



THE STATE  
of **ALASKA**  
GOVERNOR BILL WALKER

## Department of Health and Social Services

GOVERNOR'S COUNCIL ON DISABILITIES  
& SPECIAL EDUCATION  
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### GOVERNOR'S COUNCIL ON DISABILITIES AND SPECIAL EDUCATION

#### FASD Workgroup

##### LOCATION

Governor's Council on Disabilities and Special Education  
3601 C Street, Suite 740  
Anchorage, Alaska

June 9, 2015  
3-4:30pm

#### CALL TO ORDER

Jeanne Gerhardt-Cyrus called the meeting to order at 3:03 pm.

#### ROLL CALL

Aileen McInnis, Alex Edwards, Anna Attla, Jeanne Gerhart-Cyrus, Britteny Howell, Travis Hedwig, Trish Smith, Jill Burkert, Christie Reinhardt, Teri Tibbett, Sherrell Holtshouser, Barb Chambers, Britteny Howell.

#### PARTNER UPDATES

Alaska FASD Partnership - Teri Tibbett

The partnership is between projects right now, so if anyone has ideas for projects to work on, let the partnership know in their meeting tomorrow (June 10, 2015 @ 3pm). They are beginning work to plan for FASD Awareness Day (on 9/9/15) with their statewide restaurant promotion/table tents.

FASDx Services – Barb Chambers

Approximately 8 diagnoses per month. Working on nearly 100 referrals in Anchorage right now. Need new advanced nurse practitioners, if anyone knows one who could join! Attended FASD Train the Trainer event last week.

ACCA – Jenn Wagaman

Fairbanks team does approximately 2-3 diagnoses per month, which is all they can handle right now. Running a summer FASD class through UAA eLearn, it is full every semester, and includes principals, special education teachers, etc.

Women's Children's Family Health – Sherrell Holtshauser

She is a nurse consultant for public health for 30 years now. Worked in rural, Fairbanks, and Anchorage on prevention. Has a perinatal listserv with 800 subscribers. She prevented a powerpoint presentation and prevention brochure (attached).

## **OLD BUSINESS**

### **DD Eligibility**

Christie – Update on Department of Education and Early Development (DEED) regulations to define a physician to include advanced nurse practitioners. This was pulled from the State Board of Education agenda in Fairbanks last week because they wanted to get feedback on the definition that we proposed from the chief medical officer, Jay Butler. Christie gave testimony anyway to fill the board in on the issue, let them know regulations will be on the agenda for September, and that we will have self-advocates, parents, and others to call in and provide testimony for it. Teri suggests we keep her in the loop to help with the advocacy piece.

Brittney – Update on the request for proposal (RFP) that is supposed to go out at the end of the special legislative session. The state will be contracting with an agency to create an implementation plan for a shift from our current Home and Community-Based Services (HCBS) 1915 c waivers to new HCBS 1915 i and k state plans. This shift would allow people with FASDs to be covered under the new HCBS 1915 i guidelines.

## **NEW BUSINESS**

Discussion of new mission statement wording from this first draft:

*What: Advocate for a comprehensive service delivery system for those impacted by prenatal exposure to alcohol which provide early and lifelong success. Why: We recognize that supports for individuals already impacted by an FASD are required in order to achieve primary prevention. Who: In partnership with stakeholders, Governor's Council on Disabilities and Special Education's Developmental Disabilities Committee, the statewide FASD Partnership, the Juneau FASD workgroup, the Alaska Mental Health Trust Authority, and NOFAS. How: Through training, research, and the development of services and accommodations.*

Brittney will draft a couple of wording options from this discussion and send out to the group for a vote in July.

Jeanne – Council May meeting recap. Council voted on our priorities and we have an approved workplan. We also have a new action plan format that allows us to identify which partner agencies we're working with, and in what capacity, to guide our work going forward.

Britteny – if anyone has ideas for guest speakers at our future meetings, let her know. Also, she will be sending out emails to set up FASD Awareness Day workgroups to begin planning for events on 9/9/15.

