



Kansas Maternal and Child Health Council (KMCHC) Meeting

Wednesday, July 25, 2018

Member Attendees		Absent	Visitors
Rebecca Adamson, APRN-C Carrie Akin Brenda Bandy, IBCLC Kourtney Bettinger, MD, MPH Kayzy Bigler Tammy Broadbent Lisa Chaney Stephanie Coleman Julia Connellis Dennis Cooley, MD, FAAP Sarah Fischer, MPA Beth Fisher, MSN, RN Terrie Garrison, RN, BSN Deanna Gaumer Cory Gibson, EdD Beth Greene Kari Harris, MD Sara Hortenstine Elaine Johannes, PhD Tamara Jones, MPH Peggy Kelly Jamie Kim, MPH Kelli Mark Elisa Nehrbass, Med	Lawrence Panas Susan Pence, MD Cari Schmidt, PhD Katie Schoenhoff Christy Schunn, LSCSW Pam Shaw, MD, FAAP Sookyung Shin Rachel Sisson, MS Heather Smith, MPH Kasey Sorell, BSN, RN Lori Steelman Jenny Taylor Lisa Williams Stephanie Wolf, RN, BSN Donna Yadrich	Stefanie Baines, CES Linda Blasi Ellie Brent, MPH Joseph Caldwell Greg Crawford Denise Cyzman Mary Delgado, APRN Stephen Fawcett, PhD Lisa Gabel, RN, BSN Lori Haskett Charles Hunt, MPH Kimberly Kasitz Patricia Kinnaird Steve Lauer, MD, PhD Annie McKay Patricia McNamar, DNP, ARNP, NP-C Brian Pate, MD, FAAP Melody McCray-Miller Mohamed Radhi, MD Cherie Sage Sharla Smith, PhD, MPH Chris Steege David Thomason, MPA Na'shell Williams	Danielle Brower Whitney Downing Ashley Hervey Jessica Looze
Staff			
Mel Hudelson Connie Satzler			

Agenda Items	Discussion	Action Items
Welcome & Recognize New Members/Guest	Members were welcomed, new KMCHC members were introduced	
Review & Approval of April 18, 2018 Minutes	It was moved to approve the minutes from April 18, 2018, all approved.	
Exploitation & Human Trafficking in Kansas (Special Presentation) . Jennifer Montgomery, Attorney General's Office	Jennifer Montgovery from the Attorney General's office gave a presentation on human trafficking in Kansas. Slides are available at http://www.kansasmch.org/meetings.asp Some key information includes: <ul style="list-style-type: none"> • 83% of trafficking involves domestic victims, the majority are children. • Child trafficking includes both sex trafficking and labor trafficking. KS has seen an increase in traveling sales crews. • Several new crimes in Kansas related to trafficking in 2017, and the state has received an "A" grade regarding trafficking laws. • The Blue Campaign has many of the common presentations of trafficking for health care providers so that they can identify the signs of trafficking. • Stewards of Children – Darkness to Light training is recommended for those who work with children is recommended for prevention. • National Human Trafficking Hotline: 1-888-3737-888 or text HELP to 233-733, open 24 hours, 7 days a week. 	
Responding to Human Trafficking: MCH's Role & Next Steps (Facilitated Discussion) Connie Satzler, EnVisage Consulting	Questions for Ms. Montgomery: Q:Are there victims on the human trafficking advisory board? A:Yes there are. Q: How can we train foster care placement organizations and foster care parents about how to identify child trafficking? A: That is something that has to be looked at but should be a priority.	

	<p>Q: Are CPS placements doing what they can to minimize movement of foster care kids? There are concerns about retaliatory placements. (Donna Yadrich)</p> <p>A: Keeping foster care children from being moved more often than necessary is something that should be a priority.</p> <p>Who is doing work related to trafficking now?</p> <ul style="list-style-type: none"> • Title X is currently doing working on this topic. • KU Wichita is the only licensed home, so they so see and work with trafficking victims. • Kansas Youth Empowerment Association is working on what positive role models look like and how to understand what healthy relationships are to prevent trafficking. • KDHE and KDADS are on the states advisory committee. <p>Groups discussed connections that can be made, and action items that will move this work forward.</p> <p>Look at how to empower children who are looking for a connection, understand labor trafficking, KYEA has a healthy relationships training and incorporating that in other settings.</p> <p>Need to get education out to different groups who work with kids – school nurses, CASA, etc. who need to know what to look for to identify trafficking. Posters with information on signs and demand have been created and can be shared. Jennifer can provide a number of different trainings.</p> <p>It should be a requirement of all foster parents that they are required to take the training (not currently required). Train home visitors and at the governor's conference. Trainings have been done with cable.</p>	
<p>Title V MCH Block Grant Application/ Action Plan/ Measurement Updates <i>Rachel Sisson, Jamie Kim, KDHE</i></p>	<p>Rachel reported that the block grant application was submitted on time.</p> <p>There are some State Action Plan changes because we were able to eliminate up to three measures and merge together some priorities.</p> <p>State Action Plan Changes:</p> <p>State Priority #2 will be eliminated because it is very broad and will be integrated into other priorities. This is our work and will always be a priority—</p>	

