



Maternal Mortality & Morbidity Advocates

# Screening Process Implementation Guide for Providers

Maternal Health & Substance Use Disorder (SUD)

SUD Resource Hub available at  
[www.mommasvoices.org](http://www.mommasvoices.org)

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# Screening Process

## A Guide for Maternal Health Providers on Introducing and Conducting the Screening Process

This guide is designed to support providers in introducing and conducting behavioral and mental health screenings in maternal healthcare settings with empathy and intention. It offers guidance on patient-centered communication, connecting individuals with appropriate support and resources, and ensuring meaningful follow-up to their pregnant and postpartum patients. By fostering trust and prioritizing patient well-being, providers can play a vital role in improving maternal mental health outcomes.

### 1. Why Screening is Needed

Screening during maternal care is critical to identifying potential risks early, ensuring timely interventions, and promoting better outcomes for both the parents and the baby. The screening process helps providers:

- Detect medical, psychosocial, or behavioral considerations that may impact pregnancy.
- Address gaps in maternal health outcomes by identifying individuals who may need additional support.
- Foster open communication and trust between providers and patients, ensuring that care is tailored to individual needs.

By introducing screenings to every patient, effectively, providers can provide reassurance that these assessments are standard tools aimed at supporting health and well-being.

### 2. What the Screening Process Is Used For

Maternal health screenings can include a range of focus areas, including:

- **Physical Health:** Identifying conditions like hypertension, gestational diabetes, anemia, or thyroid disorders.
- **Mental Health:** Screening for depression, anxiety, or postpartum mood disorders using validated tools like the Edinburgh Postnatal Depression Scale (EPDS), which can be easy to administer and interpret, when done in a respectful and [trauma-informed](#) manner.

- **Substance Use:** Assessing for tobacco, alcohol, or drug use and offering support for cessation or treatment. Screening is particularly crucial for individuals with substance use disorder (SUD), as they help:
  - Identify and address potential risks early, reducing adverse outcomes for both the mother and baby.
  - Connect patients with harm-reduction strategies, coping mechanisms, and supportive care tailored to their unique needs.
  - Build trust and reduce stigma by framing discussions in a nonjudgmental, supportive manner.
  - Facilitate access to integrated care models that address both prenatal and addiction treatment needs.
- **Non-medical Drivers of Health:** Addressing issues such as food insecurity, housing instability, intimate partner violence, safety, or lack of access to transportation or childcare.
- **Fetal Health:** Monitoring fetal development and assessing risks for preterm birth or stillbirth.

### 3. How to Introduce the Screening Process

Introducing the screening process effectively in a compassionate manner may ensure patient understanding and an increased openness to support and resources that are offered.

The following strategies are recommended:

- **Create a Welcoming Environment:**
  - Sit down at eye level with the patient and provide undivided attention to create a more grounded and approachable presence.
  - Maintain gentle eye contact to show attentiveness and respect, helping the patient feel heard and valued.
  - Begin with a warm, empathetic approach to build trust with the patient before screening (e.g. casual conversation, ask about their family or life updates since the last appointment, listen for 60 seconds uninterrupted).
  - Use open-ended questions to encourage two-way communication.
- **Explain the Process and its Purpose:**
  - Provide a clear overview of what the screening entails.
  - Clarify what a screening tool is.
  - Let patients know the purpose of the screening is to support their health.
  - Consider using the 4 or 5 P's approach: parents, partner, past, pregnancy, peers. Provide resources related to these areas.
  - A [sample script](#) is included below as an additional resource.
- **Normalize the Process:** Explain that the screening process is a standard procedure for all patients. Offer reassurance that many individuals benefit from these screenings, and it's a proactive step in their care journey.

- **Obtain Informed Consent:**
  - Ensure patients understand the process by using teach-back or similar techniques.
  - Provide an opportunity for questions before proceeding.
  - Emphasize they can stop the screening at any point.
  - Reassure the patient they are in control and can stop whenever they wish.

## 4. Resources Provided Before and/or After Based on Screening Results

Provide resources and helpful information prior to screening whenever possible.

