

Meeting Minutes of:

Task Force on Infant and Maternal Mortality Among African Americans

Tuesday, February 14, 2022 | 2:00 PM - 4:00 PM | Location: WebEx

Attendees

Members in Attendance	Guests and IDPH	Non-Voting Members
1. Angela Ellison (Chair) 2. Tamela Milan-Alexander (Co-Chair) 3. Catherine Harth 4. Daniel Johnson 5. Dara M. Gray-Basley 6. Glendean Burton 7. Gloria Elam 8. Lisa Green 9. Lisa Masinter 10. Paula Brodie 11. Santina Wheat 12. Shirley Fleming	1. Alexander Smith 2. Amanda Bennett 3. Ashley Horne 4. Cara Bergo 5. Jelena Debelnogich 6. Trishna Harris	1. Alexis Gilgrist 2. Angelique Muhammad 3. Bridget Patrick 4. Cynthia Williams 5. Jackie Ealey 6. Janelle Flores 7. Jessica Lamberson 8. Karie Stewart 9. Mekazin Alexander 10. Nancy Tartt 11. Patricia Lee King 12. Sabrina Nelson
<u>Not Present</u> 13. Cheryl Floyd 14. Dawn Wells 15. Jasmine Martin 16. Jeanine Logan 17. Marie Versher 18. Stephanie James 19. Virginia Julion		

MOTIONS

- Review and Approval of Minutes from November 2022, Meeting**
 1st Lisa Green, 2nd Gloria Elam, the Task Force unanimously approved.
- Review and Approval of Minutes from the January 2023 Meeting**
 1st Gloria Elam, 2nd Dara Gray-Basley, the Task Force unanimously approved.
- Motion to adjourn the meeting**
 1st Shirley Fleming, 2nd Paula Brodie, Unanimous Approval.

AGENDA ITEMS

- 1. Call to Order & Roll Call:** Angela Ellison, Chair called the meeting to order at 2:04 pm. Angela introduced herself and asked Alexander Smith to conduct the roll call of the committee members.
- 2. Review and Approval of Minutes from the November 2022 and January 2023 Meeting:** The meeting minutes from the November 2022 and January 2023 meetings were reviewed. Lisa Green motioned to approve the minutes from November, Gloria Elam seconded it, and the Task Force unanimously approved. Gloria Elam motioned to approve the minutes from January, Dara Gray-Basley seconded it, and the Task Force unanimously approved.
- 3. IDPH Update:**
 - Lisa Masinter introduced herself as the Office of Women's Health and Family Services (OWHFS) Deputy Director and gave a bit of her background on as an OBGYN, experience in Public Health, and past roles including the Medical Director of Maternal and Child Health at Chicago Department of Public Health and at Alliance working on health equity and supporting national FQHC's
 - Kenya McRae, the previous Title V director, is no longer with IDPH. The IDPH team is close to being able to post for the Title V director and MCH division chief. Lisa is filling in for the role until a person is determined. She will also remain as part of IMMT unless she
 - Leandra Diaz is the OWHFS' new administrative assistant. She will be helping organize the meetings and work on all of the back-end materials for the meetings.
 - Trying to finalize and update a new Hospital Perinatal and Maternal Levels of Care Code 640. The process is getting closer to voting through another advisory board to IDPH called the Perinatal Advisory Committee and then will begin the JCAR rules process.
 - Two new voting members are still pending with the director, hopefully will be able to announce those two at the next meeting.
 - Cara Bergo gave an update on the Maternal Mortality Review Committee (MMRC). One more meeting left on 2020 cases and the MMRC report will be done hopefully by summer and include case review of deaths from years 2018-2020.
- 4. Final Presentation of Recommendations for the IMMT Yearly Report**
 - Tamela covered the different recommendations made by the committee to be included with their yearly report.
 - Quality Improvement Discussion
 - Discussed the various recommendations made on QI including data collection/sharing and coordination.
 - Impact and Efficiency
 - General Assembly Recommendations:
 - Want to submit a report every 2 years instead of every year to allow the task force and sub-committees more time to collect and review data and input. Also allows for more synergy between sub-committees and collaborators and to generate thoughtful, impactful, and actionable recommendations that can be implemented statewide.

- Recommendation on pro-active assistance to state residents impacted by the sunset of the PH Emergency Act 2023.
- Support and Resources
 - The recommendations for this area were around enhancing IDPH's capacity to support activities of the task force including dedicated staff as well as funding to coordinate efforts in the State and support for sub-committee work.
- Questions/Recommendations
 - Estimated time for report? Answer: Being Submitted this week (Of February 2/14/2023)
 - The committee discussed how can it better show and prove to legislature about the impact of the recommendations. Discussed wanting to include ways to include language to legislatures to quantify some of these recommendations.
 - Lisa Masinter to ask IDPH's Legislative Affairs their thoughts on these.
 - Committee suggested to highlight the recommendation around the Public Health Emergency, due to it being lapsing coverage for impacted communities.

