

Suzie Kuerschner – *“FASD: A Provider’s Perspective”*
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Creating Capacity
FASD Webinar
Sewing Sustainable Systems

Suzie Kuerschner





Planning Goals

- ❖ **Facilitate integrated service delivery from a family focused, Collaborative Circle of Care model that insures culturally congruent and developmentally appropriate case coordination**
- ❖ **Facilitate community design of systems to include mentors, natural helpers and elders that can increase the frequency and duration of support**





Provider Partnerships

State, county and tribal systems model multi-disciplinary trust, promoting a climate conducive to positive collaborative relationships with families





Creating and Facilitating Collaborative Community and Provider Systems

- ❖ **Create and demonstrate respectful integration of professional and community members and volunteers**
- ❖ **Identify and list community specific resources**
 - inclusive of providers, natural helpers and elders
- ❖ **Conduct community readiness assessments**





Form Task Force





Potential Task Force Team Members

“Who should participate and be represented?”

❖ Educators

- ❖ Healthy Start
- ❖ Early Intervention
- ❖ Early Childhood
- ❖ Head Start
- ❖ Special Education
- ❖ Elementary through High School
- ❖ Post Secondary/College

❖ Behavioral Health

- ❖ Mental Health Providers
- ❖ Drug and Alcohol Treatment Counselors
- ❖ Parent Educators

❖ Public Health Providers

- ❖ C.H.R.s
- ❖ M.P.H.
- ❖ W.I.C. staff
- ❖ Medical staff: doctors and nurses

❖ Indian Child Welfare

❖ Vocational and Career Development Counselors

❖ Corrections providers

- ❖ Juvenile Services
- ❖ Adult Corrections
- ❖ Probation Officers

❖ Families affected by fetal alcohol

- ❖ Biologic
- ❖ Adoptive
- ❖ Foster

❖ Middle and high school students

❖ Community leaders/tribal council members

❖ Elders

❖ Spiritual advisers and religious leaders (relevant to community context)

