

**Alaska FASD Partnership Steering Committee  
March 9, 2016 - MINUTES**

**Present:** Clayton Holland, Mike Jeffery, Vickie Tinker, Stephanie Johnson, Jeanne Gerhardt-Cyrus, Jenn Wagaman, Meghan Clark, Monica Charles-Leinberger, Teri Tibbett.

**I. Approval of agenda.** Approved.

**II. Approval of Minutes 2/10/16 and 2/24/16** (not approved, will do next time)

**III. Letters of support for SB 91 Omnibus Crime Bill and HCR 21 ACEs**

Teri will send out the draft letters for approval from the steering committee after they've been reviewed by a few people.

**IV. Member updates**

Mike Jeffery has become Surrogate Parent with the Barrow School District for children who are wards of the state.

Jeanne announced a OPT in Kiana conference that is offering opportunities for empowerment for youth in Kiana.

Teri gave a legislative update related to the \$10 million per year for three years that was added for behavioral health treatment and recovery grants in the House Finance Committee.

**V. Discussion with John Bennett, Alaska Center for Resource Families (ACRF)**

John: ACRF is a private non-profit agency charged with providing training for foster and adoptive families statewide. They have lending libraries and other resources, on-site and web-based trainings on attachment disorders, grief and loss, trauma, FASD, etc. OCS families are required to have regular training. There is a 16-hour core training that offers core issues related to basics of foster care, that offers some overview of FASD and other disabilities, but by no means is it comprehensive. Therapeutic foster care and regular foster care are differently managed. Not too many trainings for OCS staff. OCS contracts out training for training for Therapeutic foster parents.

Question: What kinds of trainings are offered for families raising children with brain differences, like FASD, trauma, brain injury, behavior disorders?

Jenn: Wanting to be sure foster parents are properly trained. How can we as an advocacy group be sure our population are appropriately trained?

John: Foster parents need intervention support, direct actions they can take to help them deal with their children.

Teri asked what mechanism we could use to encourage or require OCS/overseers of therapeutic foster parents

Monica: Pick one thing to work related to training for prenatal alcohol exposure and do it well. Rural areas.

Stephanie: Presbyterian Hospitality House did a massive training in Nome for people from villages.

Mike: Suggested a survey to ask potential therapeutic foster parents what they might need.

John: Talked about FASD family support groups and the need for them, possibly teleconferenced.

Jeanne suggested a directory of resources for OCS to use when seeking appropriate trainings.

Jenn: suggested talking with Tiffany, a LEND Fellow who is interested in the project that could help us. Jenn will ask if she would research what other states are using to train therapeutic foster homes in brain-based disabilities, and what is generally available. She could also let us know what current regulations are in our state (who is providing, what they are training, and who manages them). This could give us some good background info.

Ask OCS: What is OCS's agreement with the agencies providing therapeutic foster care in the state and how are decisions made about what training is required for those families, e.g. does OCS mandate certain trainings? Or is it left to the discretion of the contracting agency? Would they be open to specialized training for brain-based disabilities, such as FASD, trauma, brain injury? How can training be effectively delivered to rural/tribal foster families in cases of tribal jurisdiction? How can we make sure there is encouragement for those entities to deliver it? How can we educate OCS about the importance of specialized brain-based trainings for families with children with FASD, trauma, brain injury?

**VI. Adjourned 4:20pm**

**VII. Next regular meeting:** Wednesday, April 13, 2016