



# Guidelines for Identifying Substance-Exposed Newborns

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# Governor's Action Plan for Reform

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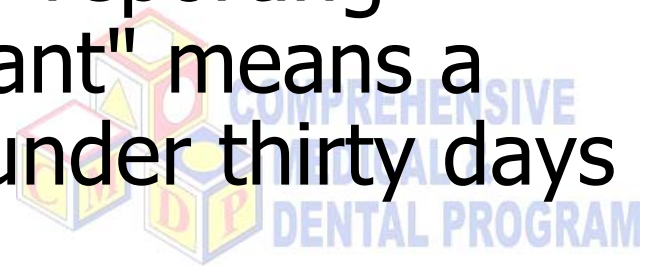
- Establish Alcohol & Drug Abuse as a Factor in Determining Child Abuse/Neglect
- Develop Medical Protocols to Identify Substance-Exposed Newborns and Treat Appropriately



# Arizona Revised Statutes

## § 13-3620

- Requires a health care professional, who reasonably believes that a newborn infant may be affected by the presence of alcohol or a drug, to immediately report this information, or cause a report to be made, to Child Protective Services. For reporting purposes, "newborn infant" means a newborn infant who is under thirty days of age.





# Multi-disciplinary Team

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- Prenatal substance abuse
- Child Protective Services
- AZ Department of Health Services
- Indian Health Services
- Hospital Social Services
- Arizona Chapter-AAP
- Arizona Perinatal Trust
- Arizona Perinatal Social Workers Association
- Tribal Social Services
- Physicians (7 including 3 neonatologists)



# Identification of Substance-Exposed Newborns



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- To improve the ability to effectively identify substance-exposed newborns
- To standardize guidelines for maternal and neonatal screening in Arizona
- To improve the health and well-being for women and their at-risk newborns





# Community Review

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- American Academy of Pediatrics—Arizona Chapter
- Arizona Medical Association—Maternal Child Health Committee
- Arizona Perinatal Trust
- American College of Obstetricians and Gynecologists—Arizona Chapter





# Dissemination

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- Chairman, Obstetrics Department
- Chairman, Neonatology Department
- Chairman, Pediatric Department
- Community Presentations
  - Annual Prevent Child Abuse Conference
  - Governor's Children's Justice Task Force
  - Annual Judicial Conference
  - AHCCCS Medical Director's Meeting
  - Governor's Task Force on Preventing Prenatal Exposure to Alcohol & Other Drugs
  - Governor's School Readiness Board—Health Implementation Team





# Maternal Drug Screening

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- History of previous or current substance use by mother and/or significant others living in the home
- Non-compliance with prenatal care
- Unexplained poor weight gain during the pregnancy
- Medical symptoms of withdrawal



# Maternal Drug Screening

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- Signs of substance use/abuse
- History of Hepatitis B/C/HIV infection
- Previous/current history of placental abruption
- History of stroke in the mother
- Medical non-compliance





# Neonatal Drug Screening

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- Signs of neonatal abstinence syndrome
- Small head size (brain size)
- Newborns who are underweight
- Stroke in the newborn
- Intestinal blood flow compromise (NEC)
- Positive drug screen in mother



# Why Drug Screen?

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- Confirms presence of drugs of use
- Determines use of multiple substances – not identified in maternal history
- Identification of newborn at risk
- Identifies drugs contraindicated in breastfeeding
- Identifies newborns that need protective, developmental services
- Identifies mother who may need treatment





# DRUG SCREENING

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- Urine vs. meconium specimens
- Negative screen means that not enough drug was present to exceed lab cut-offs
  - These are not scientifically determined
  - Threshold values are same for adults
- You may have substance abusing moms with negative urine tests on themselves or their babies!
- Different hospitals screen for different substances of abuse and have different cut-offs.

# Limitations of Drug Screening in Mother

- Will identify only common drugs of abuse used in last 24-48 hours
  - Cocaine, marijuana, barbiturates, benzodiazopines, amphetamines, PCP
- Will be negative if used earlier in pregnancy
- Alcohol & inhalant use requires special testing
- Sophisticated user can falsify results





# Limitations of Urine Drug Screening in Newborn

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- First urine contains highest concentration of drug/metabolites
- If first urine sample missed, unlikely to get positive test, even in drug-exposed newborn!
- Negative urine drug test is common, even in presence of substance use/abuse



# Meconium Drug Testing

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- Most reliable & comprehensive testing
- Forms from 16-20 weeks gestation until birth
  - Identifies most substances used after 20 weeks
  - Cocaine, marijuana, opiates, barbiturates, benzodiazopines, amphetamines, PCP
  - Special testing for alcohol
- Best results – collect multiple specimens





# Further Recommendations

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- Consider maternal & newborn testing
  - HIV, Hepatitis B & C, Syphilis
- If + for opiates, watch for onset NAS
- Counsel mom that breastfeeding is contraindicated
- Medical provider should report per A.R.S. §13-3620
- Consider CPS consult prior to discharge, home health nursing, close follow-up of mom & newborn

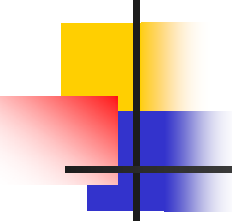


# Senate Bill 1280

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- Innovative legislation – S.B. 1280 created AZ Families F.I.R.S.T. (Families in Recovery Succeeding Together)
- A Steering Committee chaired by the Governor's Office, with representation from the Legislature, the Judiciary and Child Advocacy guided ADES & ADHS in the development and implementation
- Outcome Driven





