

Florida Office of the Attorney General
Statewide Task Force on Prescription Drug Abuse & Newborns



Policy Recommendation #9

Toolkit to Help Communities Establish and Maintain
Substance Exposed Newborn Workgroups

Intervention and Best Practices



Statewide Task Force on Prescription Drug Abuse & Newborns

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INTRODUCTION

The national surge of prescription drug abuse is afflicting pregnant women causing an increasing number of babies born with Neonatal Abstinence Syndrome (NAS). NAS refers to the various complications that occur with the withdrawal process newborns can experience after birth if their mothers have used addictive illegal or prescription drugs during pregnancy.

This national epidemic is increasing in Florida with a growing number of NAS cases and babies born suffering from withdrawal symptoms. In 2011, there were 1,563 instances of newborns diagnosed with drug exposure in Florida, three times the number in 2007.

The 2012 Florida Legislature recognized the problem of Substance Exposed Newborns and adopted legislation to create a statewide task force to examine the extent of prescription drug abuse among expectant mothers, as well as the costs of caring for babies with Neonatal Abstinence Syndrome, the long-term effects of the syndrome, and prevention strategies.

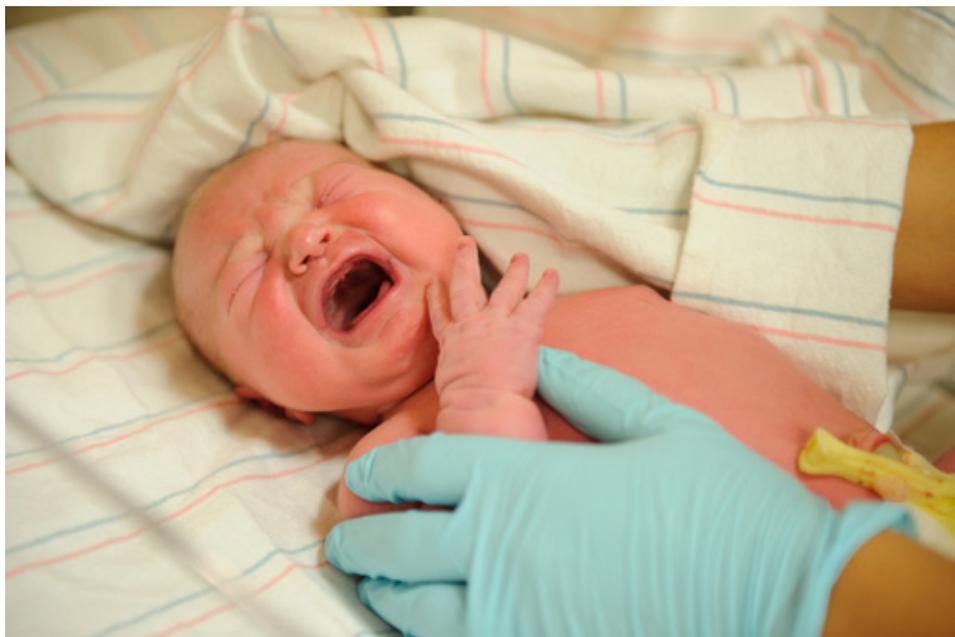
The final report presented by the Prescription Drug Abuse and Newborns Task Force provided a wide range of recommendations on how to combat the problem, including the creation of a toolkit to help communities establish and maintain Substance Exposed Newborn (SEN) Workgroups.

This toolkit will utilize the U.S. Department of Health and Human Services SAMHSA Substance-Exposed Infants Five-Point Intervention Framework, the Prescription Drug Abuse and Newborns Task Force Final Report, various Florida community resources, and the Born Drug Free Florida educational campaign to help Florida communities establish and maintain their own SEN Workgroups.



EXTENT OF THE PROBLEM

- Florida has been the epicenter of prescription drug diversion, resulting in more women using or abusing prescription opioid drugs.
- More women abusing prescription drugs translate to an increase in more cases of Neonatal Abstinence Syndrome (NAS).
- NAS refers to medical complications newborns typically experience if their mothers abused illicit or prescription drugs during pregnancy.
- NAS is a treatable disease.
- Determining the exact number of cases of NAS in Florida is difficult because there is significant variability in hospital policies and practices used to determine both the diagnosis and reporting of NAS.
- Nevertheless, in 2011 there were 1,563 newborn drug withdrawal cases reported in Florida. This category includes all classes of drugs.
- A recent national study determined that between 2000 and 2009 average hospital charges for newborns diagnosed with NAS increased from \$39,400 to \$53,400 per baby, about a 35 percent increase.
- The Task Force determined that NAS costs are concentrated in Neonatal Intensive Care Unit expenses, and are typically paid by Medicaid.



