# THE LOUISIANA COMMISSION ON PERINATAL CARE AND PREVENTION OF INFANT MORTALITY AND PREVENTION OF INFANT MORTALITY

#### January 19, 2023 1:00pm - 3:00pm

#### MINUTES

- I. **Roll Call & Introductions** 
  - Meeting called to order by Chair, Dr. Perry S. Barrilleaux, at 1:10pm. a.
  - Members Present: b.
    - i. Dr. Perry S. Barrilleaux
    - ii. Dr. Joseph Biggio
    - Courtney Campbell iii.
    - Aundria Cannon iv
    - v. Leslie Lewis
    - vi. Erika Moss
    - Dr. Steve Spedale vii.
    - viii. Emily Stevens
    - ix. Dr. Rodney Wise
    - x. Amy Zapata
  - c. Members Absent:
    - i. Senator Regina Barrow
    - ii. Representative Rhona Butler
    - iii. Dr. Amar Nijjar
    - iv. Dr. Marshall St. Amant
  - d. Guests:
    - i. Andi Abramson
    - Renee Antoine ii.
    - Shane Bates iii
    - Rachelle Boudreax iv.
    - Marci Brewer v.
    - Paulette Carter vi.
    - Nicole Coarsey vii.
    - Aimee Cloyd viii.
    - Sara Dickerson ix.
    - х. Amanda Dumas
    - Berkley Durbin xi.
    - Julie Emory xii.
    - Daniele Farrisi xiii.
    - xiv. Veronica Gillispie-Bell
    - Marty Hennegan XV.
    - Cheri Johnson xvi.
  - Support Staff: Cara McCarthy e.
  - Ancillary support: None. f.
- Approval of Previous Meeting Minutes II.
  - Dr. Joseph Biggio made a motion to approve meeting minutes from November 18, 2021, January a. 20, 2022, March 17, 2022, May 19, 2022, July 21, 2022, and November 17, 2022.
  - Dr. Steven Spedale seconded the motion. b.
  - Minutes were approved without opposition. c.
- III. Systems of Care
  - Dr. Veronica Gillispie-Bell presented a reminder of the charge of the Perinatal Commission to a. define participation in the state's perinatal quality collaborative. Questions from participants included how metrics for Louisiana Perinatal Quality Collaborative (LaPQC) were selected and how to define the difference between participation and non-participation. Dr. Gillispie-Bell responded that the LaPQC selects metrics from a national set of metrics, based on the needs and goals of the individual health system, and in alignment with national requirements such as the

- Kaitlyn Joshua xvii. Amy Ladley xviii. Randal Leggett xix. Kayla Livingston XX. Danielle Mistretta xxi. Yasser Omar Amanda Perry xxiv. Dionka Pierce xxv. T Perry xxvi. Laura Poole xxvii. Kerrie Redmond xxviii. Frankie Robertson xxix. Shelly Ryan Gray xxx. Brittany Sweeny
- xxxi. Ayesha Umrigar
- xxii. xxiii.

Joint Commission Perinatal Standards. Dr. Gillispie-Bell also reminded the group that, since the LaPOC was authorized by the Perinatal Commission, all proposed initiatives would be presented to the Commission prior to planning and implementation.

