

2018 Report to the General Assembly

Plan for Services for Substance-Exposed Infants

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Executive Summary

In November 2016, State Health Commissioner Dr. Marissa J. Levine declared the Virginia opioid addiction crisis a public health emergency. In 2017, the Governor and General Assembly directed the Secretary of Health and Human Resources to convene a workgroup to study barriers to identification and treatment of substance-exposed infants in the Commonwealth. In December 2017, the work group made recommendations in a report submitted to the General Assembly.

During the 2018 General Assembly session, the Code of Virginia (§ 32.1-73.12) was amended to identify the Virginia Department of Health (VDH) as the lead agency to develop, coordinate, and implement a plan for services for substance-exposed infants. The plan must:

1. support a trauma-informed approach to the identification and treatment of substance-exposed infants and their caregivers and include options for improving screening and identification of substance-using pregnant women
2. include the use of multidisciplinary approaches to intervention and service delivery during the prenatal period and following the birth of the substance-exposed child and referral among providers serving substance-exposed infants and their families and caregivers.

The General Assembly directed VDH to work cooperatively with the following stakeholders in developing the plan:

- Virginia Department of Social Services
- Department of Behavioral Health and Developmental Services
- community services boards and behavioral health authorities
- Local departments of health
- Virginia Chapter of the American Academy of Pediatrics
- American Congress of Obstetricians and Gynecologists--Virginia Section
- other stakeholders as may be appropriate.

VDH is required to report to the General Assembly annually regarding implementation of the plan.

Various state and local agencies, health systems, and community partners are involved in efforts to provide services and resources for substance-exposed infants and their families. However, VDH identified a lack of coordination and knowledge of these efforts and resources among partners and health systems. Many partner organizations know what is available within their respective communities but this does not transcend to resources and services external to the community. VDH conducted an environmental scan survey to capture efforts and resources currently available to pregnant and post-partum women and substance-exposed infants across the Commonwealth. The results are being analyzed and will be discussed when the taskforce convenes for the first meeting in early 2019. The task force will utilize survey results in the development of the plan for services for substance-exposed infants.

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Background

The Code of Virginia directs the Virginia Department of Health (VDH) to serve as the lead agency for the development, coordination, and implementation of a plan for services for substance-exposed infants (SEI) in the Commonwealth (see Appendix A). The bill identifies the following stakeholder organizations to work cooperatively with VDH in developing and implementing the Commonwealth's SEI plan:

- Virginia Department of Social Services (VDSS)
- Department of Behavioral Health and Developmental Services (DBHDS)
- Community Services Boards (CSBs)
- Behavioral Health Authorities
- Local departments of health
- Virginia Chapter of the American Academy of Pediatrics
- American Congress of Obstetricians and Gynecologists, Virginia Section

Participation is open to other stakeholders, as may be appropriate, such as the Virginia Neonatal Perinatal Collaborative, March of Dimes, Virginia Hospital and Healthcare Association, etc. The SEI plan must support a trauma-informed approach for the identification and treatment of SEI and their caregivers and include:

- options for improving screening and identification of substance-using pregnant women;
- use of multidisciplinary approaches to intervention and service delivery during the prenatal period and following the birth of the substance-exposed child; and
- referral among providers serving SEI and their families and caregivers.

The Appropriations Act includes support one full time employee to execute the plan (see Appendix B).

Activities

In June 2018, VDH conducted an environmental scan survey to identify current programs for women who are pregnant and have substance use disorder and infants born substance-exposed. The survey was distributed to multiple healthcare providers, hospitals, local health districts, community service boards, community stakeholders, and professional organizations working with pregnant and postpartum women and infants across Virginia (Appendix C). After taking the survey, the stakeholders were asked to forward the survey to additional healthcare providers and/or professional organizations. The main goals of the environmental scan were to provide the working group a baseline of current programs and resources, identify gaps in services and resources, and identify others who needed to participate in the survey. Survey results will inform the plan of services for SEI and their families.

The survey was open for approximately two months. There were 137 individual respondents representing 85 organizations to include 22 local health districts, 21 community service boards, 19 hospitals and 23 other entities (Appendices D and E for lists of survey respondents). The

responses are being analyzed and will be finalized by December 2018. The results will be discussed during the first task force meeting, which is planned for early 2019.

The task force will include the required organizations outlined in the legislation, along with interested individuals identified on the environmental scan, ensuring diverse geographic and organizational representation. VDH will convene the task force of 40-50 individuals to develop, coordinate and implement the SEI plan.

