collateral Sources | * | | | | | | | 2b | c | - | |
| 5.9.1.2. Explore | * | | | | | | | 2b | c | - | |
| 5.9.1.3. Interpret | * | | | | | | | 2b | c | - | |
| 5.9.2. Conduct a Mental Status Examination | * | | | | | | | 2b | c | - | |
| 5.9.3. Conduct a Risk Assessment | * | | | | | | | 2b | c | - | |
| 5.9.4. Victim Safety | | | | | | | | A | B | - | |
| 5.9.5. Identify Patient Strengths and Weaknesses | * | | | | | | | 2b | c | - | |
| 5.9.6. Identify and Prioritize Patient Problems and Needs | * | | | | | | | 2b | c | - | |
| 5.10. Administer, Record and Score Psychological Tests | | | | | | | | | | | |
| 5.10.1. Beck Anxiety Inventory (BAI) TR: Manual | | | | | | | | a | - | - | |
| 5.10.2. Beck Depression Inventory (BDI) TR: Manual | | | | | | | | a | - | - | |
| 5.10.3. Use Patient Health Questionnaire (PHQ-9) TR: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1495268/#app1 | | | | | | | | a | - | - | |
| 5.10.4. Million Clinical Multiaxial Inventory (MCMI) TR: MCMI Manual, Pearson Interpretive Scoring Systems | | | | | | | | a | - | - | |
| 5.10.5. Minnesota Multiphasic Personality Inventory (MMPI) TR: Manual | | | | | | | | a | - | - | |
| 5.10.6. Shipley Institute of Living Scale (SILS) TR: Manual | | | | | | | | a | - | - | |
| 5.10.7. Wechsler Adult Intelligence Scale (WAIS) TR: Manual | | | | | | | | b | - | - | |
| 5.10.8. Alcohol Use Disorders Identification Test (AUDIT) TR: The AUDIT: Guidelines for Use in Primary Care | | | | | | | | a | - | - | |
| 5.10.9. Automated Neuro-Psychological Assessment Metrics (ANAM) TR: DODI 6490.13; AF ANAM Guide | | | | | | | | a | - | - | |
| 5.10.10. Columbia Suicide Severity Rating Scale (C-SSRS) TR: http://cssrs.columbia.edu/ | | | | | | | | a | - | - | |

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| | A | B | A | B | C | D | E | A 3-level | B 5-level | C 7-level | D |
| | 5 Level | 7 Level | Training Start | Training Complete | Trainee Initials | Trainer Initials | Certifier Initials | CRSE | CDC | CDC | QTP |
| 5.10.11. PTSD Checklist (PCL) TR: https://www.ptsd.va.gov/professional/assessment/adult-sr/ptsd-checklist.asp | | | | | | | | a | - | - | |
| 5.10.12. Generalized Anxiety Disorder Assessment (GAD) TR: http://www.phqscreeners.com/select-screener/41 | | | | | | | | a | - | - | |
| 5.10.13. University of Rhode Island Change Assessment Scale (URICA) TR: http://www.umbc.edu/psyc/habits/content/ttm_measures/urica/readiness.html | | | | | | | | a | - | - | |
| 5.10.14. Brief Addiction Monitor (BAM) TR: https://kx2.afms.mil/kj/kx7/ADAPTDemandReduction/Documents/BAM.pptx | | | | | | | | a | - | - | |
| 5.10.15. Clinical Institute Withdrawal Assessment for Alcohol (CIWA) TR: Assessment of Alcohol Withdrawal: The Revised CIWA-AS | * | | | | | | | 2b | c | - | |
| 5.11. Treatment Planning TR: The ASAM Criteria: Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions; The Complete Adult Psychotherapy Treatment Planner, current edition; Chemical Dependency Counseling: A Practical Guide | | | | | | | | | | | |
| 5.11.1. Explain Assessment Results to Patient | * | | | | | | | 2b | c | - | |
| 5.11.2. Determine Treatment Methods | * | | | | | | | 2b | c | - | |
| 5.11.3. Determine Treatment Resources | * | | | | | | | 2b | c | - | |
| 5.11.4. Develop a Written Treatment Plan | * | | | | | | | b | c | - | |
| 5.11.5. Implement the Treatment Plan | * | | | | | | | b | c | - | |
| 5.11.6. Develop a Relapse Prevention Plan | * | | | | | | | 2b | c | - | |
| 5.12. American Society of Addiction Medicine (ASAM) Criteria TR: The ASAM Criteria: Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions | | | | | | | | | | | |
| 5.12.1. Dimensions | | | | | | | | B | C | - | |
| 5.12.2. Levels of Care | | | | | | | | B | C | - | |
| 5.13. Therapeutic Approaches | | | | | | | | | | | |
| 5.13.1. Motivational Interviewing TR: Motivational Interviewing, Helping People Change | | | | | | | | B | C | - | |
| 5.13.2. Cognitive Behavioral Therapy TR: Cognitive Behavior Therapy: Basic and Beyond | | | | | | | | B | C | - | |

