



# The Implementation of CAPTA Provisions

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## The Child Abuse Prevention and Treatment Act (CAPTA)

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- CAPTA is Federal legislation addressing child abuse and neglect across the United States
- Originally enacted in 1974 and reauthorized in 2010
- Certain provisions of the act were amended in 2015, by the Justice for Victims of Trafficking Act of 2015 (P.L. 114-22) and in 2016, by the Comprehensive Addiction and Recovery Act of 2016 (P.L. 114-198).



## Comprehensive Addiction and Recovery Act (CARA)

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Aims to address the problem of opioid addiction in the United States. Included in the CARA requirements are;

- the establishment of a **Plan of Safe Care** to address the needs of both the infant and parent(s),
- increasing States' compliance with CAPTA and amending the legislation to include the needs of infants born with and identified as being affected by substance misuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder.

# CAPTA SEI Definition

Infants born affected by substance use or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder

Healthcare providers involved in the delivery of care of an infant born substance exposed must notify child protective services. A plan of safe care is to be developed for these infants and their families.

The requirements are intended to provide the needed services and supports for infants with prenatal exposure, their mothers with substance use disorders and their families to ensure a comprehensive response to the effects of prenatal exposure.

Congress stated that these reports to CPS, on their own, are not grounds to substantiate child abuse or neglect.



# CAPTA Provisions

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- States are to develop policies and procedures for the notification to child protective services of the birth of an infant affected by prenatal drug or alcohol exposure
- Work with stakeholders to ensure the development of a **Plan of Safe Care** for infants who are prenatally exposed
- Develop a process for referrals to screening and early intervention services

# CT State Legislation

- CT Public Act 18-111, Sec 5, amending C.G.S 171-102a  
<https://www.cga.ct.gov/2018/ACT/pa/pdf/2018PA-00111-R00HB-05332-PA.pdf>
- The creation of written **Plans of Safe Care**, which must be developed between the mothers of their newborns and their providers.
- A provider involved in the delivery or care of a newborn who, in the provider's estimation, exhibits physical, neurological, or behavioral symptoms consistent with prenatal substance exposure, associated withdrawal symptoms, or fetal alcohol spectrum disorder must notify DCF of these conditions in the newborn.
- The DCF Commissioner, in consultation with other departments, agencies, or entities concerned with the health and well-being of children, to develop guidelines for the safe care of newborns with Substance Exposure.



# CT State Legislation

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- The creation of written **Plans of Safe Care**, which must be developed between the mothers of their newborns and their providers.
- A provider involved in the delivery or care of a newborn who, in the provider's estimation, is born substance exposed to methadone, buprenorphine, prescription opioids, marijuana, prescription benzodiazepines, alcohol, other illegal/non-prescribed medication, and/or the misuse of prescription/over the counter medication must notify DCF of these conditions in the newborn.
- The DCF Commissioner, in consultation with other departments, agencies, or entities concerned with the health and well-being of children, to develop guidelines for the safe care of newborns with Substance Exposure.