In addition, VDH conducted an awareness and educational campaign to key stakeholder groups to promote awareness of the new Code requirements, completion of the environmental scan, and the opportunity to participate on the taskforce. VDH shared the recent SEI-related data and evolving state infrastructure being developed. A presentation was developed and provided to the Substance Abuse Services Council (Appendix F). VDH distributed the presentation to multiple stakeholders, including the Virginia Neonatal Perinatal Collaborative's Executive Committee and the 35 local health districts between May and August 2018. In addition to the presentations, VDH held discussions with early childhood partners including Early Impact Virginia, the organization that coordinates home visiting across Virginia.

Next Steps

VDH will carry out the necessary hiring-related tasks to employ a full time coordinator to support the work of SEI plan development. The coordinator will convene the taskforce in the first quarter of 2019; review results of the environmental scan to identify gaps in services; and coordinate all future activities of the SEI taskforce. The preliminary timeline for SEI plan activities is included in Appendix G. Once established, the taskforce will develop a multi-year SEI implementation plan. As VDH continues to lead this important work in response to the requirements of HB 1157 to address the needs of SEI and their families, staff will continue efforts toward interagency collaboration in order to build a comprehensive system of care to address the medical, mental health, and social needs of families impacted by substance use disorder.

Appendix A

CHAPTER 695

An Act to amend the Code of Virginia by adding in Chapter 2 of Title 32.1 an article numbered 17, consisting of a section numbered 32.1-73.12, relating to substance-exposed infants; plan for services.

[H 1157]

Approved March 30, 2018

Be it enacted by the General Assembly of Virginia:

1. That the Code of Virginia is amended by adding in Chapter 2 of Title 32.1 an article numbered 17, consisting of a section numbered **32.1-73.12**, as follows:

Article 17.

Substance-Exposed Infants.

§ 32.1-73.12. Department to be lead agency for services for substance-exposed infants.

The Department shall serve as the lead agency with responsibility for the development, coordination, and implementation of a plan for services for substance-exposed infants in the Commonwealth. Such plan shall support a trauma-informed approach to identification and treatment of substance-exposed infants and their caregivers and shall include options for improving screening and identification of substance-using pregnant women; use of multidisciplinary approaches to intervention and service delivery during the prenatal period and following the birth of the substance-exposed child; and referral among providers serving substance-exposed infants and their families and caregivers. In carrying out its duties, the Department shall work cooperatively with the Department of Social Services, the Department of Behavioral Health and Developmental Services, community services boards and behavioral health authorities, local departments of health, the Virginia Chapter of the American Academy of Pediatrics, the American Congress of Obstetricians and Gynecologists, Virginia Section, and such other stakeholders as may be appropriate. The Department shall report annually on December 1 to the General Assembly regarding implementation of the plan.

Appendix B

2018 Budget Bill – HB 5002 Budget Amendment

Item 297 #2h

This amendment provides \$47,000 each year from the general fund for the fiscal impact of House Bill 1157, which requires the Department of Health to serve as the lead agency with responsibility for the development, coordination, and implementation of a plan for services for substance-exposed infants in the Commonwealth.

Appendix C

Environmental Scan Survey Questions

Thank you for agreeing to participate in this survey. The following questions will be used help us understand what efforts currently exists across the state related to Maternal Opioid Use Disorder (OUD) and substance-exposed infants. This survey will be used to gather baseline data in order to achieve the following goals:

- Identify and prioritize needs and gaps in services, and access for maternal and child health (MCH) populations
- Identify current capacity to address needs and gaps
- Identify and prioritize resources
- Develop implementation strategies for each MCH population and provider group
- Incorporate national standards into strategies

Please answer the following questions to the best of your ability.

