



Pat Quinn, Governor

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**ILLINOIS DEPARTMENT OF PUBLIC HEALTH
MATERNAL MORTALITY REVIEW COMMITTEE**

December 12, 2012

10:30 a.m. – 1:00 p. m.

James R. Thompson Center

100 West Randolph

Chicago, IL

9th Floor - Room 034

Robin L. Jones, MD, Chairperson

Minutes

Chair: Robin L Jones

Attendees: Pat Schneider, Cynthia Wong, Pat Prentice, Shirley Scott, Paula Melone, Kevin Madsen, J. Roger Powell, Pat Schneider, Stacie Geller, Trish O'Malley, Judith Hibbard, Harold Bigger, Barb Prochnicki, Jerome Loew, Deborah Boyle, Michael Leonardi, Robert Gessner

Absent: None

IDPH Staff: Charlene Wells

1. Review and Approval of Minutes- October 10, 2012

The minutes of the October 12, 2012 meeting were reviewed. J Roger Powell motioned approval and Michael Leonardi seconded. The minutes were approved with the correct spelling of Michelle Kominaiarek's name.

2. Obesity Workgroup Update

Deborah Boyle, MD

Deborah Boyle has reviewed data from 2007 forward with weight and height indicators. She stated that the causes of death were non consistent from case to case.

There is not clear evidence that BMI's 30-35-40 would it be associated with maternal death.

Kevin Madsen suggested looking at the cases as direct or indirect. There are a number of indicators that present difficulty in analyzing the data. Stacie Geller suggested that the committee should continuously look at BMI's to see at what point it there are significant factors that may make a difference.

The Committee discussed the number needed for the obesity group and based on the number when open discussion can occur under the Open Meetings Act. The MMRC needs to expand the group or can work with others and not have an actual group but an Obesity Research Discussion.

Michael Leonardi said research will differ based on cause of death. Variables need to be selected to allow a sort by cause of death. Jerome Loew suggested differentiating the physiological cause from cause of death.

Paula Melone asked about the level of care where obese patients died and whether they had been transferred from a lower level of care.

Harold Bigger asked if we could send a data request form to Harold Duckler so that data can be used.

Deborah Boyle said you can't really find evidence that prenatal care makes any difference. It may be difficult to make the case that initial prenatal care and number of visits on death patients may make a difference.

Paula Melone asked about the possibility of applying for March of Dimes Grant.

The MMRC approved the request to ask Harold Duckler for data.

3. Research and Publications

**Stacie Geller, PhD
Cynthia Wong, MD
Shirley Scott, RN, MS**

Dr. Wong is preparing a paper on pre and post testing results.

Shirley Scott discussed the publication of the second article and will give an update next meeting

The Committee discussed the need for data entry of all case assessments as well as all MMR's.

Stacie Geller made a motion that Pat Prentice spend a week in Springfield with Nancy Martin to get the data entered. Kevin Madsen seconded. The motion passed with 1 nay 17 ayes.

Further discussion was held about the ability to publish papers on the IDPH website to make them available to the public or allow the IDPH website to have a search for the PDF link to the journal so it can be accessed for free

The need to show the outcomes of hospitals prior to and after the analysis is important. The data is complex. One possibility is to write up what we have about hospitals baseline and secondary assessment results and describe the change over time.

Cynthia Wong stated that medical students need to do an academic project and we may be able to enlist assistance for data analysis in that way.

Judith Hibbard stated that we need to be sure that a bureaucracy was not created without outcome and that mortality from hemorrhage is actually decreasing. She discussed asking a fellow about the project. Jerome Loew stated that years of data will be needed to prove incidence reduction.

Shirley Scott reminded all that the 2 year Post OPHEP competency is due to the Perinatal Centers by January 15, 2013. All hospitals need to assure that original participants in the OBHEP program answer the 10 questions of the approved competency by the end of the year.

4. CDC/AMCHP Maternal Mortality Review Initiative Robin L Jones, MD
Robin Jones reported that the CDC has a national initiative to standardize the review of maternal deaths. LaMar Hasbrouch, M.D., Robin L Jones, M.D., Mark Flow, Pat Prentice and Glendean Sisk attended a meeting in Atlanta in November to discuss the process in Illinois and to learn from other states with active review processes. Many states do not review individual charts. There is a great variety in the level of case selection and the depth of review.

Members of the CDC received a packet of information from the MMRC that included the 24 hour form, MMR, and case assessment form, data dictionary, an outline of the implementation of the MMRC and activities.

The CDC also requested and received a copy of the Obstetric Hemorrhage Education Project book and CD's

The CDC is driving toward outcomes and will have a national standard developed by March 2013.

5. MMRC Case Reviews and Recommendations

A motion was made to close the meeting at 11:52am by Harold Bigger and seconded by Deborah Boyle. The meeting was closed.

A motion was made to re-open the meeting at 1:05pm by Roger Powell and Robert Gessner. The meeting was re-opened.

Charlene Wells reminded members to go on-line and complete the Open Meetings Act Training

A motion to adjourn was made by Cynthia Wong and seconded by Pat Schneider. The meeting adjourned at 1:09 pm