## **SETRAC** Perinatal Committee

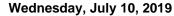
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TOPIC	DISCUSSION/RECOMMENDATION	ACTION/FOLLOW-UP
Presenter: Dr. David Weisoly Topic: Call to Order/Approval of Minutes	Dr. Weisoly welcomed the group. Minutes from the April 25, 2019 meeting were approved as written.	The committee has no further recommendations
Presenter: Dr. Weisoly Topic: 2018 Data Submission and Q&A	<ul> <li>State Bill 749 is a 1-year extension on maternal level of care designation requirements; specifically, telemedicine. Currently an ongoing discussion. DSHS may send survey requesting feedback on neonatal designation process. Currently no date for upcoming survey. Survey will most likely go to program managers and medical directors.</li> <li>Reported roughly 90% submission for data at this time. Hospitals that have not submitted can speak to Tonya Carter or Dr. Weisoly. The FAQ document was created in the QI workgroup meeting and emails and will go out via email with the 2019 data spreadsheet. Will compare 6-month data beginning with July 2018 against 6-month data to see if numbers are correct. Still working through the process.</li> <li>The next version of data submission will be web-based. Data will be viewed as a group. Beginning in 2020, hospitals will get their own data over the aggregated data every 6 months.</li> <li>Requested additional participation in the QI workgroup. Requested members provide committee updates to their hospital leaders.</li> <li>Data reviewed. Will compare with VON data. Noted missing data from 1 hospital that will make a huge impact on data. Data will change once this hospital's data is received. Noted data can still be corrected and resubmitted. Q5: If there are separate blood infections, they are counted separately.</li> <li>Q6: Noted opportunities for improvement. Q7: Should not use cephalosporins, however there will be exceptions. Currently at 4%.</li> <li>Q8: Preliminary data. Will see if 7% of VLBW inborn mortality question may be answered in error.</li> <li>Q9: Numbers seem low. Possibly due to pending data submissions. Will revisit after full data is received.</li> <li>If baby was double counted in the dominator, it could affect ventilator days.</li> </ul>	SETRAC to send FAQ and 2019 spreadsheet on 7/15/19 Requested hospitals correct and resubmit data if needed Requested all data is reviewed for errors prior to submission to perinataldata@setrac.org Late submission can be sent to tonya.carter@setrac.org



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	Q10: National benchmark is 90% according to VON. Possibly errors in data submission as numbers are low. If 20% are inborn and receiving any steroids before the delivery, the data is most likely incorrect. Requested data is reviewed prior to submission.	
	Data will not be submitted to the State. Will perform side by side comparison after next submission.	
	As data is blinded, any high performers would need to volunteer to present to the committee or low performers who have completed at PI project.	
	Committee requested a review of formulas on the spreadsheet. Some hospitals were using the most current version of the spreadsheet and some from the first version. Jan-Jun 2019 spreadsheet will be fixed.	
	The FAQ document and updated spreadsheet for 1/1/19 - 6/30/19 will be sent on 7/15/19 with a due data of October 15, 2019; quarterly moving forward. Well babies are not included in this data. Transition babies that are not admitted are not included in this data.	
Presenter: Jenny Bennett Topic: Drowning Prevention/Water Safety	Jenny shared her personal story and presented on water safety. Noted most toddler drownings happen during a non-swimming season. 9 bathtub drownings this year in Texas. Leading cause of death in children ages 1-4. Overall drowning is number 1 cause of childhood deaths in Texas. Survey data reviewed. 26 participants and responses. Goals: increase number of reporting hospitals with education materials and how to use them. HCA created a pamphlet with education regarding barriers that is provided with all maternal discharge orders. Can be provided in hospital sponsored classes as well. Memorial Hermann has created a pamphlet. Any HCA hospital can order these pamphlets from their print shop. Parents preventing childhood drowning pamphlets and pool safely pamphlets provided to committee. Email jennifer.bennett4@hcahealthcare.com for more information. Jenny to present at the EMS committee regarding the submersion registry.	The committee has no further recommendations







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Presenter: Dr. Weisoly Topic: Perinatal QI Workgroup	Thanked workgroups for increased participation. Noted the FAQ document will be distributed via the email list serve. This will be a living document where questions can be added. Document is based on questions received by Dr. Weisoly and Dr. Fry. Noted this is a NICU database and not for well babies. Send questions to tonya.carter@setrac.org Noted any workgroup projects must be presented to and approved by the committee.	The committee has no further recommendations
Presenter: Dr. Lisa Owens Topic: Low Birthweight Infant Mortality Workgroup	Dr. Owens provided an update. Safe Sleep implementation in the NICU. Goal is web-based toolkit, education for families, and a FAQ document. Partnering with the health departments in each county to address rates of death. Community wide education. Possibly develop a LBWIM data collection tool.	The committee has no further recommendations
Presenter: Dr. Sophia Tsakiri Topic: Perinatal Planning Workgroup	Noted working with EMResource for emergency personnel and plans as perinatal or maternal bed availability is not up to date in EMResource. Working with SETRAC to separate maternal beds and find one way to update the system. Willing to share emergency plans for regional availability and designation process. Algorithms on how to triage mother in labor during a hospital emergency/evacuation will now be shared.	The committee has no further recommendations
<ul> <li>Presenter: Dr. Eugene Toy</li> <li>Topic: Maternal Mortality Workgroup</li> <li>Depression Screening</li> <li>Drug Abuse Screening</li> </ul>	<ul> <li>Dr. Davidson presented the depression and drug screening tool for approval.</li> <li>Requirements for designation reviewed.</li> <li>Goal is for each hospital to develop a screening process with validated instrument. Recommendation is EPDS if a hospital does not have a tool in place.</li> <li>Will begin by surveying hospitals to see if screening tool is in place and what they are using. If project is approved, a toolkit will be developed. Surveys will be distributed after 3 months and then quarterly each year moving forward. Committee members agreed to the rollout of the depression and drug abuse screening project.</li> <li>This presentation will be added to the Perinatal webpage at www.SETRAC.org</li> </ul>	The committee approved the roll out of the depression and drug abuse screening project. Presentation will be added to SETRAC website.
Presenter: Jessica Pugil Topic: Working Partners	Noted this study is only for Harris County at this time. Working Partners	The committee has no further recommendations



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	representative are not clinicians but work with physicians in Harris County. Performing yearlong research project to improve maternal health and reduce morbidities in Harris County. Discussed the data registry demonstration project. Working with Dr. Epps, Davidson, and Toy regarding the registry. Goals and data metrics reviewed. Intent is to put in red cap system. Sites will be trained on how to collect and report the data. Those interested in participating can speak after the meeting. Contact information provided.	
Next Meeting	Wednesday, September 11, 2019 at 1:30pm to 3:00pm Harris County Office of Emergency Management (Conference Room 120) 6922 Old Katy Rd. Houston, TX 77024	
Adjourned	There being no other items for discussion, Dr. Weisoly adjourned the meeting.	