



State & Territory CCDF Administrators Meeting

July 30–August 1, 2019 • Hyatt Regency Crystal City • Arlington, Virginia

Opportunities for Supporting Populations Impacted by Opioid Misuse and Substance Use Disorders

Mihn Le, Office of Child Care

Maria Pestalardo, Office of Child Care, Region V

Jeanne VanOrsdal and Ronna Schaffer, Infant/Toddler Specialists,
Child Care State Capacity Building Center

Session Objectives

- ◆ Increase awareness of the opioid and substance misuse public health crisis
- ◆ Review the Child Care and Development Fund (CCDF) information memorandum policy flexibilities
- ◆ Explore policy-to-practice opportunities
- ◆ Identify effective State and Territory Lead Agency strategies

Agenda

- ◆ Setting the stage
- ◆ Overview of information memorandum (IM) *Child Care and Development Fund (CCDF) Policy Opportunities for Supporting Populations Impacted by Opioid Misuse and Substance Use Disorders*
- ◆ Region V perspective
- ◆ State and Territory Lead Agencies: policy to practice
- ◆ Table conversation
 - Eligibility
 - Funding, grants, and contracts
 - Training and quality
 - Consumer education
 - Coordination of services
- ◆ Wrapping it up

Setting the Stage

- ◆ From 1999 to 2017, more than 700,000 people have died from a drug overdose.
- ◆ Around 68 percent of the more than 70,200 drug overdose deaths in 2017 involved an opioid.
- ◆ In 2017, the number of overdose deaths involving opioids (including prescription opioids and illegal opioids like heroin and illicitly manufactured fentanyl) was 6 times higher than in 1999.

Excerpted from U.S. Centers for Disease Control and Prevention. (2018). Understanding the epidemic [Web page]. Retrieved June 18, 2019, from <https://www.cdc.gov/drugoverdose/epidemic/index.html>

THE OPIOID EPIDEMIC BY THE NUMBERS



130+

People died every day from
opioid-related drug overdoses³
(estimated)



11.4 m

People misused
prescription opioids¹



47,600

People died from
overdosing on opioids²



2.1 million

People had an opioid use
disorder¹



81,000

People used heroin
for the first time¹



886,000

People used heroin¹



2 million

People misused prescription
opioids for the first time¹



15,482

Deaths attributed to
overdosing on heroin²



28,466

Deaths attributed to
overdosing on synthetic
opioids other than methadone²

Source: U.S. Department of Health and Human Services. (n.d.). What is the U.S. opioid epidemic? [Web page]. Retrieved July 23, 2019, from <https://www.hhs.gov/opioids/about-the-epidemic/>

What We Know about the Opioid Crisis

Roughly 21 percent to 29 percent of patients prescribed opioids for chronic pain misuse them.



Between 8 percent and 12 percent develop an opioid use disorder.

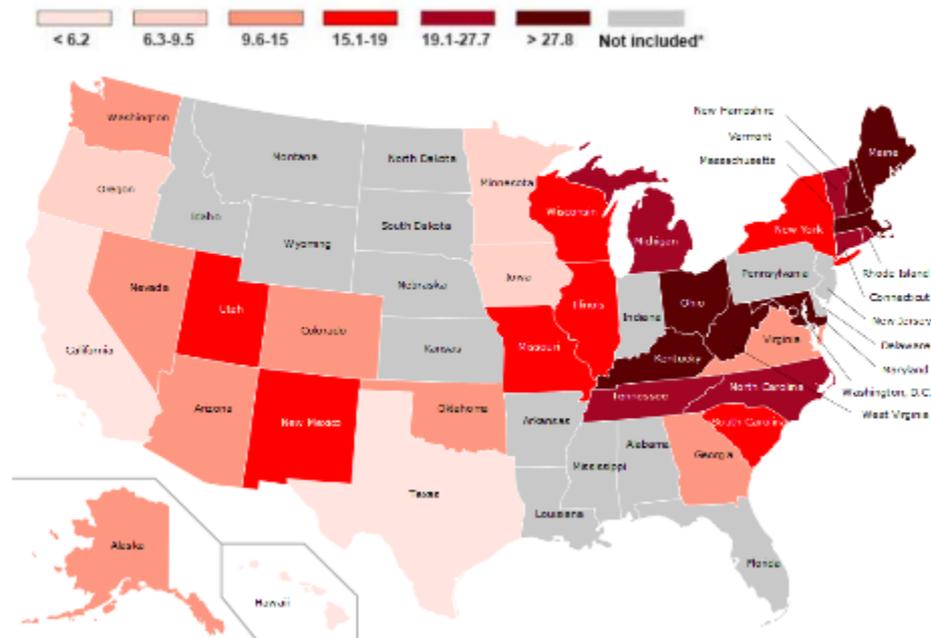
Approximately 80 percent of people who use heroin first misused prescription opioids.

