

National Center on
Substance Abuse
and Child Welfare



Program Summary

In-Depth Technical Assistance for Infants with Prenatal Substance Exposure and their Families



Updated May 2018

Overview

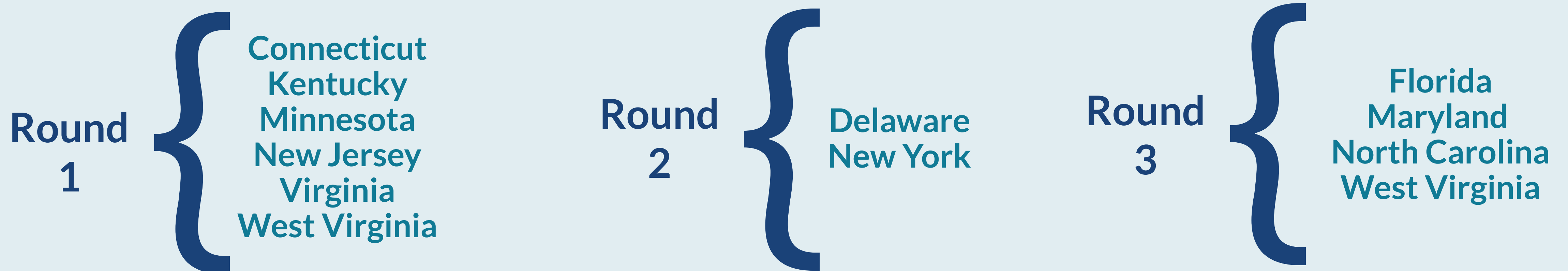


The National Center on Substance Abuse and Child Welfare (NCSACW) is funded by the Substance Abuse and Mental Health Services Administration and the Administration on Children, Youth and Families, Children's Bureau.

Since 2007, NCSACW has provided the In-Depth Technical Assistance (IDTA) program to advance the capacity of states, tribes, and their community partner agencies to improve outcomes for families affected by substance use disorders. In 2014, NCSACW launched a specialized IDTA program focused on improving the safety, health, permanency in their relationships, and well being of infants with prenatal substance exposure and the recovery of pregnant and parenting women and their families.

This 18-24 month program strengthens collaboration among child welfare, substance use disorder treatment, and the courts, as well as maternal and infant health care providers, early care and education systems, home visiting, and other key partners. IDTA also assists states to develop policies and protocols to align with the prenatal substance exposure provisions in the Comprehensive Addiction and Recovery Act (CARA) of 2016, which amended sections of the Child Abuse Prevention and Treatment Act (CAPTA).

Since 2014, NCSACW has provided IDTA to eleven states:



Identified Barriers and Challenges

IDTA state teams identified key barriers to engage families affected by prenatal substance exposure at each point of intervention in NCSACW's Five-Point Intervention Framework: pre-pregnancy, prenatal, birth, infancy, and throughout childhood and adolescence. The IDTA program focuses on addressing barriers at three key points of intervention:



Prenatal

- Inconsistent substance use screening as part of routine prenatal care
- Stigma and perceptions about pregnant women with substance use disorders
- Lack of understanding of Medication Assisted-Treatment (MAT) for pregnant women
- Lack of MAT, gender-specific, culturally-appropriate, and evidence-informed services for pregnant women



Birth

- Inconsistent hospital protocols for:
 - Identifying infants with prenatal substance exposure
 - Treating infants with NAS
 - Promoting mother-infant bonding
 - Discharge planning that addresses the mother's substance use treatment needs
 - Notifying Child Protective Services for infants who meet CAPTA requirements
- Inconsistent responses by CPS to hospital notifications
- Plans of Safe Care not developed for infant, family, or caregivers