ESTABLISHING A SUBSTANCE EXPOSED NEWBORN WORKGROUP

Agencies and Stakeholders

By facilitating introductions and relationships between community partners, a Substance Exposed Newborn Workgroup provides an opportunity for dialogue and progress toward solutions.

The following agencies should be invited to participate in the SEN Workgroup:

- Child Care and Development Specialists
- Child Welfare
- Department of Children and Families
- Department of Health
- Developmental Disabilities
- Epidemiologists
- Family/Dependency Courts
- Family Support Services
- Health Care Providers
- Healthy Start Coalitions
- Hospitals
- Juvenile Agencies
- Maternal and Child Health
- Pharmacists
- Physicians, including Obstetric and Pediatric Care
- Special Education
- Substance Abuse Treatment

It is imperative that these stakeholders collaborate to address SEN issues in any given community because none have the resources or information base to address the issues on their own. In an effort to better address the issues, it may be influential to create smaller subcommittees for each of SAMHSA's Substance-Exposed Infants Five-Point Intervention Framework.

FIVE POINT INTERVENTION FRAMEWORK

The Five Point Intervention Framework addresses all stages of development for a substance exposed newborn. Many efforts previously focused on pregnancy and birth, however a more comprehensive approach is necessary to address complications of prenatal substance exposure and NAS.

Pre-pregnancy Intervention Efforts

This intervention point allows communities the opportunity to promote awareness of substance abuse among women of child-bearing age and the effects this exposure can have on a baby. Members of this subcommittee would include Maternal and Child Health Organizations, Private Physicians, and Substance Abuse Treatment Facilities.

Prenatal Screening

This intervention point encourages providers to make substance screens a part of routine prenatal care and facilitate referrals to treatment or additional services as necessary. Members would include Family Support Services, Health Care Providers, Maternal and Child Health Organizations, Pharmacists, Physicians, Epidemiologists and Substance Abuse Treatment Facilities.

Testing at Birth

This intervention point incorporates testing newborns for substance exposure at the time of delivery. Members of this subcommittee would include Family Support Services, Health Care Providers, Healthy Start Coalitions, Hospitals, Epidemiologists, Maternal and Child Health Organizations, and Physicians.

Neonatal Services for Infants and Parents

This intervention point includes developmental assessment of a substance exposed newborn and links to any necessary services for newborn and the family. Members of this subcommittee would include Child Care and Development Specialists, Child Welfare, Developmental Disabilities, Family/Dependency Courts, Family Support Services, Health Care Providers, Hospitals, Maternal and Child Health Organizations, Physicians, Substance Abuse Treatment Facilities and Healthy Start Coalitions.

Services throughout Childhood & Adolescence

This intervention point focuses on ongoing coordination of services for the child and family. Members of this subcommittee would include Child Care and Development Specialists, Child Welfare, Developmental Disabilities, Family/Dependency Courts, Family Support Services, Health Care Providers, Juvenile Agencies, Maternal and Child Health Organizations, Physicians, Special Education, Substance Abuse Treatment Facilities and Healthy Start Coalitions.

TASKS OF THE SUBSTANCE EXPOSED NEWBORN WORKGROUP

Inventory of Current Efforts and Identify the Community Issues

First the workgroup must take an inventory of current efforts and assess the needs of the community. This can begin through open dialogue among the stakeholders, interviewing additional key people in the community, focus groups, and/or community forums. Review any local data on Substance Exposed Newborns. Collect and compare initial hospital reports of substance exposed newborns, child protective services referrals from hospitals, referrals to drug and alcohol treatment facilities, the prevalence of prenatally exposed children, and developmental assessments of SENs through early childhood and developmental disabilities systems.

Set Goals

The SEN workgroup should develop a vision or mission. There is not a set standard for SEN Intervention and each community must decide how to respond to the issues at hand. Although details can be addressed in smaller subcommittees, it is important for the SEN workgroup as a whole to

discuss the community problem and the goals. It may be helpful to review national best practices, evidence-based interventions, and what other communities are doing to establish a desired outcome.

Develop an Action Plan

The SEN workgroup should agree on an action plan as a whole and within each of the Five-Point Intervention subcommittees it would be beneficial to do the same. Actions should include providing information and education, addressing access and barriers to services, enhancing services and supports, and modifying broader systems of care. Each subcommittee should create a list of desired interventions and the tasks necessary for the outcome.



