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## Welcome and Introductions

The Committee Chair, Jodi Hoskins, called the meeting to order at 1:05P.M. on Thursday, July 20, 2017. She requested that everyone around the room and on the phone introduce themselves.

## Attendees

Members in Attendance	Guests and IDPH				
<p>Shelly Musser-Bateman, Chair (phone)            Leslie Caldarelli            Ira Chasnoff (phone)            Christine Emmons            Jodi Hoskins, Co-Chair            Omar LaBlanc            Ellen Mason            Emily Miller (phone)            Cindy Mitchell            David Ouyang (phone)            Mary Puchalski            Elaine Shafer (phone)            David Soglin*            Heather Stanley-Christian (phone)**</p>	<p>Amanda Bennett, IDPH            Elizabeth Cook, IDPH intern            Edeline Dormevil, IDPH intern            Jane Fornoff, IDPH            Ashley Horn, IDPH            Andrea Palmer, IDPH (phone)            Miranda Scott, IDPH            Alexander Smith, IDPH            Kelly Vrablic, IDPH</p> <p>Ann Borders ILPQC            Pattie Lee King, ILPQC            Amy Lin ILPQC            Camille Gordon ILPQC            Anna Potere, Ounce of Prevention            Brielle Treece Osting, EverThrive IL            Antoinette Robey, EverThrive IL            Bahkahia Madison, Chicago School of Professional Psychology</p> <tr> <th colspan="2" data-bbox="857 1415 1524 1451">Members Not In Attendance</th> </tr> <tr> <td data-bbox="190 1451 857 1734"></td> <td data-bbox="857 1451 1524 1734"> <p>Ginger Darling            Dennis Crouse            Arvind Goyal            Robyn Gude            Nirav Shah</p> </td> </tr>	Members Not In Attendance			<p>Ginger Darling            Dennis Crouse            Arvind Goyal            Robyn Gude            Nirav Shah</p>
Members Not In Attendance					
	<p>Ginger Darling            Dennis Crouse            Arvind Goyal            Robyn Gude            Nirav Shah</p>				

\*joined meeting, in person, after the meeting was called to order.

\*\*joined meeting, on the phone, after the meeting was called to order.

## Minutes

The Committee corrected the April 2017 minutes to reflect that Ira Chasnoff attended the meeting in person. With this change, the April 2017 minutes were approved without objection.

## Motions

1. Motion to approve the April 2017 Meeting Minutes  
1<sup>st</sup> Leslie Calderelli, 2<sup>nd</sup> David Soglin
2. Motion to adjourn.  
1<sup>st</sup> David Soglin, 2<sup>nd</sup> Leslie Calderelli

## Agenda Items

### *Updates*

- The Committee was reminded to submit their ethics training materials to Alex Smith at IDPH.
- The Department also shared an ABC7 story on the opioid epidemic in which reporters interviewed both Director Shah and Dr. Ouyang. Committee members can find the link to that story [here](#).
- Dr. Bennett shared the most recent NAS-related data out to the Committee.

### *ILPQC Presentation--Quality Improvement Initiatives*

- Dr. Calderelli presented to the Committee on state-based perinatal quality improvement collaboratives.
- Perinatal Quality Improvement Collaboratives focus on quality improvement and advancing evidence-based clinical practice and process.
  - Dr. Calderelli reviewed the definition of quality improvement, and how it informs ILPQC's work.
- Dr. Calderelli then shared the goals of ILPQC's NAS Workgroup
  - This workgroup is planning to implement a quality improvement initiative based on successful work in other states and adapt this work for Illinois.
  - The NAS Workgroup specifically looked at neonatal quality improvement collaboratives in Massachusetts, Ohio, and Tennessee.