- b. Proposed definition: The Louisiana Commission on Perinatal Care and Prevention of Infant Mortality defines participation in the state perinatal quality collaborative as reporting national Alliance for Innovation on Maternal Health (AIM) measures, and national breastfeeding metrics, that allow Louisiana to be designated as an "AIM" state.
- Corrections to presentation: Dr. Gillispie-Bell made a verbal correction of the number of hospitals c. in Louisiana participating in at least one LaPQC initiative: 47 of 48 birthing hospitals rather than 47 of 49.
- d. Dr. Biggio made a motion to approve the definition.
- e. Dr. Spedale seconded the motion.
- f. The definition was approved without opposition.
- **Commission Authorized Projects** 
  - Dr. Gillispie-Bell presented on the 2017-2019 Louisiana Pregnancy Associated Mortality Review a. (PAMR) report. Dr. Gillispie-Bell provided a timeline of the evolution of the report and the functions of the committee that reviews maternal deaths defined as "the death of an individual while pregnant or within one year of pregnancy, regardless of cause." Dr. Gillispie-Bell gave an overview of the review process and the key decision questions for the committee:
    - i. Was the death pregnancy-related?
    - ii. What was the underlying cause of death?
    - iii. Was the death preventable? Was there a chance to alter the outcome?
    - iv. What were the **factors that contributed** to the death?
    - v. What were the specific and feasible actions that might have changed the course of events?
  - b. Dr. Gillispie-Bell then presented a snapshot of pregnancy-associated cases from 2017-2019. Pregnancy-associated deaths are defined as "a death that occurs during pregnancy or within one year of the end of pregnancy including leading causes of death." Data from 2017-2019 indicate the leading causes of pregnancy-associated death were accidental overdose, homicide, and motor vehicle crash.
  - Dr. Gillispie-Bell also presented findings related to disparities in pregnancy-associated deaths, c. which show substantial differences in causes of death based on race, education level, insurance type, and age.
  - d. Dr. Gillispie Bell concluded by proving recommendations for the Perinatal Commission by point of intervention and priority areas for prevention. She emphasized the importance of using data to monitor maternal outcomes, how the Bureau of Family Health supports clinical and systems change, and reviewed current polices that enable or support a strong system of care.
  - Discussion on this report touched on challenges in providing care for substance use disorders e. (SUD) to patients who were reluctant to seek or follow up with care and what role Managed Care Organizations (MCO) played in providing care to these patients. Meeting participants also discussed ways the Perinatal Commission could support the training of providers and pharmacists who work with patients with SUD. Proposed opportunities included providing training on bias and stigma, following up with Dr. James Hussey on his work addressing SUD and mental health, working with MCOs to require a discharge plan for patients who have given birth and have a SUD, and working with emergency departments to identify patients at risk or currently experiencing a SUD. Meeting participants also discussed the challenges of obtaining data from MCOs and recommended representatives from the six MCO attend future meetings to discuss these topics.
  - f. To access the full PAMR report visit: https://partnersforfamilyhealth.org/wpcontent/uploads/2022/09/2017-2019 PAMR Report 08.17.2022 FINAL.pdf
- V. Legislative Implementation
  - Ms. Ayesha Umrigar provided information on current legislation related to maternal and child a. health including implementation of the Doula Registry (Act 182 – 2021 Legislative Session); development of an information pamphlet on emergency contraception for people who have experienced a sexually-oriented criminal offense (Act 513 - 2022 Legislative Session); the implementation status of perinatal mood disorder screening (Act 188 – 2022 Legislative Session);

IV.

the status of the request for policies relative to children giving birth ( $\underline{SR \ 87} - 2022$  Legislative Session); and a report out of the Study Commission on Maternal Health and Wellbeing ( $\underline{SR \ 131} - 2022$  Legislative Session).

- VI. Perinatal Commission Work Groups
  - a. Ms. Cara McCarthy presented on the proposed plan for work groups for the 2023 calendar year. Ms. McCarthy will collect information on published reports related to maternal and child health and will send to Perinatal Commission members and guests for their review. She will also send out a feedback tool to assist Commissioners and guests in reviewing the reports and identifying potential work group topics of interest. She reminded Commissioners and guests to specially review the reports with a lens of how work groups could focus on guidelines, policies and potential research.
  - b. Ms. McCarthy will gather feedback on the reports from Commissioners and guests and will present this information at the March 16 Perinatal Commission meeting. Commissioners will select which work groups will move forward and will facilitate selection of participation of members in the workgroups.

## VII. Membership

- a. Dr. Biggio provided the status of open Perinatal Commission seats and provided information on how interested persons could apply for the Family Practitioner and Family Planning Representative seats: email <u>PerinatalCommission@la.gov</u> to express interested, and fill out an application with the Office of the Governor: <u>https://gov.louisiana.gov/index.cfm/form/home/14</u>.
- b. Ms. Amy Zapata suggested promoting the open seats through online platforms such as Indeed and LinkedIn and Dr. Barrilleaux volunteered to present about the Perinatal Commission and the open Commission sets at a Louisiana Academy of Family Physicians [CM1][VGM2][CM3]meeting.

## VIII. Announcements

- IX. Public Comment
  - a. Ms. Daniele Farrisi from the Louisiana Public Health Institute gave a presentation on the newly established Louisiana Pregnancy Registry. Ms. Farrisi outlined the key challenges in collecting consistent data from a variety of sources and the importance of focusing on key drivers of maternal mortality beyond obstetric complications. Ms. Farrisi provided information on the pilot phase of the project which is focusing on healthcare systems. Currently the project has collected data on 77,568 pregnancies associated with 61,250 birthing people. The project has calculated roughly 45 indicators, including 21 indicators related to severe maternal morbidities. Ms. Farrisi reported that the current pilot project will end 2023 and the data is available as a resource.

### X. Adjourn

- a. Dr. Spedale made a motion to adjourn the meeting.
- b. Dr. Biggio seconded the motion.
- c. Chair Dr. Barrilleaux adjourned the meeting at 2:55pm.
- d. The next meeting is March 16, 2023, from 1:00pm to 3:00pm.