



PERINATAL SUBSTANCE EXPOSURE TASK FORCE

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

Task Force Chair: *Monica Edgar and Tricia Tilley*

April 19, 2017 – 2:00PM-4:00PM

Community Health Institute/JSI, 501 South Street, Bow

Minutes

Attendees:

In-Person: Tricia Tilley, Monica Edgar, David Laflamme, Rekha Sreedhara, Deborah Schachter, Linda Parker, Rebecca Ewing, Adelaide Murray, Felicity Bernard

Phone: Ann Collins, Bonnie Whalen

Safe Plan of Care:

- Tricia brought copies of the draft Safe Plan of Care for Task Force members to review.
- Five hospitals have been asked to use this draft in May and June as a pilot before it is rolled out to the whole state.
 - The Draft Plan was sent out with a cover letter and the eight page form. This form tries to capture information throughout the prenatal experience and gets the team set up with a plan for when the infant goes home.
- As a reminder, the safe plan of care was developed as a result of federal legislation CARA/CAPTA. There needs to be a safe plan of care for every infant born, affected by substance use.
- There was a question about the amount of information being requested on the plan, are there concerns about treatment confidentiality?
 - Dartmouth will be having a meeting to discuss how to implement this.
 - Someone from risk management is going to be involved with discussions about implementation.
 - There will be comments and concerns raised and discussed in June.
- Becky shared that the team in Concord is struggling with where the document lives. Is it electronic? Is it on paper? Does the patient own it? Does the practice lock up a copy? Is the release stapled to the front?
 - These questions are being looked at in the context of embedded care.
 - Tricia spoke with Concord Hospital risk management about confidentiality and 42 CFR Part 2. The state will defer to the host agency's policies and procedures on what kinds of releases are needed. It depends on the constellation of providers within the entity.
 - For example – is treatment provided internally or externally?
 - Each hospital understands their confidentiality procedures.
- DCYF would like as much buy-in from community providers as possible. They need information reported on every baby that applies to the safe plan of care.
- Could this be an electronic form that the patient fills out?
- The IDNs are working on a patient care plan that sits atop many sources and grabs information from multiple sources.

- The hope is that hospitals will take this plan to the IDN groups to help share care across entities.
 - William Torrey would need to be involved with anything DH related.
- This should be on Deb Mullen's radar – she works in Health IT.
- Because this is health information it is protected and therefore complicated.
- Tricia will give Bonnie the names of her IDN group before 4/20.
- There was feedback about the Question X on Page 7 – it should be set up with a likert scale. A Yes/No (current format) is too difficult to answer for these measures. Tricia will take this suggestion to the group.
- Tricia will be presenting to ASTHO on Safe Plans of Care. Other states have not had such public health and healthcare input into child protection matters.

State Planning Process:

- Rekha and Bonnie had included information on tobacco use from NAS project-based data, which included data on cocaine, marijuana, alcohol, SSRIs, benzos, nicotine, and other substances.
 - Bonnie is still waiting to hear from Bill if he has data that does not include Vermont. She will ask him if the data could be available before the 25th.
 - There may be wide variations across hospitals so Bonnie will put the overall number (of only NH hospitals)
 - These numbers would provide a snapshot describing the problem.
 - What are the substances?
 - SAMSHA sent out something about alcohol and benzos in the treatment setting.
 - There are babies born in NH hospitals that are not necessarily NH residents.
 - Hospitals do not identify where the baby was from.
 - We will make a note of that in the plan.
- Tricia followed up with Audrey about safe sleep deaths. Each year varies between 8 and 12 that are unsafe sleeps (1/5) out of 53 total infant deaths in 2014.
- Rekha went through the plan's strategies to clean it up and put things in the correct order.
- Daisy Goodman has been working on developing an informational packet on the impacts of marijuana during pregnancy and lactation.
- Perhaps the plan should include information on Methadone Dosing as this is unclear with the perinatal population.
- This version of the state plan will be sent to members of the Task Force. If they have any thoughts on it, those will be due by Friday April 21.

Next Meeting: To Be Determined after June 2017