Source: National Institute on Drug Abuse, National Institutes of Health, U.S. Department of Health and Human Services. (2018). Opioid overdose crisis [Web page]. Retrieved April 11, 2018, from <https://www.drugabuse.gov/drugs-abuse/opioids/opioid-overdose-crisis>

Opioid-Related Overdose Death Rates

Revised May 2019

2017 Opioid-Involved Overdose Death Rates (per 100,000 people) ¹



Source: National Institute on Drug Abuse, National Institutes of Health, U.S. Department of Health and Human Services. (2019). Opioid summaries by state [Web page]. Retrieved July 23, 2019, from

<https://www.drugabuse.gov/drugs-abuse/opioids/opioid-summaries-by-state>

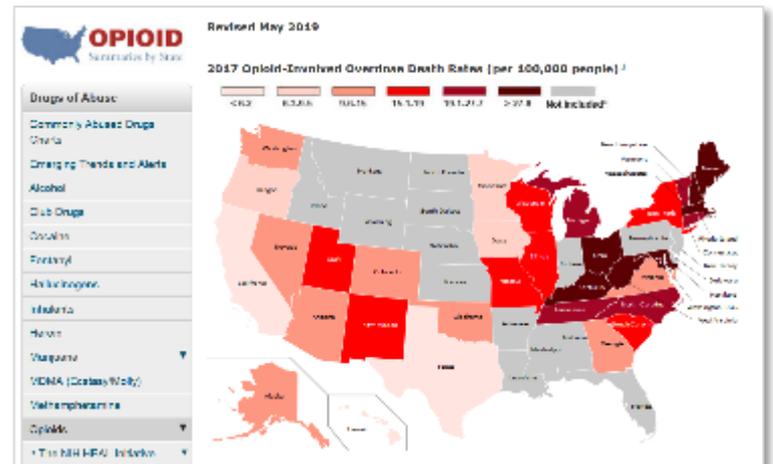
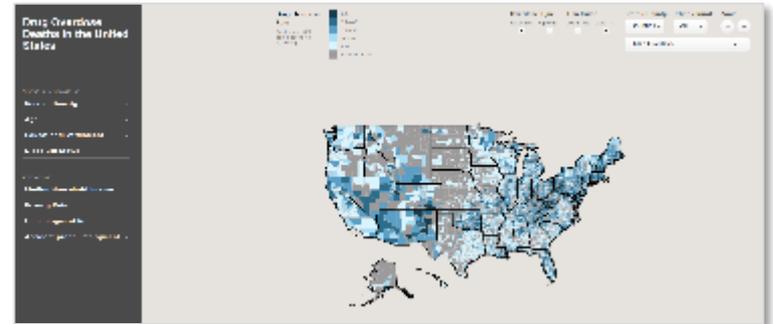
*Office of Child Care



Information at the State and County Levels

- ◆ National Opioid Misuse Community Assessment tool from NORC at the University of Chicago
 - <https://opioidmisusetool.norc.org/>

- ◆ Opioid Summaries from the National Institute on Drug Abuse
 - <https://www.drugabuse.gov/drugs-abuse/opioids/opioid-summaries-by-state>



