



The Kentucky Folic Acid Partnership Meeting  
Location: State Lab Building, Frankfort, KY  
**May 22, 2008 11:00 to 1:00pm**  
**MINUTES**

**Those present:** Kelly McKown, Katrina Thompson, Shari Stewart, Beth Crace Fisher, Roxanne True, Trina Douglass, Nicole Nichols, Debra Israel, Linda Lancaster, Diane Sprowl and Susan Brown.

**Those who notified me as unable to attend:** Dr. Ruth Ann Shepherd (vacationing in Ireland), Jill Ford, Linda Dunsmore, Susan Borders, Linda Litzinger, Missy Mozea and Richard Nading.

- I. Susan Brown called the meeting to order and each member introduced themselves to the group.
- II. Shari Stewart made a motion to approve the January minutes as written and Katrina Thompson seconded the motion, with all members in agreement.
- III. **Chairman's Report** per Linda Lancaster for Dr. Shepherd: Linda began by thanking everyone for making the trip to Frankfort, acknowledging the fact that gas prices have risen significantly, but reminding members that we already meet only three times per year rather than quarterly, and we combined the sub-committee meetings and the partnership meetings years ago, into the same day to save additional time and travel. (The work of the KFAP is respected and appreciated and we hope that our members will continue to attend). State Budget Finances: DPH is in the contracting process, but with State Budget Finances not where we'd like them to be, some contracts have been cut. In January, contracts were developed, but the contracts have still not gone out even though it is now May. There is hope for adjustments over the next 1-2 years. Many retirees in 2008 will not be replaced to help with the budget. HBWW: A group of 35 participants of HBWW met last week (May 15, 2008) to hear Dr. O'Bryan speak on progesterone therapy. Participants also discussed ideas including a GREAT calendar and magnet with tear-away pages promoting healthy preterm labor messages. Linda shared that at the intervention sites-UK is using electronic messages that relay an ACOG message. They also have a community and media piece they follow with PR folks at each site, working along with the HD folks. They use radio, print, and billboards. The next meeting for HBWW will be at the conclusion of the KPA conference in June. Linda was asked if there is any data to show that the HBWW project is making an impact and she reports that the C-section rates have not (at least) increased at the three intervention sites. Both Trover Clinic and UK offer centering education, and King's Daughters have a Chapter grant from the March of Dimes that provides a SW to interview all the moms to help impact the prematurity rates. All three sites offer Grand Rounds about prematurity concerns. The speaker comes to one site where the presentation is recorded and then shared with the other two sites. Substance abuse has been one of the recent topics and participants learned about a newer drug similar to methadone called subutex. While these drugs were meant to be used to help addicts wean from the use of stronger drugs, they are now being sought on the street as a desired

and potent means for getting high. KY PRAMS: (PRAMS=Performance Risk Assessment Monitoring System Survey). A PRAMS survey was sent to 600-800 KY postpartum women. The state is currently in the process of trying to get back 80% of those and surprisingly, it does seem as though we will reach that goal. The PRAMS project had input from the CDC but it is not funded through the CDC. It is funded through a MOD grant. All is going well. Analysis of the survey responses starts soon. Our PRAMS survey included a couple of additional questions specific to KY issues, so the data gathered should be quite useful. Many women have included additional handwritten comments with their responses. It's possible that perhaps Tracey Jewell would present those results for us at our September KFAP meeting. (I've requested this to Tracey and I'm awaiting her response). Infrastructure: Linda states that Dr. Shepherd has greatly improved the infrastructure in epidemiology at the KDPH. She shared information about the three students they've successfully hosted that have gone on to seek employment within the facility. Another student arrives soon from Alabama. FIMR-Fetal Infant Mortality group is going strong. First Steps: There are some changes and new issues being worked on there. State Training: There is a three day training being held in Louisville for PN nurses during June 16-18, 2008. Both Trina Douglass and Susan Brown will be presenting on prematurity and the prematurity toolkit, among other topics. GIFTS: (Giving Infants and Families Tobacco Free Starts) is part of a \$246,000 Anthem Foundation grant targeting 9 counties in eastern KY. It is LHD based to help women quit smoking while pregnant. Joyce Robl and Kristen Ashford have worked closely on this project (Joyce is finishing her final requirements for a PhD, and Kristen is also a PhD candidate at UK). They researched and pulled materials from several sources and areas and then developed a unique program specifically for KY. As part of the project, seven new people were hired and the funding amount of the grant is reflected mostly in salaries, travel and incentives. Three days of training was provided in addition to much technical assistance and support. The program has motivational case management, as the KEY component of the program. The grant was awarded 2-10-08 and by the end of April 150 people were currently enrolled in the program, and thirty-three people have already quit smoking! Participants are screened for the following: smoking, secondhand smoke, social skills, depression, and domestic violence. The program target was to recruit 55 woman on Medicaid, and they recruited 80 women in the first 1 ½ months. It's been a great success! Some minor fine-tuning remains, but GIFTS would very much like to be funded for another year. The 9 counties participating include the 7 counties the KY River District (Knott, Lee, Leslie, Letcher, Owsley, Perry and Wolfe) along with Knox and Whitley Counties. The program consists of HVs and HD visits at one week, 6 weeks and 3 months. Sometimes phone contacts are used too, but face-to-face contact is preferred. Participants are informed about the medications that may be available, but since most OBs aren't comfortable ordering stop smoking meds for pregnant women, the motivational case management counseling component becomes the key factor in the success of the program. Eventually, KDPH would like to take GIFTS statewide and have the LHDs bill Medicaid for their counseling services. Although there would be no funding available to provide statewide staffing of this program, the KDPH could probably gather funding to provide training and materials. **Shari Stewart asked if the state would be interested in working with the private sector on this, commenting that Central Baptist has been looking for something like this.** Linda commented that perhaps KDPH may be able to provide an outside training by January, and that the KDPH would certainly be willing to speak with Central Baptist about this in more detail.

