

ABOUT THE PROJECT

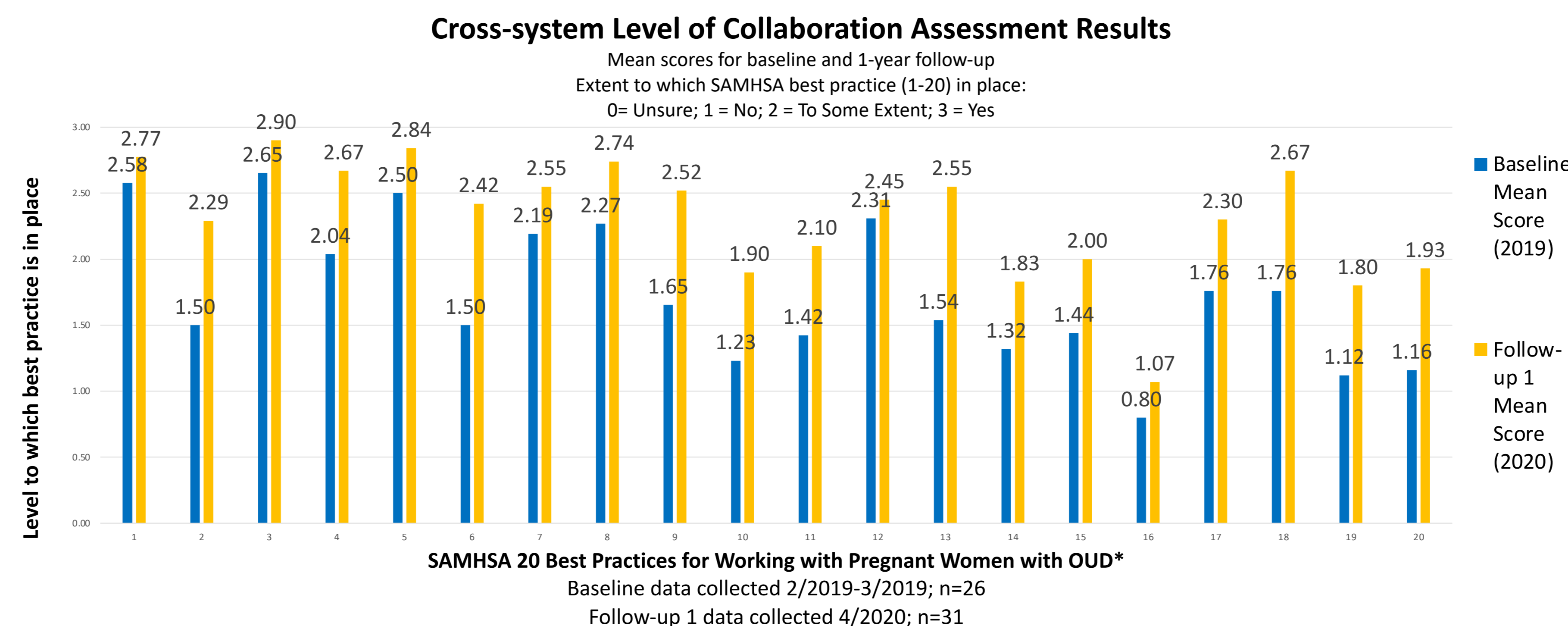
- The Substance Use Network (SUN) developed a compassionate **cross-sector collaborative system of care** that uses **best practices** to support the health, safety, well-being and recovery of **pregnant patients with a substance use disorder (SUD)**, their infants, and families.
- The mother-baby dyad presents an **opportune time for intervention** due to an increased motivator for behavior change and the ability to begin services even before the child is born (SAMHSA, 2016)*.
- SUN established a **governance structure** across sectors to address system-level barriers, disparate patient encounter practices, restrictive admitting procedures, superficial application of community input, and data-sharing limitations.
- Partners meet monthly to review each participant's **medical condition and social determinants of health** impacting their overall recovery.
- Barriers** identified in the monthly care coordination team meeting are then **systematically addressed** with steering and oversight committees.