- Given the work of ILPQC's NAS workgroup and the work of the NAS Committee, it seems like the groups should align their work and support one another.
  - The group discussed how the NAS Committee should put together core recommendations as outlined by the legislation, while ILPQC should think about how to implement these recommendations "on the ground" in hospitals. This group puts together the core, ILPQC thinks through mechanics "boots on the ground"
  - As an example, the NAS Committee has created a draft "decision tree" regarding when to screen for and how to treat NAS. ILPQC can then take this decision tree and think about how to implement it in hospitals across the state. Toolkit example, decision tree example
- As the NASC works through the five goals of the Committee, it will be important to communicate with ILPQC, specifically around goal #3 (develop protocols for training hospital personnel in implementing an appropriate and uniform process for identifying and treating NAS) and goal #5 (make recommendations to the Department on evidence-based guidelines and programs to improve the outcomes of pregnancies with respect to NAS).
- The group decided that Brielle from EverThrive IL will draft a work plan in conjunction with the co-chairs that outlines what the Committee has done and what it needs to do by 2019. This work plan will include "activation points" to circle back with ILPQC and share recommendations to inform their work.

#### *Old Business—1-Pager*

- Jodi and Shelly shared a one-pager document detailing the NASC's work to-date.
- The group reviewed this one-pager and discussed their recommendations around substance use screening for pregnant women under goal #3 (develop protocols for training hospital personnel in implementing an appropriate and uniform process for identifying and treating NAS). It was suggested that the group may want to include the use of a trauma screen. Other members of the group noted that physicians may be wary of screening patients if they cannot refer or link them to care following the screening.
- The group asked their colleagues at ILPQC how hospitals across the state handle the screening and referral issue. ILPQC shared that they can survey their members and return to the committee with answers. This may inform the NASC's recommendations around screening for prenatal women.

#### *Old Business—Decision Tree*

- Jodi presented the "identifying drug exposed newborns decision tree" that had been drafted by Ira Chasnoff, Elizabeth Unal, Ginger Darling, Jodi Hoskins, Christine Emmons and Cindy Mitchell.
- NASC members provided feedback on and edits to the decision tree.

- Jodi shared that she will make the changes outlined by the group and present a final draft for the Committee to vote on at the next NASC meeting.

*Old Business—Massachusetts Document Discussion*

- The group discussed the state of Massachusetts's NAS protocols during the ILPQC presentation of other state's neonatal quality improvement collaboratives. This document provided a highlight summary of Massachusetts's work.

*Old Business—Education Recommendations Discussion*

- The Committee felt they had discussed this thoroughly during the ILPQC presentation and the discussion of the one-pager, in particular around goal #3. ILPQC will be bringing more information to the group in the next meeting.

*New Business—Data*

- Dr. Bennett shared updated NAS data with the Committee. The trends mirror those seen across the country.
  - Rates have steadily increased, especially for whites and Hispanics. Rates have also increased significantly in Illinois' rural counties and in urban counties other than Cook.

*New Business—Step 4: Identify and develop options for reporting NAS data to the Department by using existing or new data reporting options*

- Dr. Bennett shared that APORS recently received a March of Dimes grant to improve case confirmation of NAS babies. The Department will be engaged in chart abstraction and validating hospital discharge codes, linking APORS and hospital discharge data to ensure alignment.
- Given this update, Dr. Bennett recommended waiting to make recommendations until after the grant period. The grant ends in May 2018, but data abstraction starts in the fall.
- The group discussed this recommendation and decided it may be beneficial to discuss which data points *should* be reported to the Department. As a starting point, Dr. Bennett said she will share the information they are collecting through the March of Dimes grant, and the Committee can review this data abstraction form at the next meeting.
- The group also shared that they should review the data that other states are collecting, as outlined in the ILPQC presentation, at the next meeting.

*Next Steps*

- Brielle will work with the Committee co-chairs to draft a work plan.
- Jodi will bring an updated decision tree to the next NASC meeting for a vote.
- ILPQC will bring information regarding how Illinois hospitals screen and refer to the October NASC meeting.
- Dr. Bennett will bring the March of Dimes data abstraction form to the next NASC meeting.



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- Brielle will send a doodle poll to arrange a September NASC meeting prior to the October 26th meeting.

### **Adjournment**

Dr. Soglin moved for the meeting to be adjourned. This was agreed upon by Leslie Calderelli at 4:02 P.M. on Thursday, July 20th.