

Vermont CAPTA Requirements Related to Newborns Exposed to Substances During Pregnancy

Delivery of newborn with reported or confirmed maternal substance use during the last trimester of pregnancy

Yes ↓

Maternal substance use limited to:

- Prescribed Medications for Addiction Treatment (MAT)
- Prescribed opioids for chronic pain
- Prescribed benzodiazepines
- Marijuana

No ↙

Yes ↘

Report to DCF via call to Child Protection Hotline (1-800-649-5285)

Yes ←

Concerns for newborn safety after birth?

No ↓

The following situations meet Vermont's Newborn report acceptance criteria:

- newborn has a positive confirmed toxicology result (urine, meconium or cord) for an illegal substance or non-prescribed medication.
- newborn develops signs or symptoms of withdrawal (neonatal abstinence syndrome) as the result of exposure to an illegal substance, use of non-prescribed medications, misuse of prescribed medication, or due to undetermined exposure.
- newborn is suspected to have fetal alcohol spectrum disorder (FASD), or the pregnant individual had active alcohol use disorder during the last trimester of pregnancy.
- concern that the pregnant individual's substance use constitutes a significant threat to an infant's health or safety

Effective November 1, 2017, DCF no longer accepts reports where the sole concern is regarding marijuana use during pregnancy.

DCF will assess child safety and engage the involved caregivers in the development of a Plan of Safe Care.

1. Complete Plan of Safe Care with involved caregivers prior to hospital discharge and send to infant's PCP.
2. Complete de-identified CAPTA notification.

The Vermont Plan of Safe Care, CAPTA notification form, Family Handout, and Frequently Asked Questions can be found on the DCF FSD website: <https://dcf.vermont.gov/fsd/partners/POSC>