The Caregiver’s Guide to NAS & Beyond

Developed by and for families on the South Shore (MA) caring for children born substance exposed.

Visit us at: www.2themoonandback.org
In October of 2017, To the Moon and Back started support groups in Plymouth, MA for the caregivers (adoptive and foster parents and relative caregivers) of children born with in utero substance exposure. What we found was that there was a lack of focus on children as they grew. Research on the long-term needs of this population lacked, and there were no best practices in care for these children. There was also very limited resources to support the caregivers who had stepped up to care for these children.

One of the important facets of our Caregivers Support Group is the ability to resource share. Families share what helped their children and the information on providers who helped make a difference in the lives of their children. We compiled these recommendations for the South Shore Resource Guide. We also went one step further and offered providers the opportunity to participate in a one hour training on Neonatal Abstinence Syndrome to raise awareness and understanding of how to best help these children.

You will see within the guide a designation for resources that were recommended by our families and those who received our training. The providers that received the training, in our opinion have a firm commitment to caring for children with in utero exposure, and we thank them for their willingness to collaborate.

We hope that this guide is just a starting point. We welcome your recommendations to be added to future printings as well as providers who would like to participate in our one hour training. Please feel free to reach out to me at theresaharmonLICSW@gmail.com.

To all the families out there who are working tirelessly to ensure that their children reach their full, true potential you have our deepest gratitude and love. We remain here for you as a resource.

Sincerely,
Theresa Harmon, MSW, LICSW
Founder & Executive Director
To the Moon and Back, Inc

www.2themoonandback.org
Thank you to our many supporters and collaborators who made this guide possible. These include:

Leanne Bishop, BSPT
Bishop Physical Therapy and Kingston Public Schools

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Birth to Three Program (West Virginia) featured on the NOVA PBS special “Addiction,” and President of To The Moon And Back WV

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2019 Candidate for a Master in Social Work

Stacey Szklut, MS, OTR/L
Executive Director, South Shore Therapies

Dr. Nate Horowicz Willis
Director of Public Health Plymouth

Thank you to the financial sponsors behind this guide:
Advocacy efforts have resulted in (MA) passing state level funding to support children born opiate dependent as they grow.

Beyond NAS Conference our annual conference which focuses on children born substance dependent or exposed. The target audience is both professionals and caregivers for the purpose of providing education on tangible interventions and resources to support this population. It is an opportunity to hear from nationally recognized experts in the field of NAS.

Caregiver Support Group meets twice a month via Zoom to provide a safe and welcoming environment for caregivers to share with each other what has and has not worked well for their child. This is especially important since there are no best practices in care for children with NAS as they grow. We often host speakers with experience working with children with exposure.

Children’s Groups a monthly kids play group that focuses on play that improves some of the deficits kids with NAS may experience. For instance, sensory play to help with sensory integration or swim to improve core strength. The group also allows parents who may not have the time to participate in the more formal support group meet their peers.

Education is a key component of our program. Theresa Harmon, MSW, LICSW, our founder and Executive Director, provides community presentations on Neonatal Abstinence Syndrome with an emphasis on the long-term needs of children.

Financial Grants for parents and caregivers to apply to for uncovered expenses such as nutritional supplements, therapy copays, or for durable medical equipment (for example, weighted blankets). Applications and guidelines are available at www.2themoonandback.org

The Caregiver’s Journey, based off the Department of Public Health funded Journey Project, video vignettes developed by caregivers for caregivers of what to expect in the NICU, when you get home with your child with substance exposure, the potential long-term needs of children, and how to work with your child’s birth family or your own family in the case of our relative caregivers. Video series is available at www.2themoonandback.org
What is it:
Massachusetts Early Intervention (EI) is a program for infants and toddlers (birth to 3 years old) who have developmental delays or are at risk of a developmental delay. EI services are designed to help support families and caregivers, and to enhance the development and learning of infants and toddlers through individualized, developmentally appropriate activities within the child’s and family’s everyday life experiences.

What to expect:
A four member team will perform an initial evaluation of your child at home using Battelle, a standardized test that assesses for developmental delays. You will get results at that appointment and be given the opportunity to enroll in early intervention services. The goal of early intervention is to ensure that your child is meeting their developmental milestones. Treatment providers may include a Developmental Specialist, Nurse, Social Worker, Occupational, Physical, or Speech therapist. Services can occur at home or in another setting such as daycare or a relatives home. These services are billed to your child’s insurance if they have insurance. Any remaining out of pocket cost is covered by this federally funded program.

Signs your child may benefit:

• Not meeting developmental milestones, such as crawling or walking at the expected time (gross motor).

• Having trouble with feeding or have poor eating habits (adaptive and feeding skills).

• Limited vocabulary or has difficulty following directions (expressive and receptive language).

• Difficulty grasping or using small items (fine motor).