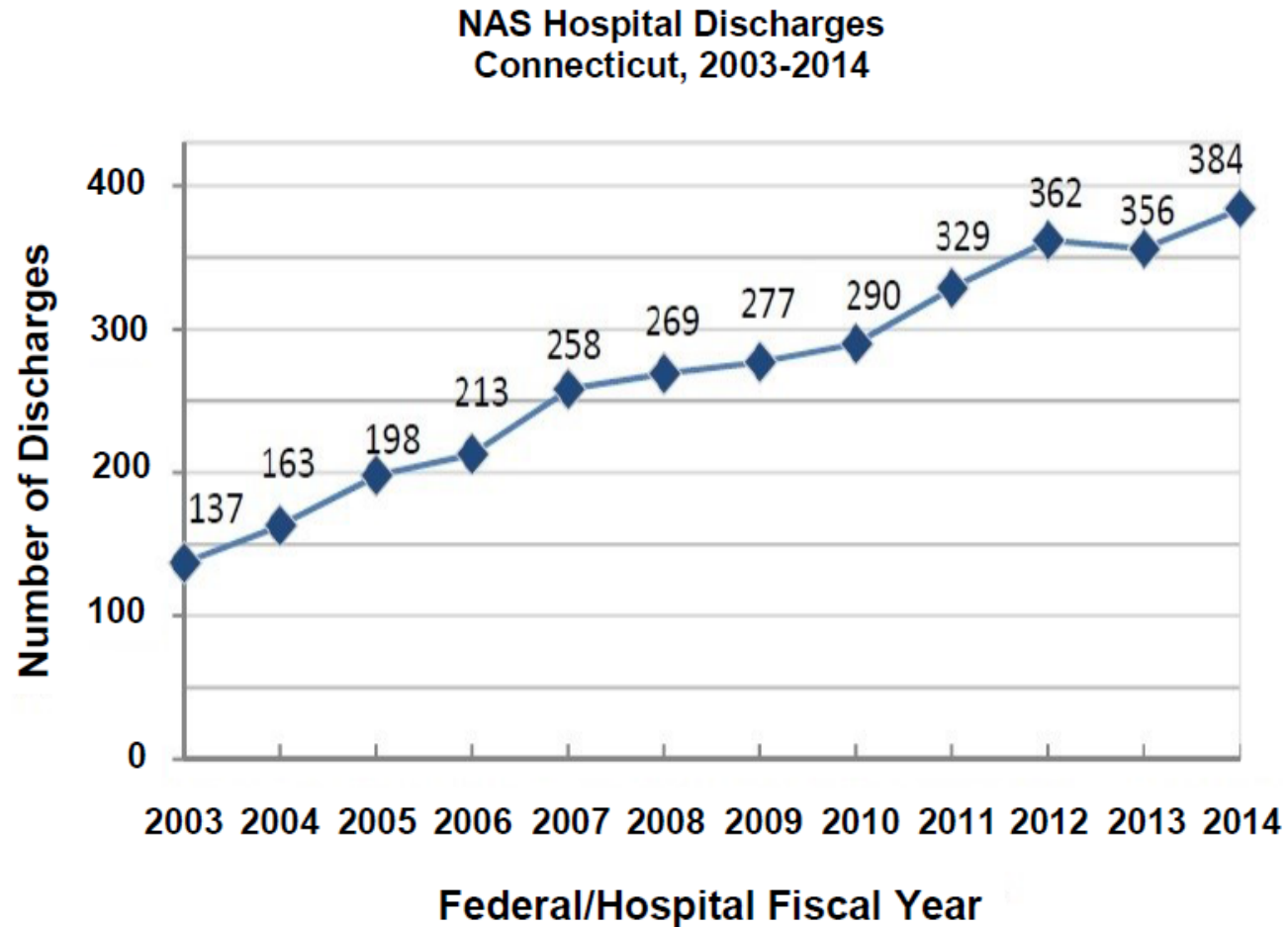
# What is a Plan of Safe Care?

- ❖ Mom's Plan
- ❖ Mom chooses the lead professional to collaborate with
- ❖ Verified and/or developed by the birthing hospital at time of birth and provides notification
- ❖ Demonstrates plan to meet the needs of mom, infant, and family

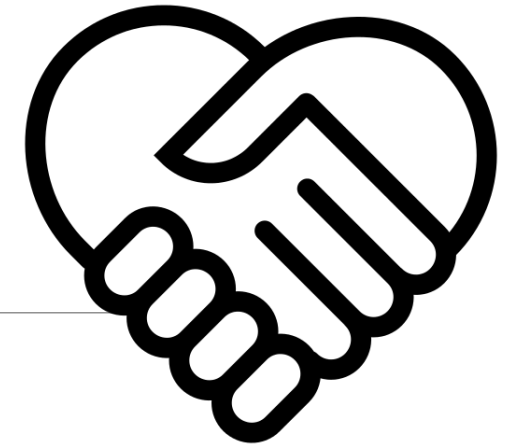




# DPH NAS Data



# A Collaboration



Between:

Persons with lived experience,

**Moms,**

Partners/Families,

Health care providers,

Social Workers,

& Key Providers:



## What is the difference between a report and notification?

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- A **DCF report or referral**, sometimes called a 136, occurs when anyone has concerns about the safety of a child. They report their concerns to the DCF Careline. DCF will then make a decision if the referral meets criteria for acceptance.
- A **CAPTA notification** to DCF occurs when a newborn baby has been born after being exposed to certain substances (because the mom used substances during pregnancy) but there are no other concerns about safety. A notification does not contain any identifying information about you or your baby.

