1. Hospital Name:

2. What is the highest level of maternal care at your hospital?
   - Level I
   - Level II
   - Level III
   - Level IV

3. Are pregnant women universally screened at your hospital for substance misuse or abuse by obstetricians/gynecologists (OB/GYNs)?
   - Yes [GO TO QUESTION 6]
   - No
   - Don’t know

4. By which criteria are pregnant women screened for substance misuse or abuse at delivery at your hospital? Check all that apply:
   - Suspected substance use
   - Little or no prenatal care
   - Placental abruption
   - Known history of substance use
   - Display signs of intoxication at time of delivery
   - Positive prenatal screening result
   - Lives outside of area
   - There is no specific protocol on who is tested
   - Other, please specify: _________________________________________
   - Don’t know

5. What percentage of pregnant women who receive prenatal care at your hospital-run clinics are screened for substance misuse or abuse by OB/GYNs prior to entering labor and delivery?
   - Women are not screened [GO TO QUESTION 11]
   - Less than 25%
   - 26-49%
   - 50-74%
   - 75-99%
   - Don’t know
6. When are pregnant women screened at your hospital-run clinics or hospital for substance misuse or abuse? Please check all that apply:
   - First trimester
   - At first visit (if later than first trimester)
   - Second trimester
   - Third trimester
   - During labor
   - After delivery
   - Practice is inconsistent
   - Don’t know

7. Which tool(s) do your hospital-run clinics use to screen women for substance misuse or abuse during pregnancy? Please check all that apply:
   - 4Ps
   - 4Ps +
   - 4Ps + Embedded in the Pregnancy Risk Assessment (PRA)
   - 5Ps
   - TWEAK
   - T-Ace
   - Other, please specify: ___________________________________________
   - Don’t know

8. How are positive prenatal screening results shared with labor and delivery at your hospital? Please check all that apply:
   - OB/GYN report
   - Medical records
   - Nurse
   - Other, please specify: ___________________________________________
   - Women are screened but results are not shared
   - Don’t know

9. Does your hospital obtain a separate consent to test pregnant women for substance misuse or abuse?
   - Yes, consent for testing for substance misuse or abuse is separate from consent for medical treatment
   - No, consent for medical treatment includes consent for testing for substance misuse or abuse
10. **What methods are used to test pregnant women at your hospital for substance misuse or abuse? Please check all that apply:**

- [ ] Breathalyzer (separate consent is obtained)
- [ ] Breathalyzer (separate consent is *not* obtained)
- [ ] Blood test (separate consent is obtained)
- [ ] Blood test (separate consent is *not* obtained)
- [ ] Urine toxicology (separate consent is obtained)
- [ ] Urine toxicology (separate consent is *not* obtained)
- [ ] Other, please specify: ___________________________________________
- [ ] None
- [ ] Don’t know

11. **What elements are addressed in discharge plans at your hospital for mothers with substance use disorders (SUDs)? Please check all that apply:**

- [ ] Mother’s substance use (including a referral to care if needed)
- [ ] Mother’s Medication-Assisted Treatment (MAT) dosage changes due to delivery
- [ ] The safety of the home environment
- [ ] Parenting support
- [ ] Community support
- [ ] Referral to home visitation services
- [ ] Assistance in finding and scheduling pediatric care
- [ ] Other, please specify: ___________________________________________
- [ ] Our hospital does not develop discharge plans for mothers with SUDs
- [ ] Don’t know

12. **Which of the following service linkages do qualified staff (social worker, case manager, nurse, or other qualified individual) at your hospital provide to address the mother’s needs for developing a plan of safe care when she is identified to have an SUD? Please check all that apply:**

- [ ] Qualified staff provide warm handoff to referred services (i.e., direct person-to-person link with service provider)
- [ ] Qualified staff follow up to ensure mother has engaged in services
- [ ] If mother has not engaged in services, qualified staff contact her and attempt to re-engage or refer to a different program.
- [ ] If mother has not engaged in services, qualified staff reassess need for child welfare involvement and/or report of child neglect or abuse
- [ ] Qualified staff only provide referral to services, they do not provide follow-up
- [ ] Other, please specify: ___________________________________________
- [ ] None
- [ ] Don’t know
13. **How confident are you in your hospital’s effectiveness at discharge planning for mothers who have an SUD?**
   - [ ] Not at all
   - [ ] Somewhat
   - [ ] Moderately
   - [ ] Very
   - [ ] Extremely

14. **Which of the following is a barrier to screen pregnant women for substance misuse or abuse at your hospital? Please check all that apply:**
   - [ ] Lack of time to perform screening
   - [ ] Unfamiliarity with screening tools
   - [ ] Insufficient time to manage positive screenings
   - [ ] The stigma associated with substance abuse
   - [ ] Other, please specify: ___________________________________________
   - [ ] None

15. **Other Comments:** In the space below, please feel free to share other aspects about the care of substance exposed infants (SEIs) and their mothers you think are important to understand as we think about how best to support efforts throughout New Jersey:

   [Blank space for comments]

   Thank you for taking time to complete this survey.