• Trouble with loud noises, visuals that are too busy, or trouble with change/ transitions (sensory).

• Having trouble gaining knowledge and skills (learning/cognition).
Early Intervention Providers

**CATCHMENT AREA 25:** Carver, Duxbury, Halifax, Hanover, Hanson, Kingston, Marshfield, Pembroke, Plymouth and Plympton

**Kennedy Donovan Center EIP - Greater Plymouth**
32 Crescent Street
Kingston, MA 02364
Phone: 508-747-2012
Fax: 508-747-4898

**CATCHMENT AREA 21:** Abington, Avon, Bridgewater, Brockton, East Bridgewater, Easton, Holbrook, Rockland, Stoughton, West Bridgewater and Whitman

**BAMSI Early Intervention**
801 Pleasant Street
Brockton, MA 02301
Phone: 508-586-9855
Fax: 508-583-5847

**South Bay Early Childhood Services - Brockton**
1115 West Chestnut Street
Brockton, MA 02301
Phone: 508-559-0473
Fax: 508-427-5361
Referral Line: 800-244-4691

A complete list of Early Intervention programs by city can be found at:
www.massfamilyties.org

Children who have a Neonatal Abstinence Syndrome (NAS) diagnosis are automatically eligible for one year for Early Intervention.
What is it:
A neuropsychological evaluation looks at multiple areas of functioning, including intellectual, academic, attention, and memory. Neuropsychological tests evaluate functioning in a number of areas including: intelligence, executive functions (such as planning, abstraction, conceptualization), attention, memory, language, perception, sensorimotor functions, motivation, mood state and emotion, quality of life, and personality styles.

What to expect:
An assessment is typically conducted over 2-3 sessions for a total of 6-8 hours, sometimes shorter or longer depending on reason for seeking the evaluation as well as the child’s level of focus, fatigue etc. An in-person feedback session is then held to discuss results and a written report follows.

Signs your child may benefit:
Often individuals seek a Neuropsychological Evaluation to understand cognitive strengths and weaknesses, clarify appropriate intervention strategies for cognitive or attentional problems, and to obtain a diagnosis to receive academic accommodations. Neuropsychological programs will help link you to available resources to support your child academically, behaviorally, and developmentally.

“As a father of an adopted son who was born substance exposed, I was scared when professionals who cared for my son suggested that he had a ‘neuropsych’ done. Unfamiliar with this term, it was overwhelming to me. Our neuropsychologist and To The Moon And Back were wonderful though and made me feel comfortable with the process. Come to find out it was mostly my son playing games that tested him. Thanks to the ‘neuropsych’ my son got the IEP he needed and he is now thriving in school.”

- Anonymous Adoptive Father
Neurologists

Neuropsychology Program at Children’s Hospital
Boston  |  (617) 355-6000  |  www.childrenshospital.org

[R] LEAP at Massachusetts General Hospital
Boston  |  (617) 643-6010  |  www.massgeneral.org

[R] Psychology Assessment Center at Massachusetts General Hospital
Boston  |  (617) 726-3647  |  www.massgeneral.org

Clinical Neuropsychology Program at Tufts
Boston  |  (617) 636-5848  |  www.tuftsmedicalcenter.org

[R] Developmental and Behavioral Pediatrics at Boston Medical Center
Boston  |  (617) 414-4841  |  www.bmc.org

Multidisciplinary Evaluation Program at Franciscan Children’s
Boston  |  (617) 254-3800  |  https://disabilityinfo.org

[R] Dr. Carol Leavell
Norwell  |  (781) 738-0570  |  www.drcarolleavell.com

[R] Child&Family Psychological Services/Integrated Behavioral Associates
Multiple Locations  |  (781) 551-0999  |  www.cfpsych.org

Neuropsychology and Education Services for Children and Adolescents
Newton  |  (617) 658-9800  |  https://nesca-newton.com

Integrated Center for Child Development
Canton & Newton  |  (781) 619-1500  |  www.iccdpartners.org

Metrowest Neuropsychology
Norwell & Westborough  |  (508) 983-1425  |  metrowestneuropsych.com

[R] Dr. Drayer
Easton  |  (508) 297-0291  |  www.drjeffdrayer.com

LifeDimensions Neuropsychological Services
Braintree  |  (781) 348-2258  |  http://lifedimensionsnsp.com

Norwood Behavioral Health
Norwood  |  (781) 762-1419  |  http://norwoodbehavioralhealth.com

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What is it:
Developmental-behavioral pediatricians evaluate, counsel, and provide treatment for children and adolescents with a wide range of developmental and behavioral difficulties. They seek to understand the family’s view of the problem and the effect of the child’s problem on the family. Developmental-behavioral pediatricians advocate for the needs of their patients and work closely with a range of supporting medical professionals, school administrators, and other agencies involved with the education, development, and care of the child.

