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ILLINOIS DEPARTMENT OF PUBLIC HEALTH

PERINATAL ADVSORY COMMITTEE MEETING

October 8, 2009

12:30 p.m. – 3 p. m.

Michael Bilandic Center N-505 Conference Room 5th Floor 160 North La Salle Street Chicago, Illinois

Howard Strassner, M.D., Chair

MINUTES

Attendees: Howard T. Strassner, J. Roger Powell, Nancy Marshall, Kevin Rose, Barb Prochnicki, Jose L. Gonzalez, , Janet Hoffman, Phyllis Lawlor-Klean, Cathy Gray, Harold Bigger, Nancy Eschbach, Rebecca Holbrock, Richard Besinger, David Fox, Bruce Merrell

Absent: John Barton (excused), Richard Besinger (excused), Dennis Crouse (excused), Karole Lakota (excused), David Schreiner (excused), Kevin Rose, Lisa Dye, Robyn Gabel (excused)

Guests: Barb Haller, Louise Simonson, Carol Rosenbush, Pat Prentice, Lenny Gibeault, Robyn Gude, Cindy McDermith, Cora Reidl, Omar LaBlanc, Cliff Toub

IDPH: Charlene Wells, RN, BS

- 1. Call to Order and WelcomeHoward Strassner Dr. Strassner called the meeting to order and welcomed the members and guests.
- 2. Self Introduction of Members......Howard Strassner Members introduced themselves
- 3. Review and Approval of Minutes from Last Meeting.....Charlene Wells Cathy Gray moved approval of the minutes of the June 11, 2009 meeting. John Powell seconded the motion. The minutes were approved as written.

Committee Reports

Statewide Quality Improvement Committee......Harold Bigger, M.D. Maternal Mortality Review Sub-Committee.....Robin Jones, M.D.

Dr. Bigger reported informational items:

Single Line Associated Blood Line Infections in NICU – The Hospital Report Card Act is monitoring items in all hospitals in Illinois. Most indicators apply to those 17 years of age and older. Since March 2009 Neonatal lines are being monitored. The program is in place although Neonatologists were not aware of it at most Level III's.

CEO's received the letter and assured that the program was implemented through the Infectious Disease Departments.

Maternal Mortality Surveillance in Illinois – Amanda Bennett – CDC Fellow –

Ms Bennett looked at inconsistencies and problems: Illinois may not be ascertaining all deaths. Linking birth certificate and death certificates may Result in a better yield. Thanks to Nancy Martin most maternal deaths are being discovered.

Management of Obstetrical Hemorrhage. Discussion was held regarding how to measure the success of the program, is the educational program working, have we diminished deaths and significant morbidities:

The MMRC has several ideas in mind. A Hospital Assessment Form was completed in 2006. The MMRC wants to have the Director of IDPH send out a follow-up letter and follow-up Hospital Assessment tool to request comparative data

MOTION – The MMRC via SCQ that PAC recommends to the director of IDPH that a letter is circulated from him to all birthing hospitals, recognizing completion of one year of the program and requesting completion of an attached Amended Hospital Assessment Tool.

J. Powell moved approval, Barb Prochnicki seconded. The Motion was called and unanimously approved.

The letter should be directed to the CEO's requesting return of the Hospital Assessment to the Perinatal Centers.

Dr. Strassner asked if the responses from the last survey were kept. The forms went to Health Statistics. Charlene is going to try to locate the computer. Cathy Gray indicated that comparative slides for Blood and Lab times were included in the educational data. Northwestern has a volunteer who may be able to work on the project. David Fox asked if the data is difficult to collect. Members stated that data would be collected for the second time and should be more accurate.

Maternal deaths often do not have complete autopsies. A letter and checklist was developed by Dr. Jerome Loew and Dr. John Gianopolous to address the issue of content of maternal death autopsies.

MOTION: The MMRC via the SQC recommends that the PAC ask that the Director or his designee send the letter and checklist for maternal autopsies to all coroners and medical examiners and hospital pathologists in the State of Illinois.

Motion discussed – autopsies are not required in Maternal death, The Motion made by Dr. Bigger seconded by David Fox. The motion was called and passed unanimously.

Dr. Bigger asked that the Maternal Mortality Review Committee become a standing Committee of the PAC.

MOTION: The SQC requests that the MMRC become a standing Committee of the PAC

H. Bigger moved approval J Powell seconded – The Motion was called and passed unanimously

MOTION: That the current membership of the MMRC is maintained and that a third member of the PAC is appointed.

H. Bigger made the motion, Barb Prochnicki seconded. The Motion was called, approved by all with one abstention. Discussion was held regarding the appointment of a member prior to the December.

