

**ILLINOIS DEPARTMENT OF PUBLIC HEALTH  
PERINATAL ADVISORY COMMITTEE MEETING**

**October 15, 2008  
12:30 p.m. – 3:00 p. m.**

**Michael Bilandic Center  
N-505 Conference Room  
5<sup>th</sup> Floor  
160 North La Salle Street  
Chicago, Illinois**

**MINUTES**

**Chaired:** Howard Strassner, MD

**Attendees:** Richard Besinger, J. Roger Powell, Jose Gonzalez, Harold Bigger, Phyllis Lawlor-Klean, David Fox, Dennis Crouse, Shelia Cochran Sanders, Cathy Gray, Janet Hoffman, Nancy Marshall, John Barton

**IDPH STAFF:** Maureen McBride,

**Absent:** Gail Wilson

**Excused:** Karole Lakota, Clifford Corbett, Nancy Eschbach, Kevin Rose

**Guests:** Barb Haller, Elaine Shafer, Pat Prentice, Carol Rosenbush, Lenny Gibeault, Louise Simonson, Cora Reidl, Cindy McDermith,

**1. Call to Order & Welcome ..... Howard Strassner**

There was a quorum present and the meeting was called to order at 12:52 p.m.

**2. Additions to the Agenda for New Business ..... Howard Strassner**

- A. Discussion with the Director, Dr. Damen Arnold
- B. Tribute to Maureen McBride

**3. Review and Approval of Minutes from Last Meeting.....Maureen McBride**

The minutes of the June 5, 2008 meeting were presented. J. Roger Powell moved approval and Cathy Gray seconded. The minutes were approved.

**4. IDPH Update**

- Five State of Illinois hospitals have closed OB Services in 2008. The hospitals are located in the suburbs and City of Chicago changing a previous trend of downstate closings. Some hospitals are seeking upgrades in designation in the near future.

- The Perinatal Administrator's job is posted on the IDPH website and comes down at 5 pm today. Maureen McBride will be involved in selecting the candidate and will be writing the interview questions. The members acknowledged Ms. McBride's current challenge of running two full time programs.
- Ethics forms are due back in the department by October 31, 2008

## **5. Update on Obstetric Hemorrhage Education Project...Maureen McBride**

Ms. McBride noted that the Director, Dr. Damen Arnold is appropriately pleased and impressed by the Obstetric Hemorrhage Education Project. He was presented with an Instructor's Manual at a recent meeting with Dr. Strassner.

Louise Simonson reported that two Statewide Roll-Outs for Perinatal Centers have been completed, one in Springfield on July 14, 2008 and one at Rush on July 21, 2008. All ten Perinatal Centers had administrators and Perinatal Center Champions in attendance. The Roll-Outs included all aspects of the "Train-the-Trainer" concept; Benchmark Assessment, Didactic Program, Skills Station and Drill. The manual is undergoing changes based on feedback from both sessions. Each Illinois hospital with birthing services will receive two manuals. Special mention was made of the simulation and debriefing DVD produced at Loyola.

Feedback from participants has been very positive. The workgroup continues to update the Program based on responses.

Cathy Gray thanked the workgroup for their efforts and stated that the book was a quality product. Ms. McBride thanked all members of the Obstetric Hemorrhage Education Project Workgroup for their time and effort indicating the manual is a professional product and she was proud to have the IDPH name on it.

## **6. Statewide Quality Improvement Committee .....Harold Bigger**

Data on Maternal Mortality for the years 2002-2005 was presented by Harold Bigger. The data report focused on categories of causes of death and time periods of pregnancy.

An analysis of causes indicated diagnoses of hypertensive and infection were at the bottom of the list. The findings are provisional and unedited. They have not been corrected for differences of opinion of the MMRC from the original MMR.

The WHO definition of Maternal Death, forty two days post partum and pregnancy related deaths, was discussed as a further refinement necessary for comparative analysis. The ACOG/AAP Guidelines for Perinatal Care was noted as a reference. Further analysis should be done to look for trends based on race, geographic areas etc.

David Fox asked Harold Bigger if there were any surprises in the data. He indicated the fact that suicides in Illinois were more prevalent during pregnancies. The highest risk for suicide was thought to be in the immediate post partum period.