What to expect:
Most initial evaluations take place over a number of sessions with a typical visit lasting 60-90 minutes. Initial visits include observing and talking to the child and the sharing of detailed developmental history, habits, abilities, and challenges. Questionnaires and surveys help to provide further clarification. Standardized assessments of developmental functions (language processing, motor, sensory, visual processing, memory) are combined with assessments of mental health status, socialization and a complete physical and neurological examination. Outside information and evaluations from teachers, therapists, and other providers (including blood tests and imaging studies) are typically reviewed. Further testing, such as genetic screening, and neuropsychological or educational testing may be ordered as part of the initial evaluation. Once the evaluation is completed, the developmental-behavioral pediatrician will provide a report with a specific diagnosis when appropriate. Families may receive recommendations for treatment or referrals to agencies that fund and provide such treatments, help finding therapists, and guidance in educational planning.

Careful follow-up with a developmental-behavioral pediatrician is the norm. The frequency of visits will be higher than with a general pediatrician. A developmental-behavioral pediatrician often acts as an advocate during school planning, providing diagnoses, documentation and support to make sure the child receives needed services. Developmental pediatricians can also prescribe medications when appropriate. Over the long term, they monitor the child as they move through different educational settings, assisting with educational programming, behavioral and medication management, and often act as a care coordinator.

Signs your child may benefit:
Most often, an initial evaluation is sought when a child is not developing, learning, or behaving similarly to same-aged peers. If you are concerned about your child’s developmental, learning, or behavioral problems, a Developmental-Behavioral Pediatrician may be helpful in evaluating and coordinating care and treatment plans.
The following are examples of when a parent or caregiver may seek care for their child from a developmental-behavioral pediatrician:

- A baby born prematurely who fusses a lot and doesn’t sleep or eat well.
- A toddler who is not talking yet and seems preoccupied with certain toys and is uninterested or unable to interact with others.
- A school-aged child that regularly acts out at school and in other settings.
- A school-aged child with poor handwriting, short attention span, low grades and few friends.
- A teenager who suddenly has failing grades and withdraws from social settings.
- Parents of a child diagnosed with autism, ADHD, developmental disorders, or behavioral disorders because they have been bombarded with advice about treatments and possible “cures”. They seek guidance in making the best decisions in choosing interventions most likely to benefit their child without causing harm or undue stress.
- Adolescents with worrisome changes in mood.
- Children of any age with persistent anxiety, depressive moods, fears, sleep disturbances or obsessive-compulsive patterns of behavior.

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**Developmental-Behavioral Pediatricians**

[R] **Boston Children’s Hospital**  
*Department of Developmental Medicine*, Dr. Prock & Dr. Fogler  
Boston | (617) 355-4125 | www.childrenshospital.org

**Child and Adolescent Health Specialists**  
Cohasset | (781) 383-8380 | drbelknap.com

[R] **Boston Medical Center**  
*Developmental and Behavioral Pediatrics*, Dr. Augustyn  
Boston | (617) 414-4841 | www.bmc.org

**Tufts Floating**  
*Center for Children with Special Needs*  
Boston | (617) 636-8100 | www.floatinghospital.org

**Massachusetts General Hospital**  
*Newborn Developmental Follow Up Program*  
Boston | (617) 724-0161 | www.massgeneral.org

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What is it:
Pediatric Physical Therapists are movement and developmental experts. They help children learn to move and use their muscles in ways that encourage normalized development. Physical Therapists concentrate on Gross Motor Development, or large movement development, which includes sitting, walking, running, jumping and playing. Children who are born with in utero substance exposure often have problems which delay or make natural learning of these movements difficult.

What to expect:
A Physical Therapy Evaluation can be requested at any time during your child’s development and will focus on assisting your child to normalize their movement in a way that is appropriate for their age and development. Physical Therapists work in hospitals, outpatient clinics, Early Intervention programs and in schools. A Physical Therapy evaluation may be requested in the NICU to help a child decrease their muscle tightness and encourage flexion, at home through Early Intervention services to work them through the normal patterns of development, by your Pediatrician in an outpatient setting to work on strengthening and sensory regulation, or after age three in your public school to assess and treat any delays or difficulties impacting a child’s ability to manage their school day. A Physical Therapy evaluation looks like play as the therapist is assessing the infant/child’s movement patterns, muscle tone, and strength in a variety of positions (back, belly, sitting, standing). Treatment is most often play based, with specific interventions designed to target movements and sensory inputs that are not naturally developing.

Signs your child may benefit:

- Delayed in milestones, especially sitting and crawling?
- Infant’s muscles tight and do they feel too strong for their age?
- Did your child tolerate tummy time/crawl?
- Does your child “W” sit? Can they ring sit (criss cross applesauce)
- Does your child seek constant movement and have difficulty sitting for quiet play time?
- Are you constantly telling your child not to hit or to use soft hands/body?
- Is your child walking on his/her toes?
Signs your child may benefit (continued):

• Does your child trip and fall more than other peers?
• Does your child walk/run with their belly sticking out?
• Do they “crash” instead of stopping?
• Do they have difficulty catching a ball?
• Do they seem to have unsafe with activity when compared with a peer?
• Does your child seem to respond to pain (or do they seem to have a high pain tolerance)?

