

# NEW JERSEY DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES

IN-DEPTH TECHNICAL ASSISTANCE  
NEONATAL ABSTINENCE SYNDROME AND  
SUBSTANCE EXPOSED INFANTS (IDTA NAS SEI)

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# NEW JERSEY OPIOID EPIDEMIC

- NJ selected for SAMHSA's 2014 Prescription Drug Abuse Policy Academy
- NJ's comprehensive plan to address the opioid epidemic includes NAS and SEI
- NJ developed "Core Opioid Workgroup"

# NJ NEW INITIATIVES

- **Opioid Overdose Prevention Program (OOPP)**
  - Regional Programs provide education, training and Naloxone kits to the community (individuals, families, etc.) at risk for an opioid overdose
- **Opioid Overdose Recovery Program (OORP)**
  - Utilizes recovery specialists and patient navigators to engage individuals reversed from opioid overdoses and treated at ED
- **Medication Assisted Treatment Outreach Program (MATOP)**
  - Licensed OTPs provide outreach and other engagement strategies and MAT to diverse at-risk populations

# NJ IDTA SEI

NJ awarded IDTA NAS SEI through NCSACW

## Partners

- Departments of Human Services (Lead Agency), Health and Children and Families
- Treatment Providers
- Maternal Health and Other Stakeholders
- Hospitals (Obstetricians, Pediatricians, Neonatologists, Labor and Delivery Nurses)
- Medicaid

# NJ IDTA SEI

- IDTA conducted walkthrough of a county with an existing SEI process and mapped out current practices and barriers in the identification and treatment of SEIs and their mothers
- IDTA assisting NJ in implementing an adopted model across the state
  - Strengths:
    - Effective practices such as multiple SEI prevention, intervention and treatment system strategies in place with intensive collaborative efforts and strong working relationships
  - SEI Gaps:
    - Lacking comprehensive system where multiple intervention opportunities can occur (i.e.; pre-pregnancy, continuing through child's developmental milestones, parental treatment, recovery support and continuing care)

# NJ IDTA SEI GOALS

- Increase perinatal SEI screening at multiple intervention points by changing practice to improve SEI perinatal screening rate
- Leverage existing programs and practices to collaboratively increase the rate at which women who screen positive on 4Ps Plus get connected for a comprehensive SUD assessment
- Leverage existing programs and practices to collaboratively increase the rate at which women delivering SEIs and their babies and any other eligible children receive early intervention and other support services for which they are eligible and improve early intervention and other support services

# NJ WHITE PAPER (NAS)

- **White Paper on costs associated with NAS in NJ:**
  - Paper will demonstrate the cost to the State for NAS infants compared to non-NAS infants and
    - Make the case for more investment in screening and pre-natal care, leading to an increase in the number of women with opioid use disorders receiving prenatal care
    - Increased screening and access to prenatal care would also lead to an increase in birth weight of infants with NAS
  - Identify high risk areas for a potential pilot site
    - Pilot site would link birth/Medicaid data with treatment entry data and seek to increase interventions

# HOSPITAL BIRTH SURVEY

- Birth Survey developed to gain a better sense of policies, procedures and practices utilized to identify and treat SEI and their mothers
- Currently beta-tested, awaiting IRB approval
- Statewide to the 55 labor and delivery hospitals

## **Survey results will be used to:**

- Establish statewide guideline for best practice
- Identify high risk areas
- Aid in the development of cross-system models to ensure families get access to services
- Establish education needed for birthing hospitals on issues of NAS and SEI



# CHALLENGES AND OPPORTUNITIES

- Some existing policies inadvertently discourage pregnant and parenting (PPW) women from seeking care for opioid dependence or other substance use disorders
- Create collaborative agreements to facilitate seamless referrals and continuity of care from pregnancy through birth and beyond
- Determining where disparities exist in terms of adequate access to MAT
- Facilitating coordination between providers who serve PPW and those caring for their infant children
- Collecting, tracking and sharing data across State and local agencies and the collaborative partners to monitor outcomes
- NCSACW guidance with developing protocols for development of Plans of Safe Care for SEI, mothers and their families



# *Substance Use Disorder Services for Women and the Family*



**COLORADO**  
Office of Behavioral Health  
Department of Human Services

# *Two Efforts of Many*

Branding of Women's Services  
State Systems Reform Project



# Branding

Issue: Little visibility for women's SUD services outside of the funded treatment community

Solution: Statewide image for Women's SUD services

Consumer-focused

Educational

Engaging



# Components

Website

Posters

Rack cards

Pocket cards



# Characteristics

Consumer driven—messages based upon consumer feedback

Hopeful

Mother and family focused

Visually appealing

Limited verbal content

Feeling of calm, safe, warm



No wait.  
No judgment.  
Just the help  
you need.