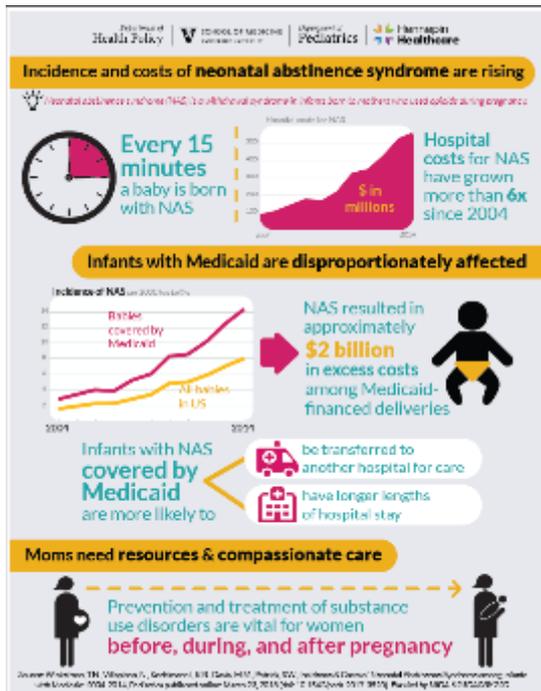
Neonatal Abstinence Syndrome (NAS)

- ◆ Neonatal abstinence syndrome (NAS) is a group of conditions that an infant experiences when withdrawing from exposure to substance.
- ◆ The number of babies born in the U.S. with a drug withdrawal symptom increased 383% during 2000-2012.
- ◆ The severity of signs and symptoms are impacted by multiple factors.

Excerpted from: Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report, Incidence of Neonatal Abstinence Syndrome, [Web page]. Retrieved July 25, 2019, from <https://www.cdc.gov/mmwr/volumes/65/wr/mm6531a2.htm>.

Source: National Institute on Drug Abuse, New Studies Clarify Risk Factors for Neonatal Abstinence Syndrome. Retrieved, July 25, 2019, from <https://www.drugabuse.gov/news-events/nida-notes/2019/1/new-studies-clarify-risk-factors-neonatal-abstinence-syndrome>

Neonatal Abstinence Syndrome (NAS)



- ◆ Every **15 minutes**, a baby is born suffering from NAS.
- ◆ **Five times** as many babies were born with NAS in 2009 as in 2000.
- ◆ The average hospital stay in 2012 for infants exposed to substances was **16.9 days**, compared to an average of 2.1 days for an infant not exposed to drugs.

Source: Center for Child Health Policy, Vanderbilt University Medical Center. (n.d.). [Web page showing NAS infographic]. Retrieved from <https://www.vumc.org/childhealthpolicy/nasinfo/graphicfullsize>

Winkelman, T.N., Villapiano, N., Kozhimannil, K. B., Davis, M. M., & Patrick, S. W. (2018). Incidence and costs of neonatal abstinence syndrome among infants with Medicaid: 2004–2014. *Pediatrics*, 141(3), 1–8. Retrieved from <https://pediatrics.aappublications.org/content/141/4/e20173520>

Symptoms of Neonatal Abstinence Syndrome (NAS)

- ◆ Body shakes (tremors), seizures (convulsions), overactive reflexes (twitching), and tight muscle tone
- ◆ Fussiness, excessive crying, or having a high-pitched cry
- ◆ Poor feeding or sucking or slow weight gain
- ◆ Breathing problems, including breathing really fast
- ◆ Fever, sweating or blotchy skin
- ◆ Trouble sleeping and lots of yawning
- ◆ Diarrhea or throwing up
- ◆ Stuffy nose or sneezing

Excerpted from March of Dimes. (2017). Neonatal abstinence syndrome [Web page]. Retrieved April 11, 2018, from [https://www.marchofdimes.org/complications/neonatal-abstinence-syndrome-\(nas\).aspx](https://www.marchofdimes.org/complications/neonatal-abstinence-syndrome-(nas).aspx)

