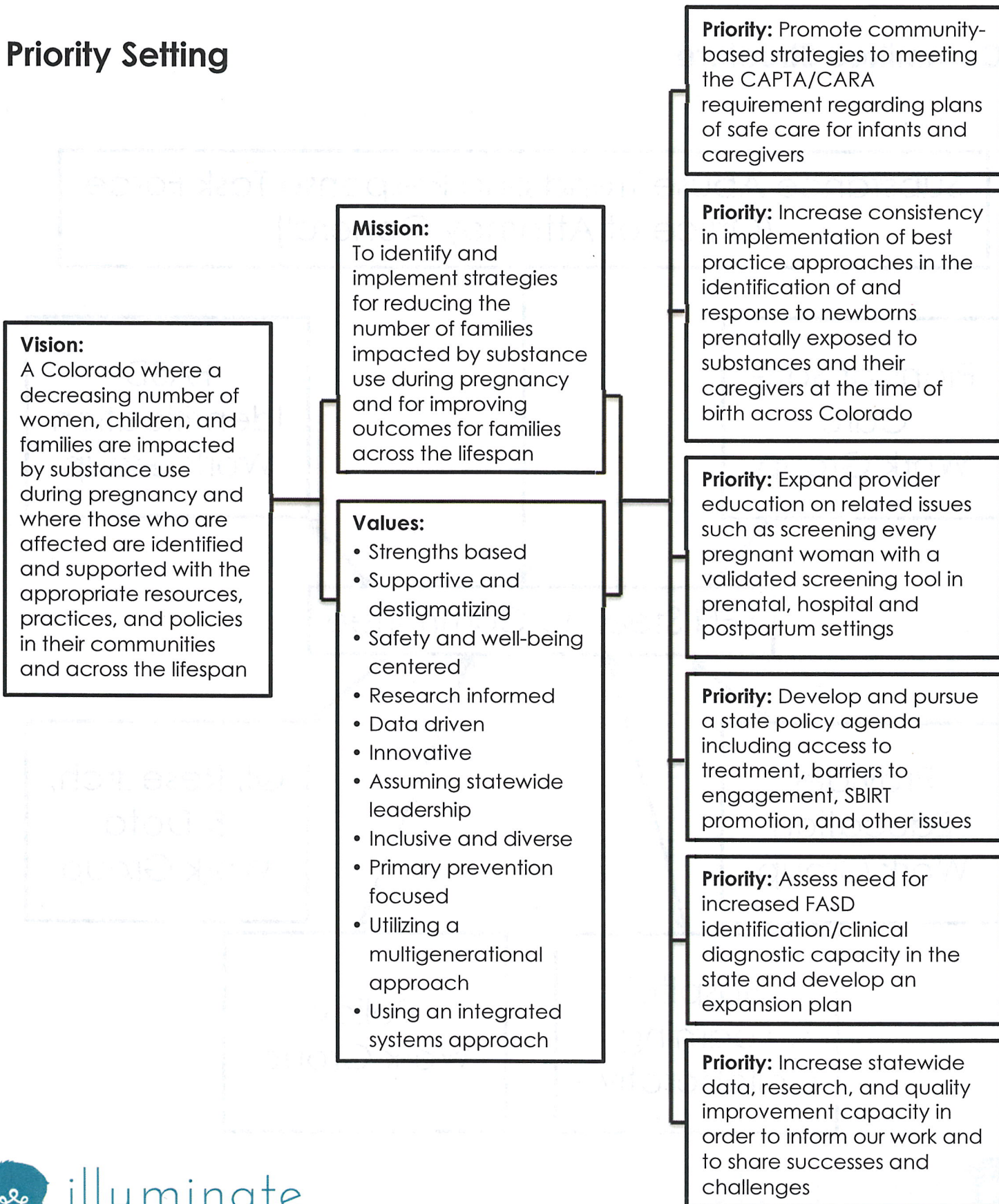


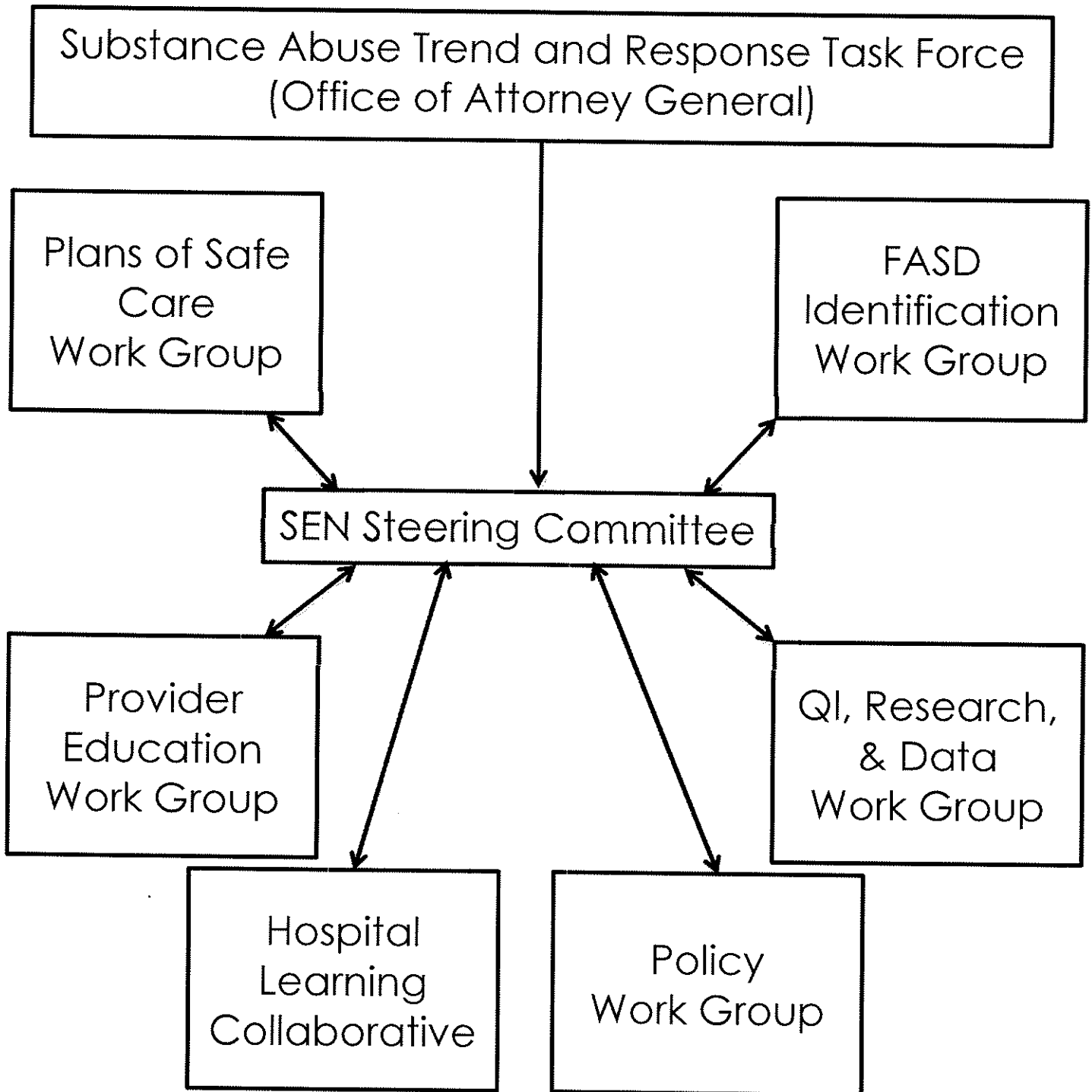
Colorado Substance Exposed Newborns Steering Committee Plan: 2018-2020