*"The staff here, they love you and they want  
you to succeed. The more help you have,  
the more you are going to make it."  
- Sydney*

**WHAT TO EXPECT:**  
If you are pregnant or a mother with young  
children, you are our priority for treatment,  
please call.  
Treatment available where your  
children are welcome.  
Your treatment will be confidential  
and nonjudgmental.  
Medicaid/ sliding scale fees.

Find help near you,  
visit [MothersConnection.com](http://MothersConnection.com) today.  
Colorado Crisis & Support Line - 1.844.493.5ALK (5255)

# Website *Mothersconnection.com*



# *State Systems Reform Project*

Goal: Integrate principles of Family Drug Treatment Court into D&N case practice statewide



# *DANSR*

Dependency And Neglect Systems Reform

Collaboration—State Court Administrator's Office is lead agency

CDHS Child Welfare Division and Office of Behavioral Health

# *Structure*

Core Planning Team

Pilot jurisdictions

Broken out by Judicial District

Executive Oversight Committee as sponsor

Work Groups

- Data
- Child Well-Being
- Training
- Treatment
- Legal

# *Question:*

What/how should judges enter orders to support treatment participation and completion?



# *Strengths*

Willing, committed court staff

Child Welfare agencies looking for solutions at the local level

SUD treatment providers want to come to the table



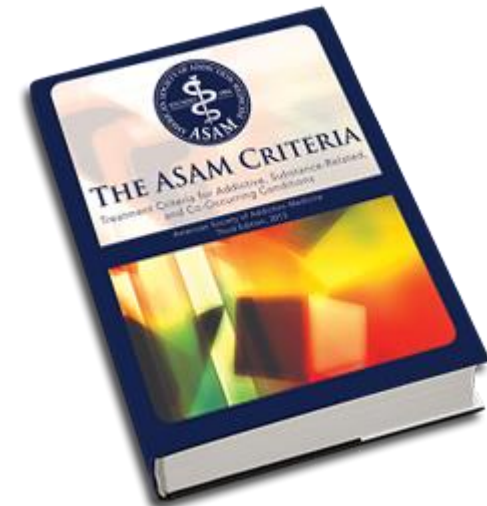
# Challenges

We don't speak the same language

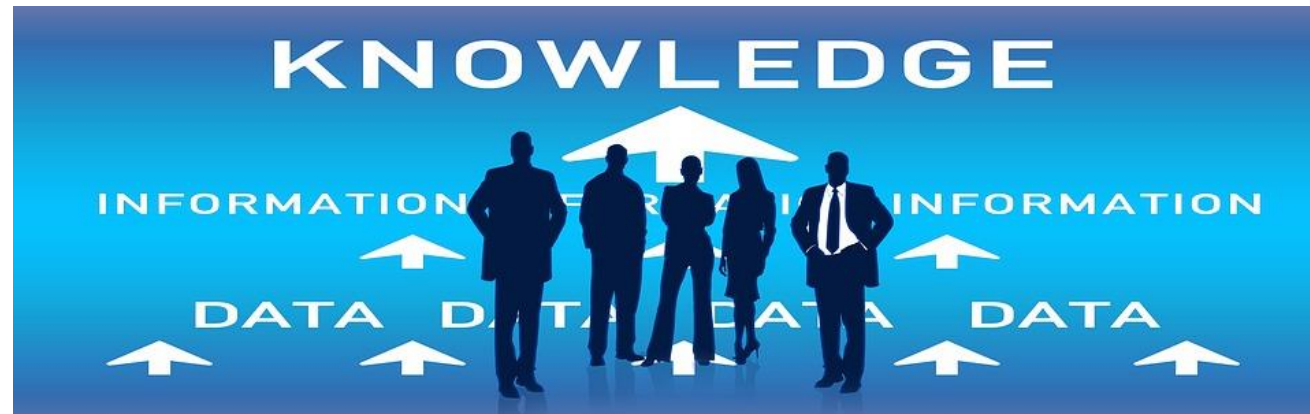
We're learning about each other's systems and fields

There is a lot to learn

Short time frame to fit in a lot of learning



DATA—what do different things mean and what should we measure?



# *Stay tuned...*

Work in progress

Relationships are central to success

We must assume best intentions

We've been here before...

We are hopeful.



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