CALL TO ORDER & WELCOME………………………………………………...Bree Andrews, MD

Bree Andrews announced that she was chairing the meeting in Dr. Crouse’s absence.

SELF-INTRODUCTION OF MEMBERS………………………………….. Bree Andrews, MD

Members and guests introduced themselves. Harold Bigger was honored with an award for his service as the founding and only chair of the Statewide Quality Council. Members voiced their appreciation for his dedication to this responsibility for 18 years.

REVIEW AND APPROVAL OF MINUTES OF JUNE 12, 2014…………… Bree Andrews, MD

The minutes of the June 12, 2014 meeting were reviewed. Glendean Burton and Janine Lewis were not listed as attendees. Jose Gonzalez motioned approval and J. Roger Powell seconded the motion. The minutes were approved with additions of the two members.
4. Old Business.......................................................... Bree Andrews, MD
Use of narcotics discussion deferred due to Dr. Crouse’s absence.

5. IDPH Update........................................ Brenda Jones, DHSc, RN, MSN, WHNP-BC
Brenda Jones will have a report in December. IDPH has a new logo, website is being changed. The new logo will be distributed for use in all official communication.

6. Committee Reports
   Statewide Quality Improvement Committee..................Harold Bigger, RN, BS
   • Levels of Care Task Force will be making recommendations regarding the best method to assess neonatal outcomes based on Levels of Care. The Task Force will have one more meeting in November. The report will be sent to the SQC members prior to the December meeting. It will be sent to the PAC members once reviewed by the SQC. The PAC will receive the document in December but will not take action at that time. The options for the PAC are:
     Adopt as is
     Re-write
     Reject
   • IDPQC Patti Lee-King, Amanda Bennett, worked on a CDC Grant that will be administered by IDPH for #200,000/yr. for three years, This reflects a huge IDPH in collaboration with ILPQC.
     The Second IDPQC Annual Meeting will be held in Naperville, November 10, 2014.
     There will be nationally known speakers on Obstetric and Neonatal topics.
   • Deb Rosenberg presented a data use report and indicated that IDPH will have integration of data soon
   • Cindy Mitchell presented a report from the Birth Certificate Task Force. The task force is developing an audit for each hospital to do 10 as a baseline audits with select variables and then will follow-up with

Maternal Mortality Review Sub –Committee.................Robin Jones, MD
   • There was a stimulating meeting, many new issues were addressed and case review being the first issue on the agenda provides well for our core mission.
   • Process for case review, currently there are 70-80 maternal deaths per year but the MMRC is only able to review 16. The MMRC needs to provide standards for first reviews that require an in-depth analysis of every case. The MMRC will be applying nation standards for initial reviews and will be include education for Perinatal Centers and Hospitals to accomplish. Brenda Jones wants to link the MMRC process with the HIV review committee to assure similar standards
   • Illinois is being recognized as being at the forefront in terms of reviewing mortality. National organizations are looking at Illinois to lead the way for other states that need to develop Maternal Mortality Review Committees. On a national level we should have a standardized review form and a standardized process for hospitals and Perinatal Centers. Illinois will serve as a model and pilot.
   • Every Mother Initiative – Robin L Jones, Stacie Geller, Abby Koch, Deborah Rosenberg, and Nancy Martin have agreed to be a team to review how to address non-clinical reasons for maternal death including , substance abuse, domestic violence, suicide, homicide and accidents. There will be a meeting in Oklahoma in mid-November. The MMRC will be required to expand the scope of reviews and add additional disciples as reviewers.
   • Robyn, Gude, Chair of the Grantee Committee came to the MMRC to ask if the previous 10 question competency needs to be the only item that can meet the OBHEP project requirement for and every two year competency. The MMRC
responded that hospitals can set the requirements for the competency around the OBHEP project. The OBHEP project does need updating and a task force will be formed to look at current requirements for the training and management of obstetric hemorrhage.

Subcommittee on Facilities Designation Report……………..Cindy Mitchell, RN, BSN, MSHL

- The Subcommittee met this morning and discussed the Site Visit process. We will reconvene task force revisit process
- Appendices will need to be adjusted to reflect the Site Visit data.
- Site Visit will continue to be mandated. Harold. Bigger stated that all hospitals do not always have extensive resources for visits. The process has been successful and can be simplified.
- A work plan review was held and Mercy Hospital will stay a Level II E for the next Site Visit
- St. Mary’s Stretor, Centegra Woodstock, and Jersey Hospitals have closed obstetric departments.
- Non- Birthing EMS and patient education all EMS -assuming time allows should – bypass non-birthing hospitals and go to a hospital with OB services. Susan Holi responded on how this demonstrated best practices but that in rural area there would have to be education etc. Massachusetts covers three states, Vermont, New Hampshire. There is a process that includes a list of providers in the areas and notification procedures.
- Procedures for when hospitals near capacity in OB and NICU were discussed. Licensure Level 2 E’s were discussed to ask if additional intermediate beds can be added. Adequate square footage, supplies and staff needs to be available and Karen Stringer would have to be notified.

Grantee Committee Report……………………….. Lenny Gibeault, MSW/Robyn Gude, RN MS

- Patti Lee-King is visiting all the Network Meetings giving the benefits of the Illinois Perinatal Quality Collaborative.
- IDPH staff will be hired to replace Charlene Wells and enhance the program
- The goals of grant application will focus on the 5 Perinatal Core measures. IDPH will schedule additional meetings as to how to approach especially for hospitals < 1100 deliveries
- Site Visits were discussed, results in Sub -Committee on Facilities Designation report
- Models of Nursing Leadership were discussed. Some hospitals have Directors who have no OB experience. This does not conform to the Rule
- OB Hemorrhage Competency – given in MMRC report
- Inconsistency in completing the Perinatal Review form needs to be addressed to allow for valid data to be obtained. A workgroup will be formed to obtain standardized definitions and will include an epidemiologist

7. New Business………………………………………………………. Bree Andrews, MD

- Open Meeting Act officer needs to be appointed as Harold Bigger is resigning
- A FOIA officer needs to be appointed as Harold Bigger is resigning
- There will be open positions on the PAC next meeting

8. Adjournment ……………………………………………….. Bree Andrews, MD

Motion to adjourn was made by Madiha Qureshi, seconded by Cindy Mitchell. Meeting adjourned at 2:15 pm.

Next Meeting:
December 10, 2014 James R. Thompson Center, Chicago, Illinois 100 W. Randolph Street, 9th FL Rm 031