

| 1. | Но | spital Name: [drop down list of all hospitals] |
|----|------|---|
| | | |
| | | |
| 2 | \A/I | at is the highest level of newborn nursery care at your hospital? |
| ۷. | | evel I |
| | | evel II |
| | | evel III |
| | | |
| | | |
| 3. | | confident are you in your hospital's effectiveness at identifying and |
| | | naging Substance Exposed Infants (SEIs)? |
| | | Not at all |
| | | Somewhat |
| | | Moderately |
| | | Very |
| | | Extremely |
| | | |
| 4. | | t data does your hospital collect regarding Neonatal Abstinence drome (NAS)? Please check all that apply: |
| | | Days spent in NICU |
| | | Pharmacologic interventions (e.g. dosage) |
| | | Developmental statistics (e.g. Bayley Results) |
| | | Discharge placement |
| | | Types of drugs of exposure |
| | | Other, please specify: |
| | | None |
| | | Don't know |



| 5. | Ho | w does your hospital define "SEI"? Please check all that apply: | | | |
|----|---|---|--|--|--|
| | | Positive infant test for illicit substances | | | |
| | | Positive maternal test for illicit substances | | | |
| | | Positive infant test or symptomology for alcohol exposure | | | |
| | | Positive maternal test for alcohol | | | |
| | | Positive infant test for prescribed medication for opioid use disorders | | | |
| | | (e.g., methadone or buprenorphine) | | | |
| | | Positive maternal test or self-report for prescribed medication for opioid | | | |
| | | use disorders (e.g., methadone or buprenorphine) | | | |
| | | Positive infant test for prescribed medications other than those for opioid use disorders | | | |
| | | Positive maternal test for prescribed medications other than those for opioid use disorders | | | |
| | | Maternal self-report of substance use during pregnancy (any trimester) | | | |
| | | Maternal self-report of substance use during last trimester of pregnancy | | | |
| | | Infant presents with symptoms consistent with substance exposure | | | |
| | | (i.e., NAS) | | | |
| | | Other, please specify: | | | |
| | | We do not define substance exposed infants | | | |
| | | Don't know | | | |
| 6. | Which standardized tools does your hospital use to assess infants with NAS ☐ Finnegan ☐ Modified Finnegan ☐ Lipsitz Neonatal Drug-Withdrawal Scoring System ☐ Other, please specify: ☐ None ☐ Don't know | | | | |
| 7. | When pharmacological management of NAS is indicated, which therapies does your hospital utilize? Please check all that apply: | | | | |
| | | Morphine | | | |
| | ☐ Methadone | | | | |
| | □ Phenobarbital | | | | |
| | ☐ Clonidine | | | | |
| | □ Other, please specify: | | | | |
| | □ None | | | | |
| | | Don't know | | | |



| 8. | How frequently are pharmacological interventions utilized as a treatment for NAS at your hospital? | | |
|-----|--|--|--|
| | □ Never | | |
| | □ Rarely | | |
| | ☐ Sometimes | | |
| | □ Often | | |
| | □ Always | | |
| | □ Don't know | | |
| 9. | What non-pharmacological care does your hospital provide to infants with NAS? Please check all that apply: | | |
| | ☐ Rooming in with mother | | |
| | ☐ Skin-to-skin contact encouraged | | |
| | □ Decreased stimulation environment | | |
| | ☐ Mother is encouraged to breastfeed (when not contraindicated) | | |
| | □ Infant swaddling□ Infant feeding is frequent, on demand & small volume | | |
| | ☐ Cuddlers | | |
| | □ Other, please specify: | | |
| | □ None | | |
| | □ Don't know | | |
| 10. | How frequently are non-pharmacological interventions utilized as a treatment for NAS at your hospital? | | |
| | □ Never | | |
| | □ Rarely | | |
| | ☐ Sometimes | | |
| | ☐ Often | | |
| | □ Always | | |
| | □ Don't know | | |
| | | | |



| 11. Which of the following does your hospital staff routinely educate mothers/caregivers of SEIs about? Please check all that apply: | | |
|---|--|--|
| | Placing infants on their back to sleep | |
| | Using a firm sleep surface for infants | |
| | Keeping soft objects and loose bedding out of crib | |
| | Hazards of bed sharing | |
| | Risk to infant of second-hand smoke | |
| | Risk to infant of alcohol use by other household members | |
| | Risk to infant of illicit drug use by other household members | |
| | Risk to infant of inappropriate use of prescription medication by other household members | |
| | Other, please specify: | |
| |] None | |
| | Don't know | |
| th | hat percentage of your hospital staff do you think are familiar with e federal Child Abuse Prevention and Treatment Act (CAPTA) quirement for notifying the proper authorities about SEIs? | |
| | 0-25% | |
| | 26-50% | |
| | 51-75% | |
| | 76-100% | |
| | hich of the following best describes your hospital's policy or protocol for otifying the proper authorities of SEIs? | |
| | Authorities are to be notified in all cases | |
| | Authorities are to be notified only when safety is a concern | |
| | Other, please specify: | |
| | There is no existing policy or protocol for notification of authorities | |
| | Don't know | |



