







General Housekeeping

 Due to the number of participants in the session mics have been muted by the presenter

 If you are experiencing any technical issues, let us know in the chat

 This training is being recorded, and will be posted to the Keep Kids Safe website







Agenda

- Introduction of Panelists
- Plan of Safe Care Legislation
- Components of Plans of Safe Care
- Role of Partner Agencies
 - DDAP
 - DOH
 - DHS (OCDEL/OCYF/OMHSAS)
- Supports for POSC
- POSC Support Grants







ROADMAP TO PLANS OF SAFE CARE

FEDERAL HHS -Requirements for State -Reporting Requirements -CAPTA

STATE DEPARTMENTS

-DOH -DDAP -DHS OMHSAS, OCYF,

OCDEL, OMAP

FAMILY FOCUSED Considering the Social Emotional

Well-being of the Whole Family MULTIDISCIPLINARY Across Health & Social Services EVIDENCE-INFORMED With Communication Among

OPIOID EMERGENCY DECLARATION





Identification and orientation of individuals attending Governor's Institute



LOCAL COMMUNITY PARTNERS



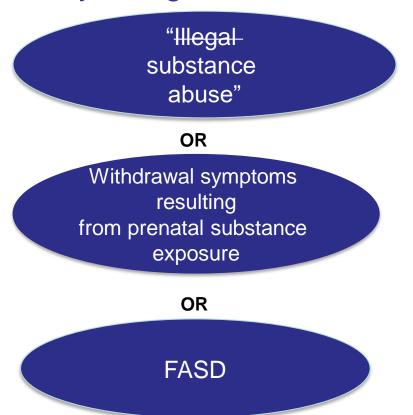






Comprehensive Addiction and Recovery Act (2016)

After 2016, the word "illegal" was removed, and family/caregivers were added to Plans of Safe Care



CARA required:

Health care providers "notify the child protective services systems"...

AND

Development of a plan of safe care for the infant and affected family member or caregiver

Effective 2016







Act 54 of 2018

Act 54 amended the PA Child Protective Services Law (CPSL) to comply with the CAPTA changes.

"Substance use"

OR

Withdrawal symptoms resulting from prenatal substance exposure

OR

FASD

Reworks CPSL's Section 6386 to shift from "mandatory reporting" to "notification"

Notification is for purpose of "assessing" a child and the child's family for a Plan of Safe Care

Requires PA DHS to collaborate with Department of Health and PA Department of Drug and Alcohol Programs on "written protocols"

Effective 2018







MINDSET SHIFT

FROM

TO

PUNITIVE

SUPPORTIVE

REPORT

NOTIFICATION

ONLY ILLEGAL —

SUBSTANCE USE

ALL SUBSTANCES

INCLUDING ALCOHOL & PRESCRIPTIONS







Plans of Safe Care are for:

- Infants (up to 1 year of age) affected by substance use or withdrawal symptoms from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder and
- Their families and/or caregivers with substance use disorders







Plans of Safe Care

A Plan of Safe Care is a Document that lists and directs services and supports to:

- Provide for safety & well-being of the infant
- Meet the substance use/ MH needs of the family/ caregiver







Effective Plans of Safe Care

- Interdisciplinary across health and social service agencies
- **Comprehensive** in their review of the physical, social-emotional, health, and safety needs of the infant and the parents or caregivers
- Family-focused as they assess and meet the needs of each family member, as well as overall family functioning and well-being
- **Timely** in their completion in the prenatal period or before the infant's discharge from the hospital







Steps to Developing Plan of Safe Care

Identify Infant & Mother

Notify ChildLine

Convene Multidisciplinary Team Develop and Implement Plan of Safe Care Supports for Infant and Mother/Caregiver/ Family







Partners in Plans of Safe Care

Department of Drug and Alcohol Programs

Partners in Plans of Safe Care

Department of Health

Department of Human Services







Pregnant Women & Women with Dependent Children

Federally Mandated Services: As per 42 U.S.C. § 300x-22(b); 42 U.S.C. § 300x-27; 45 CFR § 96.124(c) (e); and 45 CFR § 96.131) re: Pregnant Women and Women with Dependent Children (PW/WWDC), DDAP is required to allocate a dedicated amount of SAPT Block Grant funds to support pregnant and parenting women.

- Monitor SCA PW/WWDC services and spending to ensure maintenance of effort that is required by the SABG for PW/WWDC
- Provide PW/WWDC specific guidance and technical assistance to SCAs and their contracted providers

Commonwealth Mandated Services: Pennsylvania Act 65 of 1993, Sections 2123 and 2124, authorizes DDAP to establish and fund residential drug and alcohol treatment programs for PW/WWDC.

Pennsylvania's Statewide Capacity

41 DDAP Licensed PW/WWDC Residential Programs/863 Beds







DDAP Requirements

DDAP Priority Populations include Pregnant Women who inject drugs & **Pregnant Women** who use substances. DDAP's 47 SCAs & their contracted providers must:

- Screen for emergent care needs.
 - If emergent care needs are identified, make an immediate referral to the appropriate service.
- Conduct a Level of Care Assessment to determine the need for treatment.
- If treatment is indicated, refer the woman to a treatment provider immediately.
- Educate about and offer medication assisted treatment options;
- Ensure the availability of (MAT) FDA-approved medication and assist with payment for medication
- Coordination of care between therapeutic and pharmaceutical interventions is critical.
 Individuals with SUD who have a disorder for which there is an FDA-approved
 medication treatment must have access to those treatments based upon their
 individual needs and preferences.







