Attendees: J. Roger Powell, Nancy Marshall, Barb Prochnicki, Dennis Crouse, Bree Andrews, Janet Albers, Bruce Merrell, David Schreiner, Phyllis Lawlor-Klean, Cathy Gray, Janet Hoffman, Omar LaBlanc, Leonard Gibeault, William Grobman, David Fox,

Absent: Howard T. Strassner (excused), Kevin Rose (excused), Jose L. Gonzalez (excused), Richard Besinger (excused), Edward Hirsch (excused), Harold Bigger (excused)

Guests: Barb Haller, Carol Rosenbush, Elaine Shafer, Pat Prentice, Robyn Gude, Cindy McDermith, Myra Sabini, Cheryl Sadowski

IDPH: Charlene Wells, RN, BSN, Tom Schafer

1. Call to Order & Welcome

J Roger Powell, Vice –Chairman, welcomed members and guests. He recognized Tom Schafer, IDPH Director of the Office of Health Promotion.

2. Self Introduction of Members

Dr. Powell and members and guests introduced themselves. The structure of the meeting was presented.
3. Review and Approval of Minutes from Last Meeting

The minutes of the June 10, 2010 meeting were reviewed. Cathy Gray moved approval of the minutes, Barb Prochnicki seconded the motion. The minutes were approved as written.

4. Old Business

There was no Old Business.

Statewide Quality Council

Barb Prochnicki was thanked for chairing the Statewide Quality Council in the absence of Harold Biggger.

- Elaine Shafer presented the Peoria Perinatal Center Network Report on the work of the Late Preterm Infant Project, “Not Yet Ready for Prime Time”. The project reflected the scope of the ACOG objectives and standards of AAP and was very well organized. The project was able to locate areas where late preterm delivery was common, included case reviews and established dialogue between neonatal and obstetric providers. Vermont Oxford Nightingale data was applied and other State Collaborative was researched. A Gatekeeper concept has been instituted. Further data will be presented as the project continues. Ms. Shafer was congratulated on the Project.

- Ann Borders, MD is a new member of the Statewide Quality Council.

- The Network Administrators met a month ago and created a potential list of categories to be represented on the task force specified by HJR 111 to meet the requirements of SB 3272. The suggestions include the following disciplines:
  
  MFM
  Neonatologist
  IDPH
  IDHS – APORS
  Legislators (Altoff – Burns)
  2 Nurses – POEI (AHWON or NANN)
  Social Worker
  Family Practitioner state board of health
  Midwife
  3 consumers –parent, MOD/IMCHC
  OB
  DHS – Maternal Child Health Advisory Board
  Epidemiologist
  CDPH
  FQHC – added by Dr. Borders

A March of Dimes letter to Dr. Strassner dated August 2, 2010 requesting that the March of Dimes be one of the key players was shared with the members. All members received copies of SB 3272 and HJR 111.

Tom Shafer explained that the task force will be appointed by IDPH. A report is due to the General Assembly regarding all aspect of prematurity specified by November 2012.
Tom Shafer will update the PAC on the progress of appointment. The letter from the March of Dimes was read. The Perinatal Advisory Committee recognizes the exemplary work done through the March of Dimes regarding the issue of prematurity and thanks the MOD for their comments.

HJR 111 sets the minimum requirement for the Task Force. This item will be re-discussed at the December meeting.

Charlene Wells requested discussion regarding the possibility of all Perinatal Centers participating through VON by submitting data on the < 39 week elective deliveries to allow data to be presented at the beginning of the task force. Dennis Crouse described the need for data of the late preterm and re-admission rates.

Maternal Mortality Review Committee………………………………….Barb Prochnicki, RN

- The MMMRC discussed the non-compliance of one hospital with the Obstetric Hemorrhage education project. One hospital out of 144 – did not complete the project. The Sub-Committee agreed to make a recommendation for censure. Efforts to remedy the lack of participation included a call from Charlene Wells to the Level II Nursing Administrator. She would not take her call. The Perinatal Center has issued a written warning. The members discussed the next step should be (1) a letter to the CEO upon approval of the PAC (2) review all morbidity cases, (3) The next Site Visit will document Non-Compliance with a mandatory IDPH Program.
  The members further requested that the Chair of Obstetrics needs to respond within two weeks of the receipt of this letter or the Perinatal designation need to be dropped.

