

Kentucky Folic Acid Partnership
Minutes
May 17, 2001
Frankfort, Kentucky

Members present: Dr. Steve Davis, Linda Lancaster, Tamara Johnson, Denise Maples, Christi Vincent, Audra Smith, Renee Neace, Bonita Bobo, Pat Seybold, Delena Young, Heather Dietrich, Eugenia Smither, Donna Chapman, Susan Borders, Lisa Arvin, Jo-Ann Negron, Sarah Chaffin, Jennifer Jarman, Diane Sprowl, Beverly Siegrist, Sharon Owen, Marcia Burklow, Missy Schadler, Linda Villwock, and Susan Brown

Unable to attend: Dr. David Adamkin, Katrina Adams, Peggi Jordan, Sandra Bastin, Jaime Rafferty (baby boy-“Beau” born on April 30-congratulations!), Ethel Castle, Heidi Corner, Ardith Davis, Marci Flechler, Lynnett Fortney, Sandy Good, Fran Hawkins, Dianne Hillard, Cheri Johnson, Jan Jones, Jackie Klee, Gil Lawson, Anna Katherine Mefford, Judy Myers, Kris Paul, Joyce Robl, Kristen Royalty, Gina Sears, Laura Senn, Shari Stewart, Holly Turney, Toni Turpin, and Paula Watson.

Special Guest: Dr. Kim Townley.

Welcome and sign-in Dr. Davis warmly welcomed and acknowledged the newest five members of the KFAP: Western Kentucky University, Pike County HD, Magoffin County HD, Whitley County HD, and the Pennyrite-Purchase District HD.

Chairperson Dr. Davis called the meeting to order. He quickly impressed upon the Partners, “You are making a difference!” We felt his sincerity and deep appreciation as he spoke. (We the Partners would like to say thank you to you as well, Dr. Davis).

Dr. Kim Townley was introduced as Dr. Davis stated, “When a national search to find the perfect person for Dr. Townley’s position began, little did anyone expect to find the ideal person just 30 miles from Frankfort.”

Greetings from Dr. Kim Townley Dr. Townley distributed handouts from the Health and Welfare Committee Presentation of May 16, 2001, outlining the KIDS Now Initiative (**K**entucky **I**nvests in **D**eveloping **S**uccess). The first sentence inside states, “In order to reach the goal that all young children in Kentucky are healthy and safe, possess the foundation that will enable school and personal success, and live in strong families that are supported and strengthened within their communities, 25% of Kentucky’s Phase I Tobacco Settlement dollars will fund the early childhood initiative.” Next is the section, “**Assuring Maternal and Child Health**” These groups fall in that category:

Healthy Babies Workgroup (To plan and implement a public awareness/education campaign to educate the public about fetal alcohol syndrome, the impact of substance abuse on pregnancy and childbearing, the importance of smoking cessation, and about healthy lifestyle choices that help babies to be born healthy. Contact: Dr. Kim Townley-502-564-2611 ext 457 Campaign runs August-December 2001).

Folic Acid Campaign (To prevent the high incidence of Neural Tube Defects (also known as spina bifida or open spine) in Kentucky by providing access to the vitamin folic acid a known preventive measure. **FACT:** Kentucky’s rate of neural tube defect is 1 ½ times the national average. An estimated 70% of such birth defects are preventable through the administration of folic acid prior to and in the early prenatal period.

(Campaign) Based on Kentucky's incidence of neural tube defects and the average lifetime cost associated with the condition (the annual cost to Kentuckians is estimated to be \$55 million dollars annually). Contact: Dr. Steve Davis-502-564-4830 or Linda Lancaster- 502-564-2154

Substance Abuse Treatment Program for Pregnant and Post-Partum Women: To assist Medicaid eligible women with current or prior substance abuse problems to bear healthy babies and remain free of substance abuse problems in the future. Contact: Mike Townsend-502-564-2880.

