A Collaborative Approach to Supporting Women & Families

Alcohol Drug Policy Council
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Objectives

- Provide an overview on Child Abuse Prevention and Treatment Act (CAPTA) & Plans of Safe Care
- Explore the role of the Substance Exposed Infants / Fetal Alcohol Spectrum Disorder (SEI/FASD) strategic plan
- Explore the benefit of family focused and recovery oriented services
- Explore existing collaborative efforts between DCF & DMHAS

CAPTA / CARA



NEWBORN NOTIFICATION PORTAL

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.

- The Child Abuse Prevention and Treatment Act
 - Federal legislation addressing child abuse neglect across the United States
 - Originally enacted in 1974 and reauthorized in 2010
- The Comprehensive Addiction and Recovery Act (CARA)
 - Increase the states' compliance with CAPTA and amending legislation to include the needs of infants born with and identified as being affected by substance misuse
- Specifically included in the CAPTA/CARA requirements are:
 - 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
 - Develop a process for referrals to screening and early intervention services
 - 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

NOTICES

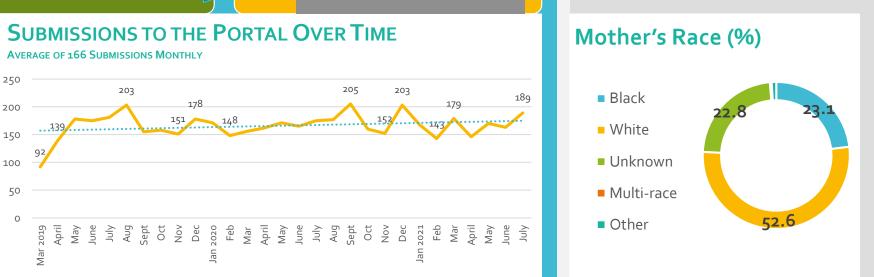
4813 TOTAL 189 July 2021 PLANS of AFE CAR

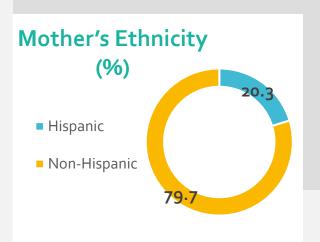
3223 TOTAL
67% of Submissions

CARELINE

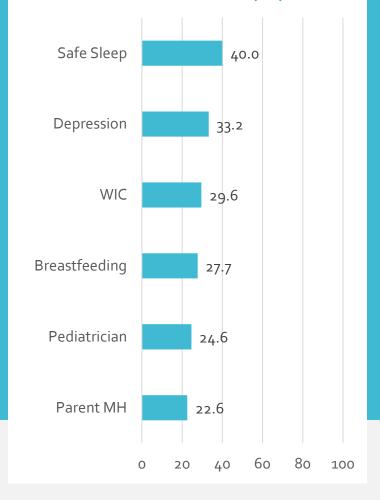
2329 TOTAL48% of Submissions

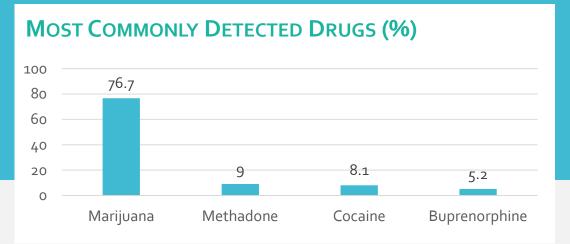
CAPTA JULY 2021





MOST COMMON NEEDS (%)





SUBSTANCE USE DATA FROM A DIFFERENT LENS



AS OF JULY 2, 2021

40 REPORTS

- 11 reports of ingestions
- 4 reports of child use no parental knowledge
- 4 reports of child use parental knowledge
- 10 reports of mother being positive at birth (cannabis)
- 6 reports of mother testing positive during pregnancy
- 5 reports of other parent smoking in a car with child present, parent selling

