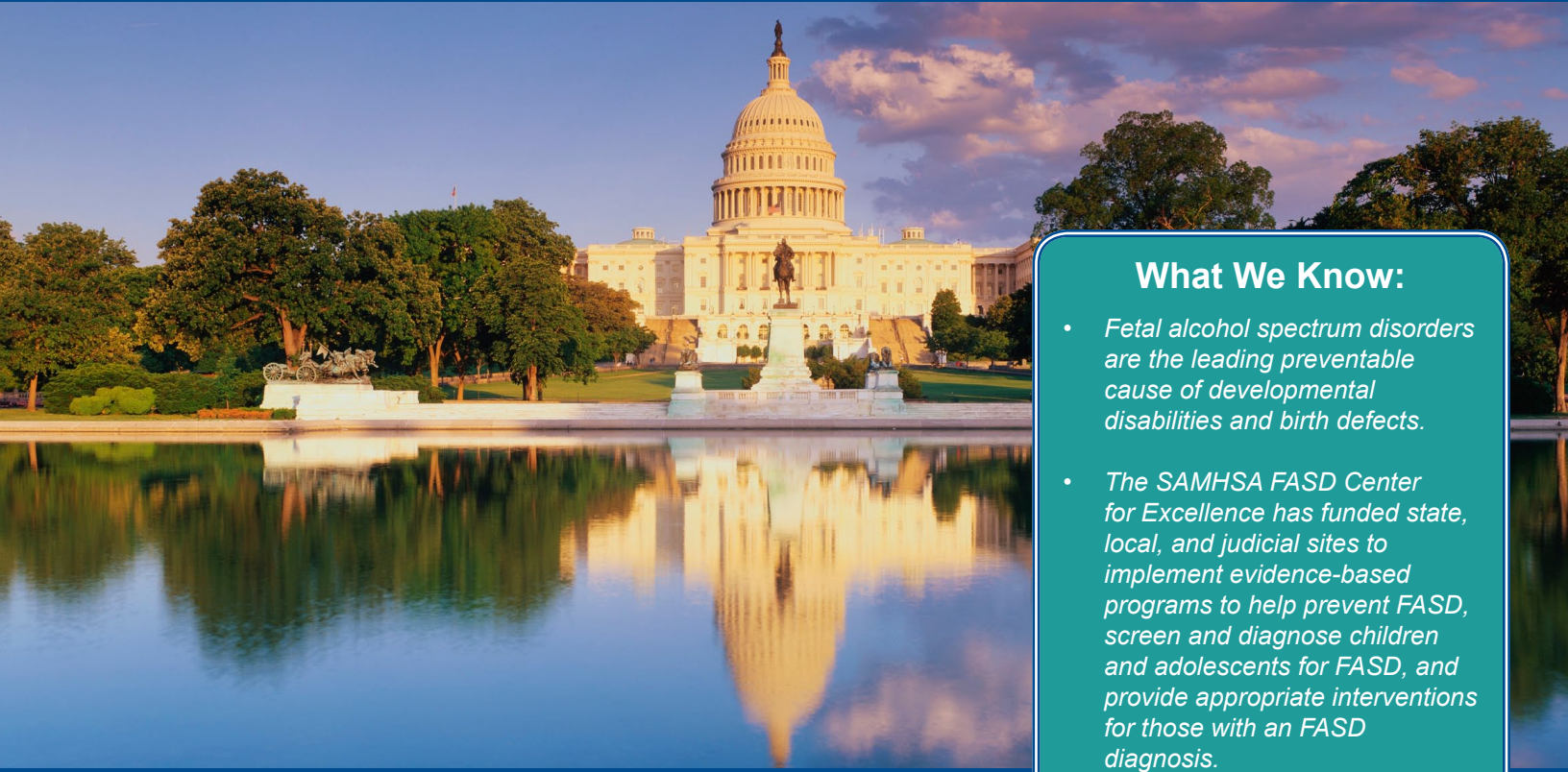


Integrating Sustainable Fetal Alcohol Spectrum Disorders (FASD) Services in Your Existing Service Setting

An Introduction to Key Steps



What We Know:

- *Fetal alcohol spectrum disorders are the leading preventable cause of developmental disabilities and birth defects.*
- *The SAMHSA FASD Center for Excellence has funded state, local, and judicial sites to implement evidence-based programs to help prevent FASD, screen and diagnose children and adolescents for FASD, and provide appropriate interventions for those with an FASD diagnosis.*
- *Integrating FASD practices into existing service settings and providing technical support and training ensure the sustainability of FASD services – Over 96% of recent projects funded (23) were successful in sustaining at least partial components of their programs.*

The Children’s Health Act of 2000 designated FASD as a critical public health issue. In response, the Substance Abuse and Mental Health Administration (SAMHSA) established the FASD Center for Excellence (“Center”), and has funded state, local, and judicial sites to implement model programs to decrease the incidence of FASD or improve the functioning and quality of life of children, youth, or adults and their families through screening, diagnosis, and appropriate clinical interventions.