| 1. Tasks, Knowledge and Technical References | 2. Core Tasks | | 3. Certification For OJT | | | | | 4. Proficiency Codes Used To Indicate Training/Information Provided (See Notes) | | | |
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| | A | B | A | B | C | D | E | A 3-level | B 5-level | C 7-level | D |
| | 5 Level | 7 Level | Training Start | Training Complete | Trainee Initials | Trainer Initials | Certifier Initials | CRSE | CDC | CDC | QTP |
| 5.13.3. Cognitive Processing Therapy TR: Cognitive Processing Therapy for PTSD: A Comprehensive Manual | | | | | | | | A | B | - | |
| 5.13.4. Rational Emotive Behavior Therapy TR: Rational Emotive Behavior Therapy | | | | | | | | A | B | - | |
| 5.13.5. Reality Therapy TR: Reality Therapy For the 21st Century | | | | | | | | A | B | - | |
| 5.13.6. Family Therapy TR: Family Therapy: Concepts and Methods | | | | | | | | A | B | - | |
| 5.13.7. Behavior Therapy TR: Behavior Therapy: Techniques and Empirical Findings | | | | | | | | B | C | - | |
| 5.13.8. Client-Centered Therapy TR: Significant Aspects of Client-Centered Therapy | | | | | | | | B | C | - | |
| 5.13.9. Solution Focused Brief Therapy TR: Solution Focused Brief Therapy: 100 Key Point and Techniques | | | | | | | | B | C | - | |
| 5.13.10. Prolonged Exposure TR: Prolonged Exposure Therapy for PTSD | | | | | | | | A | B | - | |
| 5.14. Counseling TR: ABC Manual; Addiction Treatment; Chemical Dependency Counseling; Elements of Counseling; Family Therapy; Fundamental Concepts and Skills for Nursing; Global Criteria; Group Techniques; Groups: Process and Practice; Helping Patients Who Drink Too Much; IC&RC 4 Domains; Introduction to Addictive Behaviors; Motivational Interviewing; NIAAA Guides; Principles and Practice of Psychiatric Nursing; Psychiatric Mental Health Nursing; Substance Abuse Counseling: Theory and Practice; Substance Abuse Treatment and Family Therapy-TIP 39; Theory and Practice of Counseling and Psychotherapy | | | | | | | | | | | |
| 5.14.1. Conduct Counseling | * | | | | | | | 2b | c | - | |
| 5.14.2. Alcohol Brief Counseling | | | | | | | | A | - | - | |
| 5.15. Group Therapy TR: Theory and Practice of Group Psychotherapy; Groups: Process and Practices; The Big Book; Twelve Steps and Twelve Traditions; Substance Abuse Prevention | | | | | | | | | | | |
| 5.15.1. Group Dynamics | | | | | | | | A | B | - | |
| 5.15.2. Conduct Therapeutic Groups | * | | | | | | | 2b | c | - | |
| 5.15.3. Conduct Psychoeducational Groups | * | | | | | | | 2b | c | - | |

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| | A | B | A | B | C | D | E | A 3-level | B 5-level | C 7-level | D |
| | 5 Level | 7 Level | Training Start | Training Complete | Trainee Initials | Trainer Initials | Certifier Initials | CRSE | CDC | CDC | QTP |
| 5.16. Case Management TR: DODI 6490.08; AFD 41-1; AFD 41-2; AFI 10-203; AFI 40-301; AFI 44-102; AFI 44-119; AFI 44-121; AFI 44-172; AFI 44-176; VA Handbook 1160.06; The ASAM Criteria | | | | | | | | | | - | |
| 5.16.1. Collaborate with Agencies | | | | | | | | 2b | - | - | |
| 5.16.2. Staff Cases with Multi-disciplinary Teams | * | | | | | | | 2b | c | - | |
| 5.16.3. Treatment Team Meetings (TTMs) | | | | | | | | A | B | - | |
| 5.16.4. High Interest Team Meeting | | | | | | | | A | B | - | |
| 5.16.5. Conduct Discharge Planning | * | | | | | | | b | c | - | |
| 5.16.6. Child Sexual Maltreatment Response Team (CSMRT) | | | | | | | | A | B | - | |
| 5.16.7. High Risk for Violence Response Team (HRVRT) | | | | | | | | A | B | - | |
| 5.17. Crisis Intervention TR: Principles and Practice of Psychiatric Nursing; VA/DoD Clinical Guidelines for Assessment and Management of Patients at Risk for Suicide; VHA Handbook 1160.06; VHA Central Office Workplace Violence Prevention Program-Prevention and Management of Disruptive Behavior | | | | | | | | | | | |
| 5.17.1. Elements of a Crisis | | | | | | | | B | C | - | |
| 5.17.2. Respond to a Crisis | * | | | | | | | 2b | c | - | |
| 5.17.3. Prevention and Management of Disruptive Behavior-Military (PMD-B) | * | | | | | | | 3c | - | - | |
| 5.17.4. Apply Mechanical Restraints | | | | | | | | 2b | - | - | |
| 5.17.5. Apply Manual Restraints | | | | | | | | 2b | - | - | |
| 5.17.6. Psychopharmacological Restraints | | | | | | | | A | B | - | |
| 5.18. Prevention and Education TR: AFI 44-121; AFI 90-505; Communication Mosaics; Introduction to Addictive Behaviors; Loosening the Grip: A Handbook of Alcohol Information; ABC Manual; Substance Abuse Prevention: The Intersection of Science and Practice | | | | | | | | | | | |
| 5.18.1. Types of Briefings | | | | | | | | | | | |
| 5.18.1.1. Informal Briefing | | | | | | | | B | - | - | |
| 5.18.1.2. Formal Briefing | | | | | | | | B | - | - | |
| 5.18.1.3. Guided Discussion | | | | | | | | B | - | - | |
| 5.18.2. Research Topic | | | | | | | | 2b | - | - | |
| 5.18.3. Develop Outline | | | | | | | | 2b | - | - | |
| 5.18.4. Create Presentation | | | | | | | | 2b | - | - | |
| 5.18.5. Deliver Presentation | * | | | | | | | 2b | - | - | |

