



OKLAHOMA State Department of Health

MINUTES OF REGULAR PUBLIC MEETING

PUBLIC BODY: ADVISORY COMMITTEE ON MIDWIFERY

DATE: WEDNESDAY, SEPTEMBER 14, 2022 @ 1:00PM

LOCATION: OSU CENTER FOR HEALTH SCIENCES, TANDY ROOM 351
 1111 W 17TH ST., TULSA, OK 74107

CONTACT PERSON: TRAVIS SPLAWN TELEPHONE: (405) 426-8250

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I. Call to Order

Nikki Imes called the meeting to order at 13:06.

II. Roll Call

Tabitha Cooper initiated a roll call for the meeting.

Members present: Dr. Kate Arnold, Sarah Foster, Dr. Sarah Hall, Michelle Hernandez, Nikki Imes.

Members absent: Shaun Baranowski & Lecye Doolen

Quorum met.

III. Statement of Compliance with the Open Meetings Act

Tabitha Cooper read the statement of compliance: *This regular meeting of the Advisory Committee on Midwifery, scheduled to begin at 1:00 p.m. on this 14th day of September 2022, was convened in accordance with the Oklahoma Open Meeting Act [25 O.S., §§ 301 et seq.] Further, an advance public notice was sent to the Secretary of State's Office of Administrative Rules by Internet, prior to this time today, specifying the time and place of the meeting. Notice of this meeting was given at least twenty-four (24) hours prior, and no one filed a written request of notice of meetings of this public body to date.*

IV. Opening Remarks

Nikki Imes wanted to make OSDH aware that she is not reapplying to the committee when her term ends.

V. Approval of previous meeting minutes

The committee reviewed the meeting minutes of the Special Meeting, held June 8, 2022. Sara Foster questioned part 7. She wanted to clarify that the emails were bouncing back, but the calls were just not being responded to, at all. Minutes will be modified to reflect these more accurate details. Also, the meeting was held in Tandy Room 331, not Room 311.

Sarah Foster motioned to accept the minutes once they are amended to say that Anne Coffee was not responding to phone calls and the room number is corrected. Michelle Hernandez seconded the motion.

Aye: Sarah Foster, Michelle Hernandez

Abstain: Nikki Imes, Dr. Sarah Hall, Dr. Kate Arnold

Motion carries.

VI. Program Update

- a. Licensing updated – 36 licensed (Including A. Coffee) No applicants for this meeting.
- b. Thentia Update – No update. Contracting issues have been resolved. Still working to pick back up.
- c. Hearing A. Coffee – Date set for revocation hearing. 9.22.22

VII. Review, discussion, and action on license applications received

No applications received since the last meeting.

VIII. Review, discussion, and possible action on complaints

Due to the medical records involved and the private nature of that information, Michelle Hernandez motions to go into executive session to discuss complaint. Seconded by Dr. Kate Arnold.

Aye: Dr. Kate Arnold, Sarah Foster, Dr. Sarah Hall, Michelle Hernandez, Nikki Imes.

Motion carries.

Nikki Imes motions to leave executive session. Seconded by Dr. Kate Arnold.

Aye: Dr. Kate Arnold, Sarah Foster, Dr. Sarah Hall, Michelle Hernandez, Nikki Imes.

Motion carries.

Nikki Imes motions to accept the request of documents discussed in exec session and reflect that we added backup midwife to the emergency plan template form during executive session. Sarah Foster seconds.

Aye: Dr. Kate Arnold, Sarah Foster, Dr. Sarah Hall, Michelle Hernandez, Nikki Imes.

Motion carries.

IX. Old Business

At previous meeting annual report numbers were reviewed. Clarification was requested on the numbers, getting them, and compiling the data specifics. Committee requested a possible guidance document to assist in reporting. Noting that the final report is not statistically accurate

due to multiple midwives seeing the same patient. Travis pulled up the rules and regulations where the numbers came from that were requested.

Dr. Arnold feels we should know more about the 4 losses by looking at the report. Add disclaimer on the actual reporting about being for statistical purposes and only be brought before ACOM in the event of a complaint. Michelle says the question is not capturing the proper information to give us accurate outcome information. Travis asks based off what we are wanting to clarify from these numbers, what do we ask?

Dr. Hall suggest # of women provided care have 2 parts...remain in care and transient care. Possibly notate to take care for multi-midwife practices to not duplicate client numbers. Dr. Arnold suggests that we notate people who are still pregnant. Michelle suggests if we clarify only people who have delivered by a certain date. Dr. Arnold points out nothing accounts for miscarriages. Dr. Arnold wants to know the point of it all.

Travis says it is to point out efficacy. Everyone agrees the numbers will not ever capture what the true outcomes are. Dr. Arnold suggests just adding more disclaimers at the bottom. Such as: have not completed postpartum care, multiple providers, transient care provided, still pregnant, early pregnancy loss etc. Rid duplicates, specify delivery during the year only. Travis added note that everyone agreed to.

Dr. Hall wants to know why perinatal and neonatal deaths do not match. She said it is not clear what's being asked to report. Travis said we asked for transfers to be split into maternal and neonatal, so we can clarify perinatal deaths be separated into maternal & neonatal when asking for numbers. Perinatal includes ANY TIME of pregnancy. Dr. Hall wants # of fetal loss after 20 weeks should include cause of death, circumstances, gestational age etc. (Dr. Arnold stepped out at 3:11.) Sarah Foster looked up that the CDC says perinatal is 28 weeks thru 7 days. WHO says perinatal defines it as 22 weeks. Sarah Foster wants deaths around labor to be differentiated by deaths during pregnancy. (Dr. Arnold returned at 3:15.) ACOG says 20 weeks. Dr. Arnold feels like it was meant to be maternal perinatal deaths. Everyone else agrees. The committee made a clerical error, the intention was for perinatal should have been maternal. Dr. Arnold suggested Joyce Marshall is over the infant and maternal mortality review boards and can give us definitions. Travis emailed her immediately. Everyone agreed to send. If there is a definition it should go out with the notice to report and additional clarifiers. Can keep as 'old business for the next meeting.

Travis says it will be less of a guidance document and more notes on what to report when the notice is sent out.

Dr. Arnold left office at 3:31.

X. New business

None.

XI: Adjournment

Nikki Imes motioned to adjourn at 3:31 pm. Motion was seconded by...just kidding...Travis informs committee that he has learned you do not need a motion to adjourn the meeting.

Meeting Adjourned at 3:32 pm.