

THE 9TH ANNUAL

PERINATAL SUBSTANCE EXPOSURE SUMMIT

Join us live via webinar!

FRIDAY, FEBRUARY 6, 2026



Location Virtual Live Webinar

Date Friday, February 6, 2026

MORNING SESSION

Program 8:00 am–11:30 am

AFTERNOON SESSION

Program 12:00 pm–5:00 pm

**REGISTER
ONLINE**

AUDIENCE

Medical providers, nurses, medical assistants, law enforcement, and behavioral health professionals including substance abuse counselors, social workers, psychologists, peer support specialists, care managers, lactation consultants, DHHS social workers, and other professionals interested in or working with this population.

PROVIDED BY:



MAHEC
PART OF NC AHEC

WITH SUPPORT FROM:



DESCRIPTION

Project CARA, a perinatal substance use disorder clinic at Mountain Area Health Education Center (MAHEC), is excited to invite you to the 9th Annual Perinatal Substance Exposure Summit. This live summit will take place virtually on Friday, February 6, 2026. Participants have the option to register for the full day, the morning session, or afternoon session. This year's group of speakers reflects a commitment to the goals of the summit:

1. Delivering evidence-based practice around Perinatal Substance Use Disorders (PSUDs) treatment
2. Providing education that is pertinent to all parts of the integrated team working with PSUD

The summit elevates innovative programs that address the changing landscapes in supporting pregnant people affected by substance use. Our keynote speakers Kimá Joy Taylor, MD, MPH, FAAP from Doing Right by Birth and Anka Consulting and Brandee Izquierdo, PhD, DPA, MPA from Pew Charitable Trusts will focus on addressing the perinatal systems of care and the healthcare policies that impact people with living or lived experience. Other topics include introductory and advanced courses on PSUDs, data from the Maternal Mortality Review Committee, mobile methadone units, and Hepatitis C treatment in the perinatal period.

Join us to continue learning evidence-based practices on how to care for people with perinatal substance use disorders.

This program was designed to satisfy, in full, the North Carolina Medical Board's CME requirement for controlled substance prescribers. Per NCAC rules: As of July 1, 2017 all physicians (other than residents), physician assistants, nurse practitioners, podiatrists, and dentists who prescribe controlled substances must satisfy the controlled-substance prescribing CE requirements as set forth by their licensing boards; requirements vary by discipline and board.

SUMMIT AGENDA

MORNING SESSION

- 8:00–8:10** Welcome Remarks from Project CARA
Director of Programs and Research
— Olivia Caron, PharmD, BCACP, CPP
- 8:10–9:10** **MORNING KEYNOTE: A Different Vision Part Two**
— Kimá Joy Taylor, MD, MPH, FAAP
- 9:10–9:20** Break
- 9:20–10:20** First Morning Breakout: Please select one
- 1A: The Patient Experience: Navigating Perinatal Systems of Care**
— Caitlin Hettich, MSW, MFA, LCSW, LCAS; and Tammy Cody, MSW, LCSW
- 1B: The Maternal Mortality Crisis We Can Change: Substance Use, Overdose, and the Power of Collective Response**
— Elisabeth Johnson, PhD, FNP-BC, CARN-AP, LCAS
- 10:20–10:30** Break
- 10:30–11:30** Second Morning Breakout: Please select one
- 2A: Pediatric Feeding Disorders and Perinatal Substance Exposure: Infants, Caregivers and Providers Working Along a Continuum of Care**
— Mary Berger, MSC, CCC/SLP; and Carolyn Stephenson, OT/L, CNT
- 2B: Perinatal Hepatitis C: Current Evidence, Screening Strategies, and Treatment Recommendations**
— Olivia Caron, PharmD, BCACP, CPP
- 11:30–12:00** Lunch Break

SPEAKER BIOGRAPHIES

Click here to read more about our summit speakers

AFTERNOON SESSION

- 12:00–12:05** Intro and Housekeeping
- 12:05–1:05** **AFTERNOON KEYNOTE: The Unseen Struggle: A Mother's Path to Healing and Resilience**
— Brandee Izquierdo, PhD, MPA, DPA
- 1:05–1:10** Break
- 1:10–2:10** First Afternoon Breakout: Please select one
- 3A: Promoting Wellness in Peripartum Patients Using Substances**
— Vanessa Loukas, MSN, FNP-C, CARN-AP
- 3B: Breastfeeding and Substance Use Disorder: A Patient-Centered Approach**
— Katherine R. Standish, MD, MS
- 2:10–2:15** Break
- 2:15–3:15** Second Afternoon Breakout: Please select one
- 4A: Implementing Evidenced-Based Services for Child Welfare Involved Families**
— Heather McAllister, MSW, LCSW, LCAS, CBIS
- 4B: Mobile Opioid Treatment Programs**
— Jennifer Jennings, MS, LCMHC, NCC; and Nicole Ross, MA, LCAS, CCS
- 3:15–3:20** Break
- 3:20–4:50** **One Network, Many Doors: Stories and Strategies from the NC PSUD Network Teams**
— Mel Ramage, MSN, FNP-BC, CARN-AP, LCAS; David H. Ryan, MD, FASAM, FACOG; Katie Krist, NP; Jennifer Grayer, NP; and William Johnstone, MD, JD, MBA, FACOG, FACS
- 4:50–5:00** Closing Remarks
— Olivia Caron, PharmD, BCACP, CPP
- 5:00** Adjourn



SESSION DESCRIPTIONS

MORNING KEYNOTE: A Different Vision Part Two

This session will discuss ways to rethink our current system of prenatal care so it supports people who use substances.

