



## Individual Learning Guide

1. **Universal Screening:** Screening for substance use in child welfare referrals is a best practice strategy. In order to implement screening on each referral, staff need training on how to look for signs and symptoms of abuse and how to use specific tools that help probe for information that may not be obvious.
  - Am I committed to universal screening for substance at this time?
  - What systemic barriers, if any, prevent me from integrating this best practice in my work?
  - What actions can I take with my partners to improve how we screen for substance use?

### Action Steps:

2. **Practice:** Documenting substance use in child welfare referrals and during the life of a case is critical to increasing available resources. Recent practice reforms include changing the SACWIS system to improve the data collected on families.
  - What challenges do I face in responding to such changes in our systems?
  - What practices work well for me for data input and documentation? Can I learn from my peers?
  - What can I do to improve strategies for documenting substance abuse in my cases?

### Action Steps:

3. **Collaboration:** Accurate data is important to understand the scope of needs for our families and what to ask for as a system?
  - Is my data telling the story of what my families need? How do I know? Am I guessing?
  - What can I do to improve our local data collection and sharing among systems?
  - Is there anything I could do to change any barriers I face in this area?

### Action Steps:

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*“Improved detection should include uniform screening using the UNCOPE or GAIN-SS.”*

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*“Child Welfare agencies must improve their data reporting capabilities to demonstrate the impact of opiate addiction.”*

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*“Young, poor families experience elevated rates of opiate addiction and additional resources are needed.”*

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