

Washington State Fetal Alcohol Syndrome Diagnostic and Prevention Network (FASDPN)

Overview

Fetal Alcohol Spectrum Disorders (FASD) are lifelong disabilities caused by consumption of alcohol during pregnancy. FASD is the leading known cause of intellectual disabilities and is 100% preventable. In Washington, an estimated 70,000 people have FASD, and 870 babies with FASD are born each year (one percent of all births).

The Washington State Fetal Alcohol Syndrome Diagnostic and Prevention Network (WA FAS DPN) has included two to seven community based interdisciplinary FASD diagnostic clinics since 1993, linked by the core clinical/research/training program at the University of Washington (UW). The mission of the WA FASDPN is FASD prevention through screening, diagnosis, intervention, research, and training. All aspects of this mission have been accomplished as documented in the literature published by the WA FASDPN over the past 30 years.

The WA FAS DPN:

- Provides 100 percent of the state's interdisciplinary FASD diagnostic and treatment referral services to individuals from birth to under 22 years old with fetal alcohol exposure.
- Provides FAS screening and surveillance for high-risk populations.
- Identifies and refers high-risk women to intervention programs.
- Developed evidence based FASD screening, diagnostic, and intervention tools through its translational research program.
- Provides FASD training to community professionals.

The WA FASDPN is recognized as a national/international model for FASD diagnosis and prevention. It has been replicated worldwide.

Eligibility requirements

- FASD diagnostic evaluations: Individuals under 22 years of age have a confirmed prenatal alcohol exposure history are eligible to receive a FASD diagnostic evaluation at one of the WA FAS DPN clinics. An evaluation is conducted in one four-hour appointment. Information on [how to request an appointment](#) is posted on the [WA FASDPN website](#).
- FASD training: The FASDPN at the UW offers free training for community professionals interested in learning how to recognize, refer, diagnose, treat, and prevent FASD. Information for how to enroll in the [training programs](#) is posted on the [WA FASDPN website](#).

Authority

The CDC-sponsored UW FASDPN clinic was established in 1993 and expanded into the WA FASDPN through Senate Bill 5688 in 1995.

Budget

\$453,598 State funds per fiscal year.

Breakdown:

- \$362,494 for training (per year)
- \$91,104 for evaluation (per year)

Rates

Training and network coordination fees for the UW are reimbursed monthly for staff, facilities and materials costs incurred in the previous month's clinical training days. Evaluation costs through a separate satellite contract are paid \$3,960 per FASD diagnostic evaluation.

Costs and numbers served

The following services are provided for \$453,598 per year:

- 70 FASD diagnostic evaluations conducted per fiscal year.
- 80 -100 FASD screenings conducted per fiscal year for Developmental Disabilities Administration and foster care.

- Up to 400 community professionals trained on site per fiscal year. An additional 300 professionals trained off site per fiscal year.

Partners

The WA FASDPN clinics are hosted by the UW Medical Center. The WA FASDPN is a member of the WA FASD Interagency Work Group. Partners include: University of Washington (UW), Wonderland Child and Family Services, Parent Child Assistance Program (PCAP), WA chapter of the National FASD United organization, Child Health and Education Tracking (CHET), Alliance for Child Welfare Excellence, Children's Home Society of WA, DOC, DOH, OSPI, CDC, NIAAA, American Academy of Pediatrics, and community-based pediatric mental and health care providers throughout the state.

Oversight

Oversight of the UW FASDPN and satellite site is provided by the UW FASDPN who monitors each FASDPN patient record. The UW FASDPN contracts are monitored by the DBHR program manager.

Mention for Upcoming FAS Services

2SHB 1168: Providing prevention services, diagnoses, treatment, and support for prenatal substance exposure.

More information

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