Priority Setting



Colorado Substance Exposed Newborns Steering Committee Plan: 2018-2020

Committee Structure

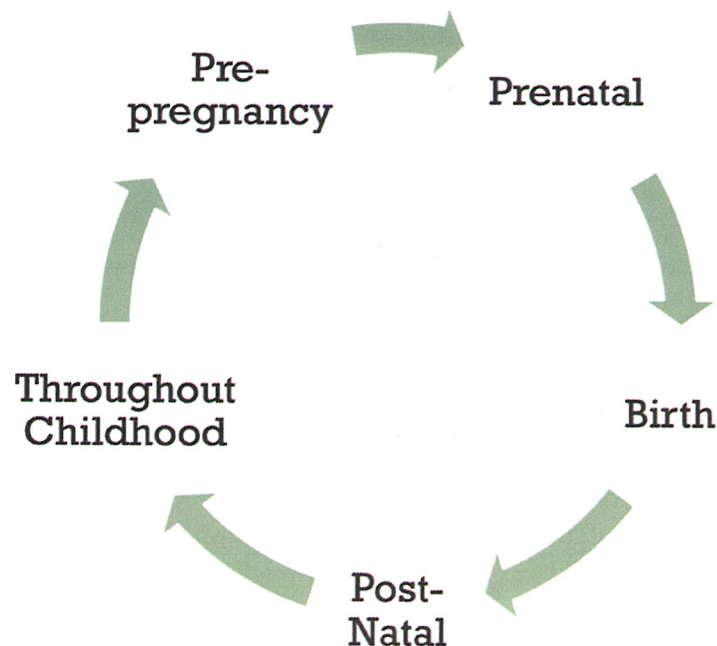


Five Points of Intervention

The "Five Points of Intervention" were developed by the National Center for Substance Abuse and Child Welfare and later adapted by the Colorado Substance Exposed Newborns Steering Committee in their 2012 white paper *Serving Families Impacted by Prenatal Substance Use: Recommendations for Policy and Practice*. The Five Points denote periods of time during which intervention can reduce the potential harm of prenatal and postnatal substance use by women. Each of the Five Points presents an equally crucial opportunity for intervention and underscores the need for a coordinated cross-system response to address this issue.

The Five Points are as follows:

- **Pre-pregnancy:** Interventions during this time frame involve promoting awareness of the effects of prenatal substance use among women of childbearing age and their family members.
- **Prenatal:** This time period begins after a woman discovers she is pregnant and extends until she gives birth. Interventions during this period involve identifying substance use by pregnant women through screening and testing and making referrals that facilitate treatment or related services.
- **Birth:** This time frame encompasses the time of delivery. Interventions during this period involve identification of and response to newborns prenatally exposed to substances and their caregivers in order to ensure early access to assessment, treatment, & support.
- **Neonatal:** This time period begins immediately after delivery and extends through the first 28 days of the child's life. Interventions involve the medical and developmental assessment of the newborn and the corresponding provision of services for both the newborn and family.
- **Childhood and Adolescence:** This time period begins when the child is 29 days old and extends through age 18. Interventions involve the ongoing provision of coordinated services for both child and family.



Excerpt from the Child Abuse Prevention and Treatment Act (CAPTA), as amended by the Comprehensive Addiction and Recovery Act (CARA)

States must be operating a statewide program that includes:

106(b)(2)(B)(ii) “Policies and procedures (including appropriate referrals to child protection service systems and for other appropriate services) to address the needs of infants born and identified as affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure or a Fetal Alcohol Spectrum Disorder, including a requirement that health care providers involved in the delivery or care of such infants notify the child protective services system of the occurrence of such condition of such infants, except that such notification shall not be construed to –

- (I) establish a definition under Federal law of what constitutes child abuse or neglect; or
- (II) require prosecution for any illegal action;

(iii) “The development of a plan of safe care for the infant born and identified as being affected by substance abuse or withdrawal symptoms or Fetal Alcohol Spectrum Disorder to ensure the safety and well-being of such infant following release from the care of healthcare providers, including through –

- (I) addressing the health and substance use disorder treatment needs of the infant and affected family or caregiver;



SAVE THE DATE:

The Impact on Children of Caregiver Substance Use Convenings

January 19th, 2018

Over the next four months, this steering committee will guide a process to shape a research-based, viable, multidisciplinary strategy for substantial, actionable change to better meet the needs of children impacted by caregiver substance use.

This work will cover the full spectrum of ways children are impacted—including during fetal development, childhood, and adolescence. For each stage of development, the steering committee will support or plan a convening of stakeholders.

With this encompassing strategy available, service providers and child and family serving agencies will have the guiding strategy necessary to collectively bolster our impact in addressing this issue.