BACKGROUND

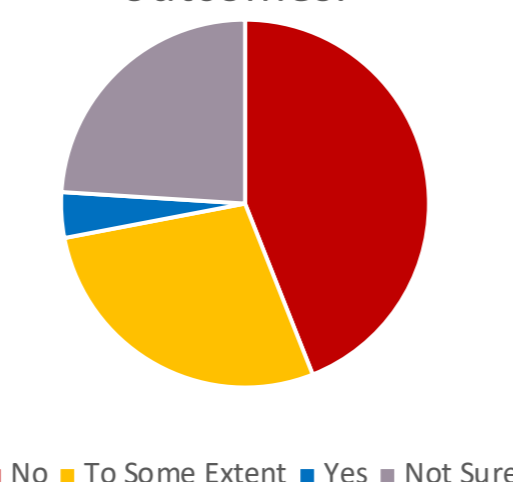
- Use of **alcohol, illicit drugs**, and other psychoactive substances during pregnancy leads to multiple **health problems** for both mother and child, including miscarriage, prematurity, physical malformations, and neurological damage. Long-term effects include growth problems, cognitive functioning issues, and predisposition to own drug use later in life*.
- Fear, stigma, and systemic barriers to care**, however, cause pregnant people with a substance use disorder to experience **health inequities**.
- In the past, individual sectors aimed to provide care to pregnant people engaging in substance use with **limited collaboration** and conflicting directives and priorities, **resulting in sub-optimal care** and results.

DATA STORY

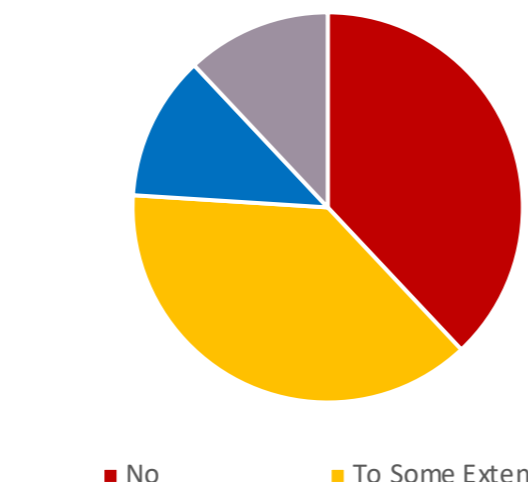
- A **SAMHSA framework** was used to facilitate and measure provider collaboration and systems alignment.
- Data were collected from members in five primary systems.
- Data represented the **twenty best practices** associated with improved collaboration in the care of mothers with an opioid use disorder (OUD).
- Baseline data was used to identify areas of strength, opportunities for improvement, priority objectives, and a shared vision.
- Quantitative assessment data from the one-year follow-up demonstrated an **increase in collaboration** and use of best practices across all 20 domains.
- Case studies** from providers and patients participating in the SUN collaborative **support the quantitative findings**.



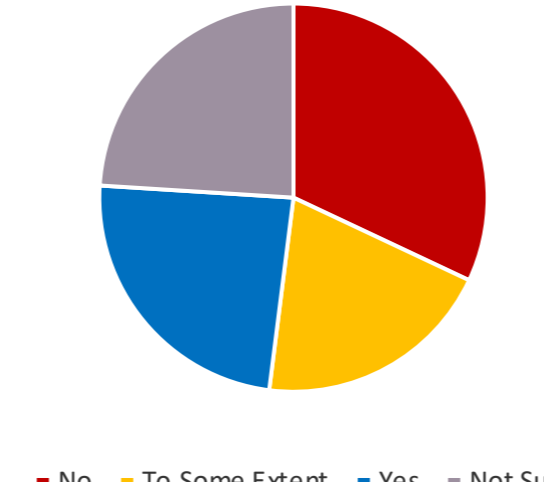
Opportunity #1:
Data is tracked and shared between systems to monitor outcomes.



Opportunity #2:
A formalized system of care coordination between systems is in place.



Opportunity #3:
Priority and preferred access* to substance use treatment and MAT for pregnant women is enforced. Standards.



31 agency partners (respondents) completed the assessment:

- 3% Family Dependency Court
- 3% Mother Medical Provider
- 6% Public Health
- 6% Infant Medical Provider
- 13% Child Welfare
- 32% SUD/MAT Treatment
- 35% Other: *Hospital System, Peer Support, Community Health, Family Support Services, Offender Supervision, Insurance Company, MCO*

CONCLUSIONS

- Cross-sector assessments can be successfully used to identify strengths and develop priority outcomes leading to **improvements in collaboration** and use of best practices.
- Using a collaborative, comprehensive approach is an **effective tool in creating sustainable system-level changes** to increase access to care, coordination across sectors, and improved maternal/child outcomes.
- SUN's approach focusing on mothers with OUD postulates that the subgroup of substance users who experiences the most stigma and health disparities may very well be the key to making the most impact on the overall opioid epidemic.

FUTURE DIRECTIONS

The SUN project will continue to work collaboratively with partners to coordinate the care of mothers with SUD across sectors and collect data to inform and measure the impact of its work on improving the use of best practices.

Acknowledgements

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References

*Substance Abuse and Mental Health Services Administration. *A Collaborative Approach to the Treatment of Pregnant Women with Opioid Use Disorders*. HHS Publication No. (SMA) 16-4978. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2016. Available at: <http://store.samhsa.gov/>.

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