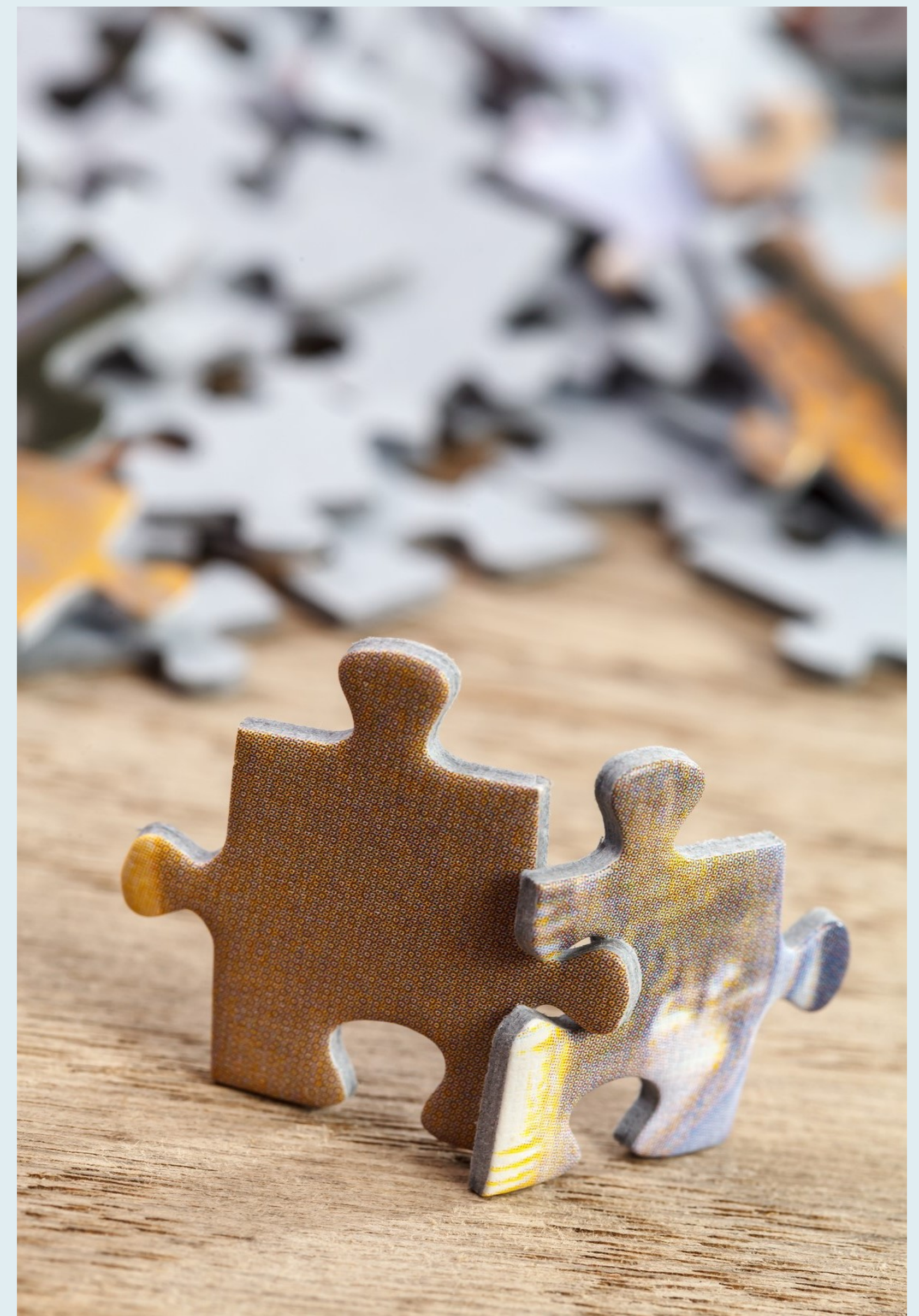
Infancy

- Insufficient access to MAT and medical care due to varied Medicaid eligibility requirements
- Challenges in engaging women in voluntary follow-up services and availability or eligibility for continued services
- Culturally-appropriate and evidence-informed services for women with substance use disorders

Through the IDTA program, states developed solutions to improve outcomes for families. Strategies included:

- ✓ Developing hospital protocols to promote consistent identification of and services for infants with Neonatal Abstinence Syndrome (NAS)
- ✓ Conducting hospital assessments to inform implementing Plans of Safe Care for infants, their families, and caregivers
- ✓ Creating systems of care or wraparound models of care that address the comprehensive needs of pregnant and parenting women and their children
- ✓ Drafting guidance documents for Opioid Treatment Providers and other providers that delineate best practices for serving pregnant and postpartum women
- ✓ Using non-stigmatizing language when referring to pregnant and parenting women with substance use disorders and their infants or children
- ✓ Engaging tribal communities in the development of treatment models for pregnant women that do not conflict with tribal beliefs and values
- ✓ Developing state policies and procedures for hospital notifications to CPS of infants and the development of a Plan of Safe Care model

