

## Competency Assessment Instrument CAI Scales & Items

Scales	Item #	Items
Goal Functioning <sup>1</sup> : Assists clients in acquiring the skills needed to get and keep chosen goals.	23a	Assessed the client's level of functioning in relation to a personal goal
	23b	Discussed the client's strengths and weaknesses in relation to a personal goal
	23c	Discussed strategies to help the client achieve their goals
Stress <sup>1</sup> : Helps clients understand and cope with stressors that trigger deterioration.	23d	Helped the client identify people who can assist them during a crisis
	23e	Identified triggers that cause the client's symptoms to get worse
	23f	Identified warning signs that come before the client gets symptoms
	23g	Helped the client decide how to respond to triggers and warning signs
Client Preferences <sup>2</sup> : Learns and respects their clients' preferences regarding their treatment.	15	It is sometimes necessary to disregard a client's preferences in order to provide the best treatment
	16	Every behavioral health provider needs to know their clients' preferences about the selection of psychiatric medications
	20	Respecting clients' choices improves their functioning
	21	Almost all clients can learn how to make well-informed choices about their care
Intensive Case Management <sup>3</sup> : Leaves the office to help clients obtain services and housing.	32b	Leaving the office with clients to help them obtain housing or benefits
	32c	Helping clients find more programs, entitlements, or services
	32d	Assisting clients when agencies deny them services or benefits
Holistic Approach <sup>2</sup> : Elicits clients' life experiences in a trusting atmosphere.	25	The diagnosis of a client affects whether rehabilitation is possible
	26	It is best to keep my work with clients focused on their mental illness
	27	Whether a client can return to work is related to how strong their psychotic symptoms are
	28	The goals of "normal" people are often too stressful for clients
Family Education <sup>6</sup> : Educates family members and other caregivers about mental illness.	45a	How confident are you about providing education to family members about psychiatric illness
	45b	How confident are you about providing education to family members about medication treatment
	45c	How confident are you about providing education to family members about rehabilitation
	45d	How confident are you about providing education to family members about mutual support groups
Rehabilitation: Practices professionally accepted psychiatric rehabilitation. (Scale has items with different response choices-see individual item)	33a	<sup>2</sup> Try to direct Jane towards more practical ideas that don't involve horses
	33b	<sup>2</sup> Acknowledge her interest, but don't intervene since her goal does not seem realistic
	34	<sup>9</sup> What percentage of all your clients could benefit from rehabilitation services that are designed to substantially improve their functioning?
	35	<sup>9</sup> What percentage of all your clients could benefit from rehabilitation services that specifically focus on work?
	36	<sup>9</sup> What percentage of all your clients are currently receiving rehabilitation services that focus on work?
Skills advocacy: Creates opportunities for clients to practice skills. (Scale has items with different response choices-see individual item)	46	<sup>7</sup> How often do you arrange activities in which clients can practice making decisions for instance, shopping or opening a bank account?
	47	<sup>7</sup> How often do you assist clients in maintaining activities that are meaningful to them?
	48	<sup>7</sup> How often do you teach clients confidence building and self-advocacy skills?
	32a	<sup>3</sup> How often do you usually teach clients about medication and the symptoms of their illness?
	32f	<sup>3</sup> How often do you usually teach clients about rehabilitation?

## Competency Assessment Instrument CAI Scales & Items (continued)

Scales	Item #	Items
Integration/ Natural Supports <sup>5</sup> : Encourages clients to choose, find and use their own natural supports.	42a	How many of your clients are involved in 12-step groups such as AA or Double Trouble?
	42b	How many of your clients are involved in mutual support groups?
	42c	How many of your clients are involved in hobby clubs or other organized social groups?
Stigma <sup>2</sup> : Works with clients to cope with being stigmatized.	41a	Clients with mental illness experience discrimination every day
	41c	I am aware of common stereotypes about people with mental illness
	41d	The stress of discrimination often causes clients' symptoms to increase
Community Resources <sup>4</sup> : Refers clients to local employment, self-help and other rehabilitation programs.	37	How often does the presence of too few programs that help people obtain employment interfere with improving your client's functioning
	39	How often does the difficulty of getting clients accepted into rehabilitation programs interfere with improving your client's functioning
	40	How often does the lack of self-help groups interfere with improving your client's functioning
Medication Management <sup>2</sup> : Teaches clients symptom and side-effect self-monitoring skills.	30	All clients can learn to accurately identify psychiatric symptoms and medication side-effects
	31	With correct use of medication, symptoms can be reduced to very low levels in almost all clients
Family Involvement <sup>3</sup> : Involves family members and helps them cope effectively.	32e	Teaching family members about mental illness
	32g	Gathering information from family members or friends
	32i	Helping family members cope with stress
Team Value <sup>2</sup> : Provides services as part of a strongly coordinated team.	51	Mental health professionals from other agencies are usually included when we problem solve about particular clients
	52	I often don't have enough time to coordinate services between the various members of the treatment team
	53	I can have other staff members assist with my clients when those staff member have a particular skill
	54	We have regular meetings as a team to problem-solve about particular clients
Evidence-based practice <sup>8</sup> : Focuses on services that have been demonstrated to improve outcomes.	22a	How effectively does completing a structured diagnostic assessment improve outcomes in your clients
	22b	How effectively does adjusting, when necessary, the dosage of psychiatric medication improve outcomes in your clients
	22c	How effectively does providing intensive treatment in the community not at clinics and offices improve outcomes in your clients
	22d	How effectively does educating and helping family and friends improve outcomes in your clients
	22e	How effectively does teaching the client how to improve their daily functioning improve outcomes in your clients
Optimism (Grusky et al, 1989) <sup>10</sup> : Assesses the degree to which providers in community mental health systems believe that their clients will improve and have positive outcomes.	12a	Will remain in the mental health system for the rest of their lives
	12b	Will be able to greatly increase their involvement in the community
	12c	Will be able to function very well in the community
	12d	Will need to be hospitalized again in the future
	12e	Will remain pretty much as they are now
	12f	Will find work that enables them to be economically self-sufficient

### \*Scale Response Choices:

- 1 1=All clients to 5=few or no clients
- 2 1=Strongly agree to 5=Strongly disagree
- 3 1=Several times a day to 5=Never
- 4 1=Always a problem to 5=Never a problem
- 5 1=All to 5=None

- 6 1=Completely confident to 4=Little or no confidence
- 7 1=All the time to 5=Rarely or never
- 8 1=Extremely effective to 4=Little or no effect
- 9 0% to 100
- 10 1=Almost all to 5=None