



## Alaska FASD Partnership Steering Committee Meeting MINUTES – July 29, 2010

### **Members present**

Kathy Fitzgerald  
Mike Baldwin  
Cindy Anderson  
Suzan Hess  
Deb Evensen  
Alex Edwards  
Vickie Tinker  
Bob Froehle/Stephanie Johnson  
Cheri Scott  
Geri Benshoof

### **Staff**

Teri Tibbett

### **I. Welcome**

- a. Teri offered an overview of the Partnership, including its formation under the Alaska Mental Health Board and Advisory Board on Alcoholism and Drug Abuse in early 2010; advocacy efforts during the 2010 legislative session; the FASD legislative appreciation luncheon at the Capitol in April; budget and policy outcomes related to FASD in 2010; membership is currently over 60 organizations/individuals.
- b. Teri referenced recommendations listed in the “2010 FASD Southeast Alaska Regional Conference Report” (see document) as a possible starting point for the steering committee.
- c. Teri indicated her role is staff to the committee and turned management of the meeting to Kathy Fitzgerald (Anchorage), representing the Governor’s Council on Disabilities and Special Education (GCDSE), who agreed to chair the meeting until a permanent chair is elected.
- d. Kathy offered background on the GCDSE and their affiliation with FASD. She noted the council receives a high number of comments from constituents about the lack of services for people affected by FASD. She referenced the work of GCDSE’s ad hoc committee addressing Autism (see document) and possibly adopting a similar process in addressing the gaps and solutions related to FASD. She indicated that department buy-in was critical to the success of the Autism workgroup and recommended this group consider inviting members of the department as well.

### **II. Introductions**

Cheri Scott (Anchorage) – Project Coordinator at Stone Soup Group. Manages a DBH-funded “Family Support Project” for families and provides training to service providers and others who work with people affected by FASD. Provides support to families affected by other disabilities as well. Is a parent of a child with FASD.

Geri Benshoof (North Pole) – Member, State Board of Education. Has worked in special education in Alaska. Interested in FASD because of personal experience with a friend who has a child with an FASD.

Suzan Hess (Sitka) – Speech Pathologist. Provides services to people affected by FASD. Works with SEARHC, Sitka Community Hospital and Mt. Edgecumbe High School. Formerly worked with the Sitka diagnostic team. Interested in healthy families, prevention, education and helping families become healthy.

Vickie Tinker (Kenai) – Coordinator, FASD program at Frontier Community Services on Kenai Peninsula. Coordinates diagnostic clinic and provides education in the community.

Alex Edwards (Anchorage) – Project Coordinator/Research Associate, Arctic FASD Regional Training Center. Works in the field of education, training, and research, under a grant through the University of Alaska.

Cindy Anderson (Anchorage) – Director of Special Education with the Anchorage School District. Suggested education is an important service the community needs to provide. Also advocated for additional supports for children with FASD.

Deb Evensen (Homer) – Educator, Consultant. Has worked with children with FASD, and on different projects throughout North America related to FASD. Currently working with the Anchorage School District on FASD projects. Wants the group to include adults in whatever direction it moves.

Michael Baldwin (Anchorage) – Advocate, Former coordinator of FASD clinic at Southcentral Foundation. Has behavioral health background with experience as a clinician, research, training.

Bob Froehle / Stephanie Johnson (Nome) – Superintendent/Mental Health Clinician at Nome Youth Facility (NYF). Noted that 60% - 70% of admissions to NYF are likely affected by FASD. They want to help end the cycle, but also figure out how to serve the children who come to their facility. Works with 26 villages in the Norton Sound region.

### **III. Organizational Considerations of the Steering Committee**

Cheri – The SE-AK FASD conference report offers a good foundation to work from. Offers several areas for the Partnership to focus on.

Kathy – What should the system look like for individuals and families? What is the educational component? What does the services component look like?

Vickie – Thinks the group needs to gel first before establishing the goals and objectives.