Universal Newborn Hearing Screening: To screen all newborns prior to hospital discharge, to assist hospitals to implement universal hearing screening, and to provide additional state staff to coordinate a universal hearing- screening program. **FACT:** 32 states currently have universal newborn screening laws. At a rate of 3:1000 births, hearing difficulties are the most common sensory birth defect. The average \$20 cost per child for a reliable hearing screening before hospital discharge, is covered by KCHIP and by Medicaid for eligible populations. Early detection and appropriate tracking and follow-up are vital to the development of the child. The cost of educating a deaf child in a residential program is approximately \$27,000 as compared to \$6,000 annually for the child who is diagnosed early and served in a typical classroom. Contact: Michelle King- 502-595-4459 ext 323 and 877-757-4237 or Eric Friedlander-502-595-4459 ext 271

Immunization Program for Underinsured Children: To achieve 100% immunization coverage by age three. **FACT:** Currently 17% of children ages birth to three years are underinsured. The purchase of vaccines to cover this population of children who are non-Medicaid and non-KCHIP eligible will increase access to immunizations. Contact: Dr. Glyn Caldwell-502-564-7243

Eye Examinations For Children: To legislate the requirement for all children to submit evidence of an eye examination (not a screening) no later than January 1 of the first year of public school entry. The current requirement for a physical examination (704 KAR 4:020 does not include an eye examination. Funds are available for assistance to children who are neither Medicaid nor KCHIP eligible and who do not have sufficient resources to pay for the cost of an eye examination from the Commission for Children with Special Health Care Needs. **FACT:** Screening alone often misses visual difficulties such as amblyopia (lazy eye) which have the potential for reversal if diagnosed and treated before the age of five. Contact: Dr. Kim Townley- 502-564-2611 ext 457, Eric Friedlander 502-595-4459 ext 271, Jackie Ferguson-800-232-1160, or Terry Vance-502-564-3678

Listed under: "Supporting Families:"

Voluntary Home Visiting Program: Provide voluntary home visitation program for first time parents who are at-risk. **FACT:** The highest number of reported child abuse cases (43%), involve children 4 years old and younger. In evaluations of multiple home visiting programs, participating children exhibited enhanced levels of health and development. Contact: Dr. Steve Davis-502-564-4830 or Curt Rowe-502-564-2154

Listed under: “Enhancing Early Care and Education:”

Access to Child Care Subsidy: To increase the reimbursement to childcare centers and licensed family daycare homes who provide care to low-income families by increasing their percentage of eligible children. **FACT:** By increasing the eligibility from 160% of the federal poverty level to 170% FPL, an estimated 12,000 *additional* children will be covered by eligibility guidelines thereby increasing access to care for low-income families. Contact: Mike Cheek-502-564-2524.

□ Moved to 165% of poverty October 2000.

Quality Rating System for Childcare: To raise the level of quality in childcare by offering a system of incentives and rewards based on identified characteristics associated with positive outcomes for children and families and by offering technical assistance to achieve quality indicators. **FACT:** Children cared for in high quality settings performed significantly better in math, language, and social skills at school entrance than did their peers in programs of poor quality, according to a study published by the University of North Carolina. Contact: Dr. Kim Townley or Teri Mehler-502-564-2611 ext 457.

Scholarship Fund for Childcare Providers: A scholarship fund administered through the KY Higher Education Assistance Authority (who has similar funds for occupational therapists, military personnel, and others) available to those who work in childcare at least 20 hours weekly and to trainers seeking a specialty trainer’s credential. The funds assist childcare personnel in moving through a credentialing system that begins at entry level and proceeds through post-secondary education. **FACT:** The quality of childcare is closely associated with the education and training levels of the childcare providers. Childcare workers are among the most poorly paid individuals in the workforce and therefore need assistance and incentive to increase their educational achievement and to permit workers to move up the career ladder in early childhood. Contact: Nancy Newberry-502-564-8099.

Increased Licensing Personnel: Additional Licensing personnel dedicated specifically to childcare who will bring expertise to upgrade childcare quality by having smaller caseloads consisting only of childcare facilities. **FACT:** Present caseloads average 100 facilities per worker (exceeding national standard of 50 facilities) and include facilities other than childcare. High case numbers preclude anything but monitoring for compliance with minimal standards and leave no time for assessing quality. Few workers have backgrounds in early childhood. Contact: Mike Cheek-502-564-2524 or Amy Stibler-502-564-2800.