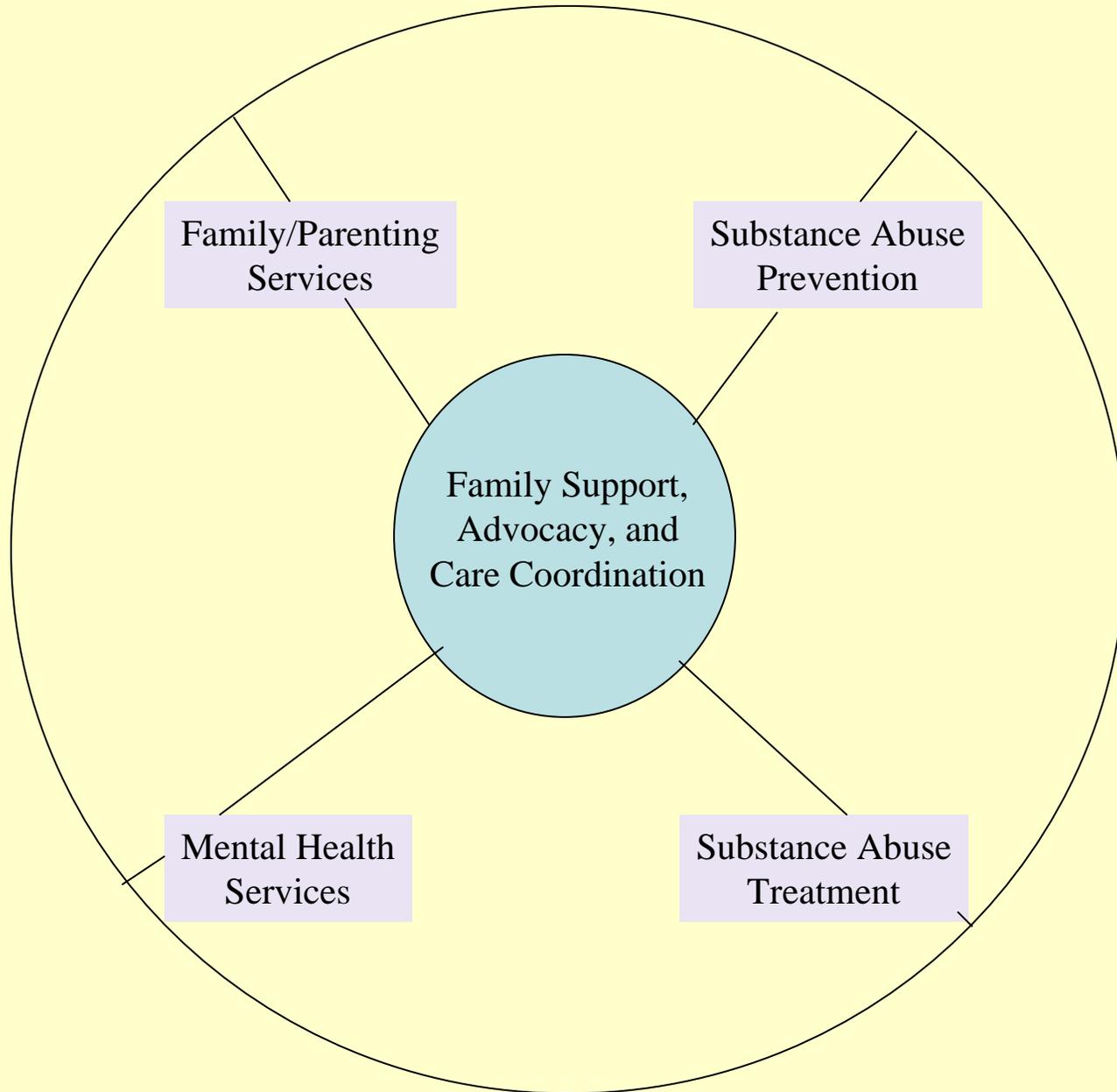
❖ Tribal and economic development staff

❖ Tribal and community recreation development staff

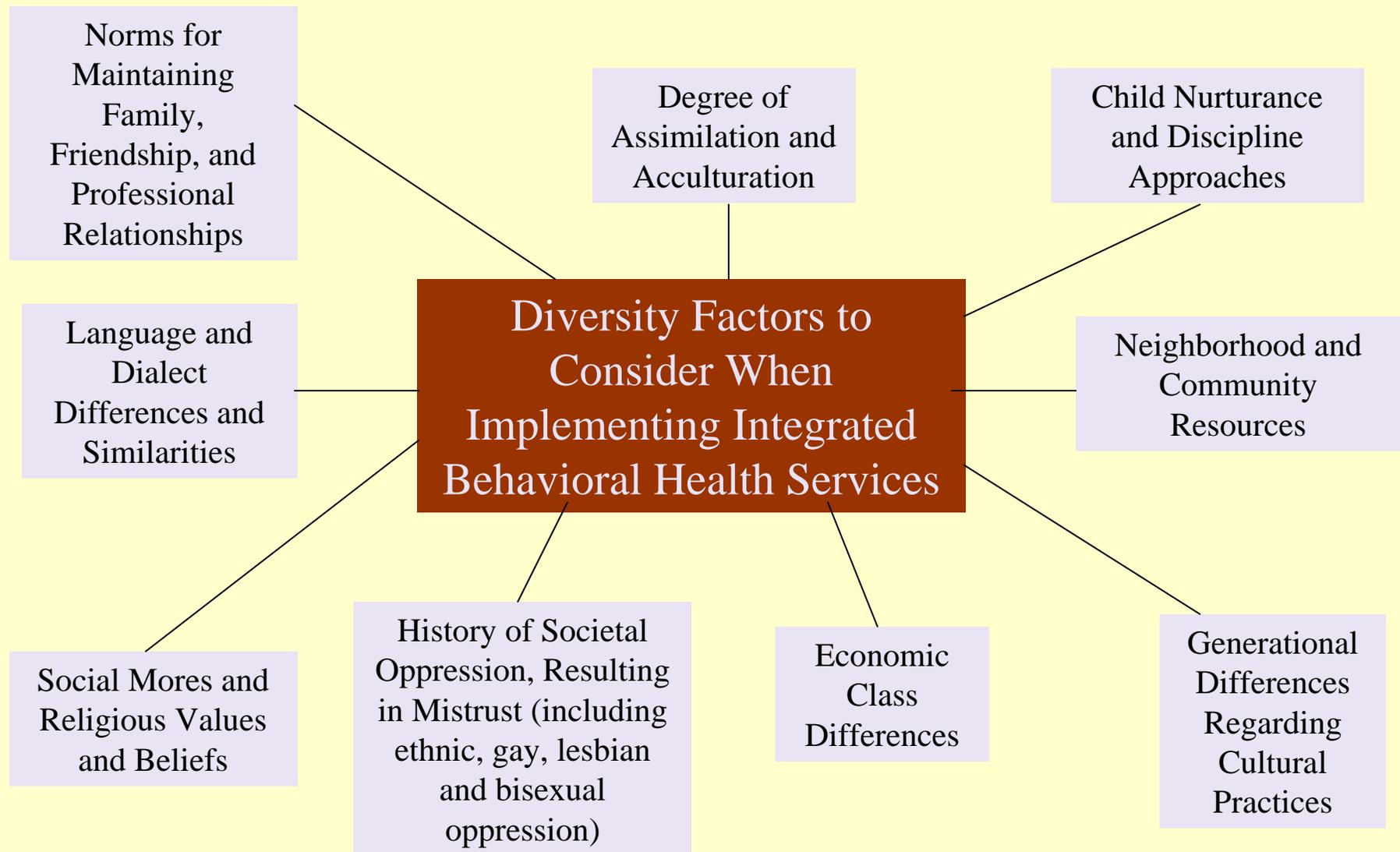
❖ Housing Providers

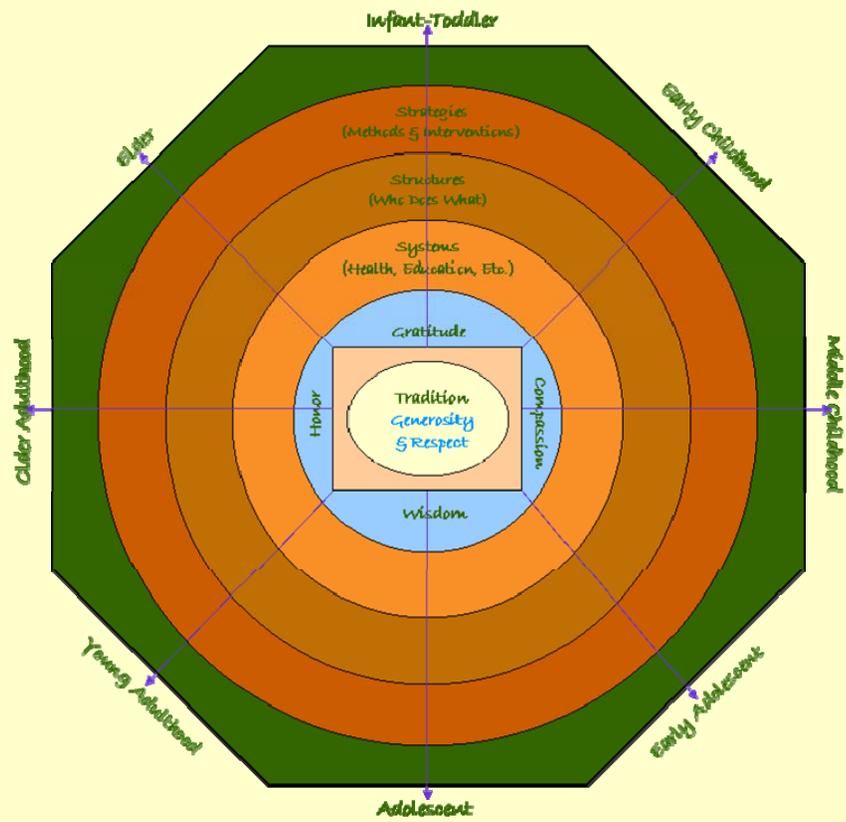
❖ Diagnostic team members

Behavioral Health Service Components



Considering Diversity Factors in Integrated Behavioral Health Service Delivery





SLBK



Systems are most successful when:





❖ **All services proceed from an understanding of the inherent shame, blame, grief and denial of FASD issues**





❖ Cultural congruence is imbedded throughout all services and respect is paid to eliminate stigma and judgment





❖ **Providers are educated about:**

- **child development**
- **consequences of organic brain damage**
- **components of behavioral health**
- **parenting stressors and family life issues**





❖ **The approach is multigenerational drawing on the strengths of extended family and/or community**





- ❖ **Families feel equal in service relationships**
- ❖ **Delivery is not “done to” but “designed with”**
- ❖ **Participation in their lives is understood as a privilege by providers**





- **Case coordination reflects family focus and utilizes forms and delivery strategies that respect this focus and conform to laws of confidentiality**





- ❖ **Frequency and duration of services are understood to be essential to building and sustaining skills; using natural community helpers, mentoring and volunteer resources**





❖ **Sustainable behavioral change is understood as the result of both skill acquisition and habituation over time**





❖ **Providers are knowledgeable about the special parenting challenges of parents who themselves may have special needs**





Integrating Traditional Knowledge and Clinical Best Practice Through State, County and Tribal Systems





Health

- ❖ **Indian Health Service**
- ❖ **Public Health**
- ❖ **Tribal Health Services**
- ❖ **Behavioral Health**
 - **state, county and tribal**





Education

- ❖ **Early Intervention/I.F.S.P. Planning**
- ❖ **Early Childhood Education/Headstart**
- ❖ **Elementary Middle & Secondary School/I.E.P. Planning**
 - **Tribal and public education**
- ❖ **Post Secondary College Support**





Justice

- ❖ Assist arrested individuals in understanding court procedures
- ❖ Train courts and judges and assist with appropriate sentencing guidelines
- ❖ Train corrections staff and probation officers
- ❖ Develop and deliver case coordinated transition services





Employment & Living

- ❖ Vocational/technical education and training
- ❖ Career development
- ❖ “Housing as learning”
 - Proctor Homes





**Potential Forms
and
Possible Templates
for
Task Force Team Members**





Example for F.A.S.D. Teams

❖ **Vision Statement**

To provide a collaborative consortium of social, emotional, educational and vocational services that promotes holistic, integrated and culturally congruent access to children and families

❖ **Mission Statement**

To provide these social and educational services from a multi-disciplinary, multi-agency and family context that facilitates functional use of the service menu and integrates access to and implementation of individually designed strategies for resilience and development

❖ **Values Statement**

That prevention and intervention are reciprocal and that children and families can benefit from strategies that build upon their identified strengths and facilitate easy geographic, cultural and conceptual access to services that are integrated via an inter-agency site based model





Memorandum of Agreement

Date _____

Partners _____

This document acknowledges the conceptual and functional relationship of the above identified partners for the committed purpose of family focused, culturally congruent collaboration in addressing the comprehensive issues surrounding Fetal Alcohol Spectrum Disorder.

Signatures _____



Family Coordination Service Plan Cover Sheet

Family Coordination Team Providers

Family Coordinator			
Client			
Family			
Community			
Elders			
Spiritual Advisors			
Other			
Educational Providers			
Behavioral Health Providers			
Medical/Physical Health Providers			
Physicians			
Public Health			
Traditional			
Other			
Social Services			
___ Housing			___ Indian Child Welfare
___ Adult and Family Services/T.A.N.F.			___ Vocational/Career Development
___ Child Protective Services			___ Corrections/Juvenile Services
Date _____	Parent/Guardian Signature _____		



Family Release of Information

Medical/Physical Health

Physicians

Public Health

Traditional

Other

Behavioral Health

Social Services

Corrections/Juvenile Services

Elder/Spiritual Advisor

Drug & Alcohol Treatment

Indian Child Welfare

Housing

T.A.N.F.

Education

Early Intervention

Early Childhood/Head Start

Special Education/I.E.P.

Elementary/Middle School

High School

Post Secondary/College

Vocational/Career Development

Date _____

Parent/Guardian Signature _____



To move forward in healing
we must remember
that as Native people
we do not live in our communities
but our communities live in us.
Then and only then
do we really realize what collects our
choices and directs our decisions



A Rosy Picture of Hope