Session Objectives:

- Understand the history that created our current systems, which often create poor outcomes surrounding substance use disorder (SUD)
- Identify a vision for moving forward to improve outcomes for all community members
- Identify policy and financing tools to begin moving toward a new holistic health and social service-based vision that creates improved outcomes for all

The Patient Experience: Navigating Perinatal Systems of Care

An experiential learning session to illustrate the systems of care that patients navigate from prenatal care, substance use care, medications, pharmacy, delivery, infant care, and postpartum care. The presenters will exemplify multiple scenarios in which patients may encounter high to low barrier care, resulting in varied patient experiences. This session seeks to highlight disparities and illustrate how each system can contribute to the patient experience and promote better outcomes.

Session Objectives:

- Gain an understanding of potential barriers, treatment modalities, and/or evidence-based practices that a patient may experience when seeking care
- Learn about the systems that must be navigated by the patient population during pregnancy and delivery

The Maternal Mortality Crisis We Can Change: Substance Use, Overdose, and the Power of Collective Response

Maternal mortality is on the rise in North Carolina, and the leading cause isn't hemorrhage or hypertension, but mental health conditions, with overdose as the primary driver. This session explores the data behind these preventable deaths and highlights the impact of stigma, criminalization, and service gaps on pregnant and parenting people. Framed through a harm reduction lens, the presentation offers strategies for providers across the spectrum of providers who care for families. Together, we'll identify opportunities for collaboration, compassion, and systemic change to save lives.

Session Objectives:

- Interpret current North Carolina maternal mortality data with an emphasis on mental health and

substance use as leading causes of death in the perinatal period

- Analyze the intersection of overdose and maternal mortality, understanding how stigma, systemic gaps, and policy barriers contribute to preventable deaths
- Apply harm reduction principles to perinatal care settings, recognizing their role in improving maternal outcomes across medical behavioral health and child welfare systems
- Identify strategies for cross-sector collaboration to address perinatal mental health and substance use, with attention to trauma-informed and culturally responsive care
- Challenge common myths and biases about substance use during pregnancy and postpartum, replacing them with evidence-based, patient-centered approaches to care and safety

Pediatric Feeding Disorders and Perinatal Substance Exposure: Infants, Caregivers, and Providers Working along a Continuum of Care

This session, hosted by a neonatal speech-language pathologist and occupational therapist at Mission Children's Hospital, describes signs and symptoms present in the perinatal substance-exposed population, provides functional strategies to improve feeding in the moment and long term, and identifies guidelines for onsite referrals when needed.

Session Objectives:

- Provide functional feeding strategies in office when perinatal substance exposure symptoms are ongoing past discharge
- Understand when and where to refer for further assessment/support

Perinatal Hepatitis C: Current Evidence, Screening Strategies, and Treatment Recommendations

This presentation will provide a comprehensive overview of perinatal hepatitis C virus (HCV), focusing on the latest primary literature, evidence-based screening recommendations, and current treatment options. Emphasis will be placed on the clinical implications for maternal and neonatal health, the evolving guidelines for universal screening in pregnancy, and considerations for postpartum care.

Session Objectives:

- Summarize key findings on the epidemiology, natural history, and outcomes of perinatal HCV
- Describe current screening guidelines for HCV in pregnancy

SESSION DESCRIPTIONS (CONTINUED)

- Discuss treatment options for HCV in perinatal persons and summarize recent primary literature
- Identify best practices for postpartum follow-up and monitoring

AFTERNOON KEYNOTE: The Unseen Struggle: A Mother's Path to Healing and Resilience

SUD during pregnancy presents complex challenges. During this session, we will delve into the key factors that contribute to the stigma surrounding SUD in pregnancy, which can hinder access to care. This includes the essential need to address co-occurring mental health conditions. Furthermore, we will examine the crucial role of early intervention and the importance of providing accessible, compassionate, and trauma-informed care to promote positive outcomes for both the parent's recovery and the child's well-being.

Session Objectives:

- Describe the complex challenges faced by pregnant individuals struggling with substance use disorder
- Identify key factors that contribute to stigma and barriers to care for pregnant individuals struggling with substance use disorder
- Recognize the significance of addressing co-occurring mental health conditions alongside substance use disorder in pregnant individuals
- Discuss the importance of early intervention and accessible, compassionate care in improving outcomes for both the parent and the baby

Promoting Wellness in Peripartum Patients Using Substances

This didactic session focuses on best practices for decreasing stigma and treating substance use disorder in pregnancy. During this training, topics will include reviewing epidemiology, screening/assessment, evidence-based treatment, including pharmacotherapies and behavioral interventions, and practices to promote wellness in patients with continued use during pregnancy.

