



# PERINATAL SUBSTANCE EXPOSURE TASK FORCE

Governor's Commission on Alcohol and Drug Abuse Prevention, Treatment and Recovery

Task Force Chair: Rebecca Ewing and Tricia Tilley

December 16, 2015

## Agenda/Notes

### Attendees:

Rebecca Ewing, Rekha Sreedhara, David Laflamme, Abby Rogers, Theresa Brown, Bonny Whalen, Vicki Flanagan, Susan Latham, Lisa Mure, Stephen Patrick (guest speaker), Jill Fournier (phone), Gary Kaufmann (phone), Linda Parker (phone).

### Welcome & Introduction:

### Updates from Priority Areas:

Priority Area	Lead(s)	TF Tasks/Other	Status/ Accomplishments	Updates
Neonatal Abstinence Syndrome (NAS) – Public Health Approach	Dr. Stephen Patrick from Vanderbilt University		Presented on the Epidemiology of Perinatal Opioid Exposure / NAS and public policy needed and national work being done on cigarette taxes (see presentation slides).  Illicit drug use rates among pregnant women: -18.3% (15-17 years of age) -9% (18-25) -5.9% (15-44)  Screening for alcohol and drug use: Dr. Patrick suggests verbal augmented by diagnostic screens; most important to foster a good, trusting relationship; conduct infant and maternal screens and history to determine infant NAS exposure.  NH does not need consent to test infant  Smoking plays a greater role compared to medication dose  NAS quality collaborative –	

		<p>199 participating centers with NH playing a large role in this initiative. By changing policies and practices outcomes have improved with treatment decreased by one day and hospital stay decreased by two days.</p> <p>Primary prevention – access to contraception and safe prescribing</p> <p>Based on a study, PDMP was associated with decrease in overdose deaths even when accounting for potential confounders.</p>	
<b>Special Legislative Session</b>	Becky Ewing	<p>The LSRs do not focus on pregnancy. Task Force members identified three areas of focus with help from Dr. Patrick to include:</p> <ul style="list-style-type: none"> <li>-Access to treatment for pregnant women;</li> <li>-Fund perinatal collaborative; and</li> <li>-After delivery care to include nurse home visits and other patient supports.</li> </ul>	Becky will contact Kate Frey at New Futures to share recommendations with legislative task force.
<b>NH Data</b>	David Laflamme	<ul style="list-style-type: none"> <li>-NH Pregnancy Risk Assessment Monitoring System (PRAMS) has obtained a 67% response rate out of 1,000 women.</li> <li>-NH PRAMS data for 2013 births will be made available soon.</li> <li>-26.7% of all births 3 months prior to pregnancy compared to last three months of pregnancy; 16.8% to 4.7% for non-Medicaid and 47.3% to 30.4% for Medicaid.</li> <li>-Data is not matching in that hospital NAS discharge data is higher compared to DHHS data.</li> </ul>	
<b>FASD Campaign</b>	Lisa Bryson, Nancy	The FASD poster campaign	-Poster created,

Jackson-Reno, Linda  
Graham, Abby Rogers

was launched via a press opportunity at the Hooksett Liquor Outlet in November. Representatives from the NH Department of Health & Human Services, the Maternal and Child Health Division of Public Health Services and the Bureau of Drug and Alcohol Services, Liquor Commission and the March of Dimes were all present for this event. A press release with photos will be sent to media outlets, and each liquor outlet will hang the created poster in their store.

approved and ready for dissemination

**Opioid Treatment Program (OTP) / Methadone Clinic Visits**

Becky Ewing and Rekha Sreedhara BDAS

-Meeting held with BDAS to review questions and discuss purpose and goal for meeting with OTPs  
-Questions streamlined to focus on essential information needed  
-Outline written to include purpose for meeting with OTPs

BDAS, Rekha, Becky and Tricia met with three OTPs.  
  
-Themes included:  
Between 3%-5% of population are pregnant;  
No typical dose for pregnant/postpartum women; Dose tends to be higher further into pregnancy; Split dosing is not routine practice; Pregnant and parenting groups are voluntary; Minimal education on community supports provided to patients.  
  
-Needs included:  
Routine OTP meetings to discuss challenges and to learn about state resources/initiatives;  
Mandate pregnancy groups; Integrate outside presenters into groups (WIC, DCYF, lactation consultant, nutrition and wellness).

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**Tool Kit**

Abby Rogers

The March of Dimes has committed to funding a three year project to develop and produce a Tool Kit for providers to build systems and coordinate existing services to more effectively care for women who are experiencing addiction to opioids during pregnancy and at the outset of parenting.

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NEPQUIN and Daisy Goodman will be overseeing this.

**Next Meeting:**

**Wednesday, January 27, 2:00PM-4:00PM,**  
DHHS Office Building at 29 Hazen Drive,  
Room TBD