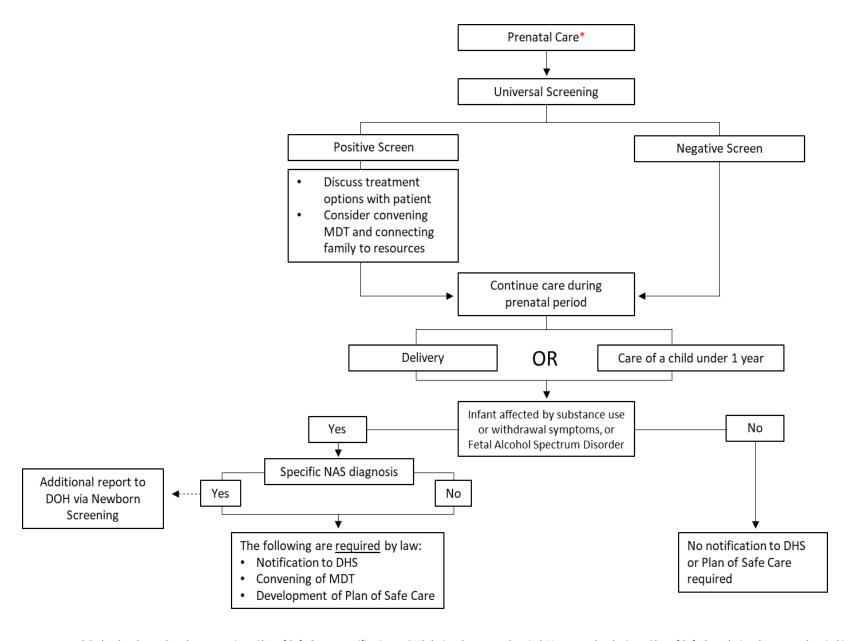


Plans of Safe Care Clinical Workflow



^{*} Federal and state law do not require a Plan of Safe Care or notification to DHS during the prenatal period. However, developing a Plan of Safe Care during the prenatal period is recommended best practice.

Note: If at any time you have reasonable cause to suspect child abuse or neglect, regardless of whether the infant is born affected by substance use, please call ChildLine to make a confidential report.



Plans of Safe Care Clinical Workflow

Definitions and resources

- Affected by: Infant with detectable physical, developmental, cognitive, or emotional delay or harm that is associated with maternal substance use or withdrawal, as assessed by a health care provider.
- MDT: local multidisciplinary teams 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.
- **DHS**: Pennsylvania Department of Human Services. Notifications specific to Plans of Safe Care shall be made to ChildLine.
- DOH: Pennsylvania Department of Health
- Screening: The determination of need for emergent care in the areas of withdrawal management, prenatal or psychiatric care. A short series of questions to identify the need for services and determine if further assessment is necessary. Screening is differentiated from testing in that testing involves biological samples.

For additional details, definitions and information visit: www.keepkidssafe.pa.gov