

Kansas Maternal and Child Health Council (KMCHC) Meeting

Wednesday, July 14, 2021

Member Attendees		Absent	Visitors
Taylor Atwood	Patricia McNamar, DNP, ARNP, NP-C	Rebecca Adamson, APRN	Adelaide Klutse
, Brenda Bandy	Jill Nelson	Carrie Akin	Vivek Panchananam
Kourtney Bettinger, MD, MPH	Brittney Nichols	Dennis Cooley, MD, FAAP	Jennifer Adhima
Kayzy Bigler	, Maria O' Sullivan	Julia Connellis	Kinsey Anderson
Heather Braum	Susan Pence, MD, FAAP	Deanna Cummings	Kaitlyn Moore
Joe Caldwell	Brian Pate	Beth Fisher	Pam Noble
Lisa Chaney	Katie Schoenhoff	James Francis	
Stephanie Coleman	Christy Schunn, LSCSW	Terrie Garrison, RN, BSN	
Mary Sunshine Delgado, APRN	Sookyung Shin	Phil Griffin	
Drew Duncan	Rachel Sisson	Rhonda Hutchinson	
Stephen Fawcett, PhD	Cassandra Sines	Scott Latimer	
Geno Fernandez	Heather Smith	Brandi Markert	
Cory Gibson, EdD	Kasey Sorell	Elisa Nehrbass	
Lisa Goins	Juliet Swedlund	Angela Oldson	
Kari Harris, MD, FAAP	Simone Taylor	Cherie Sage	
Morgan Hill	Cora Ungerer	Cari Schmidt, PhD	
Sara Hortenstine	Stephanie Wolf	Pam Shaw, MD, FAAP	
Elaine Johannes, PhD	Donna Yadrich	Sharla Smith	
Peggy Kelly	Daina Zolck	Lori Steelman	
Jamie Kim, MPH		David Thomason	
Steve Lauer, MD, FAAP		Kelsee Torrez	
Elizabeth Lewis, MPA, MSN, WHNP-		Kelly Totty	
BC		Alice Weingartner	
Shannon Lines		Taryn Zweygardt	
Jennifer Marsh			
Staff			
Mel Hudelson]		
Connie Satzler			
Emily Bailey			
Paige Lewis			

Agenda Items	Discussion		Action Items
Welcome & Recognize New Members/Guest	Dr. Harris welcomed everyone to the meeting. New members and guests introduced themselves.		
Title V Block Grant Updates & Notable Accomplishments KDHE Title V Team	Heather Smith shared that the public input period will launch on Friday, July 16 th . She asked KMCHC members to provide input and share the opportunity to provide feedback with their networks and showed members how to access the public input on the KDHE website and KMCHC websites. Links will be sent out to KMCHC. KDHE staff provided an overview of what is included in the Block Grant to help members understand how to navigate the document. Shannon Lines reviewed Kansas demographics included in the Block Grant and the State Highlights section. Question: Are special health care needs divided by diagnosis at all? Answer: There is some data, but the sample size is so small that it really isn't very helpful. Heather Smith gave an overview of the State Action Plan and what is included in this section of the Block Grant. This section provides information about who we are and what we do as a state in the area of child and maternal health. The Annual Report in the Block Grant includes information on the final year of the previous Action Plan and planning for the upcoming Action Plan.		Action Item: KMCHC members should provide input and share public input opportunity with networks and contacts.
Small Group Discussion by	Domain & Focus Area		
Domain groups reviewed d - What cont - What eme	mall Groups: Adolescent, Child, Women and Maternal, and P ata trends for their populations and discussed the following: ributing factors may be associated with the trend you are sec rging needs might impact this trend in the next couple of yea oup shared key points and action items discussed.	eing?	
	Data trend and contributing factor or emerging need	1-2 priority ways to advance p	olan activities
Adolescent	Mental/behavioral health. Need to educate parents to advocate for their child's mental health and need to increase mental/behavioral health workforce for the whole family.	More giveaways; social media focus; partner with high schools & teachers, local pediatricians with sports physicals, and local boys and girls clubs; K-State extension curriculum training teenagers to advocate for themselves within their communities	
Child	NOM 22.1. Decreasing vaccination rates. Vaccine hesitancy is on the risk.	NOM 22.2 Increase in flu shot vaccination. Look what has worked and apply. Consistent messaging, bringing partners together, and helping families know where to go for good information.	
Perinatal/Infant	Social determinants of health; look at data disaggregated by race/ethnicity	Look at data that highlights disparities by race/ethnicity, Medicaid vs. non-Medicaid. COVID is highlighting gaps that already exist. Determine who within MCH system may be	

