

Meeting Minutes of:

Task Force on Infant and Maternal Mortality Among African Americans (IMMT)

Programs & Best Practices Subcommittee

Date: Tuesday, October 28, 2025 | 11:00 a.m. to 12:00 p.m. | Location: WebEx

Attendees:

<u>Members in Attendance</u>	<u>IDPH</u>	<u>Guest</u>	<u>Members Not in Attendance</u>
1. Patricia Lee King (Lead) 2. Dara Gray Basley (Lead) 3. Joanna Su 4. Jose Ortiz 5. Cynthia Price	1. Díaz, Leandra 2. Aditi Patel 3. Kelly, Hilary	1. Perkins, Anquenet 2. Miller, Erin 3. Wilkerson, Jessica	Excused: 1. Ellen Mason 2. Deanna Durica 3. Gloria Elam

MOTIONS

1. **Motions:**

No motions were recorded.

2. **Motion to Adjourn.**

1st Jose Ortiz, 2nd Cynthia Price, the group unanimously approved. With nothing further to discuss, meeting was adjourned.

AGENDA ITEMS

CALL TO ORDER & ROLL CALL

The Lead, **Patricia Lee King**, called the meeting to order at approximately 11:06 A.M. Leandra Díaz conducted the roll call and asked guests to respond in the chat box with their name and association.

REVIEW/APPROVAL OF MINUTES: 7/15/25

- Minutes from 7/15/25 were reviewed- Not voted.

IDPH UPDATES

- **IDPH Annual Mandatory Trainings Login:** <https://OneNet.Illinois.gov/MyTraining> (5 Trainings) --**Due 12/31/2025**.
- **Maternal Health Summit:** Save the Date, **Nov 18-19, 2025**- More details to come.
- **EMTALA** guidance has been updated, but Illinois state laws will continue to protect emergency and reproductive health services.
- **Budget for Fiscal Year 2026** shows Title V funding is reduced but not eliminated, with concerns over sustaining state-funded work.
- **Illinois Perinatal Regionalization Map of Hospitals (Levels of Care Virtual Map):** Any suggestions are welcome please email Cara.Bergo@Illinois.gov
<https://dph.illinois.gov/topics-services/life-stages-populations/maternal-child-family-health-services/perinatal-health/infant-mortality/perinatal-regionalization.html>
- **2023-2024 Report to The General Assembly: Illinois Task Force on Infant and Maternal Mortality Among African Americans** <https://dph.illinois.gov/about/annual-reports/immt/report-20232024.html>
- IDPH has issued a letter advocating for **Narcan** availability in hospitals as part of the **Illinois DOPP program** to counter opioid overdoses. Illinois Saves Overdose <https://share.google/8VbYcoZ6HSxDfg6XW>
- **Maternal Health Blueprint: LIVE**
Press Release: <https://gov-pritzker-newsroom.prezly.com/gov-pritzker-releases-illinois-birth-equity-blueprint>
Document: <https://dph.illinois.gov/content/dam/soi/en/web/idph/publications/idph/topics-and-services/life-stages-populations/maternal-child-family-health-services/maternal-health/blueprint-for-birth-equity-2025.pdf>

CONVERSATIONS WITH FAMILY CONNECTS

- Family Connects Presenters: Erin Miller & Jessica Wilkerson. The program was reviewed with special guest from Peoria, IL (Erin Miller) and Chicago, IL (Jessica Wilkerson).
- The Family Connects program aims to provide universal postpartum nurse home visits to all families with a newborn. In hopes in normalizing support as part of standard care rather than a service only for high-need families.
- Jessica Wilkerson highlighted Chicago's target is to connect existing services more effectively, reducing fragmentation by coordinating between birthing hospitals, medical providers, and community programs.
- The program also targets improvements in maternal and infant mortality, especially among African Americans, by providing clinical nursing visits that include checks for hypertension, incision healing, and safe sleep environments.
- **Both speakers characterized the program as a short-term model, offering one nurse visit 2–4 weeks after birth and referring families who need further support.**