# CT Definition of Infant Born Substance Exposed for Notification Purposes

## 1. Newborn exposed in utero to:

- Methadone
- Buprenorphine
- Prescription opioids
- Marijuana
- Cocaine
- PCP
- Alcohol
- Prescription benzodiazepines
- Other illegal/non-prescribed medication, and/or the misuse of prescription/over the counter medication

## 2. Newborn with withdrawal symptoms

## 3. Diagnosed with Fetal Alcohol Syndrome



Plans of Safe Care address the health and substance use disorder treatment needs of the infant and affected family or caregiver.

The plan should be developed with input from the parents or other caregivers in collaboration with professional partners and agencies involved in supporting the infant and family.



# What information is collected and why

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Zip Code

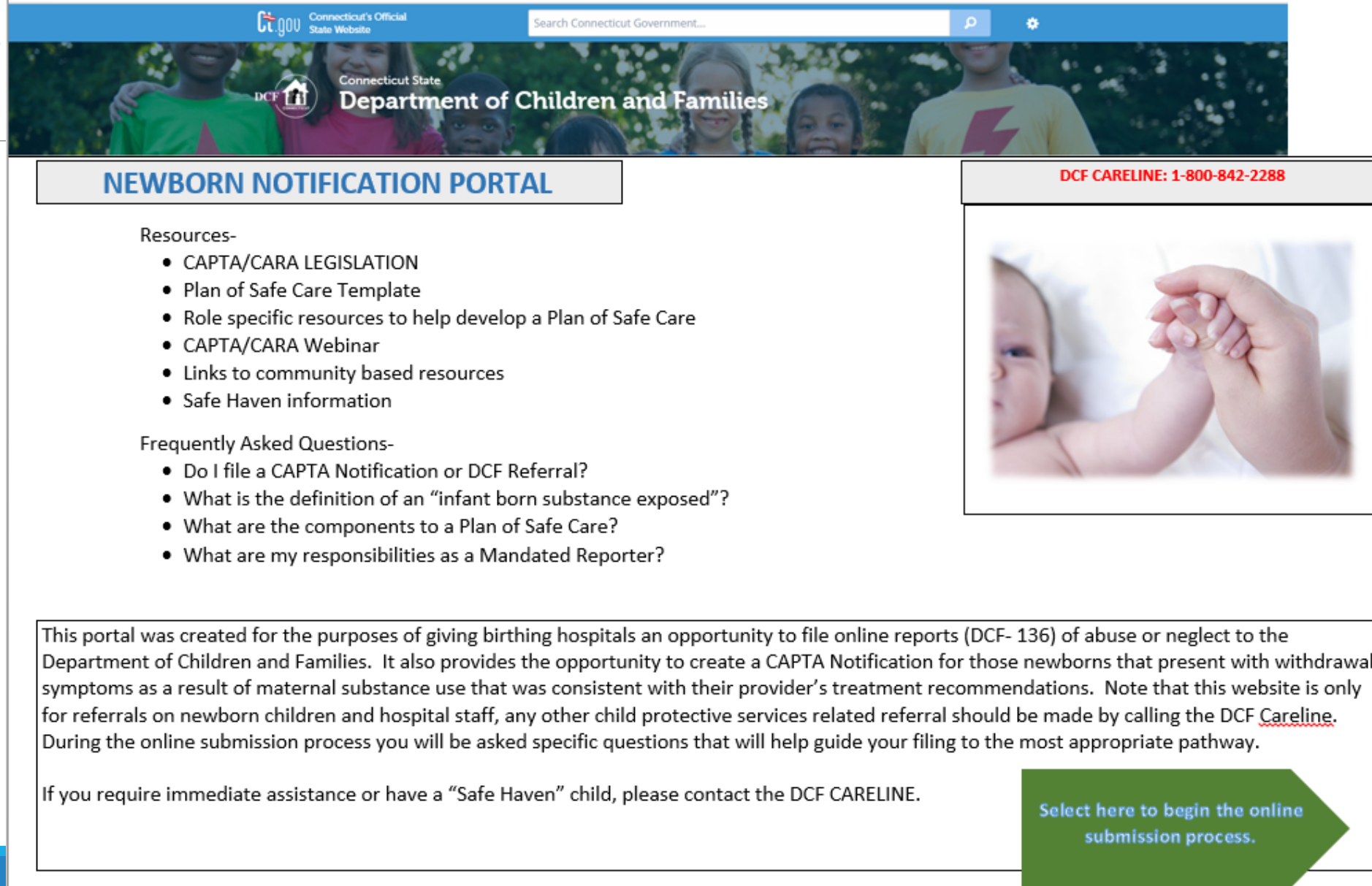
Race/Ethnicity

Substance that child was exposed to

Verification of plan of safe care provided by birthing hospital

**ONLY NON-IDENTIFYING  
INFORMATION IS PROVIDED**

# Notification Portal



Connecticut's Official State Website

Search Connecticut Government...