Spaulding - Accepts MA Health
Sandwich | (508) 833-4000 | www.spauldingrehab.org

South Shore Hospital - Accepts MA Health
Weymouth | (781) 624-8000 | southshorehealth.org

Bishop Therapy - Private Pay Only
Kingston | (787) 914-2341 | Bishoptherapyservices@gmail.com

Baystate Physical Therapy - Accepts MA Health
Multiple Locations | (866) 296-2778 | baystatept.com

OSP Children’s Therapy Center
Plymouth | (774) 608-7253 | ospchildrenstherapy.com

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What is it:
Occupational therapy helps children develop skills to enhance participation at home, school and in the community. Children have many occupations including playing, learning and developing independence in their self-care skills. They grow and change rapidly as they explore and play, developing sensory-motor coordination, social skills, self-care, and planning abilities.

Occupational therapy uses purposeful and meaningful activities to help individuals develop “skills for the job of living”. This might include learning to eat a variety of foods, ride a bicycle or pump a playground swing, navigate a playground effectively, write their name, get dressed or tie their shoes. Older children may need help learning how to organize themselves during daily routines and homework and participate in chores and meal preparation at home.

What to expect from an outpatient evaluation:
To best determine what will be assessed during the evaluation it is beneficial to have a conversation with the occupational therapist prior to testing so you can outline the functional concerns your child is having. Occupational therapy evaluations can cover a wide range foundational and skill areas including: sensory processing, oral motor skills and eating, fine motor and visual motor skills, balance and gross motor coordination, as well as motor planning (the ability to learn and execute novel motor tasks).

Outpatient occupational therapy evaluations often differ from school-based assessments as the occupational therapist within the public school focuses specifically on the child’s ability to function within the academic environment, most commonly addressing fine motor skill development and handwriting, which are related to classroom performance. The outpatient occupational therapist completes assessments which are relevant to the child’s ability to function in many environments and different roles, addressing a variety of areas that impact successful participation.
Signs your child may benefit:

- Avoids or over responds to daily events that involve touch, taste, smells or sounds (e.g. hair cutting, eating, going to a mall, vacuum cleaner). May become fearful, overly active, aggressive or meltdown during or after these events.

- Presents with eating difficulties. May be extremely picky eater with limited food repertoire or sloppy and uncoordinated

- Delayed development of typical gross motor milestones (slow to roll over, crawl, sit, and walk)

- Appears clumsy: trips or falls frequently, bumps into furniture and people, safety concerns

- Does not enjoy age appropriate motor activities such as slides, swings, ball games, building toys, drawing, cutting, and writing.

- Says "I can't" or "I won't" to age appropriate self-care or play activities.

- Demonstrates difficulty with transitions or change of plans. Prefers very set routines and can be rigid or controlling

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**Occupational Therapists**

[R] South Shore Therapies
Multiple Locations | (781) 335-6663 | southshoretherapies.com

Spaulding - Accepts MA Health
Sandwich | (508) 833-4000 | http://spauldingrehab.org

South Shore Hospital - Accepts MA Health
Weymouth | (781) 624-8000 | www.southshorehealth.org

OSP Children’s Therapy Center
Plymouth | (774) 608-7253 | ospchildrenstherapy.com

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What is it:
Speech therapy is an intervention provided by a Speech-Language Pathologist (SLP) to help people who have problems with speech, language, thinking, and swallowing. Speech disorders occur when a person is unable to produce speech sounds correctly or fluently, or has problems with their voice or resonance. Language disorders occur when a person has trouble understanding others (receptive language), or sharing thoughts, ideas, and feelings (expressive language). SLPs are also qualified to work with children who have trouble with pragmatic (social) aspects of language as well as executive functioning disorders.

What to expect:
To begin services, the SLP will complete an initial evaluation to determine if there is a need for therapy, provide a diagnosis and determine goals to work towards. After these recommendations have been made, therapy can begin. The amount and duration of therapy is determined based on your child’s needs but is typically provided once or twice per week. For children ages birth-three services can be provided by an Early Intervention agency. Children who are school age may be eligible to receive therapy through the public school system. All children may also have the option to access speech therapy through an outpatient clinic by accessing their health insurance. Services are covered by health insurance depending on your coverage and your child’s disability.