Screening results may guide the next steps in care. If a patient shows signs of distress or scores above the screening threshold, follow up with open-ended, nonjudgmental conversation.

Providers should be prepared to:

- **Provide Referrals:** Connect patients to specialists, such as maternal-fetal medicine experts, mental health professionals, or substance use counselors.
- **Offer Educational Resources:** Supply information on topics like nutrition, exercise, coping mechanisms, stillbirth prevention techniques, or managing chronic conditions.
- **Coordinate Support Services:** Link patients with community resources for housing, transportation, food assistance, or childcare programs.
- **Implement Care Plans:** Collaborate with patients to create personalized care plans that address identified risks and priorities.
- **Be Proactive:** Be prepared to provide options and resources for future challenges, even if the current screening doesn't indicate immediate risk.
- **Follow-Up Plan:** Ensure a follow-up plan is in place for patients who screen positive, including timely referrals and reassessment.

## 5. Follow-Up and Communication

Follow-up is crucial for maintaining patient trust and ensuring continuity of care:

- **Share Results Transparently:** Discuss screening outcomes in a nonjudgmental, supportive manner.
- **Encourage Questions:** Provide opportunities for patients to ask about their results or express concerns.
- **Use Open-Ended Questions and Motivational Interviewing (MI) Techniques:** Open-ended questions invite patients to share concerns or experiences that may not surface through standardized screening tools. Some patients may choose to opt out of completing a screening or may provide

answers they believe are expected. Using open-ended prompts—especially when paired with [Motivational Interviewing](#) techniques—can foster trust, reveal hidden needs, and guide meaningful follow-up. These approaches support a more complete understanding of the patient's context and help connect them to appropriate resources.

Examples:

- Is there anything else you would like to discuss?
  - Are you having any symptoms that you'd like to share or any concerns we haven't talked about?
  - What is your living situation today?
  - Are there any challenges that you'd like to share?
  - Tell me everything about...
- **Set up Appointments for Patient:** Whenever possible, schedule referrals or follow-up appointments for patients before they leave the office.
  - **Monitor Progress:** During follow-up appointments, plan to reassess and adjust care plans as needed.
  - **Provide Reassurance:** Reinforce that the goal of screening is to support and empower the patient.

## 6. Postpartum Support and Considerations

The postpartum period is a time of major physical and emotional changes. This is an important opportunity to check in on mental health, recovery, and future pregnancy plans with compassion and care.

- **Provide support and educational information** about postpartum health, preconception, and contraceptive options as needed. Consider starting with the question: “Are you planning to get pregnant again in the next 18 months?”
- **Screen all patients for perinatal mood and anxiety disorders (PMADs)** using a validated tool such as the EPDS or PHQ-9.
- **Normalize help-seeking behavior:** remind patients that seeking support is a sign of strength and we are here to support them.
- **Document any concerns clearly and refer** to behavioral health or psychiatric support when indicated.
- **Be alert for signs of more complex disorders**, such as postpartum psychosis, and escalate appropriately - this is a medical emergency.
- Common **postpartum mental health symptoms may include:**
  - Postpartum Depression: sadness, hopelessness, numbness, lack of interest in the baby, changes in sleep/appetite, guilt
  - Postpartum Anxiety: racing thoughts, constant worry (especially about baby's safety), restlessness, physical symptoms (e.g. nausea, rapid heartbeat)
  - Postpartum OCD: intrusive thoughts (often disturbing), compulsive behaviors (e.g. repeated checking), intense fear of harming the baby despite no intent

- Postpartum Psychosis: hallucinations, delusions, extreme confusion, paranoia, sudden mood changes, thoughts of harming self or baby
- **Important Reminder:** Patients with intrusive thoughts or frightening symptoms often fear judgment.
- The message should *always* be:  
“You are not alone. You are not to blame. Getting support for your mental health means you’re doing what’s best for you and your baby and we’re here to help.”

## 7. How to Use the Patient Resource Worksheet

A sample [Patient Resources](#) worksheet has been included below. It is intended to be completed in advance with community resources and contact information.