Connecticut State Department of Children and Families

## NEWBORN NOTIFICATION PORTAL

DCF CARELINE: 1-800-842-2288

Resources-

- CAPTA/CARA LEGISLATION
- Plan of Safe Care Template
- Role specific resources to help develop a Plan of Safe Care
- CAPTA/CARA Webinar
- Links to community based resources
- Safe Haven information

Frequently Asked Questions-

- Do I file a CAPTA Notification or DCF Referral?
- What is the definition of an "infant born substance exposed"?
- What are the components to a Plan of Safe Care?
- What are my responsibilities as a Mandated Reporter?

This portal was created for the purposes of giving birthing hospitals an opportunity to file online reports (DCF- 136) of abuse or neglect to the Department of Children and Families. It also provides the opportunity to create a CAPTA Notification for those newborns that present with withdrawal symptoms as a result of maternal substance use that was consistent with their provider's treatment recommendations. Note that this website is only for referrals on newborn children and hospital staff, any other child protective services related referral should be made by calling the [DCF Careline](#). During the online submission process you will be asked specific questions that will help guide your filing to the most appropriate pathway.

If you require immediate assistance or have a "Safe Haven" child, please contact the DCF CARELINE.

Select here to begin the online submission process.

# Possible Collaborators on the POSC

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- Pregnant care providers,
  - Pain Specialists,
  - Other Medication Assisted Treatment Providers,
  - Pediatricians,
  - Maternal postpartum providers: Visiting Nurse, Birth to 3,
  - Substance Use Treatment or other Behavioral Health provider,
  - Department of Children & Families Ongoing Social Worker.
- Remember: Mom chooses the professionals to collaborate with on her plan.





# Components to Consider on a POSC:

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Areas to consider, based on the individual and unique needs of this family:

- Behavioral health counseling
- Medication Assisted Treatment
- Community/natural supports
- Housing
- Financial support
- Parenting
- Safe Sleep planning
- Child Care
- Birth to 3
- Infant pediatric care



# Effective POSC are...

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- Interdisciplinary across health and social service agencies;
- Based on the results of a comprehensive, multidisciplinary assessment of physical and social-emotional health and safety needs of the infant and the parents or caregivers;
- Family focused to assess and meet the needs of each family member as well as overall family functioning and well-being by building on each family member's strengths, challenges, and, for the mother and father, parenting capacity;
- Completed, when possible, in the prenatal period to facilitate early engagement of parent(s) and communication among providers or, when not possible, before the infant's discharge from the hospital;
- Easily accessible to relevant agencies with the appropriate confidentiality safeguards to facilitate information sharing;
- Collaborative in identifying appropriate lead agencies to be accountable for the care management and for plan development, implementation, management, communication, and data submission; and,
- Grounded in evidence-informed practices, such as a preference that infants, mothers, and families remain together whenever possible.

There is not a uniform national or state template for a Plan of Safe Care that fits all urban, rural, and suburban settings or meets the needs of all parents and children. Communities might consider the domains below in determining what elements to include in a Plan of Safe Care beyond those already included in their standard child welfare safety plan developed by child welfare partners.

([https://www.cfutures.org/files/fdc/A-Planning-Guide\\_-Steps-to-Support-a-Comprehensive-Approach-to-Plans-of-Safe-Care-3.21.18](https://www.cfutures.org/files/fdc/A-Planning-Guide_-Steps-to-Support-a-Comprehensive-Approach-to-Plans-of-Safe-Care-3.21.18))

# Example of a POSC...

## Plan of Safe Care

Mother's Name:	Provider's Name:
Anticipated delivery date:	Provider Contact #:

Plans of Safe Care (POSC) address the health and substance use treatment needs of the infant and affected family or caregiver. Consistent with good casework practice, the plan should be developed with input from the parents or other caregivers, as well as any collaborating professional partners and agencies involved in caring for the infant and family. ***A Plan of Safe Care and subsequent CAPTA Notification is for mothers of prenatally exposed newborns. While the POSC may be developed prior to the birth of a child, the birthing hospital will either verify or complete and those elements identified in the POSC will be included in the notification.***