Signs your child may benefit:

• Does not smile or interact with others (birth and older)
• Does not babble (4-7 months)
• Makes only a few sounds or gestures, like pointing (7-12 months)
• Does not understand what others say (7 months-2 years)
• Says only a few words (12-18 months)
• Words are not easily understood (18 months-2 years)
• Does not put words together to make sentences (1.5-3 years)
• Has trouble playing and talking with other children (2-3 years)
• Has trouble with early reading and writing skills* (2.5-3 years)
• Produces speech that is unclear, even to familiar people (2-3 years)
• Has trouble understanding nonverbal communication (school age)
• Has trouble initiating, participating and maintaining conversation with peers and adults (school age)
• Has difficulty with organization, time management, sequencing, etc. (school age)

Resources: www.asha.org

Speech Language Pathologists

[R] Golden Speech Therapy
Plymouth | 781-603-8529 | http://goldenspeechtherapy.com

South Shore Hospital - Accepts MA Health
Weymouth | (781) 624-8000 | www.southshorehealth.org

[R] South Shore Therapies
Multiple Locations | (781) 335-6663 | southshoretherapies.com

Hingham Speech Therapy
Hingham | 617-840-5455 | www.hinghamspeechtherapy.com

OSP Children’s Therapy Center
Plymouth | (774) 608-7253 | ospchildrenstherapy.com

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What it is:
The Children’s Behavioral Health Initiative is a program originally offered through Mass Health that offers a variety of services, provided primarily in home or the community for children in need of behavioral health supports due to a diagnosed mental health condition. As of June 1, 2019 these services are also available through commercial insurances. Please call for a listing of covered providers.

What to expect:
A therapist will meet with you and your family to discuss the needs of your child and family. They will come up with a treatment plan that meets you families needs and works on the identified needs of your child. They may discuss adding additional services to best help your family. The services that the CBHI program can provide include:

- **Outpatient Therapy** is often where families first look for help as this type of therapy can help with many kinds of challenges. A therapist will meet with your child, usually in an office setting. The therapist will work out a plan based on your child’s strengths and needs and can help you get your child other needed services.

- **In-Home Therapy** works with your whole family, not just your child, in your own home and community setting to strengthen relationships and support your child. In-Home Therapy can help your child and family resolve conflicts, learn new ways to talk to and understand each other, create new helpful routines, and find community resources.

- **Intensive Care Coordination** may be the right service for you if your child or teen has serious emotional or behavioral needs or if you need help getting all the service providers in your child’s life to work together. A care coordinator helps bring everyone together to work toward common goals. You can choose who is on your team, including professionals such as therapists, social workers, teachers, and your personal supports, such as friends or relatives. You may also ask for a "Family Partner," a parent trained to help you make sure that your voice is heard. Together, the team will help you and your child reach your goals for your family.

- **In-Home Behavioral Services** helps a child changing behaviors that get in the way of his/her everyday life. An In-Home Behavioral team will work with you and your child to create a behavior plan that will help your child change these behaviors to improve their daily life.

- **Therapeutic Mentors**, Some children and teens want to get along with others but need help learning how to connect with people. A Therapeutic Mentor can help your child learn social and communication skills and practice them in everyday settings.
Family Support and Training (Family Partners) guide parents and caregivers in helping their children reach their treatment goals. They are parents or caregivers of children with special needs—they’ve “been there,” understand what families go through, and can share their experiences. Family Partners are not behavioral health professionals, but they understand child and family services and they can coach you as you work to meet your child's needs.

Signs your child may benefit:

- Diagnosed with a mental health condition such as ADHD, anxiety, depression, or PTSD.

- Behaviors are challenging to manage at home or in another setting, such as school, and you need new ideas on how to help your child.

- Exposed to trauma such as removal from their birth family due to abuse, abandonment, or neglect.

- You, teacher or another professional suspect your child may have an undiagnosed mental health condition.

**Children’s Behavioral Specialists**

High Point
(774) 213-8338 | www.hptc.org

BayState Community Services
(508) 830-3444 x316 | https://baystatecs.org

South Bay Community Services
(508) 427-5362 | www.southbaycommunityservices.com

Family Continuity
(508) 746-6762 | http://familycontinuity.org

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Outpatient Therapy

What is it:
Outpatient Therapy is often where families first look for help as this type of treatment can help with many kinds of challenges. A therapist will meet with your child, usually in an office setting. The therapist will develop a plan in collaboration with caregivers based on your child’s strengths and needs and can help link your child other needed services.

What to expect:
A therapist will typically meet with the child and the important people in their life to provide background on the identified concerns you hope to address in counseling. The therapist will likely have you fill out paperwork covering a variety of questions around physical health, development, and mental health. The therapist may ask you to complete a screening survey to assess for a variety of mental health conditions. During this first meeting they will address any pressing, acute issues that your child may be experiencing and will begin to develop a treatment plan.

Signs your child may benefit:

- Diagnosed with a mental health condition such as ADHD, anxiety, depression, or PTSD.

- Behaviors are challenging to manage at home or in another setting, such as school, and you need new ideas on how to help your child.

- Exposed to a trauma such as removal from their birth family due to abuse, abandonment, or neglect.

