

# Meeting Minutes

## Pregnant and Parenting Women Subcommittee of the Governor's Council on Substance Abuse Prevention and Treatment Tuesday, May 26, 2026, Approved

### Attendees:

**Subcommittee Members Attending:** Tameran Asbury, Courtney Boyd, Janine Breyel, Rhonda Edmunds, Amna Haque, Dr. Stefan Maxwell (chair), Dr. Cody Smith, Amy Tolliver,  
**Subcommittee Members Not Attending:** Rebecca Crowder, Dr. David Didden, Randa Eddy, Kelly Lemon, Lisa Richards  
**Guests Attending:** Teresa Marks  
**Office of Drug Control Policy (ODCP) Staff Attending:** Jessica Smith  
**State Opioid Response Regional (SOR) Coordinators Attending:** Jill Poe, Greg Elizabeth Shahan  
**Marshall University Staff Attending:** Bradley McCoy

### Opening:

Dr. Stefan Maxwell (chair) provided welcome and opening remarks of this meeting of the Governor's Council on Substance Abuse Prevention and Treatment – Pregnant and Parenting Subcommittee. The meeting was called to order on Tuesday, May 26, 2026, and was conducted by Google Meet video conference. The April 27, 2026 meeting minutes were approved by Dr. Stefan Maxwell. There was no further discussion. The purpose of the meeting was to invite Teresa Marks as a guest speaker to discuss the Prenatal Risk Screening Instrument (PRSI).

### Agenda:

#### Guest Speaker – Teresa Marks (Director, Office of Maternal and Child Health)

- The PRSI has existed since 2012 to identify any at-risk health needs including maternal substance use. It is then used by providers to connect women to services such as Drug Free Moms and Babies (DFMB).
- Project WATCH collects this data but has encountered challenges collecting it for statewide use. According to the survey done by the West Virginia Perinatal Partnership in collaboration with this Subcommittee, providers are using the PRSI for internal purposes but often do not report their data to the state.
- The Perinatal Partnership's survey analysis and PowerPoint slides were shared with Teresa Marks prior to this meeting.
- Teresa and the Subcommittee discussed how integration of the PRSI into the Electronic Health Record (EHR) is necessary to move away from paper screening tools. A digital E-PRSI does exist now thanks to Local Data Solutions.
- State Code exists to require providers to use the PRSI. The Subcommittee discussed how to implement this as an unfunded mandate.
- The Subcommittee discussed that elements of the PRSI may not be able to be attained upon the first visit. There may be a future version with an initial intake version of the PRSI for the first meeting and additional future versions at later stages of pregnancy. This may also improve self-

reporting as rapport is developed between patient and provider. Early intervention, however, is important. Dr. Stephen Loyd mentioned using a PeTH test to screen for alcohol use within the last 90-120 days with a single blood spot using HgBA1c as the earliest way to intervene for alcohol use.

- There is a need for provider training on the use of the E-PRSI, existing State Code, and developing a rapport with pregnant women/patients to successfully obtain this information.
- The Subcommittee discussed how to clarify and market to patients that screening tools like the PRSI are not for criminalization.
- Next steps include Teresa Marks planning a meeting with the PRSI Committee to share all that she has learned from this Subcommittee. Starting in July 2026, the Maternal Risk Screening Advisory Council will begin meeting at least quarterly, as opposed to annually, with reinvigorated membership.

### **2026 State Plan Key Performance Indicator (KPI) Review**

- **Goal 1, Strategy 1, KPI 1:** Teresa Marks joined the meeting and is scheduling further collaborative efforts.
- **Goal 1, Strategy 1, KPI 2:** This will require the completion of the previous KPI.
- **Goal 1, Strategy 2, KPI 1:** The West Virginia Perinatal Partnership released their survey about pediatric collaboration to all their Drug Free Moms and Babies (DFMB) sites at their May 6, 2026 meeting. Results are being analyzed now.
- **Goal 1, Strategy 2, KPI 2:** No updates. This will require synthesizing the information from the survey in the previous KPI.
- **Goal 1, Strategy 3, KPI 1:** This KPI was completed in Quarter 1.
- **Goal 1, Strategy 3, KPI 2:** This KPI was completed in Quarter 1.
- **Goal 1, Strategy 3, KPI 3:** No updates.
- **Goal 1, Strategy 3, KPI 4:** No updates.
- **Goal 1, Strategy 3, KPI 5:** No updates, there are multiple conferences and speaking opportunities scheduled for Quarter 3 and Quarter 4.
- **Goal 1, Strategy 4, KPI 1:** No updates.
- **Goal 1, Strategy 4, KPI 2:** No updates.

### **NTI Upstream Educational Campaign**

- There is ongoing dialogue between collaborators to decide the most important facts and potential blog posts.
- Janine Breyel shared examples of social media mockup graphics.
- The West Virginia Perinatal Partnership will make a landing page on their website with all necessary resources and listing all agencies coordinating this campaign.

### **Additional Discussion**

- None.

### **Adjournment:**

Dr. Maxwell closed the meeting by thanking all Subcommittee members for their attendance and participation. The Subcommittee will meet again in June 2026.