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| | A | B | A | B | C | D | E | A 3-level | B 5-level | C 7-level | D |
| | 5 Level | 7 Level | Training Start | Training Complete | Trainee Initials | Trainer Initials | Certifier Initials | CRSE | CDC | CDC | QTP |
| 5.19. Referral TR: AAFP 41-1; AAFP 41-2; AAFP 44-1; AFI 41-210; AFI 44-102; AFI 44-176; VA/DOD Clinical Practice Guidelines; The ASAM Criteria: Treatment Criteria for Addictive, Substance-Related, and Co- Occurring Conditions | | | | | | | | | | | |
| 5.19.1. Identify Referral Needs | * | | | | | | | 2b | c | - | |
| 5.19.2. Match Referral Needs | * | | | | | | | 2b | c | - | |
| 5.19.3. Explain Rationale for Referral | * | | | | | | | 2b | c | - | |
| 5.20. Documentation TR: AFI 41-210; AFI 44-121; AFI 44-172; AFRIMS; Mosby's Textbook for Nursing Assistants; Chemical Dependency Counseling: A Practical Guide to Clinical Interviewing; Taber's Cyclopedic Medical Dictionary | | | | | | | | | | | |
| 5.20.1. Perform Narrative Method | | | | | | | | 2b | - | - | |
| 5.20.2. Perform SOAP Method | * | | | | | | | 2b | c | - | |
| 5.20.3. Medical Abbreviations | | | | | | | | A | - | - | |
| 5.20.4. Medical Terms | | | | | | | | A | B | - | |
| 5.21. Consultation TR: AFECDC; AFI 44-119; AFI 44-121; The ASAM Criteria | | | | | | | | | | | |
| 5.21.1. Identify the Need for Consultation | * | | | | | | | 2b | - | - | |
| 5.21.2. Match Consultation Resources | * | | | | | | | 2b | - | - | |
| 5.21.3. Explain Rationale for Consultation | * | | | | | | | 2b | - | - | |
| 5.22. Operational Support TR: DODI 6490.05; DODI 6490.08; DODI 6490.15; CJCSM 3500.11; AFI 48-149; AFI 90-506; Psychometric Evaluation of the Moral Injury Events Scale; Military Medicine, Vol 178; ACC Operational Element (OME) CONOPS; Operational Support Team (OST) CONOPS | | | | | | | | | | | |
| 5.22.1. Performance Enhancement | | | | | | | | A | B | - | |
| 5.22.2. Performance Degradation | | | | | | | | A | B | - | |
| 5.22.3. Behavioral Drift | | | | | | | | A | B | - | |
| 5.22.4. Moral Injury | | | | | | | | A | B | - | |
| 5.22.5. Abstinence Violation Effect | | | | | | | | A | B | - | |
| 5.22.6. Moral Disengagement | | | | | | | | A | B | - | |
| 5.22.7. Fundamental Attribution Error | | | | | | | | A | B | - | |
| 5.22.8. Survey Development | | | | | | | | A | B | - | |
| 5.22.9. Command Consultation | | | | | | | | A | B | - | |
| 5.22.10. Violent Offender Services | | | | | | | | A | B | - | |
| 5.22.11. Social Engagement | | | | | | | | A | B | - | |

| 1. Tasks, Knowledge and Technical References | 2. Core Tasks | | 3. Certification For OJT | | | | | 4. Proficiency Codes Used To Indicate Training/Information Provided (See Notes) | | | |
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| | A | B | A | B | C | D | E | A 3-level | B 5-level | C 7-level | D |
| | 5 Level | 7 Level | Training Start | Training Complete | Trainee Initials | Trainer Initials | Certifier Initials | CRSE | CDC | CDC | QTP |
| 6. AF Substance Abuse Counselor Certification TR: AF Substance Abuse Counselor Certification Handbook; CADC Candidate Course; AA: The Big Book; AA: Twelve Steps and Twelve Traditions; Drug Use and Abuse; DSM; DSM Case Book; DSM-Study Guide; Substance Abuse Treatment and Family Therapy-TIP 39; Theory and Practice of Counseling and Psychotherapy; Groups: Process and Practice; Patient Records and Addiction Treatment; Elements of Counseling; Concepts of Chemical Dependency; The Book of Ethics: Expert Guidance for Professionals Who Treat Addiction; Drugs, Society and Human Behavior; Uppers, Downers, All Arounders; Loosening the Grip; The ASAM Criteria: Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions; Advanced Ethics for Addiction Professionals; Addiction Treatment: A Strengths Perspective | | | | | | | | | | | |
| 6.1. Process | | | | | | | | B | - | - | |
| 6.2. Requirements | | | | | | | | A | a | - | |
| 7. Mental Health Readiness Mission TR: DODI 6490.05; AFI 44-153; AFTTP 3-42.78 | | | | | | | | | | | |
| 7.1. Disaster Mental Health | | | | | | | | A | - | - | |
| 7.2. Conduct Combat Operational Stress Control | | | | | | | | 2b | - | - | |
| 7.3. Mental Health Mobility Teams | | | | | | | | A | - | - | |
| 7.4. Combat Stress Interventions | | | | | | | | A | - | - | |
| 7.5. Redeployment Cycle | | | | | | | | A | B | - | |
| 8. Aeromedical Evacuation TR: DODI 6000.11; AAFP 10-29; AFI 48-307, Volume 1; AFTTP 3-42.5 | | | | | | | | | | | |
| 8.1. Transfer Psych Patient | | | | | | | | 2b | - | - | |

