

# Plans of Safe Care

## Case Scenario 3

A woman is **actively using heroin, fentanyl, bath salts and other stimulants**. **Aware of pregnancy**, but for a variety of reasons she **never calls to establish prenatal care**. She has a **6-year old child with whom DCYF has become involved** after a report was made due to the school's concerns about multiple absences and lack of proper clothing for cold weather.

**At 36 weeks** she is the unrestrained passenger in a car accident and is brought to the hospital by ambulance. Evaluation reveals **ruptured membranes** and suspicion for **placental abruption**. She delivers a baby boy several hours after she arrives. **Infant is small** for his gestational age and **experiences withdrawal symptoms that require medication treatment**.

Mother tests **positive for fentanyl, methamphetamine, and marijuana**.

Because she came in under emergency circumstances and had not had prior prenatal care, the **Plan of Safe Care is not discussed with her until after her infant is born**.

### Reflection Questions:

- How would you approach developing a Plan of Safe Care for a foster family in your community?
  - In pregnancy?
  - During the birth hospitalization?
  - Upon discharge to home?
  - During few weeks/months at home?
- How might a Plan of Safe Care be developed and used to help this mother with regard to her substance misuse and parenting?
- What might be helpful for the court to know about the care and treatment of this mother and the Plan of Safe Care if there is an adjudication of parental rights in this case?



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Use this worksheet to consider how each of the following roles may be involved with Plans of Safe Care.

	Pregnancy	Birth	Discharge	At Home
Maternity Care Provider				
Pediatrician				
Social Worker				
Perinatal Coordinator				
Home Visitor				
Substance Use Disorder Treatment Program Provider				
Medication Assisted Treatment Provider				
Division for Children, Youth and Families				
Recovery Coach				
Patient				
Other				