

**Colorado**  
**Substance Abuse Training for Child Welfare Workers -**  
**Proposed Regulations to Add Services to Child Welfare Clients**  
**As a Licensing Category**

## MEMO

To: Art Atwell  
Joe Sprague

From: Karen Mooney

CC: Mary McCann  
Janet Wood

Date: March 10, 2004

Re: Substance Abuse Training for Child Welfare Workers

In light of the technical assistance project with the National Center on Substance Abuse and Child Welfare in which CDHS is involved, I have been giving some thought to the ways in which caseworker training regarding substance abuse and addiction issues might be modified in order to better meet the needs of trainees around the state. I have been involved in making some significant revisions to the state-sponsored training curricula provided to caseworkers for the past several years, however I think that a significant restructuring of the menu of available trainings might breathe some new life into this subject matter and expose trainees to information that they would otherwise not receive.

The existing trainings serve as multiple introductions to the topic of substance abuse within the child welfare population. The first training, Substance Abusing Families in the Child Welfare System, provides some basic pharmacology and stages of change information, as well as skills training around screening for substance abuse among child welfare families. The second training, Motivational Interviewing, provides some of the same information contained in the first training, but focuses specifically then upon the skills involved in doing motivational interviewing with clients. The third, Family Preservation with the Substance Abusing Family, focuses upon issues related to relapse, relapse prevention and relapse safety planning, and the fourth, Treatment Partnerships, provides material and activities to assist trainees in working collaboratively between Child Welfare and Substance Abuse Treatment professionals.

These trainings are not particularly content rich, and though there has been some discussion about trying to get them approved for CAC elective credit through ADAD, my fear is that the content simply isn't meaty enough to fulfill these requirements,

What I would propose, instead, would be that caseworkers and others involved with the child welfare system be exposed to substance abuse trainers from within our system, who train CAC applicants on a regular basis. There are several very engaging and very knowledgeable trainers who also run treatment programs who would be wonderful trainers for child welfare workers. The information specific to child welfare that is contained in the current trainings could then be distilled down into two trainings: Substance Abusing Families in the Child Welfare System, and Treatment Partnerships, and the remaining two trainings on the menu would be Motivational

Interviewing and Principles of Addiction Counseling, trained by ADAD approved trainers, for CAC training credit.

In a table, it would look a little something like this:

Current training	Replaced with	Cost	Provider
Substance Abusing Families in the Child Welfare System	Substance Abusing Families in the Child Welfare System	Facility, training materials, snacks	ADAD/Karen Mooney
Motivational Interviewing	Motivational Interviewing (ADAD approved)	Trainer \$500/day Facility, training materials, snacks	Jean Armour/Michael Connelly (Contract)
Family Preservation with the Substance Abusing Family	Principles of Addiction Counseling	Trainer \$500/day Facility, training materials, snacks	Sandy Roberts/Alan Cook/Warren Humble/Webster Hendricks
Treatment Partnerships	Collaborations (Curriculum from NYC, to be modified for Colorado)	Curriculum modifications (would probably be done by ADAD staff) and possibly supported by grant money for replication/evaluation of existing training model	ADAD/Karen Mooney

If ADAD were to take over the provision and administration of these trainings, I think we would have the flexibility to be sure that training materials were adapted quickly to keep up with current research and evidence-based practice. County child welfare staff and other service providers would greatly benefit from having exposure to some of the best trainers our field has to offer—and their training hours would count toward eventual CAC certification, if they were interested in pursuing this.

Administrative costs would be absorbed by current ADAD staff, thus reducing the cost of the training contracts.

## 16.0 Services to Child Welfare Clients

- A. Treatment of clients who have involvement with child welfare agencies requires a specialized knowledge base and specialized tasks aimed at the coordination of care between the substance abuse provider and the county child welfare program.
- B. Only programs that demonstrate compliance with the provisions in 14.0 – 14.5 Gender-Specific Women’s Treatment are eligible to treat Child Welfare clients.
- C. Treatment staff shall have documented completion of the introductory on-line course in child protection via NCSACW;
- D. Treatment staff shall have documented completion of at least 21 hours of continuing education per year in issues of child development, child safety and family dynamics, or equivalent Continuing Education Units in Solution Focused Therapy;
- E. Signed consents to release information shall be in the client record for each of the following:
  - client’s caseworker,
  - caseworker’s supervisor,
  - guardian ad litem,
  - Court Appointed Special Advocate (CASA) worker and
  - Client’s attorney through the Dependency and Neglect case.
- F. The assigned program counselor shall attend child welfare staffings at a minimum of 90 day intervals for each case referred by the child welfare entity.
- G. Attendance at staffings shall be documented in the clients record.
- H. Each client record shall contain current copies of the child welfare comprehensive family assessment, family case service plan and case plan reviews.
- I. Each client record shall contain current copies of the child welfare case reviews or documentation that the case review documentation has been requested from the child welfare agency.
- J. Each client record shall contain documentation of screening for child safety (completed within 30 days of intake and at each treatment plan review thereafter), and documentation of discussions with client about child safety issues.
- K. Each client record shall contain documentation of child welfare’s child placement and child custody status of each child.
- L. Each client record shall contain documentation regarding the child’s development and results of the developmental screen the treatment agency used to attain this information, the date the screening took place and the name of the person conducting the screening.
- M. Each client record shall contain documentation of the outcome of the substance use assessment and the current status of treatment services if the client was referred to the treatment program for assessment and services.
- N. Each client record shall contain documentation of visitation orders, custody orders, treatment orders, date of next hearing and the nature of next hearing.

- O. Each client record shall contain comprehensive progress notes including documentation of:
  - each court hearing or summary ;
  - each phone calls or conversation with the caseworker ;
  - any conversation with an attorney;
  - current court protective orders.
- P. Each client record shall include documentation that plans have been made to assure child safety in case of substance use relapse.
- Q. Each client record shall include documentation of discharge plan discussions with the Child Welfare caseworker