TRAINING REFERENCES (TR) SOURCE SUMMARY STS 4C0X1

COMMERCIAL PUBLICATIONS

- Abadinsky, H. *Drug Use and Abuse*. Current edition. Wadsworth Cengage Learning. 2014.
- Anonymous. *Alcoholics Anonymous: The Big Book*, Current edition. Alcoholics World Services Inc. 2002
- Anonymous. *Twelve Steps and Twelve Traditions*, Current edition. Alcoholics World Services Inc. 2002
- Allen, Bem P. *Personality Theories: Development, Growth and Diversity*, Current edition, Pearson Education/ Allyn & Bacon.
- American Heart Association. *Basic Life Support Provider Manual*. Current edition. National Center, 7272 Greenville Ave., Dallas TX.
- American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*. Current edition. Washington D.C.
- American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders: Case Book*. Current edition. Washington D.C.
- American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders - Study Guide*. Current edition. Washington D.C.
- Babor, Thomas F., et al. *The Alcohol Use Disorders Identification Test: Guidelines for Use in Primary Care*. Current edition. World Health Organization, Department of Mental Health and Substance Dependence.
- Baron, Robert A., Kalsher, Michael J. *Psychology: From Science to Practice*, Current edition. Pearson. 2007.
- Beck, Aaron T. *BAI, Beck Anxiety Inventory: Manual*. Current edition. Harcourt Brace Jovanovich.
- Beck, Aaron T. *BDI-II, Beck Depression Inventory: Manual*. Current edition. Harcourt Brace Jovanovich.
- Beck, Judith S. *Cognitive Behavior Therapy: Basic and Beyond*. Current edition. The Guilford Press.
- Brief Addiction Monitor (BAM)*. <https://kx2.afms.mil/kj/kx7/ADAPTDemandReduction/Documents/BAM.pptx>
- Carlat, Daniel J. *The Psychiatric Interview: A Practical Guide*. Current edition. Lippincott, Williams & Wilkins.
- Center for Substance Abuse Treatment. *Addiction Counseling Competencies: The Knowledge Skills and Attitudes of Professional Practice-TAP 21*. U.S. Department of Health and Human Services. ISBN-10: 1304146189
- Center for Substance Abuse Treatment. *Substance Abuse Treatment and Family Therapy. Treatment Improvement Protocol (TIP) 39*. 2004. DHHS Publication No. (SMA) 05-4006. Rockville: Substance Abuse and Mental Health Services Administration.
- Choca, James P. *Interpretive Guide to Millon Clinical Multiaxial Inventory*. Current edition. American Psychological Association.

Columbia Suicide Severity Rating Scale (C-SSRS). <http://cssrs.columbia.edu/>

Corey, Gerald E. *Groups: Process and Practices*. Current edition. Brooks/Cole Pubs Co.

Corey, Gerald. *Theory and Practice of Counseling and Psychotherapy*. Current edition. Brooks/Cole Pubs Co.

Cormier, Sherry, et al. *Interviewing and Change Strategies for Helpers*. Current edition. Brooks/Cole Pubs Co. 2016.

Coughlin, G., Kimbrough, S. S., & Kimbrough, L. L. *Patient Records and Addiction Treatment*. Current edition. Lanstat Inc. 2008.

Curtis, Olivia. *Chemical Dependency: A Family Affair*. Current edition. Wadsworth Pubs.

Daley, Dennis C. et al. *Dual Disorders: Counseling Clients with Chemical Dependency and Mental Illness*. Current edition. Hazelden.

Davis, S., Meier, S. *Elements of Counseling*. Current edition. Brooks/Cole Pubs Co. 2011.

DeWit, Susan, O'Neill, Patricia. *Fundamental Concepts and Skills for Nursing*. Current edition. Saunders. 2013.

Diller, Jerry. *Cultural Diversity: A Primer for the Human Services*. Current edition. Wadsworth Pubs Co.

Doweiko, H. *Concepts of Chemical Dependency*. Current edition. Brooks/Cole Pubs Co. 2015.

Ellis, Albert & Debbie Joffe. *Rational Emotive Behavior Therapy*. Current edition. American Psychological Association. 2011.

Feist, Jess & Gregory. *Theories of Personality*. Current edition. McGraw-Hill. 2017.

Foa, Edna, et al., *Prolonged Exposure Therapy for PTSD: Emotional Processing of Traumatic Experiences (Treatments That Work)*. Current edition. Oxford University Press. 2007.

Generalized Anxiety Disorder (GAD-7). Source: Spitzer RL, Kroenke K, et al. GAD-7: A brief measure for assessing generalized anxiety disorder. Pfizer. No permission required to reproduce, translate, display or distribute. <http://www.phqscreeners.com/select-screener/41>

Geppert, S., Weiss Roberts, L. *The Book of Ethics: Expert Guidance for Professionals Who Treat Addiction*. Current edition. Hazelden. 2008.

Giger, Joyce. *Transcultural Nursing: Assessment and Intervention*. Current edition. Mosby.

Greene, Roger, L. *The MMPI-2/MMPI-2-RF: An Interpretive Manual*. Current edition. Pearson.

Hart, C., Ksir, C. *Drugs, Society and Human Behavior*. Current edition. McGraw-Hill. 2013.

Herdman, John. *Global Criteria: The 12 Core Functions of the Substance Abuse Counselor*. Current edition. Learning Pubs Inc.

Hogan, Julie, et al. *Substance Abuse Counseling: Theory and Practice*. Current edition. Pearson. 2002.

- Hogan, Julie, et al. *Substance Abuse Prevention: The Intersection of Science and Practice*. Current edition. Pearson. 2002.
- International Certification & Reciprocity Consortium (IC&RC) 4 Domains.
<http://www.internationalcredentialing.org/>
- Inaba, D., Cohen, W. *Uppers, Downers, All Arounders*. Current edition. CNS Productions, Inc. 2011.
- Jongsma Jr., Arthur, et al. *The Complete Adult Psychotherapy Treatment Planner*, Current edition. Wiley. 2014.
- Kaplan, Harold J., Sadlock, Benjamin J. *Synopsis of Psychiatry: Behavioral Sciences/Clinical Psychiatry*. Current edition. Lippincott, Williams and Wilkins Co. 2014.
- Kinney, Jean. *Loosening the Grip: A Handbook of Alcohol Information*. Current edition. McGraw-Hill. 2014.
- Masters, John C., et al., *Behavior Therapy: Techniques and Empirical Findings*, Current edition. Harcourt College Pubs.
- Mee-Lee, David E., *The ASAM Criteria: Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions*, Current edition, American Society of Addiction Medicine, Chevy Chase, MD.
- Miller, William R., Rollnick, Stephen, *Motivational Interviewing: Helping People Change*. Current edition. The Guilford Press. 2013.
- Millon, Theodore. *Manual for the MCMI-III, NCS Interpretive Scoring Systems*. Current edition. Professional Assessment Service. <http://www.pearsonclinical.com/psychology/products/100000662/millon-clinical-multiaxial-inventory-iii-mcmi-iii.html>.
- NCS Interpretive Scoring Systems. *Manual for Administering and Scoring the Minnesota Multiphasic Personality Inventory-2*. Current edition. Professional Assessment Service, P.O. Box 1416, Minneapolis MN.
- Nichols, Michael P. *Family Therapy: Concepts and Methods*. Current edition. Pearson. 2009.
- PDR Staff. *Physician's Desk Reference (PDR)*. Current edition. PDR Network. 2016.
- Perkinson, Robert R. *Chemical Dependency Counseling: A Practical Guide*. Current edition. Sage Pubs, Inc.
- Polan, Elaine, Taylor, Daphne. *Journey Across the Life Span: Human Development and Health Promotion*. Current edition. F.A. Davis Co. 2015.
- Potter, Patricia, et al. *Fundamentals of Nursing*. Current edition. Mosby. 2016.
- Ratner, Harvey, George, Evan. *Solution Focused Brief Therapy: 100 Key Point and Techniques*. Current edition. Routledge. 2012.
- Resick, Patricia A., et al., *Cognitive Processing Therapy for PTSD: A Comprehensive Manual*. Current edition. The Guilford Press.
- Rogers, Carl, Webb, David. *Significant Aspects of Client-Centered Therapy*. Current edition. CreateSpace Independent Pub Platform. 2013.

