
	Approved By:  (signature) Manuel J. Jimenez, Jr., MA, MFT, Behavioral Health Care Services Director Date: <u>6/30/14</u>
POLICY: Perinatal Services for Women Requiring Substance Use Disorder Treatment AUTHOR: Julie Mills, Diana Cunningham, Office Of Management Services Reviewed by Executive Committee and recommended for approval by BHCS Director: Date: <u>6/30/14</u> initials: <u>JM</u>	Date Revised: _____ Policy No.: _____


POLICY:

It is the policy of Alameda County Behavioral Health Care Services (ACBHCS) to provide Perinatal treatment services for pregnant and/or parenting substance abusing women that ensures the protocols and requirements of the NNA Contract Exhibit C, section B-9 regarding SAPT Block Grant Perinatal Set-Aside Funds and/or Perinatal State General Funds (45 CFR 96.131) are met.

PROCEDURE:

1. When providers assess women for treatment of their substance use disorders (SUD), women will be given priority for treatment in the following order: (1) Pregnant injecting drug users; (2) Pregnant substance abusers; (3) Parenting injecting drug users; and (4) Parenting substance users.
2. Women who may qualify for this preferential admission are made aware of it via information distributed to Alameda County Social Services, local health care providers who serve pregnant and parenting women, criminal justice agencies and their treatment partners, including the MOMS program at Santa Rita Jail,
3. Women who have been assessed and found appropriate for Perinatal AOD treatment will receive the following services:
 - a. Clients are referred for medical treatment including pediatric care and immunizations for their children. Pregnant women are referred to hospitals and clinics that offer prenatal care including Highland Hospital, Alta Bates and Summit Medical Centers, Children's Hospital, Lifelong Clinic and Healthy Oakland clinic depending on which program the client is in.
 - b. Staff assist clients in obtaining child care services when necessary.
 - c. Staff coordinates presentation of infant CPR and car seat safety, local rape crisis, domestic violence, home safety, HIV/AIDS education, and the workforce center; incorporate an 8 week parenting group as a focus for recovering women; and refer participants to community providers to address sexual assault, domestic violence, mental health, marriage and family counseling, parenting issues for themselves and their children.
 - d. Developmental, sexual and physical abuse of children is addressed by referring women and their children to ACBHCS Children's Mental Health. These issues are also incorporated into groups which address parenting, co-dependency, communication, and self-esteem.
 - e. Transportation from jail to treatment is provided by and ACBHCS contractor.

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- f. Transportation to other services is provided by agency van, bus tickets, taxi vouchers, and ambulance when necessary.
- 4. Providers will publicize their programs and the fact that pregnant women are given preference. Outreach should include public service announcements, print media, social media, as well as health care and social service providers.

When a provider does not have the capacity to admit a pregnant woman due to lack of space or inability to provide the necessary services, the provider must refer the woman to another provider that has the capacity. If no provider has the capacity, the provider must provide interim services which include referral to prenatal care within 48 hours of seeking treatment.

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