



Perinatal Substance Exposure Task Force

Governor's Commission on Alcohol and Other Drugs



Date/Time: Wednesday, March 17, 2021 | **Task Force Chair:** Monica Edgar

<p>Welcome & Introductions</p>	<p>Members Present: Monica Edgar, Bethany Arcand, Louise Brassard, Sai Cherala, Farrah Sheehan Deselle, Rebecca Woitkowski (as proxy for Kate Frey), Aurelia Moran (as proxy for Kristi Hart), Lucy Hodder, Heidi Knoblauch, David Laflamme, Emily Lawrence, Ian Lemmo, Renee Maloney, Donald McNally, Margaret Minnock, Linda Parker, Shannon Rondeau, Jennifer Ross Ferguson, Lyndi Sargent, Deborah Schachter, Gabrielle Teed, Bonny Whalen, Eliza Zarka (ad-hoc) Members Not Present: Courtney Tanner Gray, Savriti Horrigan, Daisy Goodman, Debra C. Girardin, Rebecca Ewing, Alyssa Cohen Public Participants Present: Dianna Gibbs, Laura Ringelberg, Mallory Bedrard, Melissa Davis, Grace Palmer, Jennifer Steagald, Lindsey Ginter, Lindsey Wyma, Palana Belken JSI Staff Present: Adriana Lopera, Rekha Sreedhara, Hannah Lessels, Melissa Schoemmel, Martha Bradley, Christin D'Ovidio</p>	
<p>Agenda Item</p>	<p>Discussion</p>	<p>Action Item</p>
<p>Approve January Meeting Minutes</p>	<ul style="list-style-type: none"> David Laflamme motioned to approve the January meeting minutes. Emily Lawrence seconded the motion. Motion approved unanimously. 	<ul style="list-style-type: none"> JSI Team will post minutes on the Task Force webpage.



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Governor's Commission Investment Recommendation Updates	<ul style="list-style-type: none">• Doula Recommendation, submitted by the PSETF in 2020 for ten recovery coaches to become doulas. This was approved, however, after review by BDAS, they felt more information needed to be collected in order to figure out how to do a pilot. This request has been resubmitted with the following plans:<ul style="list-style-type: none">◦ Year 1 - Conduct environmental scan, research existing models, and propose a model (\$100K FY 22)◦ Year 2 - Pilot proposed program approach (\$350K FY 23)◦ This revised request was approved by the GC in January and will now be in the hands of BDAS to RFP.• Care Coordination Recommendation<ul style="list-style-type: none">◦ Year 1 - Planning process (\$300K FY 22)◦ Year 2 - Pilot one implementation project (\$300K FY 23)◦ PSETF collaborated with the Healthcare Task Force to submit this recommendation.• In total, the PSETF was able to get around \$1 million approved through 2023.• Next steps are for BDAS to release RFPs.	
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<p>Funding Recommendations - <u>COVID Relief Bill</u></p>	<ul style="list-style-type: none"> ● Rekha Sreedhara shared an overview of national and state funding opportunities. ● \$1.75B block grant funding for prevention and treatment of SUDs (Additional \$20M in state funds) <ul style="list-style-type: none"> ○ This is still a work in progress, so there aren't many details available. ○ MA Bureau of Substance Abuse Services released an RFI relate to COVID relief funds, so perhaps something similar could happen in NH. ○ We will likely know more after the next GC meeting and CHI team will share that information with the task force. ● \$80M for training regarding evidence-informed strategies for addressing mental and behavioral health conditions (including SUDs) among health professionals ● \$50M to address increased community behavioral health needs worsened by the COVID-19 public health emergency ● \$30M to support overdose prevention, syringe services and other harm reduction programs. ● Lucy Hodder shared that these relief funds are a major piece of legislation addressing SDOH. It offers an option for Medicaid programs to extend coverage to pregnant women for up to a year. Additional funding coming for enhanced insurance coverage, COBRA coverage for up to 6 months for 100% of the cost. Additionally there are enhanced SNAP and WIC benefits as well as new housing support vouchers and funding for DCYF for foster and childcare. 	<ul style="list-style-type: none"> ● Task force participants will schedule a separate meeting to process this topic further. Please reach out to Rekha if you are interested in joining.
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- [Lucy Hodder shared a summary of the bill.](#)
- Also included an enhanced subsidies for the insurance market.
 - Deborah Schachter shared that there will be enhanced funding if states adopt mobile crisis unit approaches to behavioral health.
- Could be a task force priority to summarize how the state plans to use these pots of money and how the task forces can help direct that effort and support the state.
- Other helpful summaries of the federal relief bill include:
 - Center on Budget and Policy Priorities
 - National Conference of State Legislatures
 - National Network for Youth
 - National Council of Nonprofits
 - National Academy for State Health Policy