- Shea, Shawn C. *Psychiatric Interviewing: The Art of Understanding: A Practical Guide for Psychiatrists, Psychologists, Counselors, Social Workers, Nurses, and Other Mental Health Professionals*. Current edition. Elsevier. 2016.
- Skovholt, Thomas M., Trotter-Mathison, Michelle. *The Resilient Practitioner: Burnout and Compassion Fatigue Prevention and Self-Care Strategies for the Helping Professions*. Current edition. Routledge. 2016.
- Smith, Sandra, et al. *Clinical Nursing Skills: Basic to Advanced Skills*. Current edition. Pearson. 2016.
- Sommers-Flanagan, John and Sommers-Flanagan, Rita. *Clinical Interviewing*. Current edition. John Wiley & Sons, Inc.
- Sorrentino, Sheila A., Remmert, Leighann. *Mosby's Textbook for Nursing Assistants*. Current edition. Mosby. 2016
- Springhouse, *Straight A's in Anatomy and Physiology*. Current edition. Lippincot, Williams and Wilkins Co. 2006.
- Stassen Berger, Kathleen. *The Developing Person Through the Life Span*, Current edition. Worth Pubs. 2014.
- Taleff, M. *Advanced Ethics for Addiction Professionals*. Current edition. Springer Publishing Company. 2010.
- The Joint Commission. *Comprehensive Accreditation Manual: Behavioral Health Care (CAMBHC)*. Current edition. IL: Joint Commission Resources, One Renaissance Blvd., Oakbrook Terrace. 2017. <http://www.jcrinc.com/2017-cambhc-behavioral-health-care-update-service/>
- Thombs, Dennis, Osborn, Cynthia. *Introduction to Addictive Behaviors*. Current edition. The Guilford Press. 2013.
- Townsend, Mary C. *Psychiatric Mental Health Nursing: Concepts of Care in Evidence-Based Practice*. Current edition. F.A. Davis Co. 2014.
- University of Rhode Island Change Assessment Scale (URICA). http://www.umbc.edu/psyc/habits/content/ttm_measures/urica/readiness.html
- Vaac, Nicholas A., DeVaney, Susan B. *Counseling Multicultural and Diverse Populations: Strategies for Practitioners*. Current edition. Routledge.
- Van Wormer, K., Davis, D. *Addiction Treatment: A Strengths Perspective*. Current edition. Brooks/Cole Pubs Co. 2012.
- Venes, Donald. *Taber's Cyclopedic Medical Dictionary*. Current edition. F.A. Davis Co. 2009.
- Wechsler, David. *Manual for the Wechsler Adult Intelligence Scale-II*. Current edition. The Psychological Corporation, 1981.
- West, Robert, Brown, Jamie. *Theory of Addiction*. Current edition. Wiley-Blackwell.
- Wiscarz Stuart, Gail. *Principles and Practices of Psychiatric Nursing*. Current edition. Mosby. 2012.

Wood, Julia T., *Communication Mosaics: An Introduction to the Field of Communication*. Current edition. Wadsworth Pubs. 2016.

Wubbolding, Robert E. *Reality Therapy For the 21st Century*, Current edition. Routledge. 2000.

Yalom, Irwin D. and Leszez, Molyn. *The Theory and Practice of Group Psychotherapy*. Current edition. Basic Books. 2005.

Zachary, Robert A. *Shipley Institute of Living Scale Revised Manual*. Current edition. Western Psychological Inc. 2009. <http://www.wpspublish.com/store/p/2967/shipley-2>

Zimmerman, Mark. *Interview Guide for Evaluating DSM-5 Psychiatric Disorders and the Mental Status Examination*, Current edition. Psych Products Press. 2013.

GOVERNMENT PUBLICATIONS

Public Law

National Defense Authorization Act for Fiscal Year 2017. Dec 2016. US Senate Armed Services Committee.

Public Law 5 U.S.C. § 552a, *Privacy Act of 1974*. Current law. 2015. US Department of Justice.

Department of Defense

DODI 1402.05, *Background Checks on Individuals in DoD Child Care Services Programs*, 11 Sep 2015.

DODI 6000.11, *Patient Movement*, 4 May 2012.

DODI 6000.14, *DoD Patient Bill of Rights and Responsibilities in the Military Health System (MHS)*, 26 Sep 2011.

DODI 6025.13, *Medical Quality Assurance (MQA) and Clinical Quality Management in the Military Health System (MHS)*, 29 Oct 2013.

DOD 6025.18-R, *DoD Health Information Privacy Regulation*, 24 Jan 2003.

DODI 6490.04, *Mental Health Evaluations of Members of the Military Services*, 4 Mar 2013.