1. Name
2. Title
3. Agency/Organization
4. Agency/Organization Type
5. In what city or county is your agency/organization located?
6. What localities do your agency/organization serve?
7. Does your organization/agency promote efforts for substance-exposed infants?
 - a. What current efforts exist at your organization for substance-exposed infants?
 - b. Is there certain criteria a mother/infant must meet to receive the services listed in the previous question? If so, please list them below.
 - c. Who are the partners that you work with for the efforts stated above?
 - d. Quarterly, how many substance-exposed infants does your organization serve related to the above mentioned efforts?
8. Does your organization/agency promote efforts for maternal opioid use disorder?
 - a. What current efforts exist at your organization for maternal opioid use disorder?
 - b. Is there certain criteria a mother/infant must meet to receive the services listed in the previous question? If so, please list them below.
 - c. Who are the partners that you work with for the efforts stated above?
 - d. Quarterly, how many pregnant/postpartum women (364 days after delivery) does your organization serve related to the above mentioned efforts?
9. Who else do you think should be included on this survey? Please provide names/emails below.
10. Would you be interested in being part of the working group task to develop the state-wide implementation plan in accordance with House Bill 1157?
 - a. Please include your email address.
11. If we may contact you with additional questions, please enter your contact information below.

Appendix D

Cities and Counties represented from Environmental Scan Respondents

Accomack County	Mecklenburg County
Albemarle County	Middlesex County
Alexandria City	Montgomery County
Alleghany County	Norfolk City
Arlington County	Norton City
Augusta County	Petersburg City
Charlottesville City	Pittsylvania County
Chesapeake City	Portsmouth City
Chesterfield County	Prince Edward County
Culpeper County	Prince William County
Fairfax County	Rappahannock County
Fauquier County	Richmond City
Fredericksburg City	Roanoke City
Goochland County	Smyth County
Hampton City	Spotsylvania County
Hanover County	Suffolk City
Harrisonburg City	Virginia Beach City
Henrico County	Washington County
Lexington City	Winchester City
Loudoun County	Wise County
Lynchburg City	Wythe County
Martinsville City	

Appendix E

Organizations represented from the Environmental Scan Responses	
Alexandria Department of Community and Human Services, Child Protective Services	MEDNAX, Inc.
Alexandria Department of Community and Human Services, Adult Substance Abuse Treatment	Middle Peninsula-Northern Neck Community Services Board
Alleghany Highlands Community Services	Mount Rogers Health District
American College of Obstetricians and Gynecologists	New River Health District
American Hospital Directory	New River Valley Community Services
Arlington County Public Health	Norfolk Community Services Board
Arlington County	Norton Community Hospital
Blue Ridge Behavioral Healthcare	Novant Health UVA Health System Culpeper Medical Center
Bon Secours Richmond Health System	Novant Health UVA Health System Prince William Medical Center
Bon Secours St. Mary's Hospital	Piedmont Community Services
Carilion Clinic	Piedmont Health District
Carilion New River Valley Medical Center	Pittsylvania-Danville Health Department
Centra	Planning District One Behavioral Health Services
Central Shenandoah Health District	Portsmouth Health Department
Chesterfield Community Services Board	Prince William County Community Services Board
Chesterfield Fire & Emergency Medical Service	Rappahannock Area Community Services Board
Chesterfield Health Department	Rappahannock Area Health District
Chesterfield-Colonial Heights Social Service Board	Rappahannock Rapidan Community Services
Chickahominy Health District	Richmond Behavioral Health Authority
Children's Hospital of Richmond at VCU	Richmond City Health District
Crossroads Community Services Board	Riverside Shore Memorial Hospital
Department of Behavioral Health and Developmental Services	Rockbridge Area Community Services Board
District 19 Community Services Board	Stop Child Abuse Now of Northern Virginia
Fairfax County Health Department	Sentara Martha Jefferson Hospital
Fairfax County Office for Children	Southside Health District
Fairfax-Falls Church Community Services Board	Substance Abuse Free Environment, Inc.
Goochland Powhatan Community Services	Suffolk Health Department
Hampton-Newport News Community Services Board	The Women's Hospital at Henrico Doctors' Hospital Forest Campus
Hanover County Community Services Board	University of Virginia
Harrisonburg-Rockingham Community Services Board	University of Virginia Children's Hospital
HCA Chippenham and Johnston-Willis Hospitals	Valley Community Services Board

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Henrico Area Mental Health & Developmental Services	Virginia Beach Department of Public Health
Henrico County Health Department	Valley Health, Winchester Medical Center
Hospital Corporation of America	Virginia Center for Addiction Medicine
Infant and Toddler Connection of Fairfax-Falls Church	Virginia Commonwealth University
Johnston Memorial Hospital	Virginia Commonwealth University Health, Community Memorial Hospital
Lenowisco Health District	Virginia Department of Health
Lord Fairfax	Western Tidewater Health District
Loudoun County Health Department	West Piedmont Health District
Loudoun County Mental Health, Substance Abuse & Developmental Services	

