




# Substance Exposed Infants in Maine

How did we get here and where are we going?



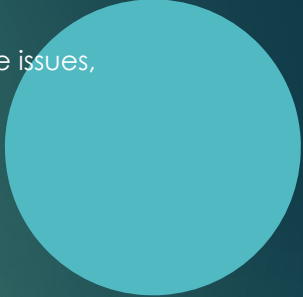
MAINE AAP CONFERENCE SEPTEMBER 2020  
STEPHEN MEISTER MD, MHSA, FAAP

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# Substance Exposed Infants in Maine

- ▶ Neither my wife nor I have a financial interest in any of the issues, devices or treatments that will be discussed today



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## Substance Exposed Infants in Maine

- ▶ Medical Director Edmund N Ervin Pediatric Center
- ▶ Past President Maine Chapter AAP
- ▶ Past Co-Chair Maine Medical Association Legislative Committee
- ▶ Past Chair Maine Child Death and Serious Injury Review Panel
- ▶ Past Maternal Child Health Medical Director State of Maine
- ▶ Past and Current Federal Grants
  - ▶ SAMHSA NCTSN Category III Evidenced Based Treatment for Trauma
  - ▶ CHIPRA "Improving Health Outcomes for Children"
  - ▶ HRSA Region I "Improving Screening and Evaluation for DD and Autism"
  - ▶ SAMHSA NCTSN Category III Mid Maine Child Trauma Center

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## Substance Exposed Infants in Maine

- ▶ **IV. C-2. Response to Infants Affected by Illegal Substance Abuse**
- ▶ **Effective 7/13/04**
- ▶ **Purpose:** The Bureau has the responsibility to respond to reports from health care providers that an infant has been born that is affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure to either legal or illegal drugs regardless of whether the infant is abused or neglected. Once a report is received the Department must assure a plan of safe care for the infant.
- ▶ No matter who does the fact finding the following determinations must be made.
  - ▶ • That the infant was affected by or addicted to one or more substances
  - ▶ • Whether the infant received appropriate medical care immediately after birth
  - ▶ • That there is or is not a safe plan of care for the infant in the immediate future.

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## Substance Exposed Infants in Maine

- ▶ **Sec. 1. 22 M.R.S.A. § 4004-B is enacted to read:**
- ▶ **§ 4004-B. Infants born affected by substance abuse or after prenatal exposure to drugs.**
- ▶ The Department shall act to protect infants born identified as being affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure (whether or not the prenatal drug exposure was to legal or illegal drugs), regardless of whether the infant is abused or neglected.

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## Substance Exposed Infants in Maine

- ▶ **Sec. 4. 22 M.R.S.A. § 4011-A, sub-§ I-A is enacted to read:**
- ▶ **I-A. Reporting of infants with prenatal exposure to drugs.** Any health care provider involved in the delivery or care of an infant whom the provider knows or has reasonable cause to suspect has been born affected by illegal substance abuse or suffering from withdrawal symptoms resulting from prenatal drug exposure (whether or not the prenatal drug exposure was to legal or illegal drugs) shall notify the Department of that condition in the infant.

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## Substance Exposed Infants in Maine

- ▶ Fall, 2008 Representative Pat Flood at a ME Chapter AAP meeting
  - ▶ What can the Legislature do to help the children of Maine?
  - ▶ Reply:
  - ▶ Find out why we are seeing a dramatic rise in narcotic affected infants
  - ▶ And
  - ▶ Do something about it!

Response: LD 1291, Resolve Establishing a Study Commission on In Utero Narcotic Drug Exposure

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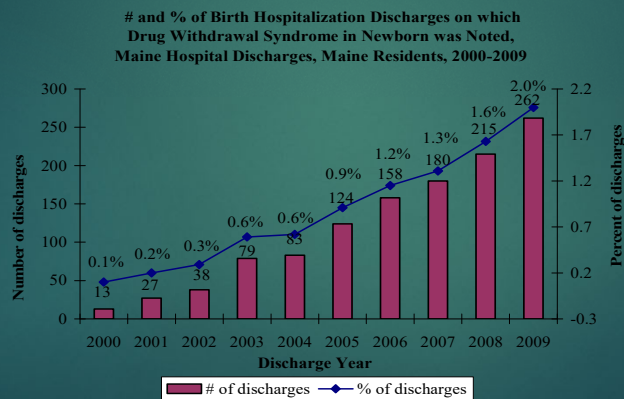
Office	Year						
	2005	2006	2007	2008	2009	2010	2011
Augusta	12	13	36	35	64	67	78
Bangor	53	67	82	82	130	153	139
Biddeford	13	7	14	11	10	28	37
Caribou	8	11	15	25	15	27	34
Central Office	2	2	4	11	46	62	49
Ellsworth	3	14	8	13	13	19	24
Houlton	4	1	2	4	3	2	3
Lewiston	20	24	27	55	51	67	109
Machias	5	8	6	6	14	16	23
Portland	26	34	39	41	53	46	66
Rockland	10	9	24	37	28	53	60
Sanford	5	4	5	6	6	6	6
Skowhegan	4	7	12	17	18	26	39
<b>Total</b>	<b>165</b>	<b>201</b>	<b>274</b>	<b>343</b>	<b>451</b>	<b>572</b>	<b>667</b>