- You, teacher or another professional suspect your child may have an undiagnosed mental health condition.
Outpatient Therapy Clinics

Fusion Behavioral Health
(508) 209-4438 | www.fusionbh.com

Middleboro Counseling Center
(508) 947-6100 | www.northeasthealthservices.com

South Shore Mental Health
(617) 847-1914 | www.ssmh.org

Baystate Community Services
(617) 471-8400 | https://baystatecs.org

Family Continuity
(508) 747-6762 | http://familycontinuity.org

[R] South Bay Community Services
(508) 830-0000 | www.southbaycommunityservices.com

[R] Christy Roman, LMHC
(508) 932-1973 | www.christyroman.net

[R] Psychology Associates
(508) 747-2718 | https://psych-associate.com

* Psychology Today offers a full listing of therapist by specialty and location. Your insurance company can also provide a list of in network therapists.

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South Shore Medical Center
Kingston: (781) 585-2200 | Norwell: (781) 878-5200
www.southshorehealth.org

Brigham and Women’s Harbor Medical
Pembroke: (781) 952-1500 | Weymouth: (781) 335-3900
www.brighamandwomens.org

Plymouth Pediatric Associates
Plymouth | (508) 746-5900 | plymouthpediatricassociates.com

Long Pond Pediatrics
Plymouth | (508) 747-1663 | longpondpediatrics.com

Atrius Health
Duxbury | (781) 934-0172 | www.atriushealth.org

* Well Child Exams are recommended at the following intervals by the American Academy of Pediatrics

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<table>
<thead>
<tr>
<th>Age</th>
<th>Examinations/Tests</th>
</tr>
</thead>
<tbody>
<tr>
<td>By 1 week</td>
<td>Jaundice and weight check, feeding issues, metabolic screening, newborn or parent vaccines (if needed)</td>
</tr>
<tr>
<td>2 weeks</td>
<td>Weight check, physical exam, newborn or parent vaccines (if needed)</td>
</tr>
<tr>
<td>1 month</td>
<td>Weight check, physical exam, vaccines (if needed)</td>
</tr>
<tr>
<td>2 months</td>
<td>Physical exam, growth and development, vaccines (if needed)</td>
</tr>
<tr>
<td>4 month</td>
<td>Physical exam, growth and development, vaccines (if needed)</td>
</tr>
<tr>
<td>6 months</td>
<td>Physical exam, growth and development, vaccines (if needed)</td>
</tr>
<tr>
<td>9 months</td>
<td>Physical exam, growth and development, hemoglobin finger stick, vaccines (if needed)</td>
</tr>
<tr>
<td>12 months</td>
<td>Physical exam, growth and development, TB skin test and/or vaccines (if needed)</td>
</tr>
<tr>
<td>15 months</td>
<td>Physical exam, growth and development, vaccines (if needed)</td>
</tr>
<tr>
<td>18 months</td>
<td>Physical exam, growth and development, vaccines (if needed)</td>
</tr>
<tr>
<td>2 years</td>
<td>Physical exam, growth and development, lead screening and/or vaccines (if needed)</td>
</tr>
<tr>
<td>2.5 years</td>
<td>Physical exam, growth and development, vaccines (if needed)</td>
</tr>
<tr>
<td>3 years</td>
<td>Physical exam, growth and development, TB skin test (if needed)</td>
</tr>
<tr>
<td>4 years &amp; older</td>
<td>Physical exam, growth and development, Annual check-up recommended, vaccines and/or hemoglobin finger stick (if needed), urinalysis, vision/hearing screenings</td>
</tr>
</tbody>
</table>
What it is:
A medical clinic with expertise in caring for children who were born substance dependent or exposed. It’s an opportunity to see multiple provider types in one setting. Another advantage of a multidisciplinary clinic is continuity of care because all of the providers work for the same hospital and have close communication around caring for your child. The evaluation by their team will help guide the care of your child as they grow.

What to expect:
Depending on what concerns you or your existing team has for your child, you may see providers such as a Pediatrician, Developmental Pediatrician, Occupational Therapist, Physical Therapist, Speech Therapist, Social Worker, Infectious Disease, or Patient Navigator.

Signs your child may benefit:
- Born substance dependent or exposed and you wish to be followed by a team with experience caring for children like yours.
- Close monitoring of your child by a team that works in sync with one another for best continuity of care.
- Determining your child’s diagnosis and how to best support your child at home, daycare, or in a school setting.
- These clinics also work hard to decrease hospital admissions for these children.

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**Multidisciplinary Clinics Focused on Children with In Utero Substance Exposure**

**Boston Medical Center SOFAR Clinic**  
Boston, MA | (617) 414-5988 | www.bmc.org

**Massachusetts General Hospital HOPE Clinic**  
Boston, MA | (617) 724-4643 | www.massgeneral.org

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The following are optometrists with experience diagnosing and treating the eye problems that children born with substance exposure are susceptible to. Not all optometrists have this area of specialization.

