

Hospital Policy Workgroup Notes

FEAT mtg. September 14th, 2006

Revision of goals:

1. 100% of mothers admitted to labor and delivery will receive a standard risk assessment which addresses risk factors for prenatal substance and alcohol abuse and includes a standard admission interview, review of the medical record and observation of behavior
2. 100% of newborns will receive a standard risk assessment which addresses risk factors for prenatal substance and alcohol abuse
3. 90% of newborns who have a positive neonatal risk assessment or whose mothers have a positive risk assessment will receive laboratory testing
4. 80% of the mothers who have a positive admission risk assessment or whose babies have a positive neonatal risk assessment will receive laboratory testing
5. 90% of mothers who have a positive admission risk assessment will have a social work referral regardless of drug testing results
6. 90% of newborns and/or mothers who have positive risk assessments will have a completed family assessment and developed safety plan for the baby prior to discharge

Standard Admission Interview (4 P's):

- Have you ever used drugs or alcohol during this Pregnancy?
- Have you had a problem with drugs or alcohol in the Past?
- Does your Partner have a problem with drugs or alcohol? Does anyone else who lives in the home have a problem with drugs or alcohol?
- Do you consider one of your Parents to be an addict or alcoholic?
- Ask the follow-up questions if questions 1 or 2 are positive
 - Have you ever felt (or do you feel) the need to cut down the amount you drink or use drugs?
 - Have you ever been (do you get) annoyed or angry because someone criticized your drinking or drug use?
 - Have you ever felt (or do you feel) guilty about your drinking or drug use?
 - Have you ever had a (do you ever) drink or use drugs first thing in the morning to steady your nerves or to get you going (an eye-opener)?

Do responses indicate Use, Risk of Use, No Risk? If Use or Risk of Use, indicate whether alcohol, other drugs (be specific), both, don't know. Also record the amount and timing during pregnancy if known.

Maternal Risk Factors:

- inadequate prenatal care (fewer than 3 visits)
- unexplained change in continuity of prenatal care (i.e., late change in prenatal care provider or birth hospital)
- precipitous vaginal delivery
- placental abruption
- previous HIV, hepatitis B or C
- previous child with Fetal Alcohol Syndrome or alcohol related birth defects
- previous DHS/Child Welfare involvement
- personal history of neglect/abuse, foster placement, juvenile detention or incarceration
- mental illness, e.g., PTSD, depression
- intimate partner violence
- homeless

Neonatal Risk Factors:

- precipitous vaginal delivery
- placental abruption
- neonatal seizures (in absence of obvious cause)
- unexplained jitteriness or signs suggestive of neonatal abstinence syndrome

Observation of Behavior: (observe the behavior of the mother, her partner and other family and support persons)

- Physical signs of substance abuse or withdrawal (e.g., apparent needle tracks; abundant nasal discharge not associated with allergies or a cold; marked dental caries, skin lesions or other signs of poor physical health and hygiene)
- Inappropriate behavior (e.g., disorientation, somnolence, loose associations, irritability or unfocused anger)
- Smell of alcohol or chemicals

Search for an Acronym :

- How about CROW? Conduct interview, Review medical record, and Observe the behavior of Women admitted to labor and delivery (it's certainly not a warm and fuzzy acronym and we definitely need to change it since we added observation of the behavior of others)