SLIDE 1
Bridging the Gap between VR Counseling and Behavioral Health Counseling
Presenters: Shardae Carter and Leo Yates

SLIDE 2
AGENDA
PART ONE: Overview of Counseling Disciplines
- Introductions
- Brief history of Vocational Rehabilitation Counseling
- Brief history of Social Work and Counseling
- Challenges of V.R. Counseling

PART TWO: Bridging the Gap
- Conversations
- Coordinating Care
- Success Stories

SLIDE 3
Introduction of the Presenters
- Shardae Carter
- Leo Yates, Jr.

SLIDE 4
HISTORY OF VOCATIONAL REHABILITATION
Graphic: The word TIMELINE with 4 wheels connecting and spinning together

SLIDE 5
Graphic: Image of the YouTube video with the title "The Public Mandate: A Federal Overview Module 1: History of VR"
https://www.youtube.com/watch?v=Z7-kCT1S51c

SLIDE 6
VOCATIONAL REHABILITATION
The Rehabilitation Process
- Is typically client driven.
- Identifying strengths, attributes, interests, aptitude, experiences, history, and BARRIERS to employment.
- Scheduling assessments such as medical, psychological, education/aptitude, career, AND ADDICTION/SUBSTANCE ABUSE screenings or barriers (perhaps the addiction severity is only mild or moderate and not severe).

SLIDE 7
HISTORY OF SOCIAL WORK & COUNSELING
Graphic: Title: Social Workers Subtitle: make a difference.
Image: 1 person needing to get over a valley with a person in the valley holding up a bridge so the person can get to the other side with others

SLIDE 8
OVERVIEW OF ADDICTION
Graphic: Many words on the slide with the word "addiction" being the one word that stands out.

SLIDE 9
KNOW THE DIFFERENCE
SOBRIETY / ABSTINENCE: They have stopped drinking or using. No other behavioral changes have occurred. Some people think this is enough. There’s a chance it’ll return.
RECOVER: Recovery is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. Better chance for success.

SLIDE 10
Ethics
Graphic: Two scales. On the first scale, the sides are labeled VR and LAWS (VR & WIOA). On the second scale, the sides are labeled WORK Policy and Human Services (Social Work/Counseling).

SLIDE 11
BRIDGING THE GAP – PART 2
An image with faceless individuals holding a document with the world in the background.

SLIDE 12
The Bridge
Supporting the Rehabilitation Process

SLIDE 13
STAGES OF CHANGE
40% of motivation for change comes from “unknown” factors.
Graphic: 6 circles with arrows pointing from each one to the next. The center is labeled "Upward Spiral: learn from each relapse." The circles are labeled:
1. Pre-Contemplation: No intention of changing behavior.
2. Contemplation: Aware a problem exists but with no commitment to action.
3. Preparation: Intent on taking action to address the problem.
4. Action: Active modification of behavior.
5. Maintenance: Sustained change; new behavior replaces old.
6. Relapse: Fall back into old patterns of behavior.

SLIDE 14
CONSIDERATIONS
Enabling: Enabling is when the person who cares mistakenly or accidentally supports the addiction. This slows down or prevents change.
WE DON’T WANT TO DO THAT!
Document off-putting behaviors or noticeable concerns. Such as:
• Missed appointments
• Lateness
• Calling at the last minute to cancel
• Appears disheveled or underdressed for a professional appointment
• Concerning behaviors (be specific)

DOCUMENT OCCURRENCES
You’re identifying possible barriers. You’re planting seeds for showing the need for change.

SLIDE 15
Enabling Addiction
• We should commend them if they’re keeping appointments. Late or missed appointments may be due to subconscious reasons.
• We should try to engage them with phone calls or letters.
• We should have conversations (with documented occurrences) when needed.
• If you suggest treatment and they say no, then bring it up again when it’s the right time. “What’s holding you back? What must happen for you to consider it?”

Graphic: Poster which reads:
Are you loving someone to death?
You enable them by:
• Giving money when asked.
• Paying for a car.
• Paying for a phone.
- Paying for or providing a place to live.
- Bailing them out of jail.

You love them by:
- Giving them food.
- Seeking professional help.
- Getting treatment.
- Answering the phone.
- Treating addiction like the disease it is.

SLIDE 16
CONVERSATION(S)

- WHAT’S CHANGED? Is the consumer doing better at keeping appointments? If no, then why not? Their behaviors may be slowing down their progress.
- RECEIVING WEEKLY UPDATES: Be an accountability partner and ask the client to do weekly check-ins, even if it’s a voicemail that is left. 12 Step Slips.
- TREATMENT: Is treatment on the table? Request counselor updates (e.g. kept appointments, results).
- EMPLOYER CONCERNS: Sometimes, we need to explain employer’s concerns about substance abuse in the workplace.

Lectures do not typically work

SLIDE 17
CONVERSATION(S)

- SUPPORT: Be up front with what support your services can provide.
- TRANSPARENCY: Keep things real and be transparent about concerns.
- CELEBRATE: Commend them and celebrate milestones (e.g., 30 days clean).
- SUCCESS STORIES: Share success stories of others who are in recovery.

Typically, you’ll have multiple conversations

SLIDE 18
ROSC: Recovery Oriented System of Care
Look for partnerships or other support systems for better success!
Graphic: 8 circles. Arrows from each circle point toward the outline of a person in the center, labeled Community Life. The circles are labeled:

1. Faith
2. Treatment & Rehab – In the model, clinical care is viewed as one of many resources needed for successful integration into the community.
3. Peer Support
4. Housing
5. Family
6. Belonging
7. Social Support
8. Work or School

SLIDE 19
COORDINATE CARE
Are others seeing the issues you’re seeing?
Consider a team meeting or conference call. Communication is Essential.
Graphic: A family stands on a platform at the center of a circle. The platform is labeled LogistiCare Member Support Platform. Around the circle are 9 platforms labeled:

1. Managed Care Organizations
2. Behavioral Health Providers
3. Government Services like VR
4. Transitional Services
5. Primary Care Physicians
6. Clinics & Labs
7. Health Care Facilities
8. Transportation Providers
9. Medical Specialists

SLIDE 20
CONSIDERATIONS
- Encouragement (you may be the only one in the person’s life who gives it)
- Empathy
- Listening
- Put aside biases (not every addict is the same)
- What will work for the person? (thinking outside the box helps)
- Resources (business cards/fliers) on hand for when treatment is requested
- Advocacy
- Believe in the person (identify their best qualities and strengths)
- Respect their choices & their values (doesn’t mean you have to agree with them)
- Is part-time the better option?

Not everyone can be fast-tracked for employment.

SLIDE 21
SUCCESS STORIES

SLIDE 22
THANK YOU!
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