2017 RHWP Project Director’s Training

Mark your calendars for the annual mandatory Project Director training where we will be talking in depth on Ohio Coding and Billing training and also discussing Reproductive Health and Wellness data collection via Ahlers. 3.5 CEU hours will be offered for Nurses and 2.0 CEU hours for Certified Health Education Specialists for the coding and billing portion. The training will be held on Monday, May 22, 2017 from 8:30am – 4:30pm at the Ohio Department of Public Safety in Columbus.

Register at for the event at http://events.eventzilla.net/e/2017-reproductive-health-and-wellness-project-director-training-2138887147

RHWP Project Director’s Webinar

If you missed our April 25th webinar on How to Talk to Minors about Healthy Relationships it has been archived and is accessible on line. Please go to http://progressive.powerstream.net/008/00153/RHWP_Training_04252017.mp4

RHWP Payment Tracker

By now you should have received the RH18 Deliverable Payment Tracker for your county(s). Please note there is a summary tab, a tab for each deliverable and an instruction tab. We hope that this tool will assist you in correctly identifying and tracking deliverable payments for your Reproductive Health and Wellness Program. Please note that this is a tool to assist you and is not required. This tracker does NOT replace the Attachment #8, Deliverable Reporting Form. If you have not yet received your tracker or have questions about it, please feel free to contact your RHWP Program Consultant.
Akron Children’s Hospital Improving Birth Outcomes: LARC and Birth Spacing 101

Once you are the page, please click on Improving Birth Outcomes: LARC and Birth Spacing 101 (2nd presentation down as of today) and follow the prompts.


CDC announces New Supplemental Issue of the Journal of Adolescent Health

CDC’s Division of Reproductive Health is pleased to announce that findings and lessons learned from the implementation of CDC’s and the HHS Office of Adolescent Health’s (OAH) communitywide teen pregnancy prevention initiatives project (CWI) are appearing in a new supplemental issue of the Journal of Adolescent Health. This supplement provides valuable information for our colleagues working to prevent teen pregnancy in their communities.

Between 2010 and 2015, CDC and the HHS Office of Adolescent Health (OAH) collaborated to demonstrate the effectiveness of innovative, multicomponent, communitywide initiatives in reducing rates of teen pregnancy and births. The CWI focused on communities with the highest rates, with an emphasis on reaching African American and Latino or Hispanic young people aged 15 to 19 years. Despite the progress made in reducing the U.S. teen birth rate, rates remain disproportionately high for some populations and in some geographic areas. Proven prevention programs which take into account unique, local needs, and involve local support, are critical for tackling disparities and reducing teen pregnancy further. It is our sincere hope that this supplement helps inform local efforts to address disparities and reduce teen pregnancy. Learn more about teen pregnancy from CDC’s Division of Reproductive Health.

http://www.jahonline.org/issue/S1054-139X(17)X0003-7

Neonatal Abstinence Syndrome and RHWP Clinics

According to the CDC Grand Rounds on Public Health Strategies to Prevent Neonatal Abstinence Syndrome (NAS) the main strategies identified to prevent the incidence of NAS center on responsible opioid prescribing and access to preconception care and family planning services
CDC indicates that one primary prevention strategy that might reduce the incidence of NAS is ensuring access to family planning and preconception care for women who use opioids. **Among women who abuse opioids, 86% of pregnancies are unintended.** CDC and the Office of Population Affairs of the U.S. Department of Health and Human Services recommend that health care providers support family planning services, which include preconception services, pregnancy intention screening, and contraceptive counseling to prevent unintended pregnancy by increasing access to the full range of contraceptive methods, including long-acting reversible contraception (e.g., intrauterine devices and implants).

To view the CDC Grand Rounds on Public Health Strategies to Prevent Neonatal Abstinence Syndrome go to [https://www.cdc.gov/mmwr/volumes/66/wr/mm6609a2.htm?s_cid=mm6609a2_w](https://www.cdc.gov/mmwr/volumes/66/wr/mm6609a2.htm?s_cid=mm6609a2_w)

**Ohio Collaborative to Prevent Infant Mortality**

The next quarterly meeting of the Ohio Collaborative to Prevent Infant Mortality will be held on JUNE 13, 2017 9AM – 3PM at the Department of Administrative Services, 4200 Surface Road Columbus, OH 43228.