SAFE STORAGE PSA

https://youtu.be/sa3ifqpt2_c

Plans of Safe Care & 211 United Way Collaboration



- Alongside CAPTA, the plan of safe care (POSC) provides 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
- The Plan of Safe Care is a document that provides a roadmap of what supports a woman, and her family, may need as she transitions into motherhood
- Mom is empowered to share her resources, strengths and needs and she chooses who to collaborate with and when to share her plan
- Ideally, POSC can be shared with the medical team in advance of her delivery to coordinate services and minimize surprises at the time of delivery
- 211 and United Way
 - Multimedia campaign
 - Online POSC resource screening tool

FASD/SEI Initiative

5 Year Strategic Plan

- Initially completed in 2017
- Currently updating plan to revamp areas of priority to include
 - CAPTA & POSC
 - Screening and Referral
 - Marketing and Training
 - Treatment, Recovery, and Wellness Support

Work is advanced through

- Core Team
- Executive Implementation team
- Workgroups























Family Focused / Two Gen Work

- DMHAS awarded a SAMHSA grant for PROUD (Parents Recovering from Opioid Use Disorder) in September 2020. Services to be delivered via integrated care model for women & families in greater Hartford & New Britain communities.
- DCF
 - Multidimensional Family Recovery
 - Recovery Management Check up and Support
 - Family Navigation



Integration of the Recovery Perspective

- We operate from the perspective that women are the experts in their own lives and that their voice is crucial to the work that we do. Women in recovery act as consultants to review materials and documentation.
- Women's REACH (Recovery, Engagement, Access, Coaching & Healing) is a statewide program the provides recovery coaching and case management services. All services delivered are provided by Women's Recovery Navigators who are persons with lived experience and use their story to inspire others.
- CCAR Recovery Coaches stationed in 22 Emergency Department
- DCF
 - CROSS
 - Youth Advisory Board
 - Parents with Cognitive Limitations
 - FAVOR
 - Parents on Behavioral Health Oversight Committee



Availability of treatment services

- DMHAS & DCF offers a full continuum of services ranging from intensive residential to community based
 - DMHAS -8 pregnant & parenting programs statewide, gender responsive treatment including withdrawal management, residential, outpatient (including integration of MAT)
 - DCF 3 youth residential treatment facilities in 2 psychiatric residential treatment facilities, 7 adolescent community base services, 5 adult caregiver services
- The level of service is matched to the individual based on their identified needs and where they are in their recovery journey
- Services are available to DCF involved families, and when appropriate, the agencies work together to support clinical needs and a safe transition into the community

How can we support each other?

- Stigma/ Discrimination continues to exists which directly impacts care
- Collaboration & Ongoing training
 - Addressing Stigma
 - Harm Reduction
 - Reproductive Health
 - Screening and connection to services
- This group is available to you for
 - Subject matter expertise
 - Support with locating and interpreting data
 - Bringing voices with lived experience to the table

Areas of Further Development

- Women's access to care
 - Increased risk of death for women of color
 - Eliminate health disparities
 - Reproductive justice
- Coverage for access to care
 - Expanding definition of postpartum from 6 weeks to 1 year
 - Ensure safety nets for most vulnerable populations
- Continue to expand on collaborative efforts between state and community partners
 - FASD-SEI Initiative
- Data informed Service development and implementation
 - Explore opportunities for cross system data infrastructure



Resources

- DMHAS Women's Services:
 https://portal.ct.gov/DMHAS/Programs-and Services/Women/Womens-and-Childrens-Programs
- DCF CAPTA Homepage: https://portal.ct.gov/DCF/CAPTA/HOME
- DCF Substance Use Services: https://portal.ct.gov/DCF/Substance-use/Home
- CAPTA Plan of Safe Care 211 website: https://cdi.211ct.org/capta/
- Connecticut Clearinghouse: https://www.ctclearinghouse.org/
- Live LOUD Campaign: https://liveloud.org
- CCADV Safe Connect: https://ctsafeconnect.com/
- Substance Use Bed Availability (real time): https://www.ctaddictionservices.com/
- Mental Health Bed Availability (real time): https://www.ctmentalhealthservices.com/

Questions & Discussion



Contact Information

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