5. Recommendations for the Task Force Upcoming Projects/Aims for the Next Year

- Discussion on where the committee thinks they can have the most impact. The committee discussed the below topics are priorities for reducing African American infant/maternal mortality in the State.
 - Access to Behavioral Health Support, wait times are getting longer. Depression and anxiety which then leads to substance abuse.
 - Also discussed that patients and staff could be impacted by violence and trauma, getting appropriate mental health resources and training
 - Poverty, Housing
 - Early Intervention (EI) services, inability for young children to access EI. There are not enough services available or get it to them. There are many barriers to access.
 - Community and Personal Violence, particularly gun violence. Not necessarily isolated to urban areas.
 - Health Literacy (Both Community and Provider) – families being able to advocate to themselves. What they would know to expect.
 - Reaching those in need of follow-up services and making sure that the patients know what they will need for follow-up.
 - Invest a lot of time into care for newborns in NICU's – they move out into the community side and then are not followed-up with. The NICU is where it starts and far from where it ends.
 - Lack of education as an intervention for clients about the issues that cause Infant and Maternal Mortality.
 - Discussed that providers need to meet patients where they are at, in terms of health literacy. How do providers breakdown language to meet the patients where they are and well understand. Using the right language and jargon that communities understand.
 - Health System Accountability – who is measuring the quality of care they give. Make hospital accountable, having them have a report card on their birth outcomes. Implicit Bias trainings.
 - Accessible Well-Woman care for reproductive age childbearing persons.

- Doula and Birthing Assistants being acknowledged in hospital systems. Involvement is important throughout pregnancy and post-partum.
- Coordination Across Sectors and Technology
 - Hand-Offs not well done, some toolkits need to be simplified and easier to be understood talking between providers.
- Trust Issues with Patients (Discussed this maybe falling under Health Systems) – Getting people that can stand up for the patient for all encompassing services.
 - Building diverse workforce around doula and midwives.
 - Getting providers and staff trained on MCH programs
 - Respect for patients
- The committee was then polled on which should be targeted and priority setting for the upcoming year from the categories identified. The options being polled on were: Behavioral Health Support (trauma-informed and healing centered), Substance Use Support, Housing, Health Literacy (provider, community, patient), Health Systems Accountability, Access to Well Woman care of childbearing persons, EI Services, Comm and Interpersonal Violence, Workforce: interdisciplinary and diverse health care team, Resources to community management for case management/ support services, Coordination/Communication across sectors/technologies, Quality of care with trust as a measure.
- The rank order of priority from the poll was: 1st Health Literacy, 2nd Behavioral Health Support, 3rd for Health Systems Accountability and Quality of Care

6. Sub-Committee Reports

● Community Engagement

- Still reaching out to get lived experiences and locate groups who can assist with finding people in middle income.
- Still needing help with reviewing the transcripts to come up with themes and narrow down what they are hearing from the listening sessions
- Looking at membership for their sub-committee.
- Do not have a date for their next meeting at the moment. Challenging to set times for the committee.

● Systems

- Met to establish a set of meetings for the year.
- Maternal side – looking at what they plan to do. The meeting today of the large group should help their direction.
- The committee has noticed that infants eligible for high-risk follow-up aren't necessarily using it. The committee has brought in outside providers to help identify gaps to provide care to infants and families, and why people aren't using that follow-up service provided.
- Committee is looking at doula services in Illinois including certifications and training, payment structure, scope of services. Researching what California is currently doing as they are steps ahead in the process.
- What information to look into for infants and toddlers, in the pediatric deserts what needs aren't being met, what gaps are identified and need to be addressed. EI services for developmental.
- Next Meeting is on March 7th.

- **Best Practices**

- Have not yet met since last meetings
- Meeting on February 28th at 3pm
- Plan to continue work of last year. Have staff come in and discuss the programs and weigh them against a sheet created. Take away anything not working or working and recommendations of ways to improve or help them move forward.
- With Kenya gone, need to do a review of their process.

Events Sharing

- Lisa will send out a document to committee from UIC Partners Council for Community Health Meeting – Meeting this Thursday Feb 16 at 10am. Inviting the committee to the full series.
- February 27th Christian Love and Action project, sponsoring a virtual screening of 'Toxic' 4pm
- Meeting Friday February 17th for the Maternal Health Stakeholder Briefing.
- Everthrive – Family Council Session, trying to get buy in for the family councils. If you have families that would be interested, it is work being done across the state.

IMMT Next Steps

- Next meeting is May 9th

7. Public Comment: No Public comment.

Persons interested in making public comment are encouraged to contact the Office of Women's Health at **312-814-5302**. If there are speakers remaining after the fifteen (15) minutes allotted for public testimony, who registered prior to the start of the meeting and who have not spoken, they may be permitted to provide their testimony at the conclusion of the meeting, at the discretion of the Chair.

Adjournment: With nothing further to discuss, **Shirley Fleming** made a motion to adjourn, **Paula Brodie** seconded the motion, and the group unanimously approved.