Possible Impact on Toddlers

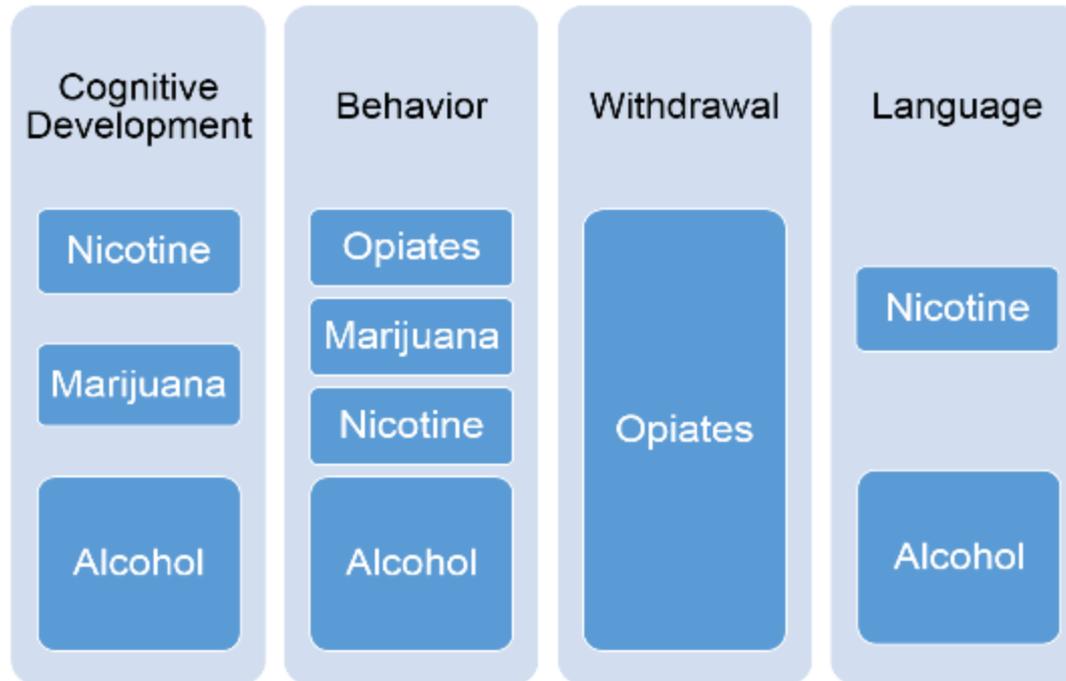
A toddler who has been exposed to opiates *may* experience one or more of the following symptoms:

- ◆ Mental and motor deficits
- ◆ Cognitive delays
- ◆ Hyperactivity
- ◆ Impulsivity
- ◆ Attention deficit disorder
- ◆ Behavior disorders
- ◆ Aggressiveness
- ◆ Less social responsivity or poor social engagement
- ◆ Failure to thrive (socially)
- ◆ Short stature

Excerpted from U.S. Office of Special Education Programs. (n.d.). *Intervention IDEAs for infants, toddlers, children, and youth impacted by opioids*, p. 2, emphasis added [Issue brief]. Retrieved from

<https://osepideasthatwork.org/sites/default/files/IDEAsIIssBrief-Opioids-508.pdf>

Short- and Long-Term Effects of Prenatal Exposure



Information Source: Behnke, M., Smith, V. C., Committee on Substance Abuse, & Committee on Fetus and Newborn. (2013). Prenatal substance abuse: Short- and long-term effects on the exposed fetus. *Pediatrics*, 131(3), 1009–24. Retrieved from <http://pediatrics.aappublications.org/content/131/3/e1009.full>

Information Memorandum, June 5, 2019: *Child Care and Development Fund (CCDF) Policy Opportunities for Supporting Populations Impacted by Opioid Misuse and Substance Use Disorders*

Available at <https://www.acf.hhs.gov/occ/resource/ccdf-acf-im-2019-01>



The screenshot shows the Office of Child Care website. The header includes the logo and name of the Office of Child Care, an office of the Administration for Children & Families. A navigation menu contains links for HOME, ABOUT, INITIATIVES, DATA & FUNDING, and TECHNICAL ASSISTANCE. The main content area features the title of the memorandum, its issuance date (June 5, 2019), the originating office (Office of Child Care), and the type of document (Guidance). Social media sharing icons for Facebook, Twitter, LinkedIn, and Email are present. A sidebar on the right provides additional information about the ACF, including its full name and a list of four key words: Child Care and Development Fund, Opioid Misuse, Substance Use Disorders, and Vulnerable Populations.

Purpose

To assist CCDF Lead Agencies supporting the economic stability of families by enhancing access to child care and early learning services to support the development of vulnerable children, particularly in communities impacted by opioid misuse and substance use disorders.

Excerpted from Office of Child Care. (2019). *Child Care and Development Fund (CCDF) policy opportunities for supporting populations impacted by opioid misuse and substance use disorders* (CCDF-ACF-IM-2019-01).

