



PERINATAL SUBSTANCE EXPOSURE TASK FORCE

Governor's Commission on Alcohol and other Drugs

Task Force Chair: Monica Edgar

Wednesday, July 15, 2020 - 2:30PM-4:00PM

REMOTE MEETING: <https://jsi.zoom.us/j/9129453548>

Meeting ID: 912 945 3548

Phone: 1-646-558-8656

Meeting Minutes

Attendees: Rekha Sreedhara, Adriana Lopera, Hannah Lessels, Aurelia Moran, Christine Campbell, Shannon Rondeau, Martha Bradley, David Laflamme, Sai Cherala, Don McNally, Lauren LaRochelle, Heidi, Kate Frey, Jennifer Steaglad, Gabi Teed, Ian Lemmo, Melissa Schoemmell, Heidi Knoblauch, Grace Palmer, Farah Sheehan Deselle, Sheryl Wood, Savriti Horrigan, Maggie Minnock, Kate White, Molly Rossignol, Alyssa Cohen, Carol Furlong, Lucy Hodder, Monica Edgar, Becky Ewing, Emily Lawrence, Susan Latham, Deborah Schachter, Victoria Flanagan, Louise Brassard

Agenda Item	Discussion	Next Steps
Welcome <ul style="list-style-type: none"> • Introductions • Approve May Meeting Minutes 	<ul style="list-style-type: none"> • Farrah Deselle motioned to approve minutes. Emily Lawrence seconded. • Minutes approved unanimously. 	<ul style="list-style-type: none"> • CHI Team will post minutes on webpage.
MOM Grant Update <i>Ian Lemmo</i> , Elliot Hospital	<ul style="list-style-type: none"> • Carol and Ian have been working over the last couple weeks to make sure that the MOM Grant moves smoothly during COVID-19. • They have built the following committees: <ul style="list-style-type: none"> ○ Steering committee: made up of community partners ○ Boots-on-the-ground committee: learning about the framework that exists on the ground, helping to improve existing resources. • The MOM Grant was planning to have a virtual kickoff this summer that has been moved to September or October. • Conversations are continuing to happen during the pandemic, but Ian expects the grant to start providing services beginning in July of 2021. • The program was supposed to begin January 1, 2021 but CMS extended the date to July 1, 2021 due to COVID. There are no new services that are being offered: the program leverages existing Medicaid services. The model is meant to build upon and improve these services. 	<ul style="list-style-type: none"> • If you are interested in a committee or know someone who might be email Ian at: ilemmo@elliott-hs.org

	<ul style="list-style-type: none"> • Does the grant include continued education or staff development for providers? <ul style="list-style-type: none"> ○ The grant is meant to build upon what the community is already doing. If there is opportunity to build upon education and training, we will take advantage of it, but we do not have any specific plans in this area yet. We are open to hearing what the needs are in terms of education and training. We hope to use the MOM model to disseminate information about Plans of Safe Care (POSC) and to increase its usage. 	
<p>Trauma Informed Care Survey <i>Farrah Deselle</i>, Dartmouth Hitchcock</p>	<ul style="list-style-type: none"> • NHCF grant to improve access to trauma informed care to families. This work has been slowed down by COVID. • Farrah has created a survey that is ready to send to the group for dissemination. The survey asks about available resources around trauma informed care and what the needs are in your community. • The goal of the grant is to link people to existing resources and then fill in the gaps. 	<ul style="list-style-type: none"> • Farrah will share the survey with task force members. Please share this with your network.
<p>Topics for Behavioral Health Summit <i>Melissa Schoemmell</i>, JSI</p>	<ul style="list-style-type: none"> • Part of JSI’s work plan includes assisting with conference presentations and proposals. Proposals for the NH Behavioral Health Summit are due August 3rd, 2020. The conference will be completely virtual with a slightly altered format. 60 minute sessions, December 7th-8th. • Discussion about potential proposals to submit: <ul style="list-style-type: none"> ○ Bi Directional 42-CFR compliance with clients (texting) and general communication ○ Abbreviated POSC workshop using topics that were identified last year <ul style="list-style-type: none"> ▪ Home visiting and POSC ○ Statewide update on perinatal SUD care in NH <ul style="list-style-type: none"> ▪ Successes, opportunities, ongoing work, key players ▪ Adapting during COVI-19, creative solutions to changing landscape ▪ Legislative status: “rebuttable presumption” bill ▪ Birth Certificate data that will be available by December 2020. ○ Peer recovery workers ○ Strength to Succeed program – Granite Pathways (Lori Hebert) ○ Gathering providers and professionals who share a catchment area to make connections at a local level ○ Family planning resources and/or ways to talk with clients about 	<ul style="list-style-type: none"> • Melissa Schoemmell will convene a group to discuss and write a proposal. • Molly Rossignol will mention cannabis BH Summit presentation at the next Therapeutic Cannabis Medical Oversight Board meeting.

