



TASK FORCE MEETING AGENDA
Thursday, February 28, 2019
North Carolina Institute of Medicine, Morrisville, NC
10:00 am – 3:00 pm

Call In & GoToMeeting Instructions:

To participate remotely, you will need to register for the webinar at the link below and call in to the conference call line. If you have never used GoToMeeting, you may want to connect about 10 minutes before the meeting to download the free software first.

Please join our Zoom Meeting at: <https://unc.zoom.us/j/493279262>

Zoom Meeting ID: 493279262

Conference Number: 877-951-6965 | Participant Code: 77582088

First Zoom Meeting or Technical issues? Please Visit: [Zoom Support](#)

Timeline:

10:00 – 10:30 AM

Robert Kurzydowski, JD, MPH

Project Director

NCIOM

- Welcome
- Introductions
- Recap TF Meeting 2
- Discuss common themes from TF Meeting 2 Discussion Questions (Handout)

10:30 – 10:50 AM

Amanda Walker

She and her first born were transferred to a higher level of care after giving birth to a full-term baby. Her story details how decisions were made and where gaps in care existed.

10:50 – 11:50 AM

Panel: Intrapartum and Neonatal Transfers, and back transfers

This panel will speak to the back-transport process, how transfer partnerships are formed (if at all), and specifics from their organizations. There will be time for questions at the end. Panel speakers are listed on the following page.



10:50 – 11:50 AM

Stacie Walker, CNM

Certified Nurse Midwife, Maria Parham Health

- Maternal transfer process
- Newborn stabilization, care and transfer

Michael Sylvia, MD, FAAP

Pediatrician, Maria Parham Health

- Determination of newborn transfer
- Newborn stabilization, care and transfer

Kate Menard, MD, MPH

Professor, Vice Chair for Obstetrics, & Director of UNC Maternal-Fetal Medicine

- Reception of a maternal transfer
- Neonatal back transport process

Amy Williford, MSN, RN, NNP-BC

Neonatal Nurse Practitioner, Vidant Medical Center

- Neonate reception process
- Neonatal back transport process

11:50 – 12:20 PM

Discussion

12:20– 1:00 PM

Lunch (Provided)

1:00 – 1:40 PM

Historical Perspective: Perinatal and Neonatal Outreach Coordinators

Martha Bordeaux, CNS, MSN, PNP-BC

Neonatal Affiliations Coordinator, Director of Advance Practice Nursing, & Nurse Practitioner, Duke University Health Systems

- Former Neonatal Outreach Coordinator

Frieda Norris, MPH, BSN, FACCE, LCCE, CIMI

Perinatal Educator, the Birthplace, CaroMont Health

- Former Perinatal Outreach Coordinator



1:40 – 2:10 PM

Current State: Perinatal Outreach Coordinator

Angela Still MSN, RN

Director of Women's Services, Vidant Medical Center

- Originator of Perinatal Outreach Service at Vidant

2:10 – 2:50 PM

Discussion

2:50 – 3:00 PM

Robert Kurzydowski, JD, MPH

Project Director

NCIOM

Task Force Meeting 2 Recap:

Last meeting was divided into two primary topics: a description of different levels of care and a deep dive into the uses and mechanisms of the CDC LOCATe tool. Azzie Conley, a representative from NC Department of Health Services Regulation, started the meeting with a remote presentation of the existing NC guideline on NICU levels of care. Dr. Marty McCaffrey and Dr. Kate Menard each presented next on the AAP Neonatal Levels of Care & ACOG Maternal Levels of Care respectively. After lunch, Andrea Catalano, an ORISE fellow from CDC presented on the LOCATe tool and its use across different states. Andrea then sat on a panel with Kimberly Harper and Kay Mitchell, both in charge of regional LOCATe pilots in NC, for an overview of how the tool has been implemented in North Carolina. The day ended in discussion. All slides and discussion material are available for review online at our website:

<http://nciom.org/events/task-force-meeting-15/>.

Looking Forward -- Task Force Meeting 4:

At Task force meeting 4, we plan to take a deeper dive into the perinatal system of care in place for other states. We've already heard about CDC LOCATe in other states, but we will spend the upcoming meeting learning about other facets of their system. What does it mean to be a consumer in these states? A small or large hospital system? What obstacles do these states face, and how have they overcome some of them? We hope to answer these questions next week.