Module One: Readiness-Every Event

INDIANA
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Readiness has five main elements that are listed below. Within each element are key points that need to be considered as you implement this component of the *Substance Use Disorder (SUD) Practice Bundle*. This module provides tools and resources that are designed to assist the prenatal care provider in addressing the unique needs of the pregnant or postpartum person with a substance use disorder.

Element 1: Provide education to pregnant and postpartum people related to substance use disorder (SUD), naloxone use, harm reduction strategies, and care of infants with in-utero substance exposure.
Key points include resources and supports that are aligned with the individual's culture language and literacy needs. The emphasis should be on SUD as a chronic medical condition that needs a comprehensive treatment approach. In addition, supports related to the needs of an infant prenatally exposed to substances need to be available to the pregnant or postpartum person.

Resource materials include

- A pocket card that provides a sample script for interviewing the pregnant or postpartum person, documentation of the conversation and appropriate billing codes for screening and Make Mothers and Babies Count in Indiana brief intervention activities.
  https://www.in.gov/health/mch/files/ipqic/IN-OB-Provider-Pocket-Card-rev.pdf
- ECHO series: Project ECHO (Extension for Community Healthcare Outcomes) is a movement to connect local primary care teams with inter-disciplinary specialist teams to spread knowledge and amplify local capacity to provide best practice care for complex chronic health conditions. ECHO's goal is to enable rural and traditionally underserved populations to receive high-quality care, when they need it, close to home. This low-cost, high-impact intervention is achieved by leveraging technology to connect expert mentors and multiple local primary care providers in online video-conferencing TeleECHO clinics.
  https://oudecho.iu.edu/tracks/aud/
- Two sample patient handouts orienting them to the prenatal risk assessment and quality care they will be receiving, one letter for patients with known substance use and one for the general population.
  https://www.in.gov/health/mch/files/ipqic/Patient-Orientation-Letters-Final.pdf
- A guide to additional information that identifies counseling opportunities for the patient and actions that should be taken by the provider.
  https://www.in.gov/health/mch/files/ipqic/Recomendations-for-Counseling.pdf
  https://www.in.gov/health/mch/files/ipqic/Newborn-Withdrawal-Going-Home.pdf
  https://www.in.gov/health/mch/files/ipqic/Newborn-Withdrawal-Going-Home-Spanish.pdf
  https://www.in.gov/health/mch/files/ipqic/Alcohol-Exposure-Going-Home.pdf
  https://www.in.gov/health/mch/files/ipqic/Alcohol-Exposure-Going-Home-Spanish.pdf

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- Implementation of non-pharmacologic treatment interventions for NAS, such as rooming-in, breastfeeding, skin-to-skin care, swaddling, and decreasing environmental stimuli have been shown to decrease the length of hospitalization and the length of pharmacologic treatment.
  https://www.in.gov/health/mch/files/ipqic/Non-Pharmacologic-Treatment-Protocol-rev.pdf
- Research on the importance of breastfeeding is well established. Infants who have been prenatally exposed to a substance are at-risk for short-term and long-term effects from their exposure. Breastfeeding, when appropriate, can help to mitigate potential risks and improve outcomes for both infants and their mothers.
  https://www.in.gov/health/mch/files/ipqic/breastfeeding-and-substance-use-final.pdf
  https://www.in.gov/health/mch/files/ipqic/20_Breastfeeding-Traffic-light.pdf
  https://www.in.gov/health/mch/files/ipqic/20_Breastfeeding-Traffic-light_Spanish.pdf
- Naloxone is available without a prescription in all states. No special licensure is needed to prescribe. The prescription should include two refills. Depending on the need, it can be found in multiple locations throughout Indiana.
  https://optin.in.gov/
  https://www.overdoselifeline.org/naloxone-indiana-distribution/
- Department of Child Services (DCS) has developed a letter for families that explains the process that will be used when the infant has been referred to DCS. DCS has also developed a letter that should be provided to the ongoing primary care provider informing them of the steps DCS will use to investigate the case.
  https://www.in.gov/health/mch/files/ipqic/DCS-Patient-Handout.pdf
  https://www.in.gov/health/mch/files/ipqic/DCS-Process-Overview-for-Medical-Providers-1.0.pdf

Element 2: Provide clinical and non-clinical staff education on optimal care for pregnant and postpartum people with SUD, including federal, state, and local notification guidelines for infants with in-utero substance exposure and comprehensive family care plan requirements.