- IV. **Committee Reports: Community Chair- Diane Sprowl** reported and distributed copies of both the 2007 Evaluated Community Plan and also the new 2008 Community Plan. Diane requested to have Irene Centers send us a list of all the smoke-free communities across KY. (Since the meeting, Linda contacted Irene and the website address is for the Kentucky Center for Smoke-Free Policy: <http://www.mc.uky.edu/tobaccopolicy/kcsp/>). Plans for 2008 have some exciting changes for expanding our [www.kfap.org](http://www.kfap.org) website. Community plans to add the DPH training

modules, a link to the KY Quitline and also a website link to an all languages “health info” translation website. Community felt it was important to add a disparities component to their plan. When dealing with disparity groups, members may experience situations where they find themselves needing medical terms translated. This website can help, and by adding a link to it via our site members can have easy access to its info. The website is: <http://healthinfotranslations.com/index.php> . In addition to linking several websites, the committee made plans to encourage members to remember to distribute Pregnancy QUILINE brochures as they provide other activities. She brought samples to be sure everyone was familiar with these (they are green and have a picture of a pregnant woman on the front). Linda added that the information provided through this particular QUITLINE is definitely pregnancy specific.(Diane wears many hats as a Branch Manager with the BRDHD and therefore, finding extra time to do all the things she enjoys and is very capable of doing for us with the KFAP website is getting more difficult. Sometimes she has to put it all on the back burner until push comes to shove, and then—no kidding—you’ll see the sparks fly, as she works her best under pressure or to meet a deadline)! When the time becomes available, Diane will take all three sub-committee plans, combine them into the correct format template and then post them onto our website. (What would we do without Diane’s computer and website skills? Her technical assistance is superb)! Online Reporting Form: It’s here, it’s easy to use and ready to go! Copies were distributed to show what the [www.kfap.org](http://www.kfap.org) website front page looks like and to help Diane demonstrate exactly how members would access the New Online Reporting Form. She talked us all through the process using the copies as visuals. The form online has easy to use, computer friendly “drop-down” boxes to key in your choices. Members had the opportunity to ask questions and to clarify any misgivings about how they should be reporting their activities. Roxanne True needed clarification about whether to answer yes or no when prompted whether an activity was reported in the CHS reporting system or not. Roxanne used an example of reporting via the CHS form to report an activity for WIC outreach for Hispanic Families, but while working the event she also provided info on folic acid that she didn’t report on the CHS form. Diane responded that in that case, she should answer no because **this** activity-the folic acid piece-was not reported on the CHS form. By using the online form, she can now report her folic acid activity. Kelly McKown has already reported many activities for the March of Dimes using the new online reporting form without any problems. Susan added that members need to type their own name into the box that asks “Who provided this activity?” That way we know whom to contact if we have any questions about the way the reporting form was completed. Then, if you are reporting for other areas (like Kelly does) you can use the description section of the reporting form to let us know who actually provided the activity. This is the section where you need to explain the-who-what-when and where of your activity. Evaluation component for the prematurity toolkit: Diane shared that the BRDHD had been quite fortunate this past spring to work with an excellent graduate student-intern (Herpreet Thind) who helped design a pre and posttest for the prematurity toolkit. It also includes a few survey questions on the usefulness of the toolkit, and also some data gathering demographics. Diane used these for the first time when she presented the toolkit information to HANDS’ staff during their retreat, this past spring. When she returned, Herpreet took the data and created a report with charts to show the outstanding results of the presentation. It compared the pretest answers to the posttest answers showing a nearly complete flip-flop on the charts. Herpreet was also instrumental in setting up several surveys through Survey Monkey for the BRDHD, (an online service that costs a mere \$200 per year that allows up to 25 surveys at a time to be conducted and evaluated). She created one to evaluate the prematurity toolkit that was sent to all the toolkit recipients. The responses were good. On a scale of 1-5 (with 5 being the best and 1 being the worst) we received mostly 4’s and an occasional 2. Written comments included things like “really liked the flip-chart,” or “thought the PowerPoint Presentation could have been a bit flashier,” probably eluding to the fact that today’s young people expect their information to be quick, colorful and to the point. After completing the survey anonymously online, the participant closes out of the survey and is given an option to click another button to receive a free gift in appreciation of their time to complete the survey. To receive the gift, they must type in their contact information. The contact info is