- **Complete in Advance:** This worksheet is intended to be completed and printed in advance of any screening by a case manager, a social worker or office coordinator. Identify a point person on the worksheet who can be contacted by the patient.
- **Update Community Resources:** Populate with up-to-date information on local community resources your clinic or organization can offer or refer to and update on a quarterly basis.
- **Provide to All Patients:** Regardless of screening results, all patients should be provided with this information, as circumstances may change.
- **Timing:** Provide patients with this resource before screenings are completed.
- **Review Resources and Prioritize Needs with Patient:** After screening is complete, update this resource together with the patient to reflect on any additional support or referrals the patient may need.

## 8. How to Use the Provider Script

The Provider Script is designed to help providers engage patients with lived experience in substance use disorder (SUD) in a respectful and empathetic manner. It serves as a tool to build trust, reduce stigma, and foster open dialogue - but its effectiveness depends heavily on how it is delivered.

### **Review and Practice in Advance**

Providers should not read the script verbatim for the first time during a patient interaction. Instead, take time to review it thoroughly and **practice it in advance** so that the language feels natural and authentic. Scripts are most helpful when they serve as a foundation - not a crutch - for meaningful conversation.

## Practice Strategies:

- **Role Play:** Partner with a colleague to simulate the conversation. Take turns playing the role of the patient to better understand how the words might feel to someone with lived experience.
- **Simulation Scenarios:** Incorporate the script into clinical simulations or standardized patient encounters to build muscle memory in a low-pressure setting.
- **Self-Practice:** Say the script out loud several times, adjusting tone and pacing so it aligns with your personal communication style while still maintaining fidelity to its intent.

**Goal:** Practice until the script “rolls off the tongue.” When the delivery feels smooth and confident, patients are more likely to feel respected, heard, and safe in the care environment.

Using this script skillfully can make a powerful difference in how patients with SUD experience care, helping to dismantle stigma and support recovery through genuine human connection.

## Patient Resources

Patient Name: \_\_\_\_\_

Provider Name: \_\_\_\_\_ Date: \_\_\_\_\_

Patient Point of Contact for Questions: \_\_\_\_\_

Point of Contact Phone Number: \_\_\_\_\_

**Directions:** This resource includes up-to-date information on local community resources that are available to all patients. During patient visits, you and your provider will use this form as a guide to identify where additional support may be needed.

### Local Organizations or Events

Organization Name	Notes / Resource Name / Contact Info
<input type="checkbox"/> Health Department	
<input type="checkbox"/> Community Baby Shower	
<input type="checkbox"/> Other: _____	

### General Support

Need	Notes / Resource Name / Contact Info
<input type="checkbox"/> Transportation	
<input type="checkbox"/> Housing / Shelter	
<input type="checkbox"/> Food Assistance	
<input type="checkbox"/> Childcare	
<input type="checkbox"/> Assistance Paying Bills	
<input type="checkbox"/> Assistance Accessing a Phone	
<input type="checkbox"/> Personal Hygiene	
<input type="checkbox"/> Prescriptions	

### Pregnancy Support

Need	Notes / Resource Name / Contact Info
<input type="checkbox"/> Diaper Bank	
<input type="checkbox"/> Lactation, Formula, Feeding Support	
<input type="checkbox"/> Milk Bank	
<input type="checkbox"/> Baby Supplies (e.g. baby wipes, teething, pacifier, toys)	
<input type="checkbox"/> Car Seat or Safety Installation	
<input type="checkbox"/> Crib or Pack-n-Play	
<input type="checkbox"/> Stroller	
<input type="checkbox"/> Doula or Birth Support Programs	
<input type="checkbox"/> Other: _____	

## Substance Use Support

Service Type	Notes / Resource Name / Contact Info
<input type="checkbox"/> Medication-Assisted Treatment (MAT)	
<input type="checkbox"/> Naloxone Distribution	
<input type="checkbox"/> Counseling / Recovery Programs	
<input type="checkbox"/> Support Groups [e.g., Narcotics Anonymous (NA), Alcoholics Anonymous (AA)]	
<input type="checkbox"/> Family Support (e.g. Nar-Anon)	
<input type="checkbox"/> Perinatal SUD Treatment Programs	
<input type="checkbox"/> In-patient Treatment Programs	
<input type="checkbox"/> Outpatient Treatment Programs	