Appendix F

Presentation from Substance Abuse Service Council

Substance Abuse Services Council Update Implementation of HB1157/SB389 (2018): *Services for Substance Exposed Infants* May 30, 2018

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Maternal and Child Health Director, Title V Director
Director, Division of Child and Family Health
and
Shannon R. Pursell, MPH
Maternal and Infant Health Coordinator
Division of Child and Family Health
Virginia Department of Health



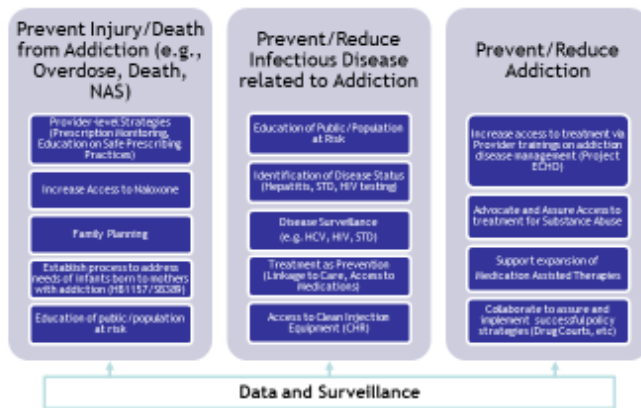
Public Health Emergency

November 21, 2016, Health Commissioner declared a *Public Health Emergency* on response to the opioid addiction crisis in the commonwealth. VDH established an Incident Management Team (IMT) to focus VHD efforts in combatting the emergency



VDH Response to Opioid Epidemic

Assure/support health in the population of people who inject drugs (PWID)



Harm Reduction

Naloxone distribution continues

- Distribution of kits to date includes
 - local health districts- 7,021
 - EMS agencies - 2,258
 - law enforcement - 568

Next phase is distribution to the CSBs

Regional trainings were held Southwest, Eastern, Central

195 REVIVE! Training sessions occurred through partnership between LHDs and CSBs

MAT

Curb the Crisis Website <http://curbthecrisis.com/>



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HB1157/SB389

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Substance Exposed Infants Plan

Legislative Requirements

- Trauma informed approach to identification and treatment of infants and their care givers
- Options for Improving screening and identification of SUD pregnant women
- Use of multi-disciplinary approaches for intervention & service delivery prenatal and postpartum
- Referral
- Required Partners: DSS, DBHDS, CSBs, BHAs, LHDs, AAP and ACOG (Virginia Chapters)

Next Steps

- Complete an environmental scan with all partners re: current efforts
 - Additional partners: VNPC, VHHA, FQHCs, Family Practice, Families, DOC, Housing etc.
- Review scan with partners to identify & prioritize needs and gaps in services & access for MCH populations
- Mobilize a statewide team to identify *current capacity* to address needs and gaps
- Identify and prioritize resources
- Develop implementation strategies for each MCH population and each provider group
- Incorporate national standards into strategies



How you can help move the plan forward...

Participate in the environmental scan -

- Assist with identification of current work
- Share information re: workflow across the agency(ies), roles and responsibilities related to MAT, OUD, NAS
- Share expertise re: referrals and expectations of *system processes*

Share evidence-based approaches and data from your area(s) of expertise

Identify who else should be included in the environmental scan

Engage in and support the development of a coordinated response

Thank you!

Coming together is a beginning;
keeping together is progress;
working together is success.

Edward Everett Hale



Appendix G

HB 1157 Plan for Services for Substance-Exposed Infants Timeline									
Process Steps	June 2018	July 2018	Aug. 2018	Sept. 2018	Oct. 2018	Nov. 2018	Dec. 2018	Jan. 2019	Feb. 2019
Create an Environmental Scan in Survey Gizmo	6/8								
Send out environmental scan survey link	6/11								
Follow-up and resend link	6/29	7/6	8/1						
Close Environmental scan Survey			8/17						
Analysis of survey done							12/14		
Complete HR-3 for FTE (full time position)					10/15				
Complete HR-8 for FTE					10/15				
Create Interview questions					10/19				
Conduct Interviews						TBD	TBD		
Finalize hiring paperwork						TBD	TBD		
Summit GA report for review					10/5				
Establish workgroup/task force						11/16			
Establish bimonthly meetings							12/14		
Hold first meeting for taskforce								TBD	TBD
					KEY:	Survey			
						Staff			
						Report			
						Task Force			