Pre-pregnancy Intervention Efforts

Intervention efforts can include health warnings, educational materials, and public education campaigns.

Prenatal Screening

Intervention efforts can include initiating prenatal drug and alcohol screens, integrating SBIRT, initiating medicated assisted treatment programs, and supporting substance abuse counseling. Universal screening should be a goal of this subcommittee.

Testing at Birth

Intervention efforts can include developing hospital protocol for testing and reporting and training for medical professionals.

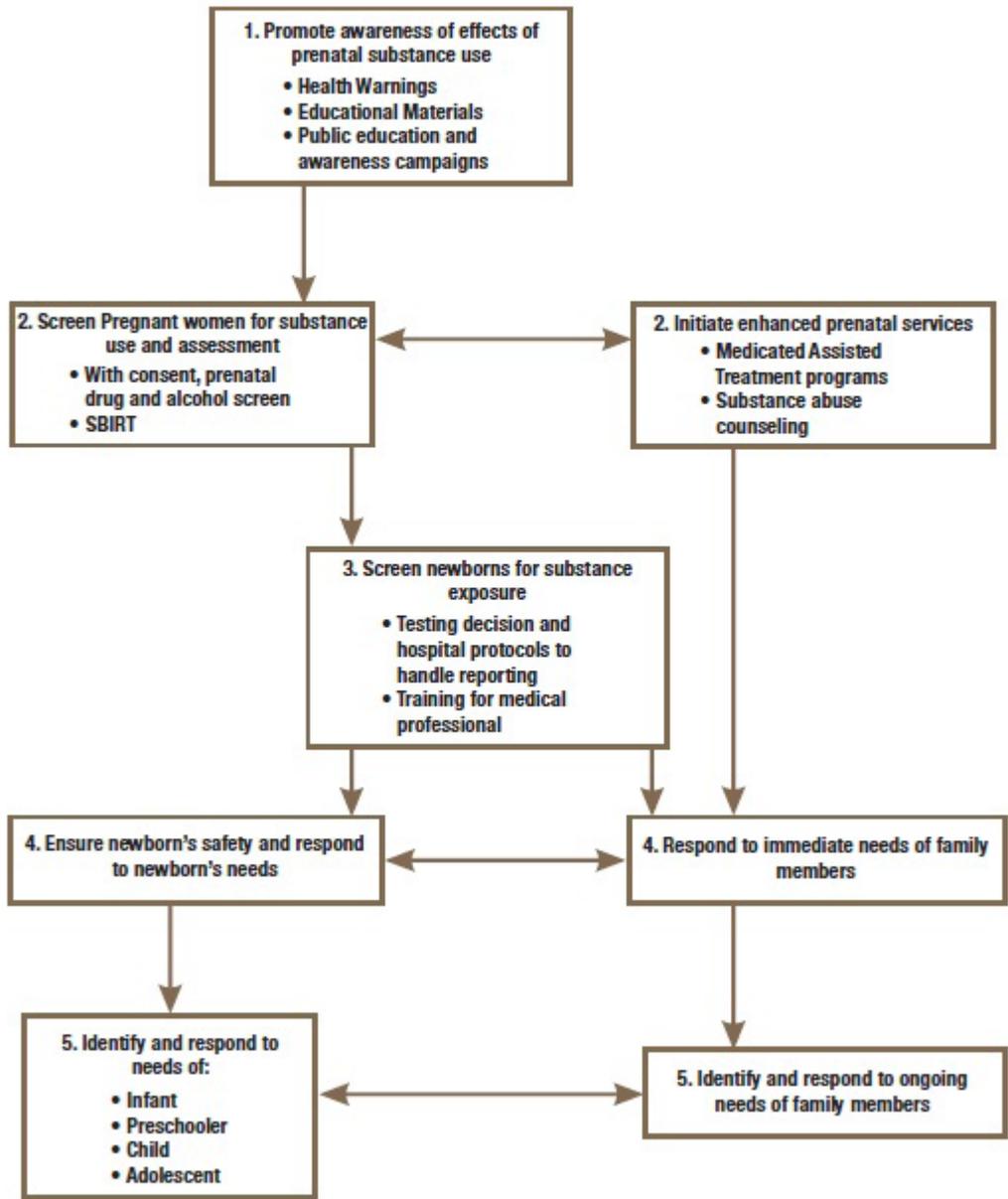
Neonatal Services for Infants and Parents

Intervention efforts can include ensuring the newborns safety and responding to the needs of both the newborn and the family.