	<p>the objectives related to priority 2 were incorporated in other priorities across the plan.</p> <p>National Performance Measure #9 regarding bullying has also been eliminated. This is important and part of adolescent health work, but will not be a reportable measure KS MCH is accountable for over the next year. It is very narrow—Kansas is taking a comprehensive approach to adolescent health (empowerment, wellness, access, etc.) and bullying alone is not being addressed. Bullying specifically has not moved in the past three years and we are still navigating staffing, key partners, and where MCH can take the lead.</p> <p>State Performance Measure #2 – Parent support has been eliminated because it is tied to Priority 2, no strong data source after three years, is integrated into our broader state work, and the objectives related to this measure have been included in other priorities.</p> <p>All of the documents including the block grant application and annual report submitted in July that Rachel went over are on the website – www.kdheks.gov/bfh (click on the maternal and child health block grant link for specific information).</p> <p>KS Title V MCH Snapshot includes KS executive summary on http://https://mchb.tvisdata.hrsa.gov. After October the current year summary will be available (reflecting the FFY2019 Application and FFY2017 Annual Report).</p> <p>Make sure to visit and “Like” the Kansas MCH Facebook page.</p> <p>Jamie Kim, MPH reported on the status of MCH measures—positive and negative trends were highlighted. See more online where the Performance Measures Snapshot is posted.</p>	
<p>11:45 Break & Lunch</p>		
<p>MCH Population Domain Small Group Discussion</p>	<p>The small groups met and reviewed the revised draft of Title V Priorities and State Action Plan. They discussed a selected domain problem to address and advance.</p> <p>Women/Maternal: Women’s health/preventive health visit (developing content, guidance, tools, and resources to support a strong visit, including reproductive life planning)</p>	

	<p>Perinatal/Infant: Home Visiting and Breastfeeding—innovative staffing models to increase reach and capacity</p> <p>Child: Developmental Screening—leveraging the ECCS/KIDOS tools and resources to go beyond Geary and Montgomery Counties (target ECCS communities)</p> <p>Adolescent: Adolescent well visit/comprehensive health strategies to increase reach and access including but not limited to school-based health centers</p>	
<p>1:45 Break</p>		
<p>Child Health Group Recommendation Presentation</p> <p><i>Pam Shaw, MD</i></p>	<p>The Child health group put together a request that KanCare create a standardized benefits template and require participating of MCOs (this resulted from the MCH-MCO partnership discussions taking place since the MCOs visited the Council and participated on a panel).</p> <p>Benefits standards template with side comparison of the differences including standardized language would be beneficial. Also that the website needs to be updated and have easy to find information.</p> <p>Having standardized forms across the MCOs is another important step.</p> <p>Next Steps: Add a sentence to the letter about wanting to meet with Mr. Hamdorf to discuss the request.</p> <p>A finalized letter will be sent electronically to Rachel who will discuss with the Secretary and forward it to Division of Health Care Finance and Medicaid Director, Jon Hamdorf.</p>	<p>Action Items: Connie will work on the last paragraph of the letter, request approval from Child Team, obtain Dr. Cooley's signature, and forward the signed letter to Rachel who will get it to Mr. Hamdorf.</p>
<p>Announcements & October Meeting Agenda</p> <p><i>KDHE Staff & KMCHC Members</i></p>	<p>Kari Harris, MD – KU Wichita has hired an adolescent medicine specialist who will begin next month.</p> <p>Lisa Williams</p> <ul style="list-style-type: none"> • PRAMS – survey of women who recently had a baby, is completing it's first year of data collection. Data will be sent to CDC, then returned for analysis and dissemination. • Can apply for two supplemental grants to collect more data on two other areas. <p><i>Additional announcements are attached.</i></p>	

Closing Remarks <i>Dennis Cooley, MD, Chair</i>	Dr. Cooley thanked the speakers and KMCHC members for their work at th meeting. The meeting was adjourned at 3:00.	
Future Meetings	The following dates are for meetings coming up: <ul style="list-style-type: none">• October 10, 2018• January 23, 2019• April 10, 2019	