MOTION: That Barb Prochnicki is temporarily appointed to the MMRC until new positions are approved and another appointment is made.

The motion was called and unanimously approved. Dr. Strassner asked that the Obstetric Hemorrhage Project continue. Charlene indicated that the OBHEP workgroup has expectations for continuing the process. Charlene indicated that there will be further attempts to retain funding.

Designation Subcommittee Report.....Cathy Gray, RN

Cathy Gray indicated that Adventist Hospital in Bolingbrook that opened one year ago is compliant with CQI. They have moderate to high risk demographics and have MFM services two half days per week. Have done more than 700 deliveries in the first year.

The second hospital is St. Mary's Good Samaritan, Mount Vernon

MOTION: That St. Mary's Good Samaritan be increased from a Level I to a Level II Perinatal Designation.

David Fox mentioned that the hospital had excellent education was a 2008 winner of the Lincoln Cathy Gray indicated that they have added personnel and have an excellent relationship with their Perinatal Center.

Cathy Gray made the motion. David Fox seconded. The motion was called and approved with one abstention.

Hospital Licensing Act section 250 has been brought up to code and is going through the approval process. Site Visit documents are being revised by the Grantee committee.

Grantee Committee Report.....Barb Prochnicki, RN

Barb Prochnicki reported that Ann Schramm has resigned her position as she is expanding her role with Northwestern. A replacement will soon be named.

The Site Visit document is in process of revision.

IDPH Update.....Charlene Wells, RN

Charlene reported that the proposed perinatal rule is moving through the process. It is expected to be reviewed November 19, 2009 by the State Board of Health Rules Committee and, if approved, to the full board on December 10, 2009. After the board takes action, the rule will be sent to the General Assembly's Joint Committee on Administrative Rules. If approved by JCAR for posting, there is a 45-day comment period, followed by another comment period and, finally, action by JCAR.

Barb Haller was requested by Dr. Strassner to obtain the date of the Board of Health Meeting and indicated that a PAC member may want to attend.

IDPH legal department has approved the format and has been very involved in the process.

Charlene requested an IDPH attorney will be working with elements of the Obstetric Hemorrhage Education Project and Rikia Alican will be assisting in this effort.

Charlene indicated that the 2010 Meeting list has been e-mailed to all.

Dr. Strassner requested that a list of members and the terms for each will be circulated at the next meeting.

5.New Business......Howard Strassner, MD

PQCI – H. Bigger indicated the Perinatal Quality Collaborative of Illinois – currently it is comprised of neonatologists and Perinatal Center Administrators. Data from PQCI indicators is being collected and is being collated and distributed. The Collaborative is working with the Vermont Oxford Project. The organization is forming by-laws and officers. PQCI is currently being spearheaded by Dr. Patricia Ittman from Rockford and Dr. Noguchi from Cardinal Glennon Hospital.

Barb Prochnicki mentioned that Rockford was instrumental in developing a Maternal Database for Vermont Oxford. VON is not currently using the Maternal Component but it has been tested and published and is available.

Cathy Gray indicated that many states have such collaboratives. VON and other states have been consulted regarding the activities on the PQCI.

Dr. Strassner asked what the results of the temperature monitor be used for. Barb indicated that the objective is to create best practices and make recommendations for changes in standards of care.

Dr. Strassner asked that future meetings contain a PQCI item to keep the PAC current on their progress.

By-Laws – Dr. Bigger indicated that the By-Laws need major revisions, no mention of standing committees, no mention of the Hospital Designation Subcommittees.

MOTION: That Dr. Strassner appoint a small committee to review and revise the by-laws.

The motion was called and approved unanimously.

Dr. Strassner indicated that the By-Laws could be revised, discussed and presented at the December 10, 2009.

Dr. Bigger referenced Robert's Rules and the five possible scenarios for the by-laws

Currently a majority vote can change By-Laws. Duties cannot change as the PAC is established by the Perinatal Program through the Rule.

Dr. Bigger suggested that the members review Robert's Rule and make comments regarding how By-Laws

Dr. Bigger was appointed by Dr. Strassner to head a task force to revise the by laws. Barb Prochnicki and Dr. Strassner will assist.

Proposed by-laws will be passed out at the December meeting. After discussion the PAC will approve the revised by-laws.

Dr. Strassner indicated that all comment must be submitted through Charlene.

Commendation for Dr. Paton: Dr. Bigger requested that a letter of recognition be written to Dr. Paton. The members

MOTION: That a letter of recognition and memento be prepared to honor Dr. Paton

Motion made by J. Gonzalez, seconded by Janet Hoffman, Unanimously approved.

6. Adjournment......Howard Strassner, MD

Motion to adjourn at 1:52 pm by Barb Prochnicki and seconded by Dr. Powell. Approved.