Members asked if physicians are choosing to discontinue anti-depressants during pregnancy out of concern for the fetus. John Barton stated a Harvard study that is focusing on continuing medications and treating patients "at risk" prophylactically.

Louise Simonson spoke about the State of Illinois Peripartum Depression Program at the University of Illinois. She told members that the University has physicians who are able to provide lectures on the safe use of antidepressant drugs in pregnancy.

John Barton asked how many cases had autopsies. Many Maternal Death cases do not have autopsies and autopsies vary greatly in the depth of analysis. Cathy Gray talked about “static object” accidents as needing to be investigated as potential suicides. Harold Bigger reinforced the need for early screening and diagnosis for Peripartum Depression as currently supported by Illinois and Federal standards.

A report from the MMRC was given discussing inconsistencies of reviews. Cases coming before the Committee indicated that biases were evident when cases were reviewed in the institution where they occurred without “out of Network” reviews. Further discussion resulted in two motions being presented:

**Motion # 1 - Pregnancy related deaths occurring at a Level III facility will require the review of a Level III hospital outside the Perinatal Network. The motion was made by Harold Bigger and seconded by John Paton.**

The motion was discussed and left specifically vague. Richard Bessinger mentioned that the review might best be accomplished by a subcommittee of the MMRC.

Motion #1 as presented by Harold Bigger and seconded by John Paton was called and unanimously approved by the Committee.

**Motion #2 IDPH is to investigate the request that all pregnancy related deaths occurring at a Level III facility have an initial review at a Level III facility outside the Perinatal Network. The motion was made by Harold Bigger and seconded by Barb Prochnicki.**

Motion #2 was discussed in detail. Cathy Gray stated there was a legal opinion presented by one Perinatal Center that IDPH does not have the correct structure for sharing data between Perinatal Centers.

An independent review done in a Perinatal M+M in another Network will be done under the auspices of IDPH. Members want to be able to go back to the hospitals and state that reviews are appropriate.

The same Perinatal Center wanted to have a joint review with another Center as has been done often in Illinois. Their outside counsel said “Great idea but you don’t have the system in place”.

It was discussed that the two entities (Perinatal Centers) might need a written agreement between them. Dennis Crouse asked whether the Perinatal Code fulfills this “agreement”.

Dennis Crouse asked if the motion should be broader and extend to morbidities. Further discussion was held and it was decided to keep the motion as stated.

Motion #2 as presented by Harold Bigger and seconded by Barb Prochnicki was called and unanimously approved by the Committee.

## **7. Hospital Facilities Designation Committee.....Cathy Gray**

Site Visits proceed at all Level III hospitals. There are more scheduled in 2008. All Level III facilities will have completed two Visits in the past six years.

The Designation Committee addresses hospitals that are closing and hospitals requesting a higher level of designation. Two hospitals with Level II with extended capabilities are requesting to become Level III.

Members asked IDPH for a plotting of hospitals that have closed in the last five years.

Legislation concerning alternative birthing centers was mentioned. There has not been much activity in this area.

## **8. Neonatal Quality Improvement Project.....Dennis Crouse**

Dennis Crouse stated two hospitals currently collecting data on newborn infant re-admissions.

A meeting will be held on November 17, 2008 hosted by Dr. Naguchi to explore State of Illinois collaborative development. Perinatal Centers are asked to have Neonatology, Nursing, and Perinatal and Hospital administration present.

It is hoped that the next Statewide Quality Improvement Project will be an exploration of those newborns discharged and readmitted within two weeks. This is an international problem, in some places the rate is three to five percent. With resources declining there is a possibility for infant less than optimum care. Dr. Crouse is seeking support of the PAC for this project.

A steering committee of Neonatology, Pediatrics, Family Practice and Nursing has created a data tool to obtain incidence and regional data and allow evaluation of different segments of the population.

IDPH must be involved with the project to provide data collection under the Regionalized Perinatal Code.

**MOTION #3– Send a letter to Dr. Damon Arnold to get his approval for this project as a Neonatal Quality Improvement Project. Request that data collection come through the Perinatal Centers. Dennis Crouse made the motion, Pedro Gonzalez seconded the motion.**

Further discussion included concerns about collecting data.