**Family Eye Care Solutions** | Dr. Laura Vasilakos, OD  
Hanover, MA | (781) 829-9400 | www.familyeyecaresolutions.com  

**New England College of Optometry** | Dr. Laudon & Dr. Hinrichs  
Boston, MA | (617) 262-2020 | www.necoeyecare.org  

**Boston Children’s Hospital** | Dr. Anna Maria Baglieri, OD  
Weymouth, MA | (617) 355-6401 | www.childrenshospital.org  

**Dr. Michael Smookler, OD**  
West Roxbury, MA | (617) 469-0015 | www.drsmookler.com  

**Dr. Cathy Stern, OD**  
Canton, MA | (781) 575-0057
Grandparents Raising Grandchildren (MA): A support network for grandparents raising grandchildren. Various groups meet throughout the state. A full listing of groups is available at: www.massgrg.com or call (617) 748-2454

Sober Mommies (MA): A support network for Moms in recovery that includes online and in person support. For more information: www.sobermommies.com or call (781) 247-5672

Recovering Moms Helping Moms (Plymouth): This group meets on Mondays from 10-11am at 29 Carver Rd, Plymouth, MA and Wednesdays at 5pm Main St Extension, Plymouth, MA. Their goal is to help local moms in recovery build a network of support and friendship. For more information call Angelica (857) 333-0120 or Nicole (843) 424-9843

Nurturing Fathers Group (Plymouth): Fathers learn age appropriate expectations for your child, behavioral management, discipline techniques and appropriate consequences. Dinner and childcare provided. Group meets Thursdays 1/24/19– 4/11/19 from 6:00-7:45 pm. Registration required. Please contact Amelia at (617) 481-7227 ext. 166 or awoodley@baystatecs.org

Plymouth Recovery Center (Plymouth): Peer Recovery Center geared at providing structure and purpose to those in recovery from addiction. They regularly offer groups such as AA, NA, ACOA, Recovery Yoga, and Art therapy. The center is a drop in site open Monday to Friday, 9 am to 5 pm. A monthly list of activities is available on their Facebook page or by calling (508) 927-4982.

South Shore Peer Recovery (Scituate): A center where “peers in recovery, their family members and friends can actively work on their recovery and support each other”. Hours are Monday-Thursday, 9:00 a.m. to 7:00 p.m., Friday 9:00 a.m. to 3:00 p.m., and Saturdays from 9:00 a.m. - 1:00 p.m.. For more information: www.southshorepeerrecovery.com or call (781) 378-0453

Boston Bulldogs Running Club (MA): A co-ed wellness club that provides anonymous and safe community support for all of those adversely affected by addiction-those in recovery, their families and friends, the clinical community, and community at large. The group meets on Tuesdays at Nelson Park in Plymouth at 630 pm. More info can be found at www.bostonbulldogsrunning.com

Magnolia New Beginnings (MA): A peer support network for individuals battling a Substance Use Disorder and those who love them. For more information: www.magnolianewbeginnings.org or call (617) 291-3266

Plymouth Youth Development Collaboration (Plymouth): A community coalition motivated around enhancing the lives of youth in our community. The goal of PYDC is to prevent and reduce youth substance use, as well as increase protective factors that support a healthy community. For more information: www.pydcplymouth.org or call (508) 224-5049
South Shore Community Partners in Prevention (CHNA 23): A cross agency collaboration for 11 towns (Carver, Duxbury, Halifax, Hanover, Hanson, Kingston, Marshfield, Pembroke, Plymouth, Plympton, and Rockland) that identifies the health needs of these communities and works to address these needs and improve the health of the community.

PCO HOPE (Plymouth County): Provides help, outreach, prevention and education to those in Plymouth County. Drop in centers are available several times a month in East Bridgewater and Plymouth for those seeking Substance Use Disorder resources. East Bridgewater-1st and 3rd Thursday of each month at 400 Pleasant St, E Bridgewater, MA. 5-8:30 pm. Plymouth-Tuesdays immediately following the 1st and 3rd Thursday of the month at 89 Court St, Plymouth, MA. 5:00-8:30 pm. For more information: www.pcohope.org

Team Sharing (National): An organization of parents who have lost a child to a Substance Use Disorder (SUD). Through social networking, community activism, grief services, and advocacy they provide support to grieving families while raising awareness around SUD. For more information: www.teamsharinginc.org or call (978) 375-4941

No First Time (MA): A comprehensive drug prevention program that utilizes a MA State Trooper and Drug Recognition Expert, as well as a recovering addict in a 45 minute presentation aimed at educating young people on the dangers of drugs. For more information: www.evangfoundation.org

Learn to Cope (MA): A support network that offers education, resources, peer support and hope for parents and family members coping with a loved one who is drug dependent. Support meetings are held weekly throughout the state. For more information: www.learn2cope.org or call (508) 738-5148