Kathy - Are we interested in designing a system of care? Identify areas for advocacy efforts?

Deb – Alaska lacks pathways in the system for people with FASD. How do we facilitate having the solution come from within? How do we facilitate system change so there are pathways for people to follow? Amazing people doing amazing things, but they are not networked or coordinated.

Kathy – Come up with an overall system that supports families. There is a system in the Developmental Disabilities (DD) world, if we can move FASD over there. Need an FASD waiver without an age limit.

Need the support from the Trust, Senior and Disabilities Services (SDS) and Division of Behavioral Health (DBH).

Bob – Nome Youth Facility is one of eight juvenile facilities in the state, which deal with kids who have FASDs. Would like staff to be thoroughly trained in all aspects. Would like training for youth as well. Could facilitate working with all eight facilities – goal to educate over 1,000 youth a year.

#### **IV. What are some of the current gaps and possible solutions?**

Gerri - Staff training in preschool and early intervention, and K-12. This isn't just a special education focus. Training for all staff who deal with youth – including those who have not been diagnosed, but are in the general population and showing FASD presentations. Also, public education is important.

Suzan – Biggest issue is the eligibility criteria. Her goal is to change the eligibility criteria to better reflect what they know now. Also, would like to see an eligibility waiver. Eligibility would be broader. Changing it to match function, not the IQ.

Vickie – Agrees with what has been said so far. Her biggest struggle is access to the school district. Has done trainings at the detention facility, but school's are so pressed for in-service time that FASD training goes to the bottom of the list. Would like to see what ASD is doing and expand it to other districts. Interested in what happens in the education system, but also what happens into adulthood.

Alex – From the RTC perspective, the goal is to have more people trained. Changing licensure requirements to include FASD training as part of continuing education.

Cindy – Person-centered planning, as each child needs different services. Co-plan and co-train with agencies so there's consistency with schools, service providers, families. Everyone using the same language and methods. Age-appropriate peers should be a component. Transition to adulthood is also important for successful integration into the community. "Healthy Choices" curriculum.

Bob – Specialized diagnostic piece is missing.

Kathy – Noted hearing several common themes: Training and Educational; Diagnostic; Adult Services.

Mike – Would like to see a more seamless system. Cross systems of care. Also, improvement of the workforce piece – educating professionals with more than just a superficial knowledge of FASD. Educating people across the systems.

Deb – Need more diagnostic teams. Need to educate more medical professionals so more people are catching it. Doctors can offer a diagnosis, not just the diagnostic teams. There is extensive information, experts, highly qualified people – it takes really good educators, master teachers with education and experience to teach and they need about 4 days for it to really get through. Deeper, longer training (example: Can't learn about blindness in just a 2-hour in-service).

Kathy – Needs to educate the system to realize that training is important.

Cheri – Prevention of more FASD. Recommended PCAP (Parent-Child Assistance Program, out of Washington state). "If we don't support the moms, we are going to see more children affected."

Kathy – Prevention and supports are needed.

Kathy – Asked if the committee supported approaching the state departments for representation on the steering committee – possibly starting with the commissioners and ask them to send someone (Hogan (DHSS), Schmidt (DOC), LaRoux (DEED), ??? (DOL), etc.

Mike - Steering committee could establish goals in several domains, e.g. Housing, Diagnosis, Family-Support, etc.) and establish committees based on those goals.

## **V. Closing**

- a. Kathy – Thanked the group for allowing her to chair the committee’s first meeting, and reminded them of the election of a permanent chair at the next meeting.
- b. Cheri – Suggested Teri send out a Doodle Scheduling Request for the week of August 16.

## **VI. Next Meeting**

- a. Review support documents, “2010 FASD Southeast Alaska Regional Conference Report” and “Preliminary Report of the Ad Hoc Committee on Autism: Findings and Recommendations” prior to the next meeting.
- b. Elect a permanent chair.
- c. Discuss member additions to steering committee.
- d. Continue discussing goals/objectives.
- e. Discuss areas of focus/committees.