	<p>contraceptive counseling, with special regards to the impact of family planning resources & education on people with SUDs</p> <ul style="list-style-type: none"> ○ Medication options for pregnant women with SUD – Shannon Rondeau ○ Today is for Me campaign – marijuana and alcohol <ul style="list-style-type: none"> ▪ Had a workshop during the 2019 summit ▪ Cannabis and therapeutic marijuana specific workshop ▪ Have an expert talk about the effects of cannabis on people who are pregnant ▪ Therapeutic cannabis medical oversight board meets monthly and has addressed this topic before. The board is creating recommendations. Several pediatricians on the board ho might be able to speak on the topic. ○ CBD safety for those who are pregnant/parenting <ul style="list-style-type: none"> ● The Summit is a great opportunity for the Task Force to highlight our work. ● Many of the topics identified can also be areas of future work for the Task Force. 	
<p>Member Updates, Challenges & Opportunities</p> <ul style="list-style-type: none"> ● DHHS/DCYF Pilot 	<ul style="list-style-type: none"> ● Grace Palmer: <ul style="list-style-type: none"> ○ Working on a DHHS/DCYF collaboration pilot focused on making referrals easier and more effective. When a family is involved with DCYF how can social workers connect families with services? Also focusing on this with medical workers. The pilot will be in the Concord area and work with Concord Hospital. The goal is to connect families to services as early and effectively as possible. ○ Working with statewide home visiting services – Healthy Families America and Comprehensive Family Support Services. Home visiting can be involved in POSC development and implementation. ● Farrah Sheehan Deselle: <ul style="list-style-type: none"> ○ SAMHSA Perinatal Provider Toolkit ○ Resources for providers and patients ○ Farrah has taken notes on each link provided in this toolkit explaining its utility. ○ NNEPQIN has helpful toolkits on their website. ○ Farrah has been working on making sure there is easy access to resources for professionals in NH. 	<ul style="list-style-type: none"> ● Grace will provide further updates on DCYF/DHHS Pilot during future meetings.

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| | <ul style="list-style-type: none"> ○ Can we connect the SAMHSA toolkit with NNEPQIN in some way? How do you envision sharing this with NH providers? <ul style="list-style-type: none"> ▪ Some of the links and resources are already included in the SUD and ESC toolkits from NNEPQIN. ▪ Farrah’s document explains what is in each link so that providers may better use them. ▪ Having a central location for resources related to perinatal SUD care might be helpful. ▪ Suggestion to organize the resources by audience. ▪ The group is considering creating an “At-a-Glance” for the resources. ● Adriana Lopera: <ul style="list-style-type: none"> ○ National Academy for State Health Policy: Four states employ Doulas to improve maternal health and birth outcomes in Medicaid ○ Is there an opportunity to implement a similar program in NH? <ul style="list-style-type: none"> ▪ The MCOs are open to exploring potentially offering this service to their members. ○ Doulas can be important in certain cultures, and some consider them to be a more holistic approach. Doulas can also positively impact outcomes for more “medical” births. ○ Thoughts about training community health workers as doulas? <ul style="list-style-type: none"> ▪ First focusing on peer recovery workers as a prenatal and delivery support, but community health workers could play a role as well. ○ Doulas in hospital settings during COVID and generally? <ul style="list-style-type: none"> ▪ This ranges based on the hospital. | |
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Next Meeting (Via Zoom):

Wednesday, September 16th, 2020