Fifth Annual Maryland Patient Safety Conference
KEEPING OUR PATIENTS SAFE

Teamwork Makes the Dream Work
Thursday, April 2, 2009
8:15 a.m. – 4:00 p.m.
Baltimore Convention Center

Presented by
The Maryland Patient Safety Center
A collaboration of the Maryland Hospital Association and the Delmarva Foundation for Medical Care

This Conference is presented in cooperation with
The Beacon Institute, LifeSpan’s Educational Affiliate; Health Facilities Association of Maryland;
Maryland Association of Healthcare Executives; Maryland Healthcare Education Institute;
Maryland Hospitals for a Healthy Environment; Maryland Nurses Association; Maryland Organization of Nurse Executives;
Maryland Society for Healthcare Risk Management; Maryland Society of Health System Pharmacists

Register by March 25
The Day At A Glance

**WELCOME** Ballroom 1/2

**KEYNOTE ADDRESS:** Quality and Safety—Changing a Massive Culture with Teamwork, Collaboration, and a Revolution in Thinking

JOHN J. NANCE, JD, Founding Board Member, National Patient Safety Foundation, ABC World News Aviation Analyst and Author

<table>
<thead>
<tr>
<th>Time</th>
<th>Accountability Track</th>
<th>Best Solutions Track</th>
<th>Leadership Track</th>
<th>Professional Issues Track</th>
<th>Specialty Track</th>
<th>Special Interest Track</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:15 a.m. to 9:45 a.m.</td>
<td>The Care Journal: A Patient- and Family-Centered Approach to Patient Safety</td>
<td>To be selected from Call for Solutions Patient Safety Solution</td>
<td>By invitation only Collegial Interactive Teams, Barrierless Communication, and Flying Hospitals</td>
<td>This session is sponsored by the Maryland Society for Health System Pharmacists Improving Patient Safety and Regulatory Compliance through Implementation of CPMOE</td>
<td>This session is sponsored by The Beacon Institute, LifeSpan’s Educational Affiliate Enhanced Resident Safety through Automated Medication Management</td>
<td>MPSC SAFE from FALLS: A Roadmap to a Comprehensive Falls Management Program</td>
</tr>
<tr>
<td>10:15 a.m. to 11:15 a.m.</td>
<td>Turn Intentions into Reality: Designing Safer Processes</td>
<td>To be selected from Call for Solutions Patient Safety Solution</td>
<td>This session is sponsored by the Maryland Society for Healthcare Risk Management Saving Lives by Advancing the Science of Patient Safety</td>
<td>Robust Process Improvement at The Joint Commission</td>
<td>Challenging the Impossible: Personal Safety for Persons with Dementia</td>
<td>Update: MHA Nurse Retention Collaborative</td>
</tr>
<tr>
<td>11:30 a.m. to 12:30 p.m.</td>
<td>Merging Data Sources: A Team Approach to Describing Safety of Care Profiles</td>
<td>Managing Infection Control Challenges: MRSA and Beyond</td>
<td>Leadership in Patient Safety</td>
<td>This session is sponsored by the Maryland Society for Healthcare Risk Management Saving Lives by Advancing the Science of Patient Safety</td>
<td>Patient Elopement—What’s ‘Missing’ In Your Facility Plans?</td>
<td>Debriefing and Data: Tools for Restraint and Seclusion Reduction in Behavioral Health Settings</td>
</tr>
<tr>
<td>12:30 p.m. to 1:30 p.m.</td>
<td>STORY BOARD PRESENTATIONS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2:45 p.m. to 3:45 p.m.</td>
<td>Update on OHCO’s Maryland Patient Safety Program Regulations</td>
<td>Making Care Safer for Mothers and Babies: The MPSC Perinatal Collaborative</td>
<td>This session is sponsored by the Maryland Association of Healthcare Executives Leaders New Work: A Quality Revolution</td>
<td>To be selected from Call for Solutions Patient Safety Solution</td>
<td>Green Teams Efforts: Promoting Health, Safety, and Sustainability</td>
<td></td>
</tr>
</tbody>
</table>
**Quality and Safety — Changing a Massive Culture with Teamwork, Collaboration, and a Revolution in Thinking**

**JOHN J. NANCE, JD**, Founding Board Member, National Patient Safety Foundation, ABC World News Aviation Analyst and Author

Einstein is reputed to have said that the very definition of insanity is doing the same thing over and over again yet expecting a different result. While the reaction of the healthcare profession to the IOM Report in 1999 was anything but rote, routine, or insane, it has been flailing at the problem with the same basic tools and expecting better results. There is, however, a sweepingly effective means of dealing with the patient safety crisis that is already providing the underpinning of truly massive improvements in safety and quality: Accepting the inevitability of human failures in even the best human system, and neutralizing the ability of such failures to hurt a patient. This presentation will bring you into the heart of the highly effective discipline that can catch or eliminate them in time.

**CONCURRENT SESSIONS:**

**ACCOUNTABILITY TRACK**

**The Care Journal: A Patient- and Family-Centered Approach to Patient Safety**

**SORREL KING**, Consumer and Founder, Josie King Foundation

This session will explain the Care Journal—a healthcare journal to help patients and their families track the vast amounts of medical information related to a hospitalization. The Care Journal is a 30-day prompted diary that is an important resource for patients, and has the potential to bridge the communication gap that sometimes may exist between patients and healthcare providers.