Retrieved from <https://www.acf.hhs.gov/occ/resource/ccdf-acf-im-2019-01>

CCDF Policy Options

Eligibility

Coordination

Consumer
Education

Training

Grants and
Contracts

Quality
Funds

Eligibility

If the Lead Agency wants to enhance CCDF eligibility options for families addressing opioid misuse or substance use disorder, some eligibility policy options to consider are:

- ◆ Including Substance Use Treatment as an Eligible Activity
- ◆ Protective Services Eligibility

Important Considerations:

- ◆ State's definition of child abuse and neglect as it relates to parental substance use; and
- ◆ Mandatory reporting responsibilities of each individual in the child care system (e.g. providers, directors, CCDF eligibility workers)

Excerpted from Office of Child Care. (2019). *Child Care and Development Fund (CCDF) policy opportunities for supporting populations impacted by opioid misuse and substance use disorders* (CCDF-ACF-IM-2019-01).

Retrieved from <https://www.acf.hhs.gov/occ/resource/ccdf-acf-im-2019-01>

Coordination

CCDF requires States to coordinate the provision of services with other agencies ... OCC recommends that required collaboration include coordinated efforts for how agencies can address opioid misuse and substance use disorders.

Excerpted from Office of Child Care. (2019). *Child Care and Development Fund (CCDF) policy opportunities for supporting populations impacted by opioid misuse and substance use disorders* (CCDF-ACF-IM-2019-01).

Retrieved from <https://www.acf.hhs.gov/occ/resource/ccdf-acf-im-2019-01>

Consumer Education

CCDF requires comprehensive consumer education efforts, which can be used to provide families with vital information on misuse of opioids, alcohol and other substances. Consumer education could include dissemination of information about:

- ◆ Other programs for which families that receive CCDF assistance may be eligible ...
- ◆ Evolving research and best practices

Excerpted from Office of Child Care. (2019). *Child Care and Development Fund (CCDF) policy opportunities for supporting populations impacted by opioid misuse and substance use disorders* (CCDF-ACF-IM-2019-01).

Retrieved from <https://www.acf.hhs.gov/occ/resource/ccdf-acf-im-2019-01>

Training

CCDF requires that all caregivers, teachers, and providers serving CCDF children receive training in essential health and safety topics, including “recognition and reporting of child abuse and neglect,” “child development,” and “any other subject area determined by the Lead Agency to be necessary to promote child development or to protect children’s health and safety.”

Excerpted from Office of Child Care. (2019). *Child Care and Development Fund (CCDF) policy opportunities for supporting populations impacted by opioid misuse and substance use disorders* (CCDF-ACF-IM-2019-01).

Retrieved from <https://www.acf.hhs.gov/occ/resource/ccdf-acf-im-2019-01>

Training

Lead Agencies should consider examining their training and professional development systems to incorporate training on substance use disorder and opioid misuse, recognition of use and referral processes to appropriate addiction services and counseling.

Neonatal Abstinence Syndrome: Lead Agencies should consider whether their Health and Safety trainings should include Neonatal Abstinence Syndrome (NAS), which is a condition that happens when an infant goes through withdrawal from substance exposure after birth.

Excerpted from Office of Child Care. (2019). *Child Care and Development Fund (CCDF) policy opportunities for supporting populations impacted by opioid misuse and substance use disorders* (CCDF-ACF-IM-2019-01).

Retrieved from <https://www.acf.hhs.gov/occ/resource/ccdf-acf-im-2019-01>

Grants and Contracts

While CCDF subsidies primarily come in the form of vouchers and certificates, Lead Agencies can also establish grants and contracts with local organizations to establish child care slots for eligible children (such as, direct partnership with a treatment facility).

Excerpted from Office of Child Care. (2019). *Child Care and Development Fund (CCDF) policy opportunities for supporting populations impacted by opioid misuse and substance use disorders* (CCDF-ACF-IM-2019-01).

Retrieved from <https://www.acf.hhs.gov/occ/resource/ccdf-acf-im-2019-01>

Quality Funds

States are required to expend a percentage of their funds on activities to improve the quality of child care (“quality dollars”). Activities that may assist families impacted by opioids and substance misuse that may also align with allowable quality activities, include (but are not limited to):

- ◆ Training and outreach
- ◆ Positive behavior interventions and support models
- ◆ High-quality program standards
- ◆ Consumer education provisions

Excerpted from Office of Child Care. (2019). *Child Care and Development Fund (CCDF) policy opportunities for supporting populations impacted by opioid misuse and substance use disorders* (CCDF-ACF-IM-2019-01).

