



FACT SHEET: Pregnant women and babies, where there is substance misuse

When a pregnant woman uses drugs and/or misuses alcohol, an assessment needs to consider the potential impact for family life and the unborn baby to. It also needs to take account of whether there are any associated activities that impact on the unborn child, and result in concerns for the child's welfare or safety. The assessment of risk and of the needs of the unborn child will be undertaken by the Multi Agency Pregnancy Liaison and Assessment Group (MAPLAG).

Aims

- To encourage pregnant women to seek early ante natal care and, if appropriate, treatment
- To normalise the ante and post natal care by providing services to address the issues related to the drug/alcohol misuse
- To establish an Action Plan to meet the needs of the unborn child, any other children in the family and the woman
- To promote information sharing and collaborative working between all agencies.

Actions to be taken

To enable early identification all pregnant women will be asked at the health booking assessment by their Community Midwife about their use of prescribed or non prescribed drugs and alcohol.

If drug use and/or drug or alcohol misuse is disclosed or suspected the woman must be referred by the Practitioner receiving this information to the Specialist Midwifery Team in 'drugs and alcohol use' based at Jessop Wing. The woman should be informed of the referral.

A member of the specialist midwifery team acts as the Care Coordinator for all pregnant women where there are issues relating to drugs and alcohol.

An assessment of risk will be carried out through the Multi Agency Pregnancy Liaison and Assessment Group (MAPLAG) .The assessment will take account of any associated activities that may impact on the unborn child and result in concerns for the child's welfare and safety, for example any known domestic abuse.

For further details see **chapter 3.18** in Sheffield Safeguarding Children Board Child Protection Procedures.

Criteria for discussion at MAPLAG

- Currently in treatment for drug or alcohol misuse
- Any ongoing problematic or dependent drug use during current pregnancy, including cannabis use
- Any ongoing problematic or dependent alcohol consumption during current pregnancy
- Suspicion of drug use where indicators of use are evident but no disclosure e.g. street sex work, criminal activity associated with drug use, past drug and /or alcohol misuse.

'Problem or problematic drug use refers to drug use which could either be dependent or recreational. It is not necessarily the frequency of drug use which is the primary 'problem' but the effects that drug taking have on the user's life.' 'Drugscope'

The woman needs to be informed, both verbally and by leaflet, about the MAPLAG process. The first discussion is usually at 20 - 24 weeks gestation.

The outcome of the Initial MAPLAG Risk Assessment

- If child protection concerns are identified a referral will be made to Children's Social Care
- If additional support services may assist the child and family a CAF should be completed and a referral to MAST (Multi Agency Support Team) should take place.
- A multi agency meeting should always take place prior to birth whether a Child Protection Conference or a Child in Need meeting
- A **Birth Plan** must be completed and forwarded to the Specialist Midwifery Team for drugs and alcohol.