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<p>JSI Health Communications Update</p>	<ul style="list-style-type: none">• Christin D'Ovidio provided an overview of the Today is for Me Campaign.• Year 2 Project Activities:<ul style="list-style-type: none">○ Updated and executed the social marketing campaign.○ User experience testing with target audience○ Key Informant Interviews with healthcare professionals that might use provider materials.○ Supported ESC group with creating materials• The team's approach always involves the end user/target audience when developing messaging.• So far, the team has generated over 6 million ad impressions across all platforms, and have been incorporating more videos. All organic content is alongside paid content.• Christin shared examples of the provider materials.• The team has been working with the PSETF Communications Working Group to review updated materials.• Christin shared examples of draft posters for the Alternative Treatment Centers (ATCs).• The ATC posters have certain legal requirements, which are outlined here.• The website has been updated and resources have been expanded. Once this is complete, the team will look to get an endorsement from the task force to include on the website.	<ul style="list-style-type: none">• There will be a talk on marijuana in pregnancy & breastfeeding at the next NNEPQIN conference on Thursday 6/10.
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Plans of Safe Care Template	<p>POSC Utilization Discussion:</p> <ul style="list-style-type: none">• Erin Collins shared that over the last 6-8 months, her practice has seen a decrease in women who have positive substance use screens, yet the families for whom they are caring, have increased in acuity including a higher rate of polysubstance use and perinatal substance exposure. They also found an inability to support the Cuddler Program throughout the pandemic. Increase in medication use for withdrawal, increase in foster placement and third party safety plans. They also saw a decrease in the pregnant person's desire to enter into recovery support or even having the conversation about connecting with these supports.• Others shared similar observations about increased polysubstance use, which can make withdrawal management more complicated.• Renee Maloney shared that CMC has seen an increase in methamphetamine and amphetamine use. They have had increased relapses 3rd trimester and postpartum period.• Katie White shared that WDH is seeing the same. They have had more women needing inpatient MAT initiation due to active use and polysubstance use. WDH has also implemented existing staff as cuddlers, but it has still been a challenge. Changing the visitor policy to keep a consistent visitor for the five days of monitoring and developing a plan earlier have been helpful measures. Support group for women begins again next week after a challenging period of engagement due to COVID.	<ul style="list-style-type: none">• There will be more TIC resources available soon on the Center for Excellence website.• Rekha proposed to bring the topic of POSC Template Updates to a subgroup meeting of the Task Force. Rekha and team will convene a meeting in the next month or so.
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- Providers are wondering how to readjust once things return to more normalcy. Many are considering the training and re-education that will need to happen. Building lived experience into training will be crucial.
 - Farrah can provide trainings on Compassion Fatigue and Trauma Informed Care (TIC).
- Grace Palmer asked if partnerships with the state's peer recovery facilitating organization could be helpful to engage parents with lived experience.
 - Katie White shared that SOS RCO recovery peers have seen utilization still through COVID.

Discussion of POSC Template Updates:

- What questions can spur action and connection, and how else can the POSC be used?
 - Grace Palmer shared that the DCYF-contracted peer recovery program leads (the Strength to Succeed program) may be willing to join the family engagement-focused meeting. Grace can connect anyone to them (Lori Hebert and Anna Battle).
- Grace Palmer has been on a team working around home visiting and connecting people to care/services. They have seen issues around connecting and closing the loop with referrals as well as with maintaining patient privacy during the process.
- Katie White shared that care coordination is key to the POSC being successful. Having follow through after referrals are initiated during



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pregnancy and then a warm handoff to social workers for ensuring the PCP is aware of referrals and any barriers that can be identified prior to sending a family home, is vital.

- Bonny Whalen shared that prenatal connections/referrals have been more successful for her practice than postnatal due to the reasons that were mentioned in the discussion. With multiple touchpoints over time with moms saying yes to the referral, when it's offered not necessary at one visit but another.
- Shannon Rondeau shared that as a care coordinator in primary care she would like to find a way to collaborate on the POSC with all care teams involved, from OB/GYN to birthing hospital team to post-partum care team.
- What does the POSC process look like with the populations of moms with SUD right now? Is there a need for an enhanced crisis pathway?

MCHB Proposal Discussion:

- JSI is working on a proposal specific to POSC which would help initiate POSC prenatally through postpartum.
- [Adriana Lopera shared the RFP from HRSA.](#)
 - One year proposal looking for innovative approaches to emerging issues, \$250,000
 - JSI has decided to bid with input from BDAS and community providers. Proposing a web-based app where the login and password would stay with the pregnant person and would be