DDAP: Counties Responsibilities

DDAP's 47 SCAs and their contracted providers must deliver services to pregnant women, women with dependent children, and women who are seeking custody of their children and must treat the family as a unit. Services include:

- Gender-specific substance use treatment and other therapeutic interventions for women which may address issues of relationships, sexual and physical abuse, and parenting, as well as childcare while the women are receiving these services;
- Family therapy, nutrition education, and education to GED level;
- Therapeutic interventions for the children in the custody of the women receiving treatment services which may address the children's developmental needs, issues of sexual and physical abuse, and neglect;
- CASE MANAGEMENT (including transportation) to ensure women and their children have access to the services provided in all items listed above.







DDAP: Counties Responsibilities Plans of Safe Care

- Screening and Assessment is a required function of all SCAs and is considered one of many functions of case management
- Screening and Assessment focuses on the individual, the case management services should address the needs of the family as a unit
- Case management must be offered to all Pregnant Women and Women with Dependent Children regardless of the entity funding treatment services
- Case Managers go to hospitals & many other agencies to do level of care assessments as well as attend planning meetings to coordinate care
- Documentation of services offered/provided as well as attempts to engage clients in services should be noted in the file
- If a client accepts case management services, a Case Management Service
 Plans should be completed and kept in the clients file along with the POSC
- Certified Recovery Specialists (CRS) are available to assist with connecting individuals and their families with gaining the skills and resources needed to initiate, maintain, and sustain long-term recovery







Department of Health (DOH)

- The mission of the Pennsylvania Department of Health (DOH) is to promote healthy behaviors, prevent injury and disease, and to assure the safe delivery of quality health care for all people in Pennsylvania.
- DOH is responsible for planning and coordinating health resources throughout the commonwealth. This includes:
 - · Licensing and regulating health care facilities;
 - Outreach, education, prevention, and treatment services on a wide variety of health topics and issues; and
 - Providing grants and subsidies to community-based groups to provide essential services to commonwealth residents.
- DOH Community Health Districts
 - Health districts
 - County and municipal health departments
 - State health centers







Department of Health (DOH)

DOH and Plans of Safe Care

Work with health care providers through external and internal partnerships to increase awareness of POSC.

 Providing education and resources to hospitals and health care providers on notification requirements for infants born affected by substances and POSC development. Neonatal Abstinence Syndrome (NAS) surveillance and reporting.

- Data collection through the Division of Newborn Screening and Genetics.
- NAS Annual Report
- Interagency collaboration through data sharing with DHS for Early Intervention.







Department of Human Services (DHS)

Office of Child Development & Early Learning (OCDEL)

- Bureau of Early Intervention Services and Family Supports (BEISFS)
- Infant Toddler Early Intervention Programs
- Family Support/Home Visiting Programs

Office of Children Youth & Families (OCYF)

- State supervised, county-administered child welfare system
- Public and Private Children and Youth Agencies

Office of Mental Health and Substance Abuse Services (OMHSAS)

- Mental Health and Substance Use Services
- County Mental Health







OCDEL Statewide Supports for Plans of Safe Care



- Partnering with other state agencies
- Partnering with the medical community
- Partnering with Early Intervention and Family Support Stakeholders







Family Support Interactive Map

EITA Portal Home Page (www.eita-pa.org)
Professionals >The Pennsylvania Family Support Resources > Interactive Map









Family Support Interactive Map

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Office of Children, Youth & Families (OCYF)

Supports for POSC

- MDWISE (Multi-disciplinary Workgroup for Infants with Substance Exposure
- Project Manager through CWRC
- Funding
- Professional Development
- Communities of Practice







MDWISE Supports

Subcommittees:

Education and Technical Assistance:

Development and dissemination of educational/ promotional materials

Policy and Practice:

Review, update, and review policies as needed







Plans of Safe Care Support Grants:

Direct funds to county child welfare agencies:

100% Federal CAPTA Funds distributed at the State level to provide for County level impact

Participants:

- •35 counties started on July 1, 2021
- Anticipate an additional 10 counties starting on January 1, 2022







Plans of Safe Care Support Grant Update:

- The 2nd round for grant funding application submission was announced on 09/30/21 for the grant period beginning 01/1/22
- Grants are for Fiscal Year (FY) 21-22 and 22-23
- Beginning FY 23-24, OCYF plans to incorporate POSC into Needs Based Program Budget (NBPB)







POSC Supports:

- Currently, supporting counties interested in the grant
- Moving forward, supporting implementation of POSC for everyone
- Example: if current work plans are not working, can support counties to adjust their plans if needed and redirect funding to new activities







Professional Development & Communities of Practice

- Survey to assess POSC team needs
- Connecting counties/ teams by interest
- Utilizing information learned from the grant process to support ALL counties

2022 Professional Development Calendar







OMHSAS Supports

- County Mental Health Agencies
- Private Mental Health Providers
- Child & Adolescent Service System Providers







Department/ Office Contact Information

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OCDEL

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OMHSAS

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Resources

Questions related to POSC? Please contact:

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For Additional Information:

Please visit the Keep Kids Safe

webpage: Keep Kids Safe PA





