The Role of Your Care Team

Together, you and your health care team will decide which services are most likely to benefit you and your baby. The CARA plan that you help to design will ensure that you have the tools you need to safely care for yourself and your baby. Your health care team is likely to include: nursing, hospital social worker, pediatrician, OB/GYN, and others (such as a lactation specialist).

Will I Be Reported To CPS?

Nevada law requires healthcare professionals to notify Child Protective Services (CPS) when an infant is determined to be affected by a fetal alcohol spectrum disorder or prenatal substance abuse or has withdrawal symptoms resulting from prenatal substance exposure.

The role of CPS is to make sure every child is safe. There must be concerns about a child’s safety for CPS to become involved with a family. Your health care providers are required to notify CPS, but not all notifications result in CPS involvement. Not all families will be contacted by CPS in response to receiving a notification from a health care provider.

A CARA Plan of Care is not the same as a CPS report. Even when CPS involvement is not needed, you will be offered a CARA Plan of Care to help you get connected to any support you may need.
What is a CARA Plan of Care?

The CARA Plan of Care is a voluntary referral to services designed to support the health and safety of you and your baby, both now and in the months ahead.

Your hospital care team will offer you a CARA Plan of Care if your baby was affected by drugs or alcohol in the womb. You and your care team will develop the CARA Plan of Care together before you leave the hospital.

The CARA Plan of Care’s purpose is to:

* Make sure you and your baby remain healthy and safe.
* Support you in caring for your baby at home.
* Connect you and your baby with services you might need.

Services for You and Your Baby

Services and supports that your family may benefit from after you discharge from the hospital might include one or more of the following:

- Prenatal & post-partum care, with referral to specialty care if needed
- Breastfeeding support
- Medications and pain management
- Contraception and pregnancy planning
- Home visiting
- Substance use disorder treatment
- Infant health and development
- Developmental screening and early intervention services
- Childcare and educational programs, including Head Start
- Parenting/family support
- Coordinated case management
- Assistance with food, housing, transportation, insurance, legal aid, and/or employment support

Your plan is unique to the needs of you and your baby. Discuss with your health care team what you and your baby need to stay safe, healthy and well.

How will my Baby be Affected?

Some possible effects from prenatal exposure to opioids and other substances include:

- Low birthweight
- Smaller head circumference
- Congenital heart defects
- Developmental delays

Neonatal abstinence syndrome (NAS) is an expected and treatable condition that follows prenatal exposure to opioids or other substances. For more information about NAS, including the signs and symptoms, and how to care for your baby with NAS please visit [https://www.marchofdimes.org/complications/neonatal-abstinence-syndrome-(nas).asp](https://www.marchofdimes.org/complications/neonatal-abstinence-syndrome-(nas).asp)

If you’re pregnant and taking opioids, talk to your provider before you stop taking them. Stopping opioids too quickly can harm you and your baby. Tell your prenatal provider about any opioid you take, even if it’s prescribed by another provider.

Marijuana and Breastfeeding

Although marijuana is now legal in some states including Nevada, pregnant women and women who are breastfeeding are encouraged to discontinue use of marijuana. There is no known safe amount of marijuana use during pregnancy or during breastfeeding and lactation.