Date: July 11th, 2018

To: Vermont Hospitals

RE: Vermont’s response to the 2016 amendments to the Child Abuse Prevention and Treatment Act related to substance-exposed newborns

I want to express my sincere appreciation to the Vermont Hospitals for implementing the new procedures to address the requirements outlined in the amendments to Child Abuse Prevention and Treatment Act. On July 22, 2016, the Comprehensive Addiction and Recovery Act of 2016 (CARA) was signed into law. The legislation made several changes to Child Abuse Prevention and Treatment Act (CAPTA) including the requirements that:

- states will develop policies and procedures to address the needs of infants born and identified as being affected by substance abuse or withdrawal symptoms (not just illegal substance abuse as was the requirement prior to this change).
- health care providers involved in the care and delivery of substance-exposed newborns will notify child protection services.
- a Plan of Safe Care will be developed to address the needs of both the infant and the affected family or caregivers.
- the state’s child protection system will report data annually to the Children’s Bureau.

Over the last year, Vermont created a CAPTA workgroup to develop procedures that would address the new requirements. The workgroup included representation from the Department of Health, Division of Alcohol and Drug Programs and the Division of Maternal and Child Health, the Department for Children and Families, Child Development Division and Family Services Division, Vermont Children’s Hospital Neonatology/Vermont Child Health Improvement Program/Improving Care for Opioid-exposed Newborns (ICON), Lund, and KidSafe Collaborative.

The following link will bring you to the Family Services webpage dedicated to our partners: http://def.vermont.gov/fsd/partners. Here you will find a section on Substance-Exposed Newborns and a list of the following resources:

- FAQs related to Vermont’s response to the CAPTA amendment
- CAPTA Flowchart
- Hospital Notification Form
- Plan of Safe Care for Hospitals
- Plan of Safe Care Flyer for Mother
November 1st, 2017 marked the beginning implementation phase with the UVM Medical Center followed by other Vermont hospitals over the subsequent months. To date, notifications have been received from 10 out of the 12 Vermont hospitals. The following is a snapshot of the notifications received as of July 2018:

DCF- Family Services has received over 100 de-identified notifications for the following criteria:

- 46% were mothers receiving Medication Assisted Treatment (MAT)
- 42% were mothers who used marijuana during their pregnancy
- 13% were mothers who were receiving MAT and used marijuana during their pregnancy

The notifications indicated:

- 86% of those mothers agreed to creating a Plan of Safe Care which was then provided to the infant’s PCP
- 58% of those mothers were receiving services prior to delivery
- 25% received additional referrals before hospital discharge

During this same timeframe, DCF-Family Services has accepted 43 child protection reports based on the following acceptance criteria:

- 39- Illegal substance use in last trimester of pregnancy
- 4 – Positive toxicology screen of newborn

I am pleased to announce on May 31, 2018, Governor Phil Scott signed the federal Governor’s Assurance acknowledging Vermont’s compliance with the new requirements. Over the upcoming year, we will continue to evaluate our new process to see if adjustments need to be made to improve this new process. We are interested in hearing from hospital staff, primary care providers, substance abuse providers, and other critical stakeholders.

If you have any questions or comments, please feel free to contact Suzanne Shibley, Policy and Planning Manager at DCF-Family Services: suzanne.shibley@vermont.gov or (802) 241-0905

Again, thank you for all your feedback and support around the implementation of these new requirements which we hope will strengthen Vermont’s approach to supporting mothers/caregivers and their infants.

Sincerely,

Karen Shea
Deputy Commissioner, DCF-Family Services