The Center has provided technical assistance (TA) and training to substance abuse, mental health, juvenile justice, social service, and child welfare agencies attempting to integrate and sustain evidence-based FASD programs and strategies into existing service settings.

As capacity to address FASD increases, service systems are documenting positive client outcomes and improved system outcomes, including increased inter-agency collaborations and administrative buy-in.

This Fact Sheet discusses four key components for integrating FASD practices into existing services settings:

- ✓ Designing and implementing program components;
- ✓ Developing Task Forces;
- ✓ Expanding staff knowledge and skills around FASD; and
- ✓ Collecting data to measure and report outcomes.

The reverse side of this Fact Sheet will provide a brief introduction to each component. Every program will

have its own needs and capabilities for expanding FASD-related services, but these four stages will be critical to making FASD service implementation a success in any existing service setting. A national FASD training resource (see links at end) can help your program assess where it stands in terms of readiness and next steps.

Flip over to learn more!



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Prevention
www.samhsa.gov



SAMHSA
Fetal Alcohol Spectrum Disorders
Center for Excellence

Program Design and Implementation

Key Steps

- Develop needs assessments and strategic plans to select a model that aligns with your agency’s mission and vision.
- Identify an appropriate evidenced-based model for integration into your agency (see links to example program models, below).
- Develop policies and procedures for the integration of FASD services into the agency.
- Use annual implementation plans to ensure effective communication and guide service delivery.

Challenges: Obtaining buy-in from partner agencies; flexibility and adaptability of evidence-based programs; ensuring diagnostic capacity.

Potential positive impacts: Enhanced buy-in through task force involvement (see below); improved client outcomes; enhanced staff capabilities; program fidelity through ongoing dialogue with program developers and trainers (see Knowledge and Skills Training, right).

FASD Task Force Coordination and Collaboration

Key Steps

- Use an existing task force, a component of a larger task force, or a new task force to assist in planning, implementation, and sustainability.

Challenges: Keeping members engaged and committed; Ensuring mutual benefit for partners.

Potential positive impacts: Regular communication with stakeholders; ongoing mechanism for troubleshooting; cross-system buy-in, coordination, and collaboration.

Knowledge and Skills Training

Key Steps

- Train staff on selected model through national training center support and online resources (see links below).

- Provide FASD awareness training to agency and partners.
- Provide sustainability training to all sites.
- Ensure that training and materials are culturally and linguistically appropriate.

Challenges: Fidelity to the chosen model; staff turnover; program-level resistance.

Potential positive impacts: Enhanced ability to successfully implement the chosen model; facilitation of learning communities that can increase peer-to-peer learning and inspire local champions.

Data Collection and Management

Key Steps

- Establish systematic evaluation plans that include evaluation design, user manuals, code books, data

collection tools, and databases to support the collection and reporting of program outcomes to assess implementation quality and program effectiveness.

- Ensure proper consents and confidentiality of all data collected, and compliance with all data collection requirements (e.g., Institutional Review Boards [IRB], Office of Management and Budget [OMB]).

Challenges: Capacity to collect and analyze data; integration of data collection into existing data systems.

Potential positive impacts: Designated data managers help coordinate and manage the data collection process; online systems facilitate data collection and reporting across multiple service sites; data on outcomes increases agency buy-in and supports applications for new funding.

SO WHERE TO START? Right here.

The SAMHSA FASD Center for Excellence provides TA to help states get started on FASD service expansion and training on specific approaches to FASD prevention and treatment. To contact us:

- ✓ Visit www.fasdcenter.samhsa.gov
- ✓ Or call (866) STOPFAS

Other national FASD training resources include:

- ✓ The FAS Diagnosis & Prevention Network (FAS/DPN) at the University of Washington, Seattle
 - <http://depts.washington.edu/fasdpn/>
- ✓ The FASD Regional Training Centers (RTC’s) of the Centers for Disease Control and Prevention (CDC):
 - <http://www.cdc.gov/ncbddd/fasd/training.htm>
- ✓ The National Organization on Fetal Alcohol Syndrome (NOFAS)
 - www.nofas.org

The following links discuss FASD service approaches that have been successfully implemented in existing settings to reduce alcohol use during pregnancy and prevent incidence of FASD:

- ✓ Project CHOICES (CDC)
 - <http://www.cdc.gov/ncbddd/fasd/research-preventing.html>
 - <http://www.cdc.gov/ncbddd/fasd/freematerials.html>
- ✓ Screening and Brief Intervention (SBI; National Institute on Alcohol Abuse and Alcoholism)
 - Training and TA resources: www.phfewic.org
 - Free, downloadable screening forms and brief intervention manuals (English, Spanish, Vietnamese, and Chinese): <http://www.phfewic.org/Projects/Care.aspx>.
- ✓ The Parent-Child Assistance Program (PCAP; Fetal Alcohol and Drug Unit, University of Washington)
 - <http://depts.washington.edu/pcapuwl/>