

Barriers to Safe Discharge Care

FPQC NAS Kickoff Meeting

Partnering to Improve Health Care Quality for Mothers and Babies

Barriers to Safe Discharge Care



Panelists:

- Erin Hough, DCF Office of Child Welfare
- Dixie Morgese, Healthy Start Coalition of Flagler & Volusia Counties
- Ute Gazioch, DCF Office of Substance Abuse and Mental Health
- Gabrielle Bargerstock, Nurse-Family Partnership
- Sally Golden-McCord, Healthy Families Florida
- Renee Jenkins, FDOH Bureau of Early Steps & Newborn Screening







PLANS OF SAFE CARE

Comprehensive Addiction and Recovery Act of 2016 (CARA)

Further clarified the population requiring a Plan of Safe Care:

"Born with and identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder" specifically removing the term illegal

Requires the Plan of Safe Care include the needs of both the infant and family/caregiver

Specified data reported by States, to the extent practical, through National Child Abuse and Neglect Data System (NCANDS):

- The number of infants identified as being affected by substance abuse, withdrawal symptoms resulting from prenatal drug exposure, or Fetal Alcohol Spectrum Disorder
- ▶ The number of infants for whom a Plan of Safe Care was developed
- The number of infants for whom referrals were made for appropriate services, including services for the affected family or caregiver

Specified increased monitoring and oversight:

- ▶ Children's Bureau through the annual CAPTA report in the State plan
- States to ensure that Plans of Safe Care are implemented and that families have referrals to and delivery of appropriate services.

Developing a Plan of Safe Care

A Plan of Safe Care is intended to facilitate a holistic multidisciplinary approach to responding the needs of the entire family.

A Plan of Safe Care is intended to be developed at the earliest point the mother's use or infant's exposure have been identified.

Plan of Safe Care Components

Infant's Medical Care

- Prenatal exposure history
- Hospital care (NICU, length of stay, diagnosis
- Other medical or developmental concerns
- Pediatric care and follow-up
- Referral to early intervention and other services
- Other

Mother's Medical Care

- Prenatal Care History
- Pregnancy History
- Other medical Conditions
- Screening and Education
- Follow-up care with OB-GYN
- Referral to other health care services

Mother's Substance Use and Mental Health

- Substance use history
- Mental Health history
- Treatment history
- Medication Assisted Treatment history
- Referrals for services

Family/Caregiver History and Needs

- Family history
- Living arrangements
- Parent-child relationships
- Prior involvement with child welfare
- Current services
- Other needed services
- Child safety and risk concerns

Points of Intervention

- Healthy Start offers universal risk screening for all Florida pregnant women and infants. Screening occurs while the mother is pregnant and also at the time of the birth.
- Florida Abuse Hotline
 - Section 39.201 Florida Statute requires mandatory reporting for anyone in the state of Florida that suspects a child is being maltreated.
 - Through the investigative process infants and their families may be referred to Family Support Services to receive ongoing case coordination. Families with more intensive needs and safety concerns must be referred to ongoing case management services.

Depending on the concerns and the level of need of the family, agency involvement may vary.

 All mothers and infants will be screened by Healthy Start both prenatally and postnatally.

▶ Should concerns of child maltreatment arise at the time of the infant's birth or through home visiting service provision, Florida's robust reporting requirements require those with concerns report the information regarding the mother, infant or family to the Florida Abuse Hotline.