Retrieved from <https://www.acf.hhs.gov/occ/resource/ccdf-acf-im-2019-01>

State and Territory Lead Agencies: Policy to Practice

Connecting to CCDF Plans

- ◆ Priority of Administration for Children and Families and U.S. Department of Health and Human Services
- ◆ Subsidy policy examples
 - 12-month eligibility for foster care
 - Increased caseloads for family care and grandparents
- ◆ Partnerships with other agencies
- ◆ Professional development
- ◆ High quality child care for low-income children

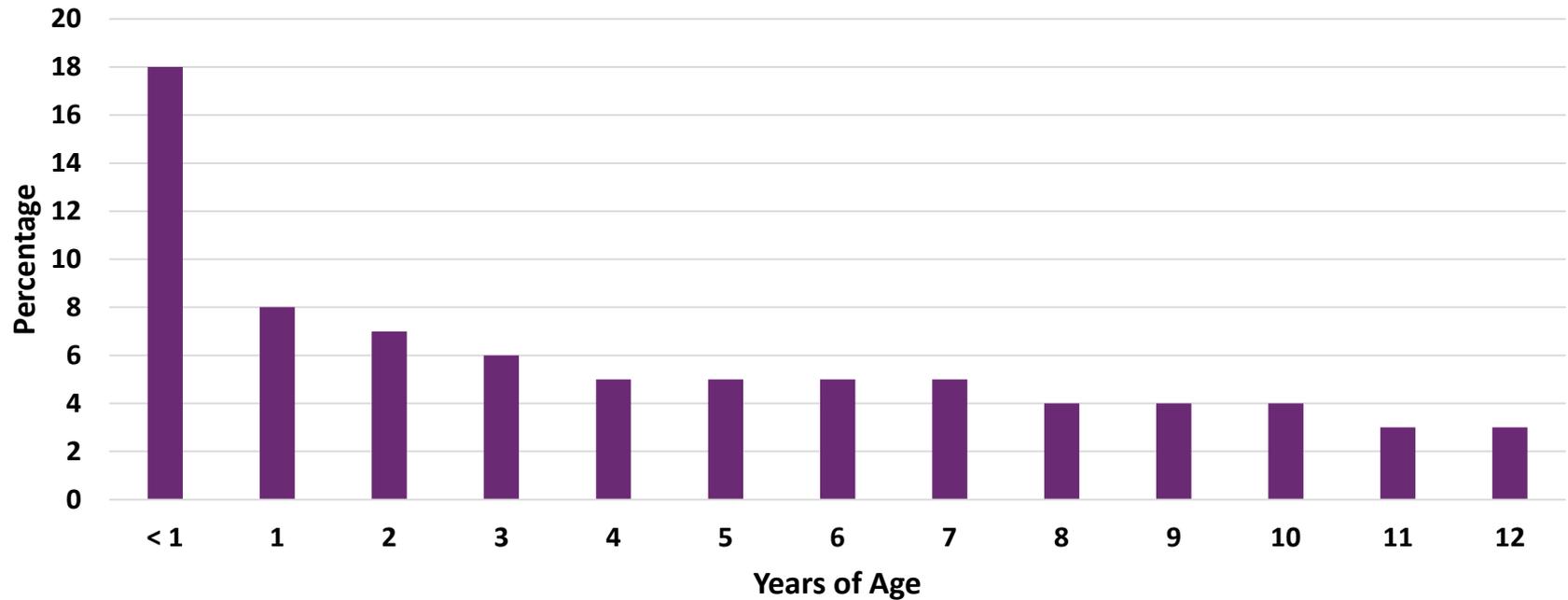
Lead Agency Supports

- ◆ Public health departments
- ◆ Temporary Assistance for Needy Families
- ◆ Medicaid and state children's health insurance programs
- ◆ Child care resource and referral agencies
- ◆ Child welfare
- ◆ Substance Abuse and Mental Health Services Administration

Office of Child Care. (2019). *Child Care and Development Fund (CCDF) policy opportunities for supporting populations impacted by opioid misuse and substance use disorders* (CCDF-ACF-IM-2019-01). Retrieved from <https://www.acf.hhs.gov/occ/resource/ccdf-acf-im-2019-01>

Foster Care

Percentage of Children Entering Foster Care



Data source: Children’s Bureau, Administration on Children, Youth and Families, Administration for Children and Families, U.S. Department of Health and Human Services. (2018). *The AFCARS report*. Retrieved from <https://www.acf.hhs.gov/sites/default/files/cb/afcarsreport25.pdf>

Support for Families and Caregivers

◆ What we know ...