Impact and Reach Metrics

- Family Connects has achieved significant impact within the communities, with a focus on equity and early intervention.
- In Chicago, the program targets 10 community areas with a goal of 50% family acceptance of visits; last year, 42% accepted, with most neighborhoods close to target.
- Chicago partners with 11/14 birthing hospitals and uses data-driven targeting to focus extra outreach on neighborhoods with high disparities.
- Family Connects served 738 Peoria families last year, with nearly half from high-disparity ZIP codes and a majority on Medicaid—highlighting the program’s strong connection to vulnerable families.
- The program provided nearly 50 safe sleep spaces and identified 61 mothers with hypertension for timely referrals, demonstrating early detection benefits.
- Both presenters stressed universal offering as a stigma-reducing strategy that increases equitable access and engagement

Program Strengths and Community Partnerships

- The program’s success relies heavily on clinical home visits and strong community collaboration.
- The clinical presence of a nurse in the home allows for direct observation and assessment, which is critical for infant safety and maternal health.
- Both Erin and Jessica emphasized the importance of community alignment, where local organizations and residents help interpret data and shape priorities, strengthening local buy-in.
- Peoria’s community agency model benefits from strong relationships with hospitals and providers despite lacking formal affiliation, creating a bridge from hospital to community supports.
- Chicago’s model includes partnerships with Connect Home Visiting Chicago, which facilitates referrals to long-term home visiting programs and follows families to maintain engagement.

Challenges and Quality Improvement Focus

- Despite successes, the program faces operational and systemic challenges that affect reach and sustainability.
- Peoria’s lack of hospital affiliation limits access to all births, requiring ongoing negotiations to overcome legal and data-sharing barriers.
- The stigma linked to the host organization’s association with child protective services requires continuous messaging to clarify the program’s universal offer and build trust.
- Chicago faces challenges scaling a universal program in a large city with over 16,000 annual births, including coordinating among many home visiting programs with limited slots.
- Both locations struggle with funding constraints, a common barrier to expanding program capacity and innovation.
- Chicago benefits from strong political and community support, maintaining engagement across three mayoral administrations and hosting annual stakeholder meetings with about 200 attendees.

Training, Mental Health Screening, and Support Systems

- Nurse training and mental health screening are integral to delivering comprehensive postpartum care.
- All nurses receive specialized maternal and child health training from Family Connects.
- Nurses conduct three standard screenings during visits: EPDS (depression), relationship quality, and substance use, which supports early detection of perinatal mental health conditions.
 - ❖ **EPDS Definition:** The Edinburgh Postnatal Depression Scale (EPDS) is a 10-item questionnaire used to screen for postnatal depression (PPD) in mothers, although it can also be used for other populations. A total score

of 10 or more, or an affirmative answer to the suicidal thoughts question, suggests potential depression that requires further clinical evaluation by a healthcare professional for diagnosis and treatment.

- Some nurses hold certifications in perinatal mental health, enhancing clinical expertise and comfort in addressing sensitive topics.
- Chicago and Peoria incorporate monthly guest speakers and professional development to keep staff updated on emerging topics like immigration and mental health supports.
- Peoria coordinates with local perinatal mental health counselors for families at risk, enabling referrals for extended home visits focused on mental health.

Program Monitoring and Feedback

- The program employs multiple methods to measure success and gather family feedback to improve services.
- Post-visit surveys are conducted by support staff, not the nurses.
- Both Chicago and Peoria collect data on referral outcomes, such as how many families connect with behavioral health or other services after referral, to identify gaps.
- The program collects monthly or quarterly stories from nurses about impactful cases.
- This combination of qualitative stories and quantitative metrics provides a comprehensive view of program effectiveness and supports continuous learning.

OTHER NOTES

Patricia Lee King

1. Will share articles and detailed notes on review form during meetings for Family Connects program documentation.
2. Follow-up with Erin Miller and Jessica Wilkerson to identify additional Family Connects program leads and possibly parent participants for future meetings.

Everyone

1. Send nominations for Chair and Co-Chair positions and candidate suggestions to Leandra.Diaz2@illinois.gov.

PUBLIC COMMENT:

No public comment provided.

ADJOURNMENT:

1st Joanna Su, 2nd Jose Ortiz, the group unanimously approved. With nothing further to discuss, meeting was adjourned.