



*Here's a short example of what a script might look like for introducing a brief screen/full screen. It doesn't have to take a long time, but should focus on including transparent information and patient-centered language.*

### **Sample Script for Introducing the Screening**

*[Greeting/rapport building]*

*To help us take the best care of you and your baby, we all of our patients' questions around things like social needs, safety at home, and any mental health or substance use concerns for you or your loved ones. Sometimes talking about these things can cause fear around what will happen if I this share that information honestly. Lots of parents are facing these kinds of challenges and we're here to help connect families with resources and support. Do you have any questions or concerns before we get started?*

*Yes/ No*

*(Patient gives Yes/ No consent)*

### **For patient who wants more info about how this information will be used or who is hesitant to proceed with this screening:**

*If you're struggling with any of these challenges, we will talk more about next steps to get you extra support.*

*I want to acknowledge that sometimes when parents are going through really hard things, they worry about what will happen if they share that information or ask for support. Let me give you some examples of things that people I've worked with are scared to talk about. Some parents have really scary thoughts about bad things happening to themselves or their baby. Other parents might be using substances to cope with stress, or maybe someone in their house is doing things that worry or scare them.*

### **For patients who may have concerns about child welfare involvement and/or confidentiality of this information:**

*A parent's biggest fear is that they'll share something that will get reported to child protective services. We are here to support you and your baby to be as healthy and safe as possible. Legally, hospitals don't have to report substance use during pregnancy, and our hospital's policy is: \_\_\_\_\_.*

*Disclosing substance use doesn't automatically mean that child welfare needs to be involved. Examples of times when we would need to notify child welfare include there being **immediate***



*safety concern for the baby or children in the home, or that you were going to leave here and hurt yourself or someone else. Those are the times that we'd have to make a report to work toward you and your children being safe. If there was a reason to believe that your baby/ children were in danger, we would talk to you about this before doing anything, and we would come up with a plan together about how to proceed so that you know what is happening every step of the way.*

*If you indicate that you are struggling with your mental health, substance use, or other social challenges, [insert information about what your hospital will do, like sharing with physician, social worker, resource provision, etc].*

*Could include:*

- *talking with social work in the hospital*
- *talking with pediatric or family medicine clinicians helping to take care of infant in the hospital*
- *consultation with lactation about breastfeeding safety*
- *consultation with addiction medicine to ensure any withdrawal symptoms are treated, and/or starting treatment medications (methadone, buprenorphine, etc).*
- *Connection to a peer support specialist, which is someone who has been through this process themselves*
- *Note: It is best practice to only order toxicology testing when it will guide medical management of the birthing person or infant. However, if your hospital reflexes to toxicology testing after a positive screen, it is important to be transparent about this with the patient.*