- Increase of opioid misuse has significantly impacted the child welfare system.
- Infants are coming into protective custody at alarming rates.
- Grandparents are becoming primary caregivers for a second time.

◆ What we can do ...

- Increase family engagement strategies.
- Connect with comprehensive services.



Impact on Grandparents

- ◆ 2.6 million children are being raised in grandfamilies or kinship care with no birth parents in the home (4 percent of all children).
- ◆ 32 percent (139,017) of children in foster care are being raised by relatives.
- ◆ For every child in foster care living with a relative, there are 19 children being raised by grandparents or other family members outside of the foster care system.

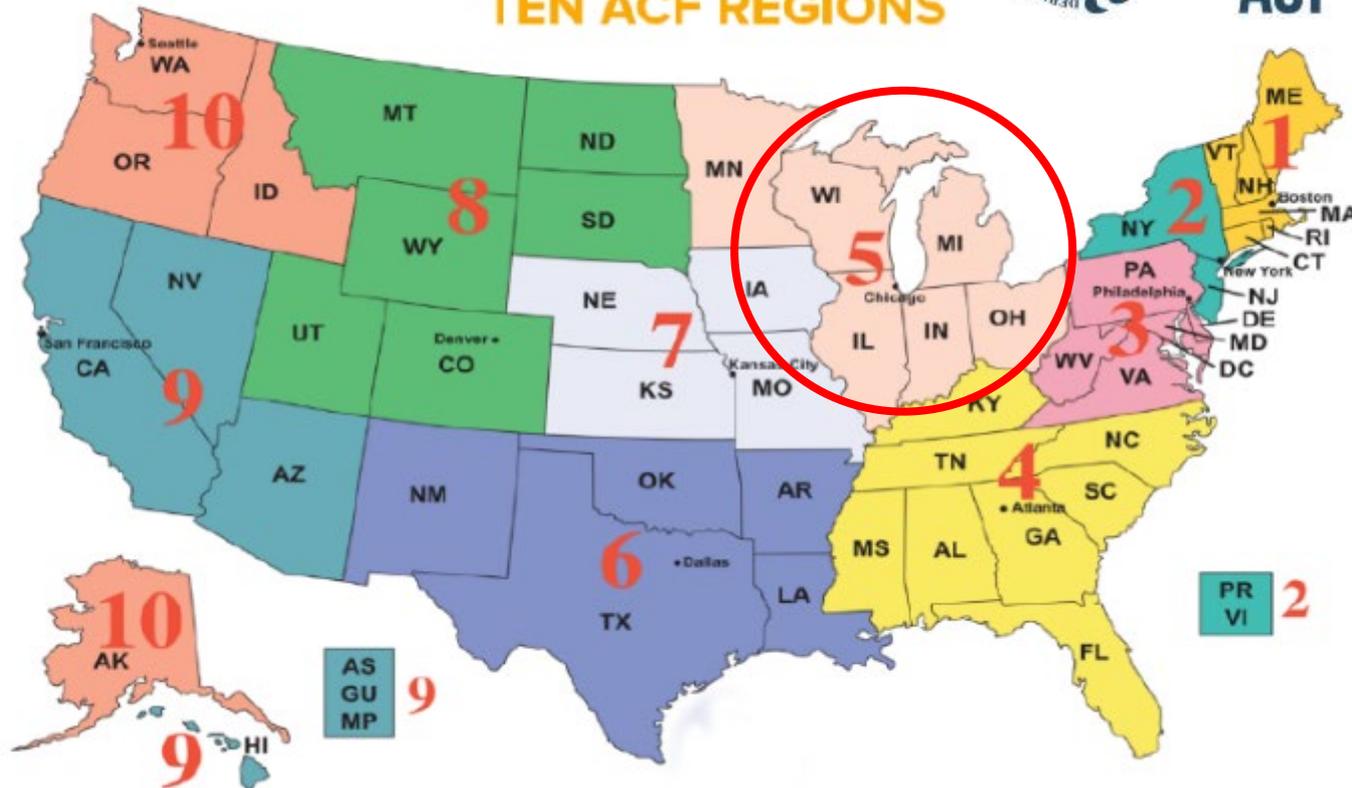


Excerpted from Generations United. (2018). *Raising the children of the opioid epidemic: Solutions and support for grandfamilies*, p. 2. Retrieved from <https://www.gu.org/app/uploads/2018/09/Grandfamilies-Report-SOGF-Updated.pdf>