**Tobacco Cessation Resources for Consumers and Providers**

Tobacco use has detrimental effects on all aspects of men’s and women’s health and is one of the leading causes of early death for adults. The use of tobacco can lead to various forms of cancer, lung disease, reproductive health issues, and many other problems. Additionally, maternal smoking is a modifiable risk factor that can directly impact birth outcomes. Tobacco use during pregnancy can lead to restricted fetal growth, preterm birth, birth defects, and Sudden Infant Death Syndrome (SIDS). As such, it is important for healthcare providers and programmatic personnel to identify tobacco use among their clients and offer comprehensive interventions to address cessation efforts.

The Ohio Smoke Free Families (SFF) website, ohiosmokefreefamilies.org, provides several resources for providers and consumers. The SFF website resources include:

- A Provider Toolkit aimed at educating providers on tobacco use and cessation, including a guide for implementing the 5 A’s brief counseling intervention, resources on e-cigarettes, and best practices for pharmacology.
Handouts (Consumer Resources) for clients in all stages of the quit process (Recently Quit, Willing to Quit, Not Ready to Quit)
Publications and presentations on smoking and smoking cessation related topics
Information on Quality Improvement Science and a data collection form that can be used by organizations to guide health care professionals or programmatic staff through the implementation of the 5 A’s counseling intervention

The ohiosmokefreefamilies.org website was created as part of the Ohio Partners for Smoke Free Families Learning Collaborative, a quality improvement project focused on increasing the quit rate through the use of the 5As intervention and educational resources on the benefits of quitting tobacco use. The project is sponsored by the Ohio Department of Health and administered by the Ohio Colleges of Medicine Government Resource Center.

Stemming the Tide of Rising Syphilis

The CDC has recently announced the release of *CDC’s Call to Action: Let’s Work Together to Stem the Tide of Rising Syphilis in the United States.*

CDC’s Division of STD Prevention is calling on public and private sectors, as well as affected communities, to help reduce syphilis through research, prevention, and outreach.

Historically low syphilis rates are in the rearview mirror, and today, we face increasing syphilis rates across almost every demographic. Of utmost concern is the continued high rate among gay, bisexual, and other men who have sex with men, as well as a sudden surge of congenital syphilis rates.

We must act now to disrupt syphilis. And we need for everyone to pitch in with specific action steps encouraged in the Call to Action. For example:

- **Public health departments** need to improve surveillance; partner with healthcare providers and patient advocacy groups; conduct partner services; increase screening; and ensure collaboration between State and local STD, HIV, and maternal and child public health programs
- **Healthcare Providers** need to take complete sexual histories; follow CDC testing recommendations; treat diagnosed patients immediately per CDC guidelines; and work with the health department to report all cases of syphilis by stage, including cases of congenital syphilis
- **Decision-makers and community leaders** need to talk to STD program professionals in their jurisdiction and address any policy barriers to affected populations seeking or obtaining recommended screening and treatment
While getting back to the basics of syphilis prevention will help make a difference, it will not put a full stop to this disease. For these reasons, the Call to Action also outlines action steps needed from affected communities, universities, industry, and even electronic medical records vendors.

Data Warehouse

As part of its continuing commitment to make public health data available as quickly and accessible as possible, the Ohio Department of Health (ODH) has updated its web-based Ohio Public Health Data Warehouse to provide faster access to aggregate, non-identifiable data about deaths in Ohio. As a result, in most cases preliminary mortality data will now be available in a matter of days after a death occurs. In the past, available mortality data was at least a year old. In addition, new Data Warehouse features enable users to look at mortality data in deeper, more meaningful ways. 

Policymakers, public health professionals, healthcare providers, health social services organizations, health researchers and others can use the Ohio Public Health Data Warehouse to explore state- and county-level mortality data to help identify, analyze and compare mortality trends:

- **Charts/graphs:** Plot information about specific types of deaths over time in chart form
- **Reports:** Create tables that illustrate and compare rates and counts of deaths by type

The Ohio Public Health Data Warehouse is available on the ODH website at “odh.ohio.gov.” If you have any questions about it, please contact Brian Fowler, Chief of the ODH Bureau of Informatics and Data Management, by email at Brian.Fowler@odh.ohio.gov or by phone at 614-466-1402.