## Mental Health Support

Service Type	Notes / Resource Name / Contact Info
<input type="checkbox"/> Perinatal Mental Health Therapist	
<input type="checkbox"/> Crisis Hotline / Emergency Services	
<input type="checkbox"/> Group Therapy / Support Groups	
<input type="checkbox"/> Counseling Services	
<input type="checkbox"/> Psychiatry Services	

## Family Support & Peer Services

Service Type	Notes / Resource Name / Contact Info
<input type="checkbox"/> Family Counseling	
<input type="checkbox"/> Parenting Education / Classes	
<input type="checkbox"/> Peer Support / Mentorship	
<input type="checkbox"/> Home Visiting Programs	

## Next Steps / Follow-Up

Action Item	Responsible Party	Follow-Up Date

## Other Needs/Concerns:

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## Provider Script (example)

Sample scripts are intended to help providers navigate sensitive conversations with clarity, compassion, and confidence. These examples offer language that supports trust-building, encourages open dialogue, and ensures patients feel heard and supported throughout the screening process.

### 1. Greeting and Context Setting

- Objective: Create a welcoming and safe environment
- Script Example:  
"Hello [Patient's Name], as you may have heard (or done in the past), during pregnancy and the postpartum period, we focus not just on physical health, but also on your emotions and coping strategies. This helps us provide better support to both you and your baby."

### 2. Explain the Purpose of the Tool

- Objective: Clearly articulate why this tool/resource is important.
- Script Example:  
"We use a standard screening tool for all of our patients to discuss any substances you may have used or been exposed to, such as cigarettes, marijuana, heroin, cocaine, opioids, alcohol, or something else. This questionnaire/screening will give us a clearer picture of your medical history so that we can better care for you and your baby."

### 3. Build Trust and Provide a Safe, Supportive Space

- Objective: Reassure the patient about the purpose of the conversation, build trust, and emphasize that the intent is supportive, not harmful.
- Script Example:  
"I want to emphasize that we care about you and your baby. We're here to support you, not to judge or create unnecessary stress. It's important that we understand these things so we can provide you with the best care and resources for a healthy outcome for you and your baby."

### 4. Set Expectations for Completing or Using the Tool or Resource

- Objective: Provide clear instructions on how to complete the tool and next steps.
- Script Example:  
"You'll be asked a series of questions, and afterward, we can review the information together. You will not be judged, treated differently, or disrespected because of your answers. Please remember, everything you share is to help us support you and provide the best care for you and your baby. We truly care about you both."

## 5. Provide Encouragement and Normalize Feelings

- Objective: Help patients feel safe and understood and reassured if they have any concerns about the screening.
- Script Example:  
"A lot of people feel nervous to answer these questions as a variety of emotions can arise. If anything comes to your mind that feels uncomfortable or raises concerns, please let us know as we want to support you through this process. We can stop at any point during the screening if you become uncomfortable."

## 6. Transition to the Tool

- Objective: Smoothly guide the patient into the screening process and give them space to ask any questions before starting.
- Script Example:  
"We're going to start the screening now. Do you have any questions before we begin? If not, take your time with your answers—there's no rush."

## 7. Explain What Happens Next (If applicable)

- Objective: Describe how the tool will be used to improve care and access to resources.
- Script Example:  
"Thank you for your honest and transparent answers—they are greatly appreciated and will help us better support you. Here are some resources that might be helpful for you."

### **Additional Script (if applicable, before tool is implemented):**

*"As part of our standard care, we also perform urine and/or blood screenings for all patients to ensure we can provide the best possible support. Would it be okay if we collect a sample from you now?"*

### **Additional Script (if applicable, after screening results):**

*"Your urine/blood toxicology results came back positive for (insert). Our priority is to ensure you, and your baby receive the safest care possible. We'd love to work with you to explore available resources, whether here in the hospital or within the community. Would you be open to discussing some options?"*