**Turn Intentions into Reality: Designing Safer Processes**

**PATRICE L. SPATH, BA, RHIT**, President, Brown-Spath & Associates

Good intentions are not enough. Creating ultra-safe healthcare requires people have the knowledge and skills to make sustainable changes. In this session participants will learn how to recognize and rescue failed safety improvement projects by implementing high-reliability solutions.

**Merging Data Sources: A Team Approach to Describing Safety of Care Profiles**

**VAHÉ KAZANDJIAN, PhD, MPH**, President, Center of Performance Sciences; Professor (Adj), The Johns Hopkins University Bloomberg School of Public Health

**VIVIAN MILLER, CPhQ, CPHRM, LHRM**, Research Project Manager, Maryland Patient Safety Center

**FRANK PIPESH**, Senior Director, Information Technology, Center for Performance Sciences

**KAROL WICKER**, Director, Product Management, Center for Performance Sciences

MPSC’s Adverse Events database will provide the trends and frequencies of events discussed in this session. Statewide priority areas for safety improvement will be presented based on more than 20,000 voluntarily reported adverse events and “near misses” data. The session will also show how cross-program findings can enhance the interpretation of safety improvement activities. As an example, data from MPSC’s MEDSAFE Project regarding patient falls will be linked to medication errors from the Adverse Events reporting tool to show the frequency of patient falls associated with medication errors among Maryland hospitals.
LEADERSHIP TRACK

This session is by invitation only

Collegial Interactive Teams, Barrierless Communication, and Flying Hospitals

JOHN J. NANCE, JD, Founding Board Member, National Patient Safety Foundation, ABC World News Aviation Analyst and Author

What would the world of healthcare look like if every practitioner knew what the best practices were for any given condition and complied with those best practices (evidence-based) 100% of the time? The distressing truth about patient safety is that essentially outrageous squabbles over which “best practice” to use, coupled with a widespread lack of understanding of the “Common Goal” (To do the best for the patient), is holding us back from serious improvement. There are three basic tiers to an effective safety system, as the world of aerospace (airlines) and nuclear power generation learned the hard way, but they depend on doing the things that work all the time. How healthcare would function with the same protocols and a primary emphasis on collegial teamwork is the subject of this presentation, and your patients are literally dying for you to adopt these principles.

This session is sponsored by the Maryland Society for Healthcare Risk Management

Saving lives by Advancing the Science of Patient Safety

PETER J. PRONOVOST, MD, PhD, Professor, Anesthesiology/CCM, Surgery, Nursing, Health Policy and Management, Director, Adult Critical Care Medicine, Co-Director, Cardiac Surgical Intensive Care Unit, Director, Quality and Safety Research Group, Johns Hopkins University

This session will discuss why patient safety has often been neglected in biomedical research funding, and will demonstrate the tremendous value in terms of saved lives and cost of care that could be realized by viewing Patient Safety as a science. Dr. Pronovost will talk about how he implemented a patient safety program to reduce catheter related bloodstream infections and in doing so saved thousands of lives and millions of dollars.

Leadership in Patient Safety

The Washington County Hospital Quality Forum: A Tool to Drive Quality, Patient Safety and Organizational Change

T. MICHAEL WHITE, MD, Chief Medical Officer, Washington County Hospital Association

This session will describe a monthly Washington County Hospital meeting of Board, Medical Staff, Nursing, Administration and Department Leadership which in 90 minutes addresses:

• The organization’s business — our mission and the provision of value in healthcare (care, quality, safety, satisfaction, advocacy, vitality, and resource utilization) to the community served.
Updates regarding the rapidly changing quality, patient safety, customer experience, employee pride, and regulatory compliance landscape.

A data driven assessment of the status of the organization allowing for recognition of successes, opportunities for improvement, action plans, responsible parties (champions), and continuous improvement feedback loops.

This session is sponsored by the Maryland Association of Healthcare Executives

Leaders New Work: A Quality Revolution

RICHARD O. DAVIS, PhD, Vice President, Innovation and Patient Safety, Johns Hopkins Hospital

The organizational patient safety journey and learning experiences of Johns Hopkins Medicine serve as the foundation for a discussion around the leadership imperative to support leapfrog improvements in quality and safety of patient care. Healthcare leaders today must understand the organizational context, systems, and structures needed to support a culture of quality and safety, and recognize and overcome personal leadership and organizational barriers to breakthrough improvements in clinical quality and patient safety.

This session is sponsored by the Maryland Association of Healthcare Executives

Robust Process Improvement at The Joint Commission

ANNE MARIE BENEDICTO, Chief of Staff and Executive Vice President, Support Operations, The Joint Commission

This session will provide an overview of the process improvement initiative at the Joint Commission today.

This session is sponsored by the Maryland Organization of Nurse Executives

Creating Healthy Work Relationships

KATHLEEN BARTHOLOMEW, RN, MN

It is the patient who loses when nurses and physicians are in conflict. Research shows that not only do disruptive relationships affect morale and retention, but also patient mortality. In order to achieve best practice and keep our patients safe, it is critical that we acknowledge the impact of conflict in the workplace. Only by understanding the origin and reasons for our behaviors can we begin to create the safe, healing environment that is our ethical obligation as caregivers.

This session is sponsored by the Maryland Organization of Nurse Executives

Enhanced Resident Safety through Automated Medication Management

DOLORES REIDENBACH, RN, Vice President, Business Marketing and Development, Millennium Pharmacy Systems, Inc.

Medication errors continue to be one of