South Shore Foster Closet: Provides donated new and gently used clothing to children in foster care. Find them on Facebook: @southshorefostercloset or call (781) 336-8439

Wonder Fund (MA): Serves children engaged with the Department of Children and Families by providing enrichment opportunities and access to emergency aid and transitional necessities. For more information: www.wonderfundma.org or call (617) 748-2368

Sunshine Farm Sanctuary (Bridgewater): A program aimed at providing healing and bonding for children in foster care through relationships with animals, arts and crafts, physical activity, and agricultural experiences. For more information: www.sunshinefarmssanctuary.com or call (508) 341-7822

Plymouth Resource Center: This is a free service that works with families with youth 0 - 21 to eliminate barriers and access services and resources. We work closely with all families, caregivers, kinship, grandparents as well as individuals in need of support. 774-283-6531
Second Nature Social Skills
Plymouth | 508-747-2663 | www.secondnaturesocialskills.com

Skills For Living at Chapman Farm School
Norwell | (508) 232-0712 | www.chapmanfarmschool.org

Building Bridges, YMCA
Hanover | (781) 829-8585 | https://ssymca.org

Many OT/SLP offices offer social skills groups and 1:1 social pragmatic instruction

Gina McClellan, Special Education Advocacy of MA
Braintree | (617) 780-7571 | www.specialedadvocacyofma.com

[R] Cape Cod Advocates
Barnstable | (508) 428-2288 | www.capecodadvocate.com

Federation for Children with Special Needs
Boston | (800) 331-0688 | www.fcsn.org

Joann Lebherz, Coastal Education Advocacy
(774) 205-4278 | (774) 205-2926 | coastaleducationadvocacy.com

[R] Catherine Mayes
Marshfield | (781) 771-8867

Sankey Law Offices
Braintree | (781) 930-3127 | www.sankeylaw.com

Nuttall, MacAvoy & Joyce, P.C
Marshfield | (781) 837-7428 | www.nmjedlaw.com

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Summer Camps

[R] Ferry Hill Day Camp
Marshfield | (508) 747-2663 | secondnaturesocialskills.com

[R] Camp Akeela
Vermont | (866) 680-4744 | www.campakeela.com

[R] South Shore Natural Science Center
Norwell | 781-659-2559 | southshorenaturalsciencecenter.org

Visit South Shore Education Collaborative for more resources: www.ssec.org

* Many local YMCAs have Inclusion Facilitators at their camps *

Recreational Activities for Children with Differences

[R] C.O.R.S.E. Foundation
Scituate | (781) 545-7736 | www.corsefoundation.org

[R] South Shore SNAP
Hingham | www.southshoresnap.com

South Shore YMCA,
Hanover | (781) 264-9400 | www.ssymca.org

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Daycare Providers

**Head Start**  
(866) 763-6481 | www.acf.hhs.gov/ohs

**Crayon College**  
Bourne: (508) 759-6620 | Plymouth: (508) 747-5437  
Kingston: (781) 585-5437 | crayoncollege.us

[R] **Bay Farm Montessori**  
Duxbury | (781) 934-7101 | https://bfarm.org

**Tiny Town Children's Center**  
Plymouth | (508) 224-7769

**Methodist**  
Plymouth | (781) 729-5212 | www.unitedmethodistnurseryschool.org

**Leaping Frogs**  
Plymouth | (508) 224-4999

**Hop, Skip, Jump**  
Plymouth | (508) 746-6010 | www.hsjpreschool.com

**Beansprout University**  
Marshfield | (781) 837-7031

[R] **The Magical Years**  
Halifax: (781) 294-9292 | Pembroke: (339) 793-2889  
Kingston: (781) 585-3842 | www.themagicalyears.org

**Magic Dragon**  
Duxbury | (781) 934-7600 | www.duxbury.k12.ma.us/magicdragon

**Pudding Hill**  
Marshfield | (781) 837-8010 | www.puddinghillpreschool.org

**Steeple School**  
Marshfield Hills | 781-837-5640 | https://steepleschool.org

**Cherubs**  
Marshfield | (781) 837-8044 | www.cherubs1.com

[R] **Woodside**  
Plymouth | (508) 830-3384 | www.woodsidescrc.org

**YMCA at Redbrook**  
Plymouth | (508) 927-3100 | www.oldecolonyymca.org

**Kindercare**  
Plymouth | (508) 830-0817 | www.kindercare.com

**Big Leaps**  
Plymouth | (774) 404-7121 | www.bigleapspreschool.com

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Interested in becoming a Community Partner?

Email theresaharmonLICSW@gmail.com to inquire.

Community Partners are those who have been trained in best practices in care for children with NAS.

“One child is born every 15 minutes with symptoms of drug withdrawal.”

- Vanderbilt University (2018)