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## Substance Exposed Infants in Maine

- ▶ LD 1291, Resolve: Establishing a Study Commission on In Utero Narcotic Drug Exposure Report January, 2010



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## Substance Exposed Infants in Maine

- ▶ April 2009 Kelley Bowden RN, Perinatal Nurse Managers of Maine
  - ▶ Hospitals are confused as to "who to report"
  - ▶ DHHS Response, who to connect with at DHHS?
- ▶ Ginny Marriner of OCFS created the NAS workgroup
  - ▶ Beginning of community response

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## Substance Exposed Infants in Maine

- ▶ The Keeping Children Safe Act of 2003 amending the Child Abuse Prevention and Treatment
- ▶ Act (PL 108-36), (CAPTA) was signed into law on June 25, 2003.
- ▶ This law requires that the Maine Department of Health and Human Services refer to the regional offices of Child Development Services (CDS) within two days a child under the age of 3 who is involved in a substantiated case of child abuse or neglect or who is identified as affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure.
- ▶ Maine Unified Special Education Regulation Birth to Age Twenty requires that the regional CDS site implement Maine's Part C as a component of IDEA (Individuals with Disabilities Education Act). Agencies providing Part C services are required to provide comprehensive, coordinated, multidisciplinary, early intervention for infants and toddlers with disabilities or developmental delays and their families.

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## Substance Exposed Infants in Maine

- ▶ In 2008, 686 children under age 3 were referred to CDS through the CAPTA system and 343 (50%) would likely have been referred due to in-utero substance exposure.
- ▶ Of the 686 referred, only 322 (47%) were evaluated as the parents were required to consent to the developmental screening.
- ▶ Of the 322 screened, 69 (21%) of these children needed an Individualized Family Service Plan and developmental services.
- ▶ The inability to gain consent from the parents for the recommended assessment may mean that we are missing many children in need of developmental services. These missed opportunities for early intervention may add to the number of children that are not ready for school at age 5.

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## Substance Exposed Infants in Maine

### ▶ Records from the NICU at the Maine Medical Center in Portland, Maine show:

▶ Year	2001	2002	2003	2004	2005	2006 (4/12mos)
▶ Cases/year	18	22	32	48	41	23
▶ Avg Charge/Case	\$29,638	\$33,478	\$22,854	\$31,269	\$29,853	\$31,209
▶ Avg LOS	36d	27.5d	22d	23d	20d	18d

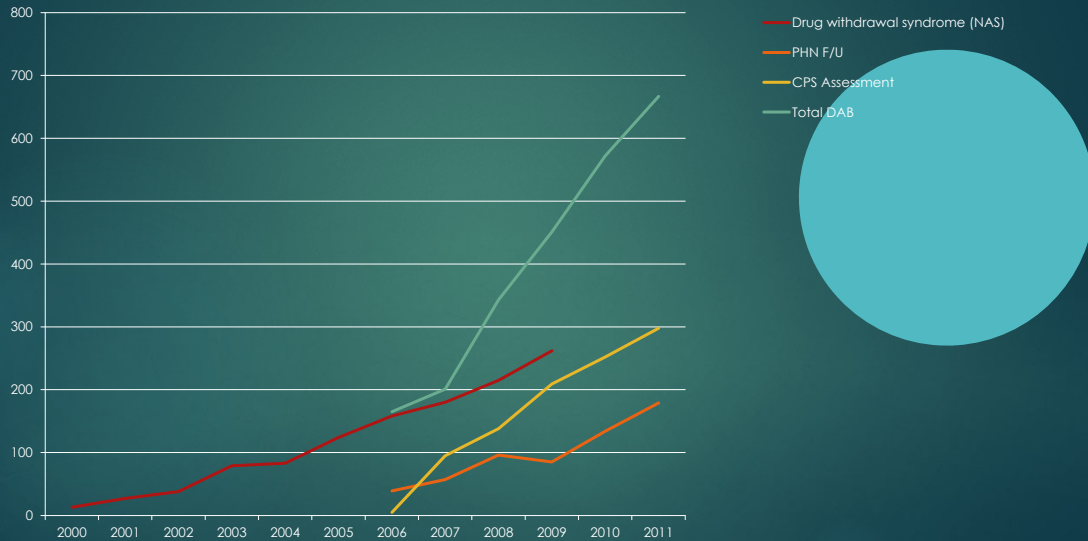
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## Substance Exposed Infants in Maine