MOTION#1: Send a letter to the CEO of the Level II hospital that continues to be non-compliant with the required Obstetric Hemorrhage Education Project summarizing the efforts of the Perinatal Center and the Illinois Department of Public Health that have made to date and stating that:

1. The MMRC will review all morbidities and deaths from this facility for one year
2. If all who have not completed the Obstetric Hemorrhage Education Program are not done in four weeks, Chicago Department of Public Heath will be notified by the Illinois Department of Public Health.

Janet Abers moved approval of the motion, Cathy Gray seconded, motion carried unanimously.

Grantee Committee Report………………………………………….........Lenny Gibeault

5. IDPH Update……………………………………………………………Tom Shafer

The Proposed Perinatal Rule is very close to going to the second comment period. The agency is unwavering on its support on the provision for 24 hour in-house neonatology. Perinatal Level III designation is a voluntary program. If a hospital wants to have the designation of Level III Perinatal Care this proposed provision must be maintained.

Mr. Schafer voiced his appreciation for the work of the Perinatal Advisory Committee on the Rule and thanked Dr. Strassner for the additional review in June. Mr. Schafer indicated that Dr. Strassner
sent a letter of support for the proposed Rule to IDPH. He hoped Dr. Strassner could be at JCAR when the Rule is presented.

Mr. Shafer also gave an update on the funding for the Perinatal Centers. Senate Bill 51 requires a new grant review process. Nine out of ten Perinatal Center budgets have been received. Review will begin when all are received and will probably take at least one month. Two thirds of money comes from the Federal Government and funds should be available. One third of the funds is from General Revenue and will run at least six months behind.

5. New Business.................................................................................. J Roger Powell, MD

**March of Dimes** – Illinois was chosen as one of the Big Five states to address the issue of prematurity, the others are California, Texas, Florida, and New York. A prematurity Tool Kit is now available on the March of Dimes website. Five hospitals were chosen. As of October data collection commenced. In January the 5 hospitals will implement the tool kit and collect data for a year.

Cathy Gray announced that on October 26, 2010 a workshop for the five chosen hospital and will be open to the public from 8:00 – 9:30 am at the University of Illinois.

The project will include data sheets, bibliography, information for parents etc. and can be used at any level hospital, The March of Dimes is currently involved in a campaign to support this initiative. Dr. Brian Ascura will present.

The Illinois hospitals selected include
University of Illinois
Decatur
Katherine Shaw Bethea
Edward
St. Elizabeth/St. Joes - Breese

**PQCI** – Dr. Crouse stated there is now a collaborative between the ten Perinatal Centers. The hypothermia project was implemented and results collected. A new project will focus on the reduction of infections. Each center is putting in a list of contact personnel, hopefully with a start date early in the next year.

A prematurity prevention Tool kit was discussed on October 14, with a conference call to update. PQCI is taking the project and getting it approved for certification. An Advisory Board has been put in place. Discussion was held as to how to involve the other Level III facilities to expand data collection, support.

PQCI is also discussing involving Obstetric involvement.

**By-Laws** – At the December meeting the by-laws will be passed out again and voted on. Cathy Gray, Pat Prentice, Dr. Strassner, Dr. Bigger will conference to prepare this process to move forward.

**Designation Subcommittee Report**................................................. Cathy Gray, RN
There was a request for a non-Illinois hospital to be part of the Perinatal Center. The hospital was told to move forward with an associated agreement that would develop a formal relationship with the Perinatal Center. There will be further discussion regarding this request after additional involvement with the affected Perinatal Center.

Dr. Powell thanked Tom Schafer for his presence at this meeting. More will be forthcoming regarding this request.

Cathy Gray moved that the Perinatal Advisory Committee retire to closed session and that guests be excused.

The Perinatal Advisory Commission entered CLOSED SESSION at 1:50 pm. The Session Re-Opened at 2:14 pm.

OPEN

Cathy Gray for a motion to act on the recommendation of the Facilities Designation Subcommittee

MOTION #2 To delay designation of Level III status of Northwest Community Hospital at this time.

Bree Andrews made the motion David Schreiner seconded the motion, The motion was approved unanimously.

6. Adjournment........................................................................................................J Roger Powell, MD

Barb Prochnicki moved adjournment and Dennis Crouse seconded the motion.

The meeting adjourned at 2:18 pm.