Region V Perspective

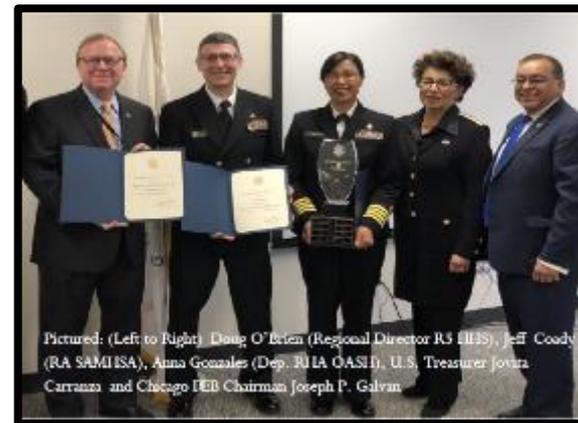


TEN ACF REGIONS



FY 2016–2018

- ◆ FY 2016: First Taskforce: Drug Exposed Children in Indian Country in Region V
 - Map out other federal programs' needs and resources (since we typically work with the same families)
 - Find duplications and areas of collaboration and coordination
- ◆ FY 2018: Second Taskforce: Region V Prevention Collaborative/Opioid Subcommittee
 - Consultation form
 - States and tribal summits
 - Quarterly meetings
 - Webinars
 - NAS Taskforce (local data)



Where to Start

- ◆ Join your state opioid taskforce or workgroup. These groups help
 - *map out other programs' needs and resources (since we typically work with the same families) and*
 - *find duplications and areas of collaboration and coordination.*

- ◆ Engage with federal, state, local, and tribal agencies in comprehensive and coordinated responses to the public health crisis of prescription drug misuse and opioid addiction.

Table Conversations



Discussion Questions

- ◆ Is your State considering or currently implementing any of the policy options outlined in the IM?
- ◆ What is your state doing (even if the efforts are not in your agency)?
- ◆ What are the CCDF program's contributions (at the state or local level, or both)?
- ◆ How do you support families and providers with substance misuse issues?
- ◆ How are state staff supported to address this issue?
- ◆ What agencies are you partnering with in your state, and what agencies *could* you partner with?

Next Steps



Resources

- ◆ *Child Care and Development Fund (CCDF) Policy Opportunities for Supporting Populations Impacted by Opioid Misuse and Substance Use Disorders* [Information memorandum], Office of Child Care (2019), <https://www.acf.hhs.gov/occ/resource/ccdf-acf-im-2019-01>
- ◆ Drug overdose deaths in the United States [Community assessment tool], NORC (n.d.), <https://opioidmisusetool.norc.org/>
- ◆ Neonatal Abstinence Syndrome [Web page], National Center on Substance Abuse and Child Welfare (n.d.), <https://ncsacw.samhsa.gov/resources/opioid-use-disorders-and-medication-assisted-treatment/neonatal-abstinence-syndrome.aspx>

Resources

- ◆ *Opioid Overdose Prevention Toolkit*, Substance Abuse and Mental Health Services Administration (revised 2018), <https://store.samhsa.gov/product/Opioid-Overdose-Prevention-Toolkit/SMA18-4742>
- ◆ Opioid summaries by state [Web page], National Institute on Drug Abuse (revised 2019), <https://www.drugabuse.gov/drugs-abuse/opioids/opioid-summaries-by-state>
- ◆ Substance Misuse [Web page], Head Start Early Childhood Learning and Knowledge Center (updated 2019), <https://eclkc.ohs.acf.hhs.gov/mental-health/article/substance-misuse>



State & Territory CCDF Administrators Meeting

July 30–August 1, 2019 • Hyatt Regency Crystal City • Arlington, Virginia

Thank You