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	<p>initiated prenatally. Easily shared with different providers by logging-in together.</p> <ul style="list-style-type: none">○ This would address technology barriers such as lack of access to a smartphone (as is the barrier with an app). As long as the provider has a laptop, they can access it.○ Working to fulfill federal POSC requirements and consider confidentiality. Designing with the end user in mind. Including an advisory council for input of folks with lived experience. <ul style="list-style-type: none">● The JSI team has had several meetings with providers (Dartmouth, Elliot, Concord, Wentworth, Amoskeag).● Working with Gabi Teed to meet people with lived experience.● Working with Lucy Hodder to address privacy and confidentiality challenges.● Considering three pilot sites with hopes to launch statewide after.● Participants shared that this would be a good way for the moms to feel ownership of the POSC and that it would allow the mother to be more involved and feel that document is "owned" by her/the family. It will promote autonomy.● This website could also be a way to normalize "help" and community support in our culture.● The team is thinking about sustainability with the pilot and looking at the stigma issue by making this a resource for all moms to use.	
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	<ul style="list-style-type: none"> The team is considering technological compatibility with other platforms as technology becomes more common in healthcare. 	
DCYF Conference-April 8th, 2020	<ul style="list-style-type: none"> Melissa Schoemmel provided an update on the PSETF presentation at the DCYF conference: Best Practices in Perinatal Substance Exposure Care. PSETF presentation is 4/8/21 from 11:00 - 12:30 registration for the conference closes 3/31/21. Division for Children, Youth & Families (DCYF) Virtual Conference April 5 - 9, Registration closes 3/31, link to register. Farrah is presenting at 9:00 am on 4/9/21 about TIC 	
Member Updates	<p>NH Maternal Mortality Review Committee Update:</p> <ul style="list-style-type: none"> Moving forward, Farrah will officially represent this committee to the PSETF. ERASE MM – Enhancing Reviews and Surveillance to Eliminate Maternal Mortality, is using funding from the CDC to identify and implement prevention strategies. <p>Birth Certificate Data and Naloxone Update from David Laflamme:</p> <ul style="list-style-type: none"> The Narcan Initiative was in response to data showing a need. David shared the DMI dashboard, which is available online. There is not good data of community use of Narcan as this is difficult to track. 	<ul style="list-style-type: none"> Please reach out to Gabi Teed for more information about the Manchester Perinatal SUD Alliance. Gabi is hoping for a generous corporate sponsorship for the Diaper Pantry, so please let her know if you have any ideas.



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- The DMI does have EMS Narcan administration data, opioid related ED visits and treatment admissions.

NH Birth Data Update:

- Last year the birth certificate worksheet questions changed slightly in NH.
- Question added: "Is there documentation that access to naloxone was discussed with the patient?"
 - This has potential issues with access to documentation.
 - After a little over a month of available data this year (about 1000 births) 13 birthing people indicated yes to prenatal substance exposure and yes to Narcan Discussion Documented.
 - 4 of 16 birth hospitals had no exposed births.
 - Of the 12 that did, 5 had no documented discussions.
 - 8 of 16 hospitals had a discussion with no exposure documented.
 - This Narcan question is asked for all births.

Naloxone and the POSC at Dartmouth Hitchcock (DH) Update from Farrah Sheehan Deselle (on behalf of Bonny Whalen):

- A naloxone availability and instructions section was added to the DH POSC template to normalize relapse and potential need for Narcan.
- There will be additional changes and updates around language eventually.

Coverage gaps and the potential for optional expansion of coverage

- Task Force will offer a follow up meeting.

General Updates:



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- Grace Palmer shared that she has been working with Concord Hospital and DCYF to connect people with home visiting as early as possible. Some of the challenges include care coordination issues. WDH and DHMC have been doing good work in this area. Her team was able to do a focus group with mothers this fall.
- Gabi Teed shared that the trends in Manchester have been similar to other areas including polysubstance use and housing issues. Gabi's position has expanded to include moms with mental health challenges. Gabi is interviewing for a Recovery Support Navigator and is hoping to have someone by the end of this week. Still offering prenatal yoga for anyone through Zoom. The Manchester Diaper Pantry is still going strong and is always in need of donations.
- Manchester Perinatal SUD Alliance continues to meet every other month.
- Wentworth Douglass Hospital (WDH) has created a Substance Use Response Team with a multidisciplinary team of approximately 40 staff members from hospitalists, nurses, case managers, LNAs, etc. All are engaging in Trauma Informed Care education, Motivational Interviewing and a more education to support staff in caring for people with substance use disorder
 - MDs and hospitalists created the Response Team. Peter Fifield and Jen Stout from the Doorway have been providing the sessions.
 - The hospital wide approach has been helpful.
 - The team plans to launch in April to have someone available 24/7 who has some level of training/expertise in SUD.



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	<ul style="list-style-type: none">• Next meeting in May: Lucy Hodder has invited Joe Ribsam from DCYF to talk about the community survey that is being disseminated right now.	
Adjournment	<ul style="list-style-type: none">• Deborah Schacter motioned to adjourn. David Laflamme seconded. The Motion passed unanimously.	
Next meeting: May 19, 2021 via Zoom		