completely separate from the survey and it doesn't provide any link whatsoever back to the survey answers. The free gift is a lavender March of Dimes "March for Babies" cup holder.

**Professional Chair-Katrina Adams-Thompson** reported on the 2008 Professional Committee changes. Professional seems to be on the same page with Community. Additions were made to reflect the HBWW project and to also address disparities and diabetes. Katrina had already provided members with the 2007 Evaluated Plan at our last meeting. Today she provided members with copies of the new 2008 plan. Well done. **Media Chair-Shari Stewart** reported that she and Beth Crace Fisher had met to discuss the new 2008 plan. Media has also added new components including the activity that they completed in February 2008 when Beth sent out an email to all KFAP members with a Spanish Media Guide to help create more awareness of the campaign for that population. Beth and Shari also went through each of the objectives carefully evaluating how to make them more measurable, so that at the end of the year during the evaluation process everything should be much easier to interpret. With Objective 3.1 Activities 2, 3 and 4 have been added. Activity 2 is the Spanish Guide already mentioned. Activity 3 addresses the toolkits and Activity 4 has all members helping to establish a list of free publications/newsletters statewide to promote our messages. Objective 3.2 addresses the need of all KFAP members to participate and report activities relating to prematurity and folic acid. Objective 3.3 Increases awareness of the Preterm Prevention Campaign, and Objective 3.4 Revisits the goal of disseminating information to National Publications with the activity being worded as "working toward." All three committee plans mesh quite well together and these will be combined and posted onto the website at Diane's earliest convenience.

**Debra Israel:** Update on Women's Health: Debra Israel provided us with a very interesting and informative report on preconceptual health issues. This has been a year of learning and observing for Debra. She shared that Sandy Cleveland had been far ahead of others in KY when she developed preconceptual protocol guidelines. Debra attended a Preconception Summit in California sponsored by the March of Dimes last October. She received an enormous amount of information. She's interested in seeing educational classes provided targeting those 29 years and under with diabetes. What resources are available? Medicaid is willing to pay for group classes. Debra is interested in forming a work task group to identify needs—open to collecting names of interested people to serve on this group. Need Peds, FP people to identify the risks—effective BCM to be used until diabetic issues under control and safe to become pregnant. Purpose is to empower women. Sees KFAP as a great resource and with our focus already broadened to include perinatal health issues—important to see preconceptual health as being an additional need for women to increase positive infant outcomes. The task workgroup would develop messages and take on the campaign statewide. During discussion it was mentioned that several of our members have been seeing the old Healthy Me, Healthy Baby promotions on TV these past two weeks. No one seems to know who put them back out there. This campaign was a precursor to the KIDSNow program. Linda had mentioned that we should call the phone number the next time we see the ad, to see who answers. (Susan sent her the number and it went to a recording of a program that is no longer in existence). Other members shared additional ideas about how to reach this target population like using You Tube and My Space as possible options. Diane also mentioned the SKY podcasts that some agencies are using. These are easily accessed via computer over the internet and a speaker can be seen and heard as if they were right there in the room with the user. Diane will check with her co-worker Amanda Bogard to look into this further. If any members are interested in serving with Debra on the preconception work task group, or you know of someone else who would be—please contact her at [Debra.Israel@ky.gov](mailto:Debra.Israel@ky.gov)

The meeting was adjourned.

Minutes Prepared and Distributed May 29, 2008  
Per Susan Brown, Kentucky's Statewide Folic Acid Campaign Coordinator