

Bob's Notes for July 2006 local FEAT planning meeting

Rewrite 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 history, 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 appropriate 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 appropriate 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

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?

Do you consider on of your Parents to be an addict or alcoholic?

(Need to create follow-up questions if any of the above are positive)

Maternal Risk Factors:

inadequate prenatal care (fewer than 3 visits)

premature rupture of fetal membranes leading to preterm delivery (<36 weeks)

premature labor

placental abruption (in absence of maternal hypertension)

previous STDs, HIV, hepatitis

previous child with Fetal Alcohol Syndrome or alcohol related birth defects

past history of SIDS in child

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:

premature rupture of fetal membranes leading to preterm delivery (<36 weeks)

placental abruption (in absence of maternal hypertension)

premature labor

unexplained neonatal depression

neonatal seizures (in absence of obvious cause)

unexplained jitteriness or signs suggestive of neonatal abstinence syndrome

SGA or marked IUGR (in absence of obvious cause)

Observation of Behavior:

Physical signs of substance abuse or withdrawal (e.g., apparent needle tracks, abundant nasal discharge not associated with allergies or a cold)

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)