Services throughout Childhood & Adolescence

Intervention efforts can include identifying and responding to the ongoing needs of the infant, preschooler, child, and adolescent and the subsequent needs of his or her family members.

Policy and Practice Framework: Five Points of Intervention



Substance-Exposed Infants: State Responses to the Problem." HHS Pub. No. (SMA) 09-4369. Rockville, MD.

U.S. Department of Health and Human Services Substance-Exposed Infants: State Responses to the Problem

Collect Data

It is critical to establish comprehensive data collection. As the action plan begins to unfold, the SEN workgroup will want to monitor and evaluate the process. Although there can be information gaps between agencies data collected can help communities show trends, establish levels of need, and pursue funding.

Seek Funding

There are various Federal grants that support the implementation and expansion of substance exposed newborn interventions. Those can be found in the resources section. It is also recommended that communities look to state and local resources and private funders. Funders may be interested in supporting SEN interventions when they consider the financial costs in addition to the physical, social and emotional impacts on a community.

EXAMPLES OF RESOURCES FROM SUBSTANCE EXPOSED NEWBORN WORKGROUPS

Many Florida communities have already established Substance Exposed Newborn Workgroups or subcommittees to address prescription drug abuse among expectant mothers or caring for babies with Neonatal Abstinence Syndrome. Below are links to digital resources at each intervention timeframe.

Pre-pregnancy Intervention Efforts

Born Drug Free Florida
www.borndrugfreefl.com

Healthy Start Coalition of Hillsborough County-Zero Exposure Project
www.zeroexposure.org

Healthy Start Coalition of Pasco-Substance Exposed Newborn Committee Website
<http://www.pascoasap.com/substance-exposed-newborn.html>

Healthy Start Coalition of Sarasota-County Clean Start Website
www.healthystartsarasota.org/clean-start-moms/

Healthy Start Coalition of Pasco and ASAP Substance Exposed Newborn Brochure

Healthy Start Coalition of Pinellas County:
Your Baby and Alcohol/Cocaine/Marijuana/Methadone/Opiates

Healthy Start Coalition of Sarasota County: Clean Start Brochure

A pregnant woman never takes pills alone

FLORIDA DEPARTMENT OF CHILDREN AND FAMILIES
MYFLFAMILIES.COM

ATTORNEY GENERAL
STATE OF FLORIDA

Florida HEALTH

www.BornDrugFreeFL.com
1-877-233-5656

A Pregnant Woman Never Gets High Alone.


ZERO Exposure Project

1-877-233-5656
zeroexposure.org

A baby's life shouldn't begin with detox

When pregnant women take pain pills, their babies may be born with drug-withdrawal symptoms.

A baby's health depends on the mother's health.

Help is available:

www.BornDrugFreeFL.com
1-877-233-5656

FLORIDA DEPARTMENT OF CHILDREN AND FAMILIES
MYFLFAMILIES.COM

Florida HEALTH

Prenatal Screening Tools

T-ACE

http://www.michigan.gov/documents/mdch/T-ACEScreeningTool_412228_7.pdf

Tolerance, Worried, Eye-Opener, Amnesia, and K/Cut Down (TWEAK)

http://pubs.niaaa.nih.gov/publications/AssessingAlcohol/InstrumentPDFs/74_TWEAK.pdf

4 P's Plus

<http://www.ncbi.nlm.nih.gov/pubmed/17805340>

Screening, Brief Intervention, Referral and Treatment (SBIRT)

www.samhsa.gov/prevention/SBIRT/index.aspx

Healthy Start Coalition of Flagler and Volusia Methadone Staffing Sheet

Healthy Start Coalition of Flagler and Volusia WIS Brochure

Healthy Start Coalition of Pasco County Physician Screening Manual

Healthy Start Coalition of Sarasota Clean Start Methadone Maintenance

Healthy Start Coalition of Sarasota Being Dependent on Pain Medication

Testing at Birth

“Drug Testing for Newborn Exposure to Illicit Substances in Pregnancy:

Pitfalls and Pearls” Int J Pediatr. 2011; 2011: 951616.