Resource materials include:
- The Healthy Tomorrow Professional Guide is a digital book that can be used by professionals who work with clients and need guidance on how to:
  - Approach the topic of opioid use with pregnant or recently pregnant clients
  - Understand the needs of pregnant or recently pregnant clients with opioid use disorder
  - Make quality referrals for clients

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- o Use the Healthy Tomorrow resources to help clients meet their goals
  https://www.mcmillenhealth.org/healthy-tomorrow
- For professionals looking for addiction services:
  https://www.in.gov/fssa/addiction/
  https://secure.in.gov/apps/fssa/providersearch/home/category/as
  https://optin.in.gov/
  https://www.overdoselifeline.org/naloxone-indiana-distribution/
- The Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN) has developed a resource for treatment of pregnant and postpartum persons:
  SBAR Respectful Care for Individuals with Substance Use Disorder
- A treatment improvement protocol *Addressing Fetal Alcohol Spectrum Disorders*
  https://store.samhsa.gov/product/tip-58-addressing-fetal-alcohol-spectrum-disorders-fasd/sma13-4803

Element 3: Engage appropriate partners to assist pregnant and postpartum people and families in the development of family care plans, starting in the prenatal setting.
Family care plans are currently being piloted through the Pregnancy Promise Program and the Parkview Medical Center

- The Indiana Pregnancy Promise Program is a free, voluntary program for pregnant Medicaid members who use opioids or have used opioids in the past. The program ensures individuals' privacy and confidentiality. The Pregnancy Promise Program connects individuals to prenatal and postpartum care, other physical and mental health care, and treatment for opioid use disorder.
  https://www.in.gov/fssa/promise/
- Engaging Communities in Family Care Plans
  https://www.in.gov/health/mch/files/ipqic/Engaging-the-community.pdf
  Model Plan of Safe Care
  https://www.in.gov/health/mch/files/ipqic/Plan-of-Safe-Care-Fillable-Form.pdf

Element 4: Establish a multidisciplinary care team to provide coordinated clinical pathways for people experiencing SUDs.

- A Map of Care for pregnant and postpartum persons with SUD has been developed focusing on "no wrong door" and with identification of professionals that need to be part of a comprehensive care team.
  https://www.in.gov/health/mch/files/ipqic/Map-of-Care.pdf

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Element 5: Develop and maintain a set of referral resources and communication pathways between obstetric providers, community-based organizations, and state and public health agencies to enhance services and supports for pregnant and postpartum families for social determinants of health needs, behavioral health supports, and SUD treatment.

Health care alone will not be adequate to fully support pregnant and postpartum persons. Community resources must be a component of the treatment plan to support optimal outcomes. Resource materials include:

- For professionals looking for addiction services:
  https://www.in.gov/fssa/addiction/
  https://secure.in.gov/apps/fssa/providersearch/home/category/as
  https://optin.in.gov/
  https://www.overdoselifeline.org/naloxone-indiana-distribution/
- Indiana MOMs Helpline:
  https://www.in.gov/health/moms-helpline/
- IRHA Find Help
  https://irhahelp.indianaruralhealth.org/
- Search and connect to support. Financial assistance, food pantries, medical care, and other free or reduced-cost help starts here:
  https://www.findhelp.org/
- Additional resources for prenatal care providers and pregnant patients are posted at the link below.
  https://www.in.gov/health/mch/files/ipqic/Provider-and-Patient-Resources-rev-links.pdf