



Date: March 1, 2024

To: Nebraska Birthing Hospitals

From: Dr. Alyssa Bish, DHHS Child and Family Services Director

RE: Infants born affected by substance use or misuse and Nebraska's response to the Comprehensive Addiction and Recovery Act (CARA)

On July 22, 2016, the Comprehensive Addiction and Recovery Act of 2016 (CARA) was signed into law. This legislation made several changes to the Child Abuse and Prevention Treatment Act (CAPTA)}, including the requirements that:

- Health care providers involved in the delivery or care of an infant born and identified as being affected by substance use or misuse (not just illegal substances) notify the child protective services system.
- States will develop policies and procedures to address the needs of newborns identified as being affected by substance use, misuse, and withdrawal symptoms resulting from prenatal drug exposure or a Fetal Alcohol Spectrum Disorder.
- A Plan of Safe Care will be developed to address the health and substance use disorder treatment needs of infants and affected family or caregivers.
- The state will report data annually to the Children's Bureau.

Nebraska's protocols to address requirements for CARA

To ensure compliance with the federal requirements, healthcare providers, involved in the delivery or care of a substance-affected infant, shall notify the child protective services system using one of the two pathways listed below. Healthcare providers are to follow these steps if an infant is considered to be affected by prenatal substance use or misuse.

1. **Report:** If child abuse and/or neglect is suspected, notify the Nebraska Child Abuse and Neglect Hotline (1-800-652-1999).
 - The DHHS Children and Family Services Specialist will request a copy of the Plan of Safe Care (described below) to support the health and treatment needs of the infant and family.
2. **Notify:** If child abuse and/or neglect is not suspected, complete the Comprehensive Addiction and Recovery Act (CARA) Notification Form, and submit it according to the directions. The Notification form is available at <https://dhhs.ne.gov/Pages/Comprehensive-Addiction-and-Recovery-Act.aspx>. This notification does not contain identifying information. The following criteria require a notification to DHHS:
 - Mother is stable and engaged in opioid medication-assisted treatment with a licensed physician.
 - Mother is being treated with opioids for chronic pain by a licensed physician.

- Mother is stable and engaged in treatment for other non-opioid substance use, including alcohol, with a licensed provider, physician and/or stable recovery program.
- Infant is at risk for Fetal Alcohol Spectrum Disorder.
- Mother is engaged in substance use or misuse, (including Marijuana) that does not rise to the level of abuse/neglect requiring a report. This is up to the physician's judgement.

Plan of Safe Care

For all infants affected by prenatal substance use or misuse, complete a Plan of Safe Care before the infant's discharge from the hospital and forward it to the infant's primary care provider.

- A Plan of Safe Care can include a discharge summary or other documentation. It must address the health and substance use disorder treatment needs of the infant and affected family or caregiver.
- A Plan of Safe Care example template is available at <http://dhhs.ne.gov/Pages/Comprehensive-Addiction-and-Recovery-Act.aspx>. The template was developed in partnership with the Nebraska Perinatal Quality Improvement Collaborative.

Email questions and/or requests for technical assistance to DHHS.CARANotification@nebraska.gov.