DODI 6490.05, *Maintenance of Psychological Health in Military Operations*, 22 Nov 2011.

DODI 6490.07, *Deployment-Limiting Medical Conditions for Service Members and DoD Civilian Employees*, 5 Feb 2010.

DODI 6490.08, *Command Notification Requirements to Dispel Stigma in Providing Mental Health Care to Service Members*, 17 Aug 2011.

DODI 6490.13, *Comprehensive Policy on Traumatic Brain Injury-Related Neurocognitive Assessments by the Military Services*, 11 Sep 2015.

DODI 6490.14, *Defense Suicide Prevention Program*, 1 Apr 2016.

DODI 6490.15, *Integration of Behavioral Health Personnel Services Into Patient-Centered Medical Home Primary Care and Other Primary Care Service Settings*, 8 Aug 2013.

VA/DoD Clinical Practice Guideline: *Assessment and Management of Patients At Risk For Suicide*, U.S. Department of Veterans Affairs. 2013. <https://www.healthquality.va.gov/guidelines/MH/srb/>

VA/DoD Clinical Practice Guideline: *Management of Substance Use Disorders*. U.S. Department of Veterans Affairs. 2015. <https://www.healthquality.va.gov/guidelines/MH/sud/>

CJCSM 3500.11, *The Department of Defense Survival, Evasion, Resistance, and Escape Psychology Program*, 29 Nov 2013.

Nash, William P. CAPT, et al. *Military Medicine - Volume 178, 6:646. Psychometric Evaluation of the Moral Injury Events Scale*. AMSUS: The Society of Federal Health Professionals. 2013.

Behavioral Health Data Portal (BHDP) User Guides:

<https://kx.afms.mil/kj/kx8/MentalHealth/Documents/Behavioral%20Health%20Data%20Portal/BHDP%20User%20Guide.pdf#search=BHDP>

DoDSER Website: <https://dodserauth.t2.health.mil/support/training>

Department of the Air Force

Air Force Enlisted Classification Directory (AFECD) – 4C0X1 Mental Health Services, 1 May 2017. Current edition.

AFDD 4-02, *Medical Operations*, 29 Sep 2015. Curtis E. Lemay Center. <https://doctrine.af.mil/dnv1updates.htm>

AFI 10-203, *Duty Limiting Conditions*, 20 Nov 2014.

AFI 31-101, *Integrated Defense (FOUO)*, 8 Oct 2009.

AFI 33-332, *Air Force Privacy and Civil Liberties Program*, 12 Jan 2015.

AFI 36-2201, *Air Force Training Program*, 15 Sep 2010.

AFI 36-2909, *Professional and Unprofessional Relationships*, 13 Mar 2017.

AFI 40-301, *Family Advocacy Program*, 16 Nov 2015.

AFI 41-106, *Medical Readiness Program Management*, 22 Apr 2014.

AFI 41-209, *Medical Logistics Support*, 6 Oct 2014.

AFI 41-210, *Tricare Operations and Patient Administration Functions*, 15 Jun 2016.

AFI 44-102, *Medical Care Management*, 6 Jan 2017.

AFI 44-119, *Medical Quality Operations*, 16 Aug 2011.

AFI 44-121, *Alcohol and Drug Abuse Prevention and Treatment (ADAPT) Program*, 8 Jul 2014.

AFI 44-153, *Disaster Mental Health Response & Combat and Operational Stress Control*, 29 May 2014.

AFI 44-172, *Mental Health*, 13 Nov 2015.

AFI 44-176, *Access to the Care Continuum*, 30 Oct 2014.

AFI 48-123, *Medical Examination and Standards*, 5 Nov 2013.

AFI 48-149, *Flight and Operational Medicine Program (FOMP)*, 12 Nov 2014.

AFI 48-307, Volume 1, *En Route Care and Aeromedical Evacuation Medical Operations*, 9 Jan 2017.

AFI 90-501, *Community Action Information Board and Integrated Delivery System*, 15 Oct 2013.

AFI 90-505, *Suicide Prevention Program*, 6 Oct 2014.

AFI 90-506, *Comprehensive Airman Fitness (CAF)*, 2 Apr 2014.

AFI 91-203, *Air Force Consolidated Occupational Safety Instruction*, 15 Jun 2012.

AFMAN 13-501, *Nuclear Weapon Personnel Reliability Program (PRP)*, 9 Mar 2017.

AFOSHSTD 91-8, *Medical Facilities*, 1 Oct 1998.

AFPD 10-29, *Worldwide Aeromedical Evacuation Operations*, 6 Nov 2012.

AFPD 41-1, *Health Care Programs and Resources*, 15 Apr 1994.

AFPD 41-2, *Medical Support*, 28 Jun 2013.

AFPD 44-1, *Medical Operations*, 9 Jun 2016.

AFTTP 3-42.5, *Aeromedical Evacuation*, 1 Nov 2003.

AFTTP 3-42.78, *Medical Behavioral Health Teams*, 27 Sep 2007.

4C0X1 Ethics Course for Non-CADC Mental Health. <https://airforce.swankhealth.com/>

ABC Manual. <https://kx2.afms.mil/kj/kx7/ADAPTDemandReduction/Pages/education-and-treatment.aspx>

AF ANAM Guide. <https://kx2.afms.mil/kj/kx9/ANAM/>

AFMS Trusted Care. AFMS Knowledge Exchange. https://kx2.afms.mil/kj/kx3/TC_Public/Pages/home.aspx

Air Force Records Information Management System (AFRIMS). <https://www.my.af.mil/afrims/afrims/afrims>

Behavioral Health Optimization Program (BHOP) Manual. <https://kx2.afms.mil/kj/kx1/BHOP/>

Clinical Supervision of the 4C0X1 Handbook.
<https://kx2.afms.mil/kj/kx7/ADAPTDemandReduction/Pages/education-and-treatment.aspx>

Mental Health Business Practice and Coding Guidelines Handbook.
<https://kx2.afms.mil/kj/kx7/AFMOAMentalHealth/Pages/MH-Business-Practice-Standards.aspx>

MHS Genesis User Guides. https://jkodirect.jten.mil/prod_communities/902/0/mhsGenesisTraining.html

SPECAT Guide. HQ AFPC/DP3AM, afpc.dpapp@randolph.af.mil, DSN: 665-3815/comm 210-565-3815

USAF Medical Standards Directory.

