



**BEHAVIORAL HEALTH AND SERVICE
INTEGRATION ADMINISTRATION**

FAS Diagnostic and Prevention Network Clinic (FASDPN)

2015-17 BIENNIAL BUDGET

| Reduction Option | FY16 | FY17 | 15-17 |
|------------------|--------------------|--------------------|--------------------|
| FTE | (0.0) | (0.0) | (0.0) |
| GF-State | (\$354,000) | (\$354,000) | (\$708,000) |
| Total | (\$354,000) | (\$354,000) | (\$708,000) |

REDUCTION OPTION SUMMARY

As required by 2015-17 Biennial Budget Instructions, the Behavioral Health and Service Integration Administration (BHSIA) is submitting the following reduction option that would eliminate funding for the Fetal Alcohol Syndrome Diagnostic and Prevention Network (FASDPN) funds used to conduct training sessions for professionals statewide to facilitate their understanding of Fetal Alcohol Spectrum Disorders (FASD), their role in identifying and providing complex intervention needs for individuals with FASD, and how to identify birth mothers of children diagnosed with FASD, while assisting them in avoiding subsequent fetal alcohol exposed births by referral to existing treatment programs. By implementing this reduction, BHSIA expects to impact community members in the medical, social service, education, and justice professions, which will result in a severe reduction in FASD education, awareness and overall visibility in our state as a whole.

REDUCTION OPTION DETAIL

Currently, FASDPN funds are allocated to provide training for professionals interested in learning how to recognize, refer and/or diagnose FASD. These professionals would not have access to the training and oversight that is needed to provide this service.

In addition to the loss of training professionals, this proposal will reduce the hours of the FAS Diagnostic and Prevention Network clinic; FASD affected families in the state of Washington will have less community resources available.

A law change will be required before this program can be eliminated. RCW 70.96A.500 currently requires that the department contract with the University of Washington fetal alcohol syndrome clinic to provide, amongst other things, training for health care staff in community-based fetal alcohol exposure clinics to ensure the accurate diagnosis of individuals with fetal alcohol exposure and the development and implementation of appropriate service referral plans.

STAKEHOLDER IMPACT

Without this training option, community resource providers, including physicians and other medical providers, will not have the ability to learn how to recognize and offer interventions for children with FASD. This reduction will lead to the reduction of the FASDPN clinic hours; therefore, parents, adoptive parents, foster parents, guardians, children, and other family members will not be able to access these services.



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