Healthy Start in Childcare: To provide personnel to train and educate childcare providers and parents in health, safety, nutrition and the benefits of early intervention. Emphasis is also placed on the prevention of communicable diseases in group settings. **FACT:** There are approximately 2040 licensed childcare facilities in KY and 814 certified family day care homes that will benefit from assistance to upgrade health and safety conditions and staff/parent training. In a random sampling of 330 licensed centers by the Louisville Courier Journal, 39% of sampled centers had health and safety violations and 73% of centers evidenced violation of state regulations at

least once in the past two years. Contact: Dr. Steve Davis-502-564-4830 or Sue Bell-502-564-3527.

Local Early Childhood Council Funding: Agencies and individuals, identified in legislation, will form local councils to improve the lives of children and families. First biennium funding will be devoted to improving the quality and availability of childcare in low resource/high needs areas. **FACT:** Approximately 103,000 of KY's young children are in childcare. According to national standards, much of KY's childcare is judged to be of poor quality and yet providers often cannot afford the expense associated with increasing quality. Funding through councils will offer seed money to make needed improvements according to specified criteria through the use of non-recurring dollars. Contact: Darlene Goodrich-502-564-8099.

Listed under **Establishing the Support Structure:**

Early Childhood Development Authority: To receive and disburse funds and to coordinate the development of programs supported by the funds. The Early Childhood Development Authority will merge four existing councils for efficient coordination of issues related to early childhood. Contact: Dr. Kim Townley-502-564-2611 ext 457.

Business Council: To improve the corporate community and local governments in supporting issues of importance to working families in Kentucky. The Business Council will be composed of business and community leaders who have demonstrated an interest in early childhood and families in the workplace. Contact: Dr. Kim Townley-502-564-2611 ext 457.

Professional Development Council: To work with existing entities to create a seamless system of education and training for early childhood providers, beginning with an entry level credential and proceeding through a Master's Degree. Contact: Nancy Newberry-502-564-8099.

Evaluation of Initiative: To ensure effective use of funds in achieving targeted outcomes across settings statewide. Contact: Dr. Kim Townley-502-564-2611 ext 457.

Listed under **Program Improvements:**

Training: Requires the Cabinet for Families and Children to set training requirements for all providers of childcare who receive a state childcare subsidy. Contact: Mike Cheek-502-564-2524.

Child Safety in Childcare: Allows the Cabinet for Families and Children (through Cabinet for Health Services Office of Inspector General) to assess penalties to facilities when an inspector finds a situation that poses an immediate threat to the health, safety or welfare of children. In addition to a hearing, an informal dispute resolution process is established prior to an action that could result in the closure of a childcare facility. Contact: Mike Cheek-502-564-2524.

Dr. Townley highlighted each of the topics and closed by saying, “The stars are in place. Don’t rest! We don’t have time to rest.”

I found Dr. Townley to be intelligent and succinct in her comments. To those of you who missed our meeting, you missed a great lady... Dr. Townley shared with us what Dr. Leach says about her...he calls her the “bulldozer with a smile.” I’d say that was an accurate description and I am pleased the KFAP had the opportunity to meet with her. Thank you again, Dr. Townley.

Chairman’s Report-Dr. Steve Davis: Dr. Davis agrees that there is a wave of support for all of the KIDS Now Initiatives. In fact, he is about to leave our meeting to address a group of about 60 people in Lexington about the KIDS Now Initiatives. He reminded us that the Initiative was signed by the Governor on April 4, 2000, but did not go into effect until July 1, 2000. He admits that he had expected the Folic Acid Campaign Initiative to be up and running by July 2, 2000, only to be awakened to the magnitude of the numbers. “We busted the manufacturers production of folic acid and it was late November before all of the 120 County Health Departments had the folic acid pills in hand to dispense.” To look at the first year’s numbers, we see what an influence that made. Last months numbers alone have surpassed the numbers for the first three months. “We’re in the business of removing barriers,” Dr. Davis said as he described a new program with the Commission for Children with Special Health Care Needs that will provide folic acid to the 5000-6000 women who come to the Commission each year. He urged the Partners to email him, or Linda Lancaster, or Susan Brown if they are facing “bumps in the road” that need attention. He pumped us up with these comments:

- Awareness is up
- Patient numbers are up and
- Patient and Professional Education numbers are up

Eugenia Smither asked if there was any movement to start an Immunization Registry like the Birth Registry? Both Dr. Davis and Dr. Townley gave their views. The answer is yes, but no. Technology is there-but the cost (funding) is not there. We’re working on it, however it becomes a big brother’s watching issue. Bottom line: This is a money issue and a political issue. (Dr. Davis had to leave and Susan Brown chaired the remainder of the meeting in his absence).

Committee Reports from the Chairs:

Diane Sprowl-Community- Community met on April 26, 2001 in Lexington, following the KFAC meeting. Diane was unable to attend. Susan Brown chaired in her absence and prepared the minutes from the meeting. The main order of business was to revise the Community Action section of the Kentucky Folic Acid Partnership and the Greater KY Chapter of the March of Dimes Year 2001 Plan. (All KFAP members received a copy of the final plan today). **Next meeting date to be announced.**

Linda Villwock-Media- Media is continuing plans to work a deal with McDonalds to do a statewide campaign to promote awareness of folic acid using tray liners. (The red tape is long but persistence is the name of our game). The month of May has been proclaimed, "Women's Health Awareness Month" by First Lady Judi Patton. In response, the KIDS Now Initiative has provided funding to purchase 3300 Physician's Folic Acid Education Kits from the March of Dimes. These are being mailed to 3000 physicians (OB/GYNs, Pediatricians, MCH Specialists and others) and 300 certified nurse midwives. Included in each kit is a cover letter telling about the KFAP and the Campaign. These were printed as an in-kind cost from the March of Dimes-along with providing postage. ***Much thanks to the March of Dimes staff: Alison and Anita, and especially Denise Maples (this was her baby). The manpower needed to do such a large mailing is incredible. Special thanks to volunteers from the Spina Bifida Association of KY provided by Heidi Corner: Demmer, Rose, Terry, Darlene and Alex. Also KFAP members who physically worked on this project: Audra Smith, Linda Villwock, Jo-Ann Negron, Lisa Arvin, and Susan Brown. The KFAC drafted the cover letter and Press Release and Linda Villwock provided the editing, for this project. *** Linda Villwock is providing training during June/July for the March of Dimes Divisions on communication techniques. Media hopes that the project with McDonalds will come together by September 2001, in time to promote our 2-year "kick-off campaign" folic acid anniversary of the Partnership. Media is also working on access to a radio database that plugs into a network of radio stations that would allow greater coverage of PSA's. **Next meeting date to be announced.**

Audra Smith-Professional- Professional committee met February 1, 2001 and will be meeting again today immediately after the Partnership meeting at O'Charley's Restaurant, in Frankfort. The goals and activities for the Year 2001 Plan were discussed and revised at the last meeting. (All members received a copy of the final draft at today's meeting). Audra asked the Partnership members to assist the Professional Committee by providing names of any professional publications that would allow the committee to submit articles about folic acid in their journals or newsletters. Dr. Kim Townley provided Audra with a list of prospects; and Eugenia Smither and Donna Chapman told of their folic acid newsletter article in the Bluegrass Family Health Newsletter. (Just a gentle reminder-if you are doing activities for the folic acid campaign-please make sure they are being reported...contact Susan Brown if you need more details of how to do this). **Meeting immediately following KFAP.**

Linda Lancaster-update on magnets and table tents-About 300 Spanish magnets of the food pyramid will be available from the pamphlet library. The new "flower" design for the Health Departments should be available by the end of June (designed by UK graphics). Eugenia Smither asked if those might be available to other partners and Linda thought they should be able to order them at cost since the design has already been made. Linda said she hopes the table tents will be ready by school time in the fall.