Year	Drug withdrawal syndrome (NAS)	PHN F/U	CPS Assessment	Total DAB	Total births	% live births NAS	%live births DAB
2000	13				13603	0.1%	0.0%
2001	27				13759	0.2%	0.0%
2002	38				13558	0.3%	0.0%
2003	79				13852	0.6%	0.0%
2004	83				13910	0.6%	0.0%
2005	124	44	5	165	14112	0.9%	0.0%
2006	158	57	95	201	14213	1.1%	1.2%
2007	180	60	130	274	14177	1.3%	1.4%
2008	215	96	138	343	13672	1.6%	2.5%
2009	262	85	209	451	13470	1.9%	3.3%
2010		134	252	572	12750		4.5%
2011		179	298	667	12704		5.3%
2012	470						

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## Substance Exposed Infants in Maine



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## Substance Exposed Infants in Maine

- ▶ Project LAUNCH: A 2-Generation Approach to Care: Marjory Withers
- ▶ The Community Caring Collaborative of Washington County in partnership with the Maine
- ▶ CDC has a multi year grant to improve care for the Washington County population
- ▶ experiencing health disparities, including prenatal, maternal and infant care for those in drug treatment programs.
- ▶ In partnership with Eastern Maine Medical Center (EMMC), they developed a bridging program where pregnant women in drug treatment travel to EMMC to tour the NICU and meet the nurses and physicians that will provide their and their infants care.
- ▶ The bridging program works with the family to provide supports and services through a family informed wraparound team to increase access to services and to help parents with high need babies. The program is also available for high risk babies who are in the NICU or are affected by other risk factors. Additionally the program offers ongoing services through integrated Infant Family Support Specialists at local health centers and treatment centers when the babies return home to Washington County.

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## Substance Exposed Infants in Maine

- ▶ The Neonatal ICU at Maine Medical Center Follow-Up Program
- ▶ Dr. Brenda Medlin directed the care of the special group of infants that had withdrawal symptoms while in the NICU. Dr. Medlin provided a link to their ongoing care in the community and used the Maine CDC Public Health Nurses and/or their contract providers to deliver in-home follow-up care.
- ▶ Dr. Medlin reported that she provided care and PHN referrals for over 100 infants in the Maine Medical Center catchment area in 2009. She also reported that there were 5 narcotic treatment programs in Portland alone and many additional primary care providers available to provide replacement therapy with Subutex.

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## Substance Exposed Infants in Maine

- ▶ The University of Maine in Orono and Maine Institute for Human Genetics & Health in collaboration with Mark Brown, MD, Chief of Pediatrics at Eastern Maine Medical Center and the Acadia Hospital Narcotic Treatment Program (NTP), Marie Hayes, PhD, professor of psychology and biomedical sciences, was funded by NIH to study Maine infants with neonatal abstinence and risk of Sudden Infant Death Syndrome.
- ▶ This longitudinal program evaluates neonatal neurocognitive status using EEG at birth and 7 months; neurobehavioral status at birth, and standard assessments such as the Bayley Scales of Infant Development during the first year. The interdisciplinary program currently has 80 high risk infants and mothers.
- ▶ The goal is to develop neonatal and early infancy markers for neurodevelopmental compromise including SIDS risk.

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## Substance Exposed Infants in Maine

- ▶ 1) Statewide Problem
- ▶ 2) Costly!
- ▶ 3) Life Course Problem
  - ▶ Multiple Exposures
    - ▶ Tobacco
    - ▶ Opiates
    - ▶ Marijuana
    - ▶ Alcohol
    - ▶ Prematurity
    - ▶ Traumatic Stress/ACEs
- ▶ 4) No consensus on the best way to manage

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## Substance Exposed Infants in Maine

- ▶ Increased risk of Developmental delay due to
  - ▶ Direct toxic impact of multiple substances on the brain
  - ▶ Impact of exposure to domestic violence and ACEs
  - ▶ Impact of neglect
- ▶ Life Course
  - ▶ Increased likelihood of Motor/Speech/Cognitive delay
  - ▶ Increased arousal
    - ▶ Sleep disturbance
    - ▶ Toileting problems
    - ▶ Aggression
    - ▶ Feeding problems
  - ▶ Poor School Performance
  - ▶ Difficulty with self regulation and sustained attention

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# Substance Exposed Infants in Maine

- ▶ Response:
- ▶ 1. Snuggle ME, funded by the Maine CDC with \$25K, Amy Belisle MD in the lead
  - ▶ Negotiated agreement among the providers to use the Finnegan's score for diagnosing NAS.
- ▶ 2. Maine Enhanced Parenting Program
  - ▶ DHHS funded led by Grace Brace of OCFS
    - ▶ Intensive Outpatient Treatment of substance use
    - ▶ Triple P positive parenting program
- ▶ 3. Mainely Families Home Visiting Program
- ▶ 4. Public Health Nursing Home Visiting
- ▶ 5. Families First Federal Legislation with a focus on evidence based interventions
- ▶ 6. Attachment and Bio-behavioral Catch-up: ages 6 to 24 months, enhances a child's regulatory capability and fosters a secure attachment: Lindsey Tweed MD
- ▶ 7. DHHS MOM grant (maternal opioid misuse model) (Alaine O'Connor DNP)
  - ▶ Improve coordination and quality of care