Announcements:

- BFH/MCH is purchasing copies of the book *Sleep Baby Safe and Snug* from Charlie's Kids Foundation. The books are an advocacy tool for SUID prevention and will be given to Home Visiting staff to educate sleep and to encourage early childhood literacy and bonding between infant and parent. The books will also be distributed to birthing hospitals as a thank you gift from the MCH program and KIDS Network, with a letter asking that the books be used as gifts for new parents for safe sleep education and a resource list of other services available to new parents.
- BFH/MCH is purchasing copies of the book "Cuddle" in the *Happy Healthy Baby* series by Spirit Publishing. These books will be provided to Home Visiting staff to give to new parents at their first postpartum home visit. This is a strategy to education parents about the importance of the parent-child bond as a source of comfort, protection, and security that is essential to an infant's social-emotional growth and to encourage early childhood literacy.
- BFH/MCH is entering into a formal partnership with Healthy Birth Day, a nonprofit lead for an intervention known as *Count the Kicks*, a campaign to prevent stillbirth by educating providers and patients about monitoring fetal movements during the 3rd trimester of pregnancy. This will be at no cost to providers in KS who will have full access to materials and videos. KS stillbirth rates are higher than the national average. Other states such as Iowa have reduced stillbirth rates annually since implementing. <https://www.countthekicks.org>
- BFH/MCH is entering into a formal partnership with Power to Decide to implement One Key Question[®] (OKQ), an evidence-based intervention known to prevent unplanned pregnancy and reduce incidence of poor birth outcomes. Training, certification, and materials will be provided at no cost to Title V and Title X clinics as well as FQHCs across the state (in partnership with KAMU). Interest already requires 3 trainings to reach 150 grantees and partners in several regions of the state! OKQ supports the development of reproductive life plans by encouraging all health providers to routinely ask "Would you like to become pregnant in the next year?" <https://powertodecide.org/one-key-question>
- The Kansas Maternal Mortality Review Committee (MMRC) was convened for the first time on June 12. KDHE Bureau of Family Health and a team from the Centers for Disease Control & Prevention provided information to the 30+ member Committee on the importance of conducting maternal and pregnancy-associated death reviews to prevent future cases and oriented them to their new role as a member. The Committee completed a mock case review. The first full review meeting for 2016 Kansas death cases will be held in the fall (tentatively planned for November 2018).
- BFH applied to the HHS Office of Adolescent Health (OAH) for an opportunity focused on Teen Pregnancy Prevention (TPP) (funding decisions pending). We don't currently have a TPP initiative in the state, and this funding provides us an opportunity to organize. We (KDHE BFH) currently have the OAH Pregnancy Assistance Fund (PAF) grant related to supporting pregnant and parenting teens (known as the Lifting Young Families Towards Excellence – LYFTE), so this is the perfect time to work upstream on the prevention piece. If funded, Elisa Nehrbass, MCH Child & Adolescent Health Consultant will be the project director.
- The KDHE Bureau of Family Health is working with KDADS, DCF, and many other state and local partners on development of a proposal to HRSA for a new funding opportunity: *Screening and Treatment for Maternal Depression and Related Behavioral Disorders program*. The purpose of the program is to establish, improve, or maintain programs that expand health care providers' capacity to screen, assess, treat, and refer pregnant and postpartum women for maternal depression and related behavioral health disorders (i.e., substance use), targeted to rural and medically underserved areas with emphasis on telehealth. The goal is to improve the mental

health and well-being of pregnant and postpartum women and, thereby, their infants' social and emotional development. If funded (only 7 states), KS will target the SE region of the state first and utilize the Edinburgh and Screening, Brief Intervention, Referral to Treatment (SBIRT) evidence-based tools/processes.

- The Kansas Neonatal Abstinence Syndrome (NAS) Toolkit with welcome letter signed by KDHE and the Kansas Hospital Association has been distributed to birthing hospitals enrolled in the initiative. To date, 70% of all birthing hospitals are enrolled to be a part of this work (cohort 1 or beyond) to improve assessment and identification of infants exposed to substances in utero. Data on infants and processes/protocol will be collected from hospitals on a regular basis. The Kansas Perinatal Quality Collaborative (KPQC) provides guidance and leadership for the initiative. NAS efforts specifically are being coordinated with the broader State Prescription Drug and Opioid Advisory Committee, NAS Subcommittee, and Governor's Substance Use Task Force. www.kansaspqc.org