<https://kx2.afms.mil/kj/kx4/FlightMedicine/Pages/AFMSA%20Flight%20Medicine%20Branch%20Directory.aspx>

United States Air Force Family Advocacy Program Standards. <https://kx2.afms.mil/kj/kx10/FAPBRANCH/>

United States Air Force Alcohol and Drug Abuse Counselor Certification Handbook.

<https://kx2.afms.mil/kj/kx7/ADAPTDemandReduction/Pages/CADC%20CERTIFICATION%20INFO.aspx>

United States Central Command (USCENTCOM) Personnel Policy Guidance Modification (Mod Twelve)

Air Combat Command (ACC) Operational Element (OME) Concept of Operations (CONOPS)

Operational Support Team (OST) Concept of Operations (CONOPS)

Other Government Organizations

American Heart Association. *Basic Life Support for Healthcare Providers* (AHA)

NIAAA Publication. *Clinical Institute Withdrawal Assessment for Alcohol (CIWA) TR: Assessment of Alcohol Withdrawal: The Revised Clinical Institute Withdrawal Assessment for Alcohol scale (CIWA-AR)*. National Institute of Health. https://pubs.niaaa.nih.gov/publications/AssessingAlcohol/InstrumentPDFs/17_CIWA-AD.pdf

NIAAA Publication. *Helping Patients Who Drink Too Much: A Clinician's Guide*. Current edition. National Institute of Health. 2007.

https://pubs.niaaa.nih.gov/publications/practitioner/cliniciansguide2005/clinicians_guide.htm

NIAAA Publication. *PHQ-9*. National Institute of Health.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1495268/#app1>

NIAAA Publication. *The Alcohol Use Disorders Identification Test: Guidelines for Use in Primary Care*. National Institute of Health. <https://pubs.niaaa.nih.gov/publications/audit.htm>

SAMHSA Publication. *Screening, Assessment, and Treatment Planning for Persons with Co-Occurring Disorders: Overview Paper 2*. Current edition. U.S. Department of Health and Human Services. 2012. <http://store.samhsa.gov/product/Screening-Assessment-and-Treatment-Planning-for-Persons-With-Co-Occurring-Disorders/PHD1131>

Veterans Administration Publication. *PTSD Checklist (PCL)*. Veterans Administration.

<https://www.ptsd.va.gov/professional/assessment/adult-sr/ptsd-checklist.asp>

Veterans Health Administration Publication. *VHA Central Office Workplace Violence Prevention Program - Prevention and Management of Disruptive Behavior*. Veterans Health Administration.

Veterans Health Administration Publication. VHA Handbook 1160.06, *Inpatient Mental Health Services*, September 16, 2013. Veterans Health Administration.

Section B - Course Objective List

“This area is reserved.”

Section C - Support Materials

“This area is reserved.”

Section D - Training Course Index

1. Purpose. This section of the CFETP identifies training courses available for the specialty and shows how the courses are used by each MAJCOM in their career field training programs.

2. Air Force and other DOD In-Residence Courses

| COURSE NUMBER | COURSE TITLE | DEVELOPER |
|----------------------|---|--------------------|
| L5ABJ4C031 01AA | Mental Health Service Apprentice Course | Ft Sam Houston, TX |
| ** | Expeditionary Medical Readiness Course (EMRC) | Camp Bullis, TX |
| *5H-F4/302-F4 | USA Drug and Alcohol Rehab Training – Individual | Ft Sam Houston, TX |
| *5H-F5/302-F5 | USA Drug and Alcohol Rehab Training – Group | Ft Sam Houston, TX |
| *5H-F6 | Army Substance Abuse Program Management | Ft Sam Houston, TX |
| *5H-F7/302-F7 | Army Substance Abuse Program Family Counseling | Ft Sam Houston, TX |
| *5H-F9 | ASAP Clinical Consultant/Med Review Officer | Ft Sam Houston, TX |
| *5H-F10/302-F10 | Army Substance Abuse Program Advanced Counseling | Ft Sam Houston, TX |
| 6A-F16/302-F28 | Behavioral Science Consultation Team Training – Phase 1 | Distance Learning |
| 6A-F16/302-F28 | Behavioral Science Consultation Team Training – Phase 2 | Ft Sam Houston, TX |

*Mandatory training for Resident Instructor positions **IAW AFI 41-106, Medical Readiness Program Management, Enlisted personnel receive initial medical readiness training through Expeditionary Medical Readiness Course (EMRC) or basic expeditionary medical readiness training (BEMRT) in conjunction with their AFSC-awarding courses. At METC, JBSA-Fort Sam Houston,

TX, (EMRC) is considered as readiness training and is optimally accomplished prior to the student entering day one of their initial skills training. Further details on the Army courses can be found at <http://www.cs.amedd.army.mil/>.

3. Other MAJCOM and FOA Courses

| COURSE NUMBER | COURSE TITLE | DEVELOPER |
|-------------------|---------------------------|------------------------------------|
| L3AIRTXXX 0B2B * | Basic Instructor Course | JB San Antonio-Lackland, TX |
| L3AIRTXXXX 0W1A** | Technical Writer | JB San Antonio-Lackland, TX |
| E6AILTXXXX 0C1B** | CDC Writers Course | Keesler AFB, TX |
| MECI 100** | AFIADL Course for Authors | Maxwell AFB, Gunter Annex, AL |
| N/A | CADC Candidate Course | AFMOA, JB San Antonio-Lackland, TX |

*Mandatory training for Resident Instructor positions **Mandatory training for CDC Technical Writers. Further course details can be found at <https://etca.randolph.af.mil/>.