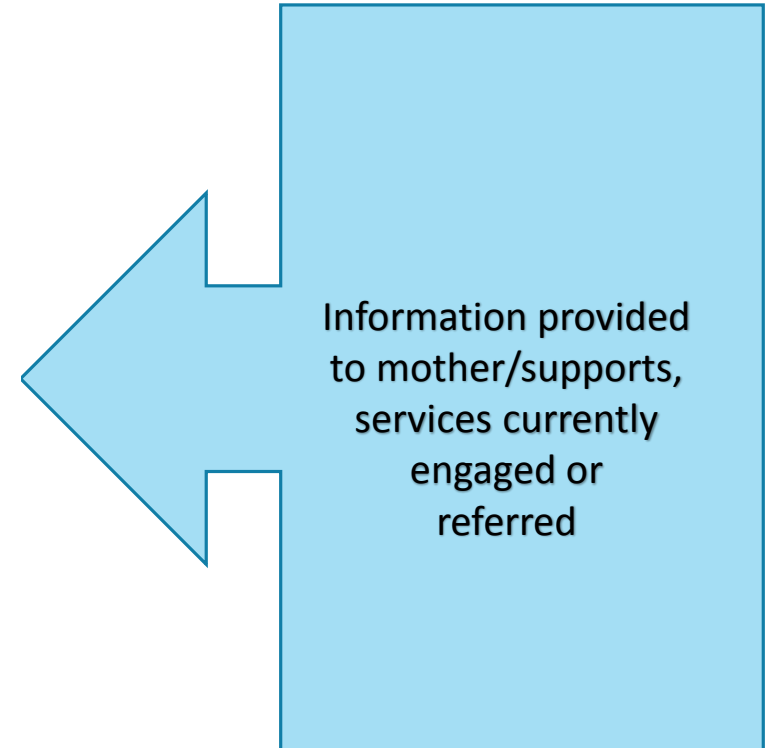
- Identify all applicable services currently engaged, information provided, and/or new referrals for infant, mother and/or caregivers:

	Information Provided	Currently Engaged In Services	Referral Made	Organization
12 Step Group				
Birth to Three				
Breastfeeding				
Childcare				
Co-parenting				
Depression during/after pregnancy				
Developmental Milestones				
Financial Assistance				
Food Insecurity				
Home visiting				
Housing Assistance				
Identified Pediatrician				
Immunizations				
Infant Car Seat Safety				
Medication Assisted Treatment				
Mental Health- Parent				
Mental Health- Early Childhood				
Nutrition				
Oral Health Care				
Other				
Parenting Groups				
Prenatal Health Care				
Recovery Supports				
Safe Sleep Plan				
Second Hand Smoke				
SNAP Benefits				
Substance Use Counseling				
Transportation				
WIC				

Signature of mother: \_\_\_\_\_ Signature of provider developing POSC: \_\_\_\_\_

Date: \_\_\_\_\_

NOTE: Identifying information of the mother will not be included in a notification.





# Resources

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DMHAS Regional directories: <https://www.ct.gov/dmhas/cwp/view.asp?a=2902&q=335196>

DMHAS Women and Children programs: <https://www.ct.gov/dmhas/cwp/view.asp?a=2902&q=335296>

211: <https://www.211ct.org/>

DCF Parent's Right to Know: <https://portal.ct.gov/DCF/Multicultural-Affairs/Parents-Right-to-Know>

Safe Haven: <https://portal.ct.gov/DCF/1-DCF/SAFE-Havens-Act-for-Newborns>

Safe Sleep: <http://www.ctoec.org/safe-sleep/>

OEC Before Birth: <http://www.ctoec.org/before-birth/>

OEC Newborns: <http://www.ctoec.org/newborns-toddlers/>

Birth to 3 Program: <https://www.birth23.org/>

SNAP benefits: <http://uwc.211ct.org/food-stampssnap/>

WIC: <http://uwc.211ct.org/wic-women-infants-and-children-program/>

Care 4 Kids: <https://www.ctcare4kids.com/>

Adult Crisis Services: <https://www.ct.gov/dmhas/cwp/view.asp?a=2902&q=378578>

Probate Court Kinship Fund: <http://www.ctprobate.gov/Documents/Flyer%20for%20Kinship%20and%20Respite%20Program.pdf>

Help Me Grow: <https://www.ct.gov/oec/cwp/view.asp?a=4544&q=535732>

Mother to Baby: <https://mothertobaby.org/>

Thank you!

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