Jo-Ann Negron-AHEC-HETC- Linda Lancaster had invited Jo-Ann to speak about the possibility of partnering with the AHEC's (area health education centers) across Kentucky to help spread the folic acid message to Hispanics. Jo-Ann distributed two colored booklets to the members. One was entitled "Kentucky AHEC-Biennial Report of

the Area Health Education Centers Program: July 1998-June 2000. This booklet gives an overview of what AHEC is: The goals of the Kentucky Area Health Education Centers (AHEC) program are to improve the distribution; quality, utilization and efficiency of health care personnel. The mission of the KY AHEC is to promote healthy communities through innovative partnerships. This is accomplished by providing:

- Educational support services to health profession students and health care providers
- Community health education, and
- Programs that encourage health professions as a career choice.

The booklet also describes each of the eight areas of AHEC and highlights their uniqueness.

The second booklet is entitled “AHEC Health Career Opportunities in Kentucky Winter 2000 Kentucky Area Health Education Centers Working for the Commonwealth.” This booklet includes a map of Kentucky with the eight areas of the AHEC divisions easily viewable. It opens up to three pages inside with four charts displayed as follows: Educational Opportunities in Health Careers, Technical Colleges, Community Colleges, and Miscellaneous Colleges & Institutes. The third page lists each of the colleges and universities, etc that appear in the charts with their phone numbers. When the booklet is closed there are two columns of “Job Descriptions” listed on the back for health careers.

Jo-Ann tells us that AHEC-HETC is a grant funded, non-profit organization with the following objectives:

- Cultural sensitivity (especially Hispanics-given the increased numbers in KY) in-services for nursing schools, health departments, etc
- Provide CEUs
- Improving care in rural areas (students who attend UK and U of L have to do a rural AHEC rotation)
- Americana (there are twenty-six languages that our doctors and nurses represent)
- Increase Awareness (Festivals- and the newly formed Latino-Hispanic Nurses Association)
- World’s Greatest Baby Shower- West AHEC

Jo-Ann always amazes me with how much information she can convey in a very short amount of time. Thank you, we are fortunate to have your expertise at our fingertips.

Featured speaker: Sarah Chaffin RN Pike County HD (Sarah’s presentation was originally scheduled for 75 minutes and had to be whittled down to 50 minutes-but what a power packed presentation it was)! **“How I Reach Teens with the Folic Acid Message”** Mrs. Chaffin was introduced to the class by the Child Development teacher: Mrs. Brown, who instructed her class to show Mrs. Chaffin respect and to be forewarned that this material will be on their final examination next week. As Mrs. Chaffin handed the pre-test to each student, Patti LaBelle’s CD, “I’ve Got a New Attitude” was playing in the background...whenever the chorus line “I’VE GOT A NEW ATTITUDE” came-Mrs. Chaffin would sing along. The pre-test has ten multiple-choice questions. See attachment. (Pretest). Mrs. Chaffin then gave the correct answers 1.D, 2.E, 3.C, 4.C, 5.B,

6.A, 7.E, 8.B, 9.B and 10.C. An orange worksheet was our next assignment: Are you getting enough folate from your diet? See attachment. As Mrs. Chaffin helped the class with their worksheet, Mrs. Brown distributed bubble gum to each of the students. Mrs. Chaffin explained how folic acid lowers homocysteine levels in the blood that helps to prevent heart disease and stroke and lower blood pressure. She related homocysteine to sticky, gooey bubble gum and how hard it is to get bubble gum out of your hair, off of your clothes and off the bottom of your shoe. She encouraged the class to give examples of how they deal with bubble-gum. (Ice, peanut butter, wax paper to clothing and then an iron used to remove the gum, cut it out of hair/carpet). Mrs. Chaffin then took the class through the worksheet about folate in the diet. She explained that there were three things that cause us to not be able to get enough folate from our diet alone... 1. The time spent "sitting there" either on a truck, in the grocery store or in your own home-causes a loss of nutrients 2. Cooking –folate during cooking causes the nutrients to seep out into the water and that water is poured off into the sink 3. Absorption–folate has to be changed by the body before it can be used. Because of these three things, the 100% of folate that you thought you were consuming may really only represent 50%. She then teases the students with "So make your boyfriend or girlfriend a Golden Slush to help ensure they are eating a diet rich in folic acid." (Golden Slush recipe appears on her original orange sheet but is not on your re-typed attachment).