State Strategies



Lessons of Successful Collaboration



Key factors for success identified by the IDTA program include:

Collaboration

- Commitment to collaborative policy and practice
- Exploration of differences in values and perceptions
- Active engagement of key local and state agencies and disciplines, such as: child welfare, substance use treatment, courts, primary healthcare, public health, medicaid, pediatricians, home visiting, and early intervention

Leadership

- Oversight Committee of State Directors, Commissioners and Department Secretaries
- Core Team of champions from key systems to advance policy and practice changes
- Project Liaison to lead and organize the Core Team

Shared Outcomes

- Enhanced information systems to identify infants with prenatal substance exposure
- Establish baseline data to measure prevalence and improved outcomes
- Begin to measure cross-system outcomes

Resources

Substance-Exposed Infants: A Report on Progress in Practice and Policy Development in States Participating in a Program of In-Depth Technical Assistance September 2014 to September 2016

Highlights the lessons, challenges and barriers, state strategies, and progress made to strengthen collaboration and linkages among multiple systems and stakeholders to improve outcomes for infants with prenatal substance exposure, their caregivers, and families from the five participating states: Connecticut, Kentucky, Minnesota (with a focus on tribal communities), New Jersey, and Virginia. https://ncsacw.samhsa.gov/files/IDTA_Executive_Summary.pdf

Summary 2017 Policy Academy: Improving Outcomes for Pregnant and Postpartum Women with Opioid Use Disorders and Their Infants, Families and Caregivers

Reviews the scope of the underlying issues, the current policy and practice environment, lessons from five states participating in the NCSACW's In-Depth Technical Assistance Program, and the work undertaken by state Policy Academy teams to develop action plans. https://ncsacw.samhsa.gov/files/IDTA_Executive_Summary.pdf

A Collaborative Approach to the Treatment of Pregnant and Postpartum Women with Opioid Use Disorders and Their Infants, Families and Caregivers

Provides an overview of the extent of opioid use by pregnant women and the effects on the infant. It provides evidence-based recommendations for treatment approaches from leading professional organizations and an in-depth case study. It also offers guidance tools to help facilitate a careful, in-depth analysis of a community's current policies, practices, resources, and training needs as related to working with pregnant women with opioid use disorders. https://ncsacw.samhsa.gov/files/Collaborative_Approach_508.pdf

A Planning Guide: Steps to Support a Comprehensive Approach to Plans of Safe Care

Supports stakeholders to improve outcomes for infants with prenatal substance exposure and their families. It offers steps and suggestions for state and local planners and practitioners to develop a comprehensive approach to Plans of Safe Care. Contact NCSACW for more information and assistance implementing these steps.

Clinical Guidance for Treating Pregnant and Parenting Women With Opioid Use Disorder and Their Infants

Offers comprehensive clinical guidance for optimal management of pregnant and parenting women with opioid use disorders and their infants. The Clinical Guide helps healthcare professionals and patients determine the most clinically appropriate action for a particular situation and informs individualized treatment decisions. <https://store.samhsa.gov/shin/content//SMA18-5054c/SMA18-5054.pdf>

Substance-Exposed Infants: State Responses to the Problem

This resource offers an exploration of the Five-Point Framework for addressing prenatal substance exposure and substance-exposed infants and provides state examples for each intervention point. <https://ncsacw.samhsa.gov/files/Substance-Exposed-Infants.pdf>

NCSACW Webinar Series on and Web-Based Resource Guide

Visit the NCSACW website for more information and resources on opioid use disorders and medication assisted treatment for pregnant and postpartum women and their families. A webinar series, publications, videos, and training materials are available. <https://ncsacw.samhsa.gov/resources/opioid-use-disorders-and-medication-assisted-treatment/ncsacw-webinar-series-on-opioid-use-disorders-and-treatment.aspx>

For more information or to request technical assistance, contact NCSACW



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