		better equipped to help advance work (e.g., first responders, extension, libraries)
Women/Maternal	Social determinants of health: increase in stress, anxiety, and trauma, as well as lack of access to services including transportation, childcare, nutritious food, etc.	Continue to connect and collaborate around issues such as postpartum Medicaid extension. How can we increase access to affordable care and patient and provider education?
	See the Family Advisory Council summary of the same d	liscussion at the end of these minutes.
Member Announcements		
Kari Harris, MD, FAAP KMCHC Chair	 home visiting (UHV) program. Immunize Kansas Coalition has resources coming from August. March of Dimes' Advocacy Action Center: Sign up to gehttps://www.marchofdimes.org/advocacy/action-cer A new brochure is being drafted that will include new 	nter.aspx born screening and other programs that families may encounter prris@ks.gov - Screening & Surveillance Education and Outreach
Future Meetings	2021 Meeting Dates: October 13 2022 Meeting dates: January 12, April 13, July 13*, Octobe *Subject to change	r 12
Optional Session		
School Based Health Maria O'Sullivan and Heather Smith	 getting where we are now with this initiative. Dr. Pence shared about the school-based health care t There was discussion on including mental health in sch Kinsey Anderson reviewed the preliminary results of th school nurses need to support students with school based based about the school based about the school based base	nool-based health. The School Nurse Survey. KDHE wants to build on the support that used health initiatives. Idents are stakeholders and can be a resource for getting things

Agenda Items	Discussion
Agenda ItemsWhat trends stand out to you?What question(s) does any of this raise for you?What might have caused us to trend up or down? Or stay the same?	 NOM 16: Adolescent Suicide/Death Adolescent well-visits are decreasing, increasing those well-visits can be an additional method to identify and address concerns in a timely manner. Suicide rate is concerning – large increase over the years in suicide rate. Very concerning. How do we encourage more people to enter the field of mental health; trouble filling these positions. How many of those with post-partum are adolescents? Would like to share this information with families, corporations, universities, and the workforce. Will this continue to rise as a result of COVID? School-based health centers in the middle and high schools could address this.
What emerging needs night we need to consider in the coming year? How might we address those?	 Sedgwick – reached out to bring a program called "zero reasons why"; getting some traction; teen-lead program to erase the stigma associated with mental health issues (program). We must focus on the mental health piece. NOM 23: Teen Births: Notable decrease in the number of teen births is good to see. NPM 4/SPM 2: Breastfeeding: Would like to see more women breastfeeding, and support for women who breastfeed across the state. However, noted that it was great to see the breastfeeding rates increasing. Education has helped to make it more acceptable when in public and more business that welcome breastfeeding and having rooms for nursing mothers, so they don't have to use a restroom. NPM 6: Developmental Screening: Worried that this is so low. Especially since many of the child care facilities are now doing the screenings. NPM 7: Child Injury: Child injury increasing is alarming. More kids at home with working parents and not watched as closely during remote learning? NPM 8 Physical Activity: High school kids are not getting enough physical activity. Physical activities during COVID remote learning/kids having more time on screens and video games. NPM 10: Adolescent Well Visits: Why are the well-visits down? Is it because parents are unable to transport? Simply the fact that it's not seen as important or something that needs to keep going thought the course of life? NPM 14: Smoking in Household: Children who are living in households who smoke increased, does this including vaping because vaping is increasing too? NPM 15: Adequate Insurance: Wonder what the FAC could do to help push Medicaid expansion? Could the number of people not insured have to do with poverty, COVID, and politics? SPM 1: Postpartum Depression: With postpartum depression, are they doing a better job asking these questions? Many people on the call said they were never asked when their kids were born. Ask

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General Comments	 We need to encourage more partnerships with schools and day care centers. How do we inform about, or get more, mom/parenting groups throughout the state? KPCC's need to acknowledge that anyone can take the prenatal education classes not just high risk/need. Issue noted: There is a shortage of mental health providers; high burnout as a result of COVID.
More information requested	NOM 4: Low Birth Weight: The increase in low birth weight deliveries is concerning. Would love to know how the poverty trend in our state is affecting those rates?
	NOM 5/6: Pre-/Early- Term Births: What is the connection to:
	Children who live in a household who smoke
	 Lack of prenatal care (this is a concern in the community) – is this why the non-Medicaid number are up? Infant and mother mortality
	NOTE: Many comments throughout the session referred to the pandemic as a cause for the trends noted. While this is likely happening in many areas, the data is from BEFORE the pandemic began, so it's too soon to tell if that's the case.
Potential areas of	Adolescent Mental Health/Well Visits
interest for the FAC	Breastfeeding
	Medicaid Expansion
	Developmental Screening
	Postpartum Depression