



Tulalip Charitable Contributions Funds Distribution Report

NAME OF AGENCY: Pediatric Interim Care
ADDRESS: 328 4th Ave. S., Kent, WA 98032
CONTACT: (253) 852-5253; <http://www.picc.net>

GENERAL GOALS: PICC brings babies safely through withdrawal from drugs, including heroin, cocaine, methamphetamines, methadone, and prescription drugs. The pioneering program also facilitates visitation for families, provides caregiver training, follows the babies after they leave, and offers a range of community outreach and education services.

SPECIFIC USE FOR THIS AWARD:

The grant from Tulalip Tribes supported PICC's Infant Withdrawal Program, providing specialized 24-hour care for infants withdrawing from drugs their mothers took during pregnancy. On a cost-per-baby basis, the grant provided the unreimbursed direct cost of care to withdraw one baby from drugs. Maya is a Native American infant representative of those helped by Tulalip Tribes Charitable Fund's grant.

For more information, see the attached report from Pediatric Interim Care.





July 1, 2015

Marilyn Sheldon
Tulalip Tribes Charitable Fund
Quil Ceda Village
8802 27th Ave. N.E.
Tulalip, WA 98271

RE: Report for Grant Q4 2013 14.2

Dear Ms. Sheldon:

Please find enclosed the report for the grant of [REDACTED] which Pediatric Interim Care Center received from Tulalip Tribes Charitable Fund March 11, 2014.

We send this report on our challenges and progress along with our heartfelt gratitude for the wonderful support Tulalip Tribes has provided to the drug-exposed and medically fragile newborns in our care. On behalf of all the babies you have helped, thank you.

With best wishes,

Barbara Drennen
Executive Director

Report to Tulalip Tribes Charitable Fund
Pediatric Interim Care Center

Grant Amount: [REDACTED]

Grant Date: March 11, 2014

Program: Infant Withdrawal Program

How Funds Were Used:

The [REDACTED] grant from Tulalip Tribes supported PICC's Infant Withdrawal Program, providing specialized 24-hour care for infants withdrawing from drugs their mothers took during pregnancy. On a cost-per-baby basis, the grant provided the unreimbursed direct cost of care to withdraw one baby from drugs. The following Native American infant is representative of those helped by Tulalip Tribes Charitable Fund's grant:

MAYA

In the past year PICC has seen a resurgence in the number of infants prenatally exposed to methamphetamines. Maya was one of this growing number. She came to PICC from a regional hospital when she was three days old. Like many methamphetamine-exposed babies, Maya was small (5 ½ pounds) and had difficulty eating an adequate amount to grow and gain at a healthy rate. Without therapeutic handling and feeding, these babies can be at risk for dehydration, malnutrition, and failure to thrive. During her month-long stay in PICC's Newborn Nursery, Maya was kept on a feeding schedule and expertly encouraged to take an adequate amount of formula at each feeding. By the time she was discharged, Maya was eating normally and weighed a healthy 9 ½ pounds. Maya went home with a relative who has adopted Maya's older sibling. At last report, Maya was continuing to thrive and develop normally.



Program Outcomes:

In 2014 PICC's Infant Withdrawal Program provided 2,865 days of medically supervised 24-hour care for 75 infants. All of these infants met the medical goals outlined in the grant application: 100% were successfully weaned of drug dependency and/or stabilized to a healthy weight and readiness for home care. Of the 68 infants discharged in 2014, 24% of the babies went home with parents, 29% were placed with relatives, and 47% were placed in foster care. All primary caregivers received training in the infant's care

prior to discharge, and our Social Worker has provided or is providing a minimum of six months home follow-up to all infants whose caregivers voluntary cooperate (82%).

Challenges:

In 2014 PICC experienced a marked rise in the number of babies prenatally exposed to methamphetamine, often in combination with opiates or other drugs. We continued to see a high percentage of opiate-exposed babies, reflecting nationwide trends in heroin and prescription opioid abuse. These infants generally require narcotic assisted withdrawal, 24-hour medical monitoring, and longer stays. The average stay in 2014 increased to 41 days.

Accomplishments:

Pediatric Interim Care Center is an innovative, pioneering program in the safe care of drug-exposed newborns. Over PICC's 25 years of operation, it has gained and kept the support of the Washington State Legislature and the trust of 43 hospitals statewide that have referred newborn patients to PICC's care. PICC has successfully weaned 2,900 babies from their drug-dependency and given each and every one of them a safe and healthy start in life. By providing a cost-effective alternative to hospital care, PICC saved Washington State \$1,135,420 in Medicaid costs for hospital care in 2014 alone.