FAQs: Vermont CAPTA Notification

Q: What is the purpose of the CAPTA Notification?

Under the federal Child Abuse Prevention and Treatment Act (CAPTA), each state must provide the Children's Bureau with annual aggregate data regarding substance-exposed newborns. In Vermont the CAPTA notification form was developed to allow these data to be collected in a de-identified way to meet federal requirements separately from theDepartment for Children and Families (DCF) reporting system.

Q: In what situations is a CAPTA notification made based on substance use during pregnancy?

CAPTA notifications are indicated for newborns exposed to the following substances in pregnancy: Prescribed or non-prescribed

- Medications for opioid use disorder (MOUD/MAT)
- Opioids
- Benzodiazepines
- Cannabis (after the first trimester)
- Alcohol (after the first trimester)
- Non-prescribed Stimulants
- Illicit Substances (methamphetamine, cocaine, fentanyl, heroin, MDMA)

Q: Who is responsible for completing the CAPTA form?

Each hospital will designate personnel to complete the CAPTA form. This could include members from social work or case management, nursing staff, or another role at your facility.

Q: When should the CAPTA form be completed?

The notification form should be completed when the infant is discharged from the hospital.

Q: Should hospitals inform the family they are completing a CAPTA notification?

Hospital staff should be transparent and should emphasize that the CAPTA form does not contain any identifying information about the infant or birth parent. A CAPTA family education handout should beprovided to families.

Q: What is the difference between a CAPTA Notification and DCF Report?

- A CAPTA notification form is submitted to collect required aggregate data for the Children's Bureau. No identifying information about the infant or birth parent is collected.
- A DCF Report is made for concerns of child safety through the Family Services Division hotline. Reports include information about the infant and family to allow DCF staff to determine if an assessment and intervention are warranted to address child abuse or neglect. In Vermont, reports regarding substance use in pregnancy without concerns for child safety are not accepted.

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Q: When a newborn is transferred who is responsible for completing the CAPTA form?

The hospital discharging the newborn is responsible for completing the CAPTA notification form.

Q: How do hospital staff submit a CAPTA notification form?

Hospital staff can submit the e-form by accessing their CAPTA Notification Algorithm and scanning the QR code, clicking the electronic URL, or visiting https://www.healthvermont.gov/family/family-planning-pregnancy/substance-use-pregnancy-information-providers

Secure faxes and email will not be accepted after January 1, 2026.

Q: What is the birth parent's residency is outside of Vermont?

A CAPTA notification form should be completed for any newborn with substance exposure born in Vermont regardless of where the birth family resides.

Q: Where can hospital personnel to learn more?

Visit https://www.healthvermont.gov/family/family-planning-pregnancy/substance-use-pregnancy-information-providers for training materials. There are patient hand-outs available here as PDF downloads that can be printed for patient education.

Q: Who can hospital personnel contact if they have questions or need support with the revised CAPTA notification process?

Direct all questions to AHS.VDHFCPCAPTA@vermont.gov.

VERMONT DEPARTMENT OF HEALTH

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