### **Date & Time of Next Meeting**

Tuesday August 4, 2015 @ 3-4:30pm. Council staff have asked all committees and workgroups to take July off, as it is a difficult time to try to get people together.

### **Adjournment**

The meeting was adjourned at 4:39 pm

*Creating Change That Improves the Lives of Alaskans with Disabilities*

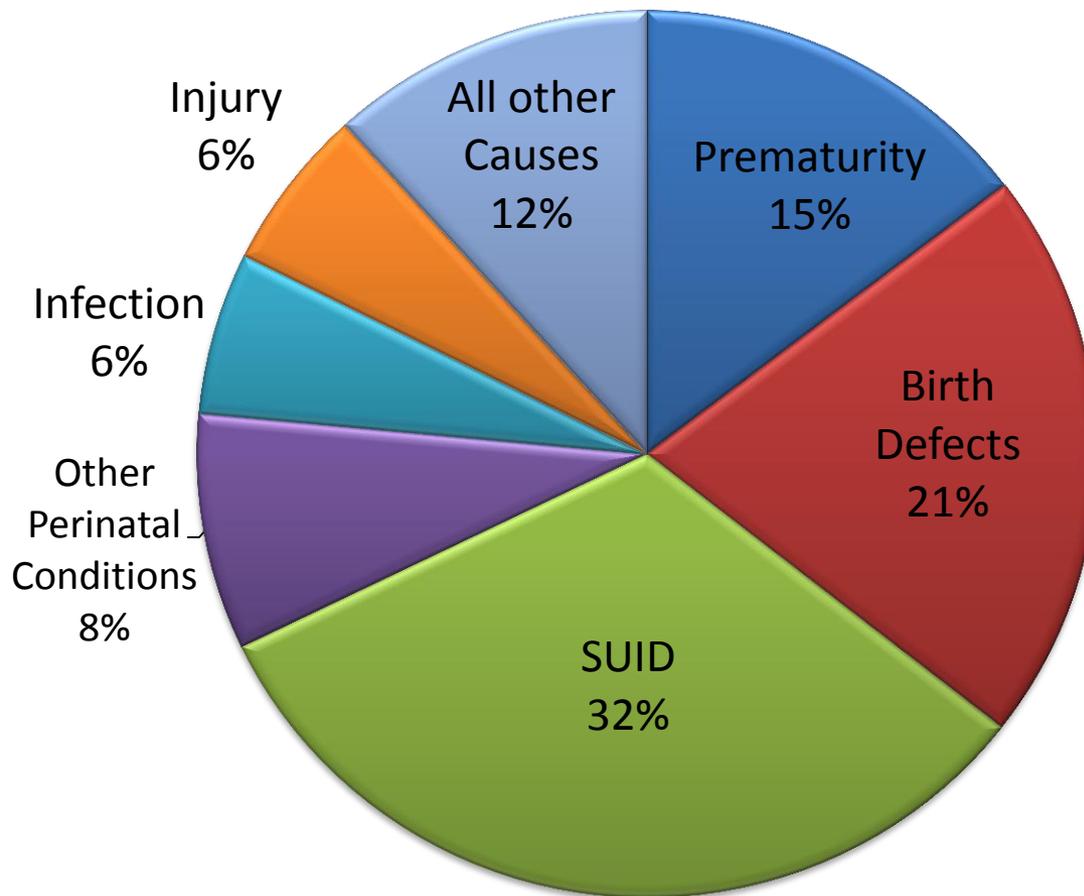


# Collaborative Improvement and Innovation Network (CoIIN) Reducing Infant Mortality in **Alaska**

Section of Women's, Children's and Family Health

June 2015

# Causes of IM In Alaska



**A lot of these causes of death are preventable.**

# Highest Leverage Strategies



IM CoIIN has six  
strategies



Each state picks up  
to three strategies  
and joins its  
“learning network.”

# The Learning Networks



## **SIDS/SUID/Safe Sleep**

Improve safe sleep practices

## **Smoking Cessation**

Reduce smoking before, during and/or after pregnancy

## **Preconception/ Interconception Health**

Promote optimal women's health before, after and in between pregnancies, including a focus on postpartum visits (content and frequency), and adolescent well visits (content and frequency).