4. AFIADL Courses

| COURSE NUMBER | COURSE TITLE | DEVELOPER |
|---------------|----------------------------------|------------------|
| CDC 4C051 | Mental Health Service Journeyman | 4C0X1 CDC Writer |

5. Exportable Courses: There are currently no exportable courses.

6. Courses under Development/Revision: The Apprentice Course and Journeyman Course are currently being revised.

Section E - MAJCOM Unique Requirements

There are currently no MAJCOM unique requirements. This area is reserved.

Section F - Documentation of Training

Part 1: Air Force Training Record (AFTR)

1. AFTR Purpose. The Air Force Training Record (AFTR) is an internet application that is accessible via Advanced Distributed Learning System (ADLS). It is designed to be the Air Forces's enterprise world-wide solution that provides the capability to manage the training lifecycle for total-force personnel to enhance productivity, efficiency, and mission effectiveness. Six of the traditional roles outlined in AFI 36-2201 will actively utilize AFTR on a day-to-day basis. These include the Unit Training Manager (UTM), workcenter supervisor, immediate supervisor, trainer,

certifier, and trainee. AFTR functional areas will vary dependent upon the role in which an individual has been assigned.

2. AFTR components managed by the supervisor are:

2.1. Master Task List (MTL). The MTL is a comprehensive list containing 100% of all tasks performed within a work center. The MTL consists of the current STS, AF Form 623 Parts II and III, AF Forms 797 and 1098 tasks, and tasks required to meet deployment and/or UTC requirements.

2.2. Master Training Plan (MTP). The MTP employs a strategy for ensuring the completion of all work center job requirements by using an MTL and serves as a guide for supervisors, trainers, and certifiers to ensure that personnel are trained in an effective and efficient manner to meet training and mission requirements. The MTP will include when tasks on the MTL should be trained (priority/milestones), how they will be trained (resources/method), and approximately how long it should take to train on individual tasks or set of tasks. Refer to AFI 36-2201, *Air Force Training Program* for guidance in developing the MTP.

2.3. Duty Task List (DTL). The DTL is a list of all tasks required for a given duty position. The supervisor creates the DTL by selecting tasks from the MTL.

2.4. Individual Training Record (ITR). All training is documented in the ITR by way of AFTR. This is the electronic version of the former Enlisted Training and Competency Folder. The ITR is made up of the AF Form 623 Parts I, II and III; AF Forms 623a, 797, 803 and 1098; and the Job Qualification Standard (JQS). This record is automatically populated based upon the duty position the individual is assigned to. All enlisted personnel (CMSgt and below) with a medical AFSC will have an active ITR within AFTR. Refer to AFI 36-2201 for guidance in documenting training on the various forms contained within the ITR.

2.5. Qualification Training Packages (QTPs).

2.5.1. Standardized QTPs for the 4C0X1 career field are obsolete and no longer required for on-the-job training. MAJCOM and duty section-specific QTPs may be developed as determined by the AFCFM and MFM. QTPs may be required for all tasks not listed in the CFETP and/or identified by the duty section or facility as a high risk procedure or task. NOTE: Initial POC for QTP development is the 4C0X1 AFCFM. The AFCFM may delegate the development of the QTPs to the MFM level.

3. AFTR provides the capability to upload training-related documents into an ITR. The following documents (as applicable) will be uploaded into every 4C0X1 ITR:

3.1. Current Basic Life Support Card.

3.2. AF Form 2096, *Classification On-The-Job Training Action*.

3.3. AETC Form 156, *Student Training Report* (Remove IAW AFI 36-2201).

3.4. CDC Enrollment Cards AETC Form 156, *Student Training Report* (Remove IAW AFI 36-2201).

3.5. AF Form 34, *Field Score Sheet* (Remove IAW AFI 36-2201).

3.6. Course Examination Scorecard (Remove IAW AFI 36-2201).

3.7. IC&RC *Alcohol and Drug Abuse Certification* (CADC).

4. Guidance for AFMS-required ITR documentation also includes (but is not limited to): AFI 41-106, *Medical Readiness Program Management*, AFI 44-102, *Medical Care Management*; AFI 44-110, *Medical Quality Operations*; and AFI 46-101, *Nursing Services and Operations*

Part 2: Work Center Training Binder

1. Initial (work center orientation/supervisor initial evaluation) and on-going (competency verification) training is vital to the successful mission of any organization. To ensure all initial and on-going work center training meets required standards, each work center will maintain a training binder (electronic or hard copy). This training binder will be utilized by supervisors and trainers and will be set up in the following order:

1.1. Work center description. This includes daily work center mission, responsibilities, and any age-range of patients cared for in this work center.

1.2. Work center training monitor appointment letter identifying primary, alternate, and their roles and responsibilities.

1.3. Roster identifying work center trainer(s)/certifier(s).

1.4. Job description/performance standards for each work center duty position.

1.5. Current CFETP and associated change(s) as found on Air Force E-Publishing for each AFSC assigned to the work center. Note: It may be helpful to create/maintain a training binder for each AFSC.

1.6. Copy of the MTP, as found in AFTR, for each duty position. This will include the specialty training standard, 797s, 1098s, 623 II, and 623 III.

1.7. Copies of all QTPs and/or ISD checklist(s) used during orientation and/or location(s) of any training plans/evaluation tools used to validate trainee qualifications.

1.8. Work center orientation checklist. In addition to minimum requirements stated in AFI 36-2201, include timelines (milestones) for each task identified.

1.9. AF Form 623a sample entry of supervisor initial evaluation of trainee qualifications. Minimum information required in statement can be found in AFI 36-2201. This evaluation must also include

full review of the MTP for trainee's duty position, revalidation of qualification(s) and timelines (milestones) for items that require further validation and/or training.

1.10. AF Form 623a sample entry of annual job description/performance standards review.