Fast Facts: Federal and State Legislation

The Child Abuse Prevention Treatment Act (CAPTA) is the United States’ foremost legislation addressing child abuse and neglect. CAPTA has been amended several times; the most relevant recent changes regarding Plans of Safe Care were made through the Comprehensive Addiction and Recovery Act (CARA) in 2016. Through CARA, requirements were added to emphasize that plans of safe care address the needs of infants who are identified as affected by substance abuse, experience withdrawal symptoms, or have Fetal Alcohol Spectrum Disorders (FASD).

Changes to federal law by CARA include:

- Removes the term “illegal” in regard to substance abuse;
- Requires that Plans of Safe Care address the needs of both the infant and the affected family or caregiver;
- Specifies that data on affected infants and Plans of Safe Care be reported by states to the maximum extent practicable. Such data includes:
  - The number of infants identified as being affected by substance abuse, withdrawal symptoms resulting from prenatal drug exposure, or FASD;
  - The number of infants for whom a plan of safe care was developed; and
  - The number of infants for whom referrals were made for appropriate services— including services for the affected family or caregiver.
- Requires that states develop and implement monitoring systems regarding the implementation of such plans to determine whether and in what manner local entities are providing, in accordance with state requirements, referrals to and delivery of appropriate services for the infant and affected family or caregiver.

On June 28, 2018, Governor Tom Wolf signed Pennsylvania’s Act 54 of 2018 to meet CAPTA requirements.

Pennsylvania’s Act 54 of 2018 requires:

- Mandatory notification to DHS when a medical provider, who is involved in the delivery or care of a child under one year of age, has determined based on standards of professional practice that the child was born affected by substance use or withdrawal symptoms resulting from prenatal drug exposure or Fetal Alcohol Spectrum Disorder.
- The development of “interagency protocols” by the Pennsylvania Departments of Drug and Alcohol Programs (DDAP), Health (DOH) and Human Services (DHS) to support local multidisciplinary teams (MDT) that will identify, assess and develop a Plan of Safe Care for infants born affected by substance use or withdrawal symptoms resulting from prenatal drug exposure or FASD.

This is a notable shift from the previous law which limited notification to DHS to only those cases including illegal substance use and included an exception to reporting if the pregnant woman was receiving treatment for a substance use disorder. These changes will have significant impact on practice; the requirements regarding notification of infants born affected by substance use go beyond the use of opioids and apply to all infants born and identified as affected by substance use, whether legal or illegal substances.