## **Social Determinants of Health**

Incorporate evidence-based policies/programs and place-based strategies to improve social determinants of health and equity in birth outcomes

## **Prevention of Preterm and Early Term Births**

Increase appropriate utilization of 17 OH progesterone and/or reduce early elective deliveries.

## **Risk-appropriate Perinatal Care (perinatal regionalization)**

Increase the delivery of higher-risk infants and mothers at appropriate level facilities

# Alaska Areas of Focus



## SIDS/SUID/Safe Sleep

Improve safe sleep practices

## Smoking Cessation

Reduce smoking before, during and/or after pregnancy

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Increase appropriate utilization of 17 OH progesterone and/or reduce early elective deliveries.

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# Substance Use Cessation



## Team Members

- January 2015. WCFH: Sherrell Holtshouser, RN, MPH– Lead
- April 16, 2015. Rainforest Pediatric Care: Joy Neyhart, DO FAAP
- April 23, 2015. State WIC: Jennifer Johnson, RD & Dana Kent, RD
- April 24, 2015. Division of Behavioral Health: Sara Clark,  
Prevention & Early Intervention Specialist
- May 21, 2015. 12 WIC Regional RDs and their respective staff

# Substance Use Cessation



## Aims:

By July 2016, WCFH staff support State WIC staff efforts to improve reliability of client report of substance use data, and staff report of referrals when use is reported, among 12 regional programs.

Goals are to:

Primary: Investigate use of validated questions likely to consistently solicit WIC clients report of substance use during standard WIC intake processes.

Secondary: Support State WIC staff work with regional WIC staff processes and skill in screening, brief intervention and referral for clients reporting substance use while preserving efficiency.

Background information: The WIC program has a defined role in providing substance abuse prevention information and conducting referral activities.

# Substance Use Cessation



## Plan

Conducted survey to learn about:

- Perceptions of prevalence of use
- Comfort level with discussing use
- Success of referrals made
- Desire for skills training in screening, brief interventions and referral.



# Substance Use Cessation



## Do



- Reviewed WIC's current screening questions (forms)
- Conducted training covering marijuana, tobacco, alcohol and other substances among pregnant women
- Conducted 10 question survey of WIC regional staff

# Substance Use Cessation



## Study –



# Act- we will rely on this WIC tool



## **Substance Use Prevention Screening, Education, and Referral Resource Guide for Local WIC Agencies**



# We will have some challenges.....

28. Check any drugs you are using during this pregnancy

372

- Marijuana       Methadone       Cocaine  
 Crank       Crack Methamphetamine       Speed  
 Heroin       Other       None       Stopped Using

If stopped using, when was the last time you used?

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## WIC APPLICATION (code 372)

27. Do you drink wine, beer or other alcoholic beverages during this pregnancy?       No       Yes 372



**Your help and support is critical to our success.**

# How to Get Involved

Email Sherrell Holtshouser @  
Sherrell.holtshouser@alaska.gov  
Or call 269-3426



CoIIN is a ***vehicle*** that works best with everyone onboard, but any level of participation is a ***means to move forward.***

Thank you!





Association of Reproductive  
Health Professionals

### New Patient Fact Sheet on FASDs

Download this new [fact sheet](#) from ARHP as a resource for counseling patients about pregnancy and alcohol consumption. By clearly communicating the risks of drinking during pregnancy, you can help reduce the incidence of fetal alcohol spectrum disorders.

In partnership with The Arc, ARHP is committed to increasing awareness on the risks of prenatal alcohol exposure. Check out ARHP's evidence-based resources on effective prevention strategies for health care providers:



**1 in 13** women say they drank alcohol while pregnant



**1 in 100** children in the US have an FASD



- [Facts about Fetal Alcohol Spectrum Disorders](#) clinical fact sheet
- [Preventing FASDs](#) on-demand CME/CE webinar with Susan Astley, PhD
- [Clinical Minute](#) CME/CE case study
- Curriculum [slide set](#) in CORE (*login required*)



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