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3139193/>

Neonatal Services for Infants and Parents

Healthy Start Coalition of Flagler and Volusia Children’s Medical Services Referral Form

Healthy Start Coalition of Flagler and Volusia Referral to Healthy Start-Healthy Families-Women and Infant Specialists

Healthy Start Coalition of Pasco County Neonatal Abstinence Syndrome Brochure

Healthy Start Coalition of Sarasota County Resource Guide

Healthy Start Coalition of Hillsborough County

Services throughout Childhood & Adolescence

The Florida Diagnostic & Learning Resources System (FDLRS)

<http://www.fdlrs.org/>

OTHER STATE SUBSTANCE EXPOSED NEWBORN KITS

Perinatal Foundation-Wisconsin Association for Perinatal Care - Newborn Withdrawal Toolkit (educational materials for parents & providers of newborns with NAS and pregnant women undergoing treatments for opiate addiction, includes Fact for Providers, Treatment, Guide for Parents, & Resources)

<http://www.waisman.wisc.edu/wic/NeonatalNutriPlan.php>

Washington's Substance Abuse During Pregnancy: Guidelines for Screening (Washington resource including Role of Provider, Screening Tools, Lab Testing, Treatment, Pregnancy Management)

http://here.doh.wa.gov/materials/guidelines-substance-abuse-pregnancy/15_PregSubs_E13L.pdf

Indiana Toolkit (Indiana resource including Substance Use Terms, Opioid Information, NAS, OB Guidelines, Effects on Breast Feeding)

Michigan Toolkit (Michigan resource including Effects of Marijuana, Alcohol, Hallucinogens, Methamphetamines, Crack/Cocaine, Opiates, & Methadone, Prescription Meds, Developmental Outcomes, Intervention Strategies)

New Hampshire Caregivers Guide (New Hampshire resource from Dartmouth including NAS Signs, Scoring, Ways to Calm Baby)

FUNDING RESOURCES

Federal Funding Sources:

Substance Abuse Prevention and Treatment Block Grant (SAPTBG)

<http://www.samhsa.gov/grants/blockgrant/>

Temporary Assistance to Needy Families

<http://www.acf.hhs.gov/programs/ofa/programs/tanf>

Medicaid & Early & Periodic Screening, Diagnosis, & Treatment Program

<http://mchb.hrsa.gov/epsdt/overview.html>

Maternal and Child Health Services Block Grant (Title V)

<http://mchb.hrsa.gov/programs/titlevgrants/>

Child Abuse and Neglect State Grants

<https://www.childwelfare.gov/preventing/developing/funding/cfm>

Community-Based Child Abuse Prevention Program

<http://friendsnrc.org/cbcap>

Title IV-B—Foster Care and Title IV-E—Adoption Assistance

http://www.acf.hhs.gov/cwpm/programs/cb/laws_policies/laws/cwpm/policy.jsp?idFlag=7

http://www.acf.hhs.gov/cwpm/programs/cb/laws_policies/laws/cwpm/policy.jsp?idFlag=8

Child Welfare Services—State Grants, Title IV-B, Subpart 1

<https://www.childwelfare.gov/pubs/factsheets/cpswork.cfm>

Promoting Safe and Stable Families, Title IV-B, Subpart 2

<http://www.acf.hhs.gov/programs/cb/resource/pssf-title-iv-b-subpart-2-ssa>

Chafee Foster Care Independence Program

<http://www.acf.hhs.gov/programs/cb/resource/chafee-foster-care-program>

Child Care & Development Fund & Child Care & Developmental Block Grant

<http://www2.ed.gov/about/offices/list/oii/nonpublic/childcare.html>

Individuals with Disabilities Education Act Grant Programs (Part B, Section 619—Special Education Preschool Grants and Part C—Special Education Grants for Infants and Families with Disabilities)

<http://www2.ed.gov/about/offices/list/osers/osep/index.html>

Developmental Disabilities Basic Support and Advocacy Grants

<https://www.cfda.gov/?s=program&mode=form&tab=step1&id=443b8ab9463c67d-6f271e5d4f986222d>

Community Mental Health Services Block Grant

<http://www.samhsa.gov/grants/blockgrant/>

Social Services Block Grant

<http://www.acf.hhs.gov/programs/ocs/programs/ssbg/about>

Florida Funding Sources:

Florida's Medicaid Program

<http://www.fdhc.state.fl.us/Medicaid/>

Florida Department of Children & Families (DCF)

<http://www.myflorida.com/accessflorida/>

Florida Department of Health

<http://www.floridahealth.gov/>

SUBSTANCE EXPOSED NEWBORN WORKGROUP CONTACTS IN FLORIDA

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