Session Objectives:

- Recall at least two principles central to promoting patient-centered care in peripartum patients
- Recognize the prevalence of substance use during pregnancy and the increased risk for mortality without evidence-based interventions
- Identify three evidence-based interventions to treat substance use during pregnancy
- Describe at least two interventions to promote wellness during pregnancy through concrete modifiable behaviors

Breastfeeding and Substance Use Disorder: A Patient-Centered Approach

This session will review the epidemiology and science of breastfeeding among dyads affected by substance use disorder, including the benefits of breastfeeding in dyads with SUD, long-term health outcomes, NOWS outcomes, and SUD recovery potential benefits. The session will discuss barriers and facilitators of breastfeeding in those with SUD and changing rates of breastfeeding among people with SUD. Finally, the session will review the ABM protocol recommendations regarding breastfeeding in settings of recent substance use, substance use treatment, and hospital policy recommendations.

Session Objectives:

- Understand the epidemiology and science of breastfeeding among dyads affected by substance use disorder
- Learn about barriers to breastfeeding support for dyads with SUD and identify areas of innovation and program development implementable in your clinical practice
- Become familiar with the Academy of Breastfeeding Medicine Protocol on Breastfeeding and SUD

Implementing Evidence-Based Services for Child Welfare-Involved Families

This course will provide participants with information about the new services the North Carolina Department of Human Services, Division of Social Services has implemented to support families involved with Child Protective Services. Attendees will learn about which evidence-based interventions are now available and what the outcomes for these services have been. The course will also provide an overview of North Carolina's implementation strategies, which have proved to be effective for Title IV-E Prevention Services Implementation.

Session Objectives:

- Participants will learn about new evidence-based services available to child welfare-involved families
- Participants will learn about successful strategies for service implementation

Mobile Opioid Treatment Programs

This session will provide an overview of mobile opioid treatment programs and how they are being utilized to expand access to care.

Session Objectives:

- Understand what mobile opioid treatment programs (OTP) are

- Be able to identify providers who offer mobile OTPs and the locations they serve

One Network, Many Doors: Stories and Strategies from the NC PSUD Network Teams

Join us for an energizing tour of the North Carolina Perinatal Substance Use Disorder Network (NC PSUD Network). We will introduce the teams, highlight what unites our work, and celebrate real wins that improve care for pregnant and postpartum people. Three spotlights bring the model to life: REACH on elevating NICU nurse practitioner education and opioid risk mitigation, TIDES on partnering residential programs with medical and OTP services, and ECU on creating a regional referral pathway that shortens time to care. We will close with a statewide look at connections and simple ways to strengthen collaboration in your community.

Session Objectives:

- Describe the core structure, roles, and common elements of the NC PSUD Network and explain how these support consistent, integrated care for pregnant and postpartum patients
- Apply lessons from the Network Hub examples to plan improvements in perinatal substance exposure education, collaboration across residential, medical, and OTP services, and development of regional referral pathways in your setting

HAVE A QUESTION?

Program Planner

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CREDIT OFFERINGS

Continuing Medical Education

Accreditation: Mountain Area Health Education Center (MAHEC) is accredited by the North Carolina Medical Society (NCMS) to provide continuing medical education for physicians.

Credit Designation: MAHEC designates this live activity for a maximum of **3 AMA PRA Category 1 Credit(s)™ for AM session, 4.5 for PM session, or 7.5 for the full day.** Physicians should only claim credit commensurate with the extent of their participation in the activity.

Disclosure Statement: MAHEC adheres to the ACCME Standards regarding industry support to continuing medical education. Disclosure of faculty and commercial support relationships, if any, will be made known at the time of the activity.

Nurse Practitioners: This activity is designated for **3 AMA PRA Category 1 Credits™ for AM session, 4.5 for PM session, and 7.5 for the full day.**

Physician Assistants: AAPA accepts certificate of participation for educational activities certified for AMA PRA Category 1 Credits™ from organizations accredited by ACCME or a recognized state medical society. Physician Assistants may receive a maximum of **3 hours for AM session, 4.5 hours for PM session, or 7.5 hours for the full day** of Category 1 credit for completing this program.

3 Nursing Contact Hours for AM session, 4.5 Hours for PM session, or 7.5 Hours for the Full Day

Mountain Area Health Education Center (MAHEC) is approved as a provider of nursing continuing professional development by the North Carolina Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. Participants must attend 80% of the activity to receive credit.

Psychologists: MAHEC is recognized by the North Carolina Psychology Board as an approved Provider of Category A Continuing Education for North Carolina Licensed Psychologists. Approved for **3 hours for AM session, 4.5 hours for PM session, or 7.5 hours for the full day** Category A.

CEUs: MAHEC designates this live continuing education activity as meeting the criteria for **0.3 CEUs for AM session, .45 for PM session, or 0.75 for the full day** as established by the National Task Force on the Continuing Education Unit.

Contact Hours: MAHEC designates this live continuing education activity as meeting the criteria for **3 contact hours for AM session, 4.5 contact hours for PM session, or 7 contact hours for the full day.**