The AAP will be changing the way that Pediatricians are credentialed. Pediatricians must be involved in a Quality Assurance project and be able to produce evidence of such to obtain and continue certification.

Data from Medicare and Medicaid and the gray journal points to increases in number of late preterm births and states that they have higher re-admission rates. The most common diagnosis for re-admission is jaundice followed by dehydration.

Harold Bigger asked if this will be ongoing data collection. The initial data request will be retrospective for three years. Ongoing data collection would involved a monthly

report (a two page re-admission tool sent through the Perinatal Centers) forwarded to the Steering Committee that Pedro Gonzalez and Dennis Crouse chair.

Data will result in understanding of the causes and development of an educational tool. There may be differences in rural and urban issues. The educational tools will target the population being served.

Discussion was held regarding making the project mandatory, assessing the quality of the data and making sure that data forms are complete.

Dennis Crouse clarified the request for information. The data would identify the patient population and gestational age. Plans would include another retrospective to be done in five years to assess affect of the education. Readmission means any infant admitted within 14 days of age, not 14 days after discharge. The Re-Admission Project Committee will review the data and bring results to the PAC.

Much retrospective data is being collected as part of JCAHO regulations. The prospective data form takes a little longer to complete. Dr. Gonzalez supported the need for retrospective data and stated Perinatal Center support is crucial to obtain data going forward.

Richard Bessinger and Nancy Marshall asked for separation of the motion - to have retrospective and prospective data collection requests separated.

**Amended Motion #3: The motion is restated that a letter be sent to the Director of IDPH to request that retrospective data analysis be collected and supported by the department. Further, it is requested that a letter from the Director be sent to hospitals indicating this support.**

Further discussion was held regarding data elements and expected outcomes. It was also stated that transports not be included as re-admissions.

The question was called on the amended motion. Motion #3 carried unanimously.

Howard Strassner recognized and gratefully acknowledged the work Dennis Crouse has done on this project.

## **9. Re-Appointments to the Perinatal Advisory Committee**

Re-Appointment forms have been filled out. They must go through the Governor. Current members may continue to serve. It is hoped that the process will be done in the next couple of months.

## **10. New Business**

### **A. Discussion with the Director – Dr. Howard Strassner**

Dr. Strassner had a meeting with Dr. Damon Arnold, Director of the Illinois Department of Public Health on October 10, 2008. He spoke with Dr. Arnold and was joined by Marilyn Thomas, acting Chief of Staff and Tom Schafer, Director of the Office of Health Promotion.

Dr. Strassner had requested the status of the Proposed Perinatal Rules. The Rules have not moved forward based on actions opposing a key proposed change. The process was not delayed by IDPH. It is hope that they will soon be forwarded back to IDPH and onto JCAHR to allow the approval process to proceed.

Dr. Strassner stated the Director was very committed to ensuring progress on the Rules. Possible revisions to include alternative birthing centers made need to be included.

Dr. Strassner asked about the position of the Perinatal Program Administrator. The job is now posted as reflected above.

Dr. Strassner also presented the Director with an OBHEP manual, explained the Quality Process, and thanked him for his support.

The decrease in Perinatal funding of 15% over the past ten years and the increase in unfunded mandates was discussed. The Director indicated that the appropriation for an additional \$1,000,000 is still in the budget.

Ms. McBride received a call and will find out who sponsored the appropriation. The department will be releasing the \$1,000,000 with the understanding that as it is general revenue money it is subject to 3% reserve. It is hoped that this funding will continue to roll over from year to year. This funding will carry forth the Obstetric Hemorrhage Education Project.

#### **B. Tribute to Maureen McBride**

Howard Strassner made special mention about the successes that Ms. McBride brought to the State of Illinois Perinatal Program citing the excellent development of perinatal standards through Site Visits, participation in revision of the Rules, organizing activities of the PAC, SQC, MMRC and the many other committees and work groups formed under her tenure to advance the public health of mothers and babies in Illinois.

The entire membership acknowledged her efforts, wished her well and refreshments were served.

#### **11. Adjournment.....Howard Strassner**

A motion for adjournment was requested. Richard Bessinger motioned adjournment, Nancy Marshall seconded, motion approved. The meeting adjourned at 2:11PM.