Golden Slush Recipe

91mcg folic acid for a festive touch, garnish with orange slices, halved

1 1/2 cups frozen peach slices

3/4 cup frozen Florida orange juice concentrate, thawed

1/4 cup water

1 to 2 tablespoons sugar

Let peaches stand at room temperature 5 to 10 minutes. Place peaches, thawed concentrate, water, and sugar in a blender container. Cover and blend until smooth. Makes 3 (5-ounce) servings.

Now Sarah does her slide show using the slides provided during the Train the Trainer sessions.

She is very in tune to teens and knows how to easily open up with them. She goes through a little bit of history as she relates the founding of the March of Dimes by asking "Who was the President of the United States during WWII?" The class shouts out different names and answers as Sarah encourages, "That's close, he was a cousin!" The answer was FDR. Then Sarah asks what kind of physical ailment did he suffer from? The answer is polio, which allows her to talk about Dr. Salk and the polio vaccine. She also tells the class about Eddie Canter and the school children giving dimes to help "save babies." Sarah has her folic acid display boards placed around the room and makes reference to them during her slide presentation. Then it was time for games-we played the "Price is Right," game, playing for a car of your dreams...maybe its Elvis' car or Andy's car- whatever car you can picture in your dreams. Sarah displays different brands of multivitamins and asks the contestants to put them in order of the cost and to figure out

the better buy. She explains to the class how most all multivitamins have the 400 mcg of folic acid or folate in them. She discusses ingredients and “designer labels” and relates the pill bottles to buying a pair of jeans. Then she passes out cereal boxes for the kids to read the labels. She lets the kids decide which is the better value. She gives them a scenario, like your Mother gives you \$10 to go to the store and buy some cereal and you get to keep the change. Which of the cereals will be your better buy? Someone says a cereal name based on it being cheaper to buy. Sarah asks who has that box of cereal and asks them to read how much folic acid is in it. They say, 25%, so Sarah says, you’d have to eat 4 bowls to get your daily-recommended amount. How many servings are in that box of cereal? The student says, 8. Sarah replies that cereal would only last 2 days. Who has the Total cereal box? That student answers. She asks how much folic acid is in that box? The student replies 100%, and also eight servings, which would last a week. Although the Total seems to be more expensive it is the better bargain. Then Sarah asks the students to tell the amount of folic acid in each of the cereal boxes still not discussed...oatmeal-no folic acid, raisin bran-25%...Sarah explains that the manufacturers may choose to add less folic acid because it does change the taste of the product. Then we played the Get the “B” Attitude word search game. (See attachment). Once the students had been fully educated the post-test (same as pre-test) was given. This time the class goes over the answers in detail together-fully understanding why the answer is right or wrong.

Sarah provides a folic acid presentation for teens that teaches history, math, economics and nutrition all in one. She makes it so entertaining that they get it without even trying. Now when Sarah goes out and about- she’s easily recognized by the kids as the folic acid lady. She’s become a celebrity in her own hometown. Thank you Sarah for your excellent presentation!!!! You helped us all to see how we too can better give others the “B” attitude. (You’d be great at the MCH Conference)!

Revised Year 2001 Plan Distributed to each of the members present-if you need a copy, let me know I will send it to you as an attachment.

Next meeting date: September 6, 2001 (two year anniversary)

(Changed from September 20, 2001 date due to conflict with MCH Conference)

The meeting will be held in Frankfort at the State Lab Building from 10-12:30.

The meeting was adjourned.

Respectfully submitted,
Susan Brown RN ICCE IBCLC
State Folic Acid Campaign Coordinator