| 14. What percentage of your hospital staff working with newborns do you think are familiar with the CAPTA requirement that calls for the development of a Plan of Safe Care for an infant with NAS? |
|---|
| □ 0-25% |
| □ 26-50% |
| □ 51-75% |
| □ 76-100% |
| 15. Which of the following best describes your hospital's policy or protocol for the development of a Plan of Safe Care for an infant with NAS? |
| ☐ A plan is to be developed for all cases |
| ☐ A plan is to be developed only when safety is a concern |
| □ Other, please specify: |
| ☐ There is no existing policy or protocol for developing a Plan of Safe Care |
| □ Don't know |
| 16.What elements are included in your hospital discharge plans for an infant with NAS? Please check all that apply: |
| ☐ Referral to early intervention services |
| ☐ Referral to home visiting services |
| ☐ Referral to a pediatrician experienced in working with SEIs |
| ☐ Referral to a high-risk infant follow-up clinic |
| ☐ Referral to a developmental assessment clinic |
| ☐ Referral to other specialty clinic(s), please specify: |
| ☐ Other, please specify: |
| □ None |
| □ Don't know |



| mana | service linkages and follow-ups do qualified staff (social worker, case ger, nurse, or other qualified individual) at your hospital provide to ess an SEI's needs? Please check all that apply: |
|------|---|
| | Qualified staff provide warm handoff for mother/caregiver to referred services (i.e., direct person-to-person link with service provider) |
| | Qualified staff follow up to ensure that mother/caregiver has engaged infant in services |
| | If mother/caregiver has not engaged infant in services, staff attempt to reengage or refer to a different program |
| | If mother/caregiver has not engaged infant in services, staff reassesses need for child welfare involvement and/or report of child neglect or abuse |
| | Qualified staff only provide referrals to services, they do not provide follow-up |
| | Other, please specify: |
| | None |
| | Don't know |
| | are your hospital's criteria for the referral of an SEI to early vention services (EIS)? Please check all that apply: |
| | The infant displays signs of NAS |
| | The infant spent time in the Neonatal Intensive Care Unit (NICU) |
| | The infant tests positive for substance exposure |
| | The mother tests positive for substance use during pregnancy |
| | The mother tests positive for substance use at delivery |
| | The infant shows signs of Fetal Alcohol Spectrum Disorder |
| | Other, please specify: |
| | This hospital does not refer to EIS or provide mothers/caregivers with EIS contact information [GO TO QUESTION 20] |
| | Don't know |



| 19. | 19. Describe your hospital's protocol or process for referring SEIs, including those who experience NAS, to EIS. Please check all that apply: | | | | |
|-----|---|---|--|--|--|
| | ☐ Qualified staff provide the mother/caregiver with an EIS referral | | | | |
| | 1 | □ Qualified staff provide a warm handoff to EIS | | | |
| | Qualified staff follow up with EIS to ensure the mother/caregiver has engaged the infant in the program | | | | |
| | Qualified staff follow up with the mother/caregiver if they did not engage the infant in EIS | | | | |
| | ☐ Mother/caregiver are provided with EIS contact information | | | | |
| | \square EIS referral is automatic when an infant is in the NICU | | | | |
| | | □ Other, please specify: | | | |
| | | □ Don't know | | | |
| 20. | | which criteria are infants tested for substance exposure at delivery at your spital? Please check all that apply: | | | |
| | | Infants are universally tested | | | |
| | | Mother suspected to have used during this pregnancy | | | |
| | | Mother suspected/known to have used during prior pregnancies | | | |
| | | Mother screened for positive use | | | |
| | | Mother tested for positive use | | | |
| | | Infant displayed symptoms of withdrawal or other medical signs Other, please specify: | | | |
| | | There is no specific protocol on who is tested | | | |
| | | Don't know | | | |
| 21. | | nat methods are used at your hospital to test infants for substance posure? Please check all that apply: | | | |
| | | Meconium | | | |
| | | Cord test | | | |
| | | Blood test | | | |
| | | Urine toxicology | | | |
| | | Other, please specify: | | | |
| | | None | | | |
| | | Don't know | | | |



| 22 | when i | nfant is suspected or known to have been substance exposed, how and s this information conveyed from your hospital staff to the infant's ient pediatric primary care provider (PPCP)? Please check all that apply: |
|-----|------------------|---|
| | | Qualified staff work with the mother/caregiver to find and refer the infant to a PPCP, reporting the substance exposure to him/her |
| | | Qualified staff work with the mother/caregiver to find and refer the infant to a PPCP, but do not report the substance exposure to him/her |
| | | Information on substance exposure is always included in documentation shared with the PPCP |
| | | Information on substance exposure is always included in documentation shared with the PPCP, only when requested |
| | | The mother/caregiver is advised to discuss the substance exposure with their PPCP |
| | | Other, please specify: |
| | | This information is not routinely shared |
| | | Don't know |
| 23. | further ☐ Never | - |
| | □ Rarel | |
| | ☐ Some | |
| | | |
| | □ Alway | 75 |
| 24. | the care | Comments: In the space below, please feel free to share other aspects about of substance exposed infants (SEIs) and their mothers you think are nt for us to understand as we think about how best to support efforts out New Jersey: |
| | | |

Thank you for taking time to complete this survey.