# What would it take to do this work?

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- Partnership between ADES and ADHS
- Understanding systemic issues in Child Welfare, Jobs, Substance Abuse & the Courts
- Statewide change of substance abuse treatment for families in Child Welfare and TANF towards Family Centered Practice





# Legislative Outcomes

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- Availability
- Timeliness
- Accessibility

of Substance Abuse Treatment



# Performance Measures



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Reduction in:

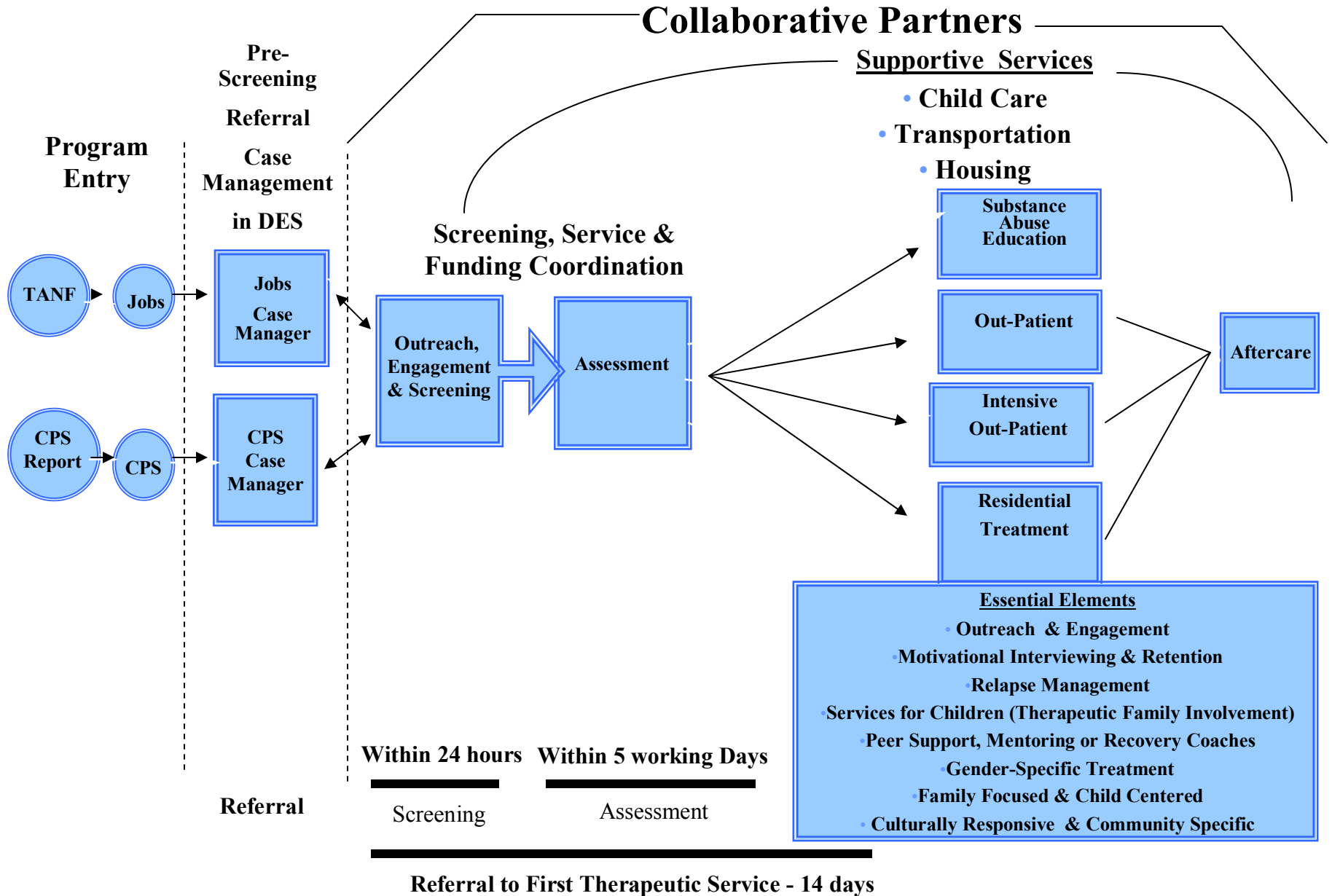
- Recurrence of child abuse and neglect
- Frequency of substance abuse
- # of days in foster care

Increase in:

- Obtaining or maintaining employment
- # of children - permanency



# Arizona Families F.I.R.S.T. - SB 1280 Model





# Essential Elements

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- Outreach & Engagement
- Motivational Interviewing & Retention
- Relapse Prevention & Management
- Gender-Specific Treatment
- Family Focused & Child Centered
- Culturally Responsive
- Community Specific





# AFF Program Referrals

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- Since program implementation in March 2001 the program has received 11,754 referrals through June 2005.





# AFF Accomplishments

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Special design of this program:

- Maximizing federal funds
- Engaging a hard to reach population
- Bridging systems for client outcomes





# For Additional Information

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## Identification of Substance-Exposed Newborns

- [www.azaap.org](http://www.azaap.org)
- [www.azdhs.gov/phs/owch](http://www.azdhs.gov/phs/owch)
- [www.governor.state.az.us/cyf](http://www.governor.state.az.us/cyf)

## Arizona Families F.I.R.S.T.

- [www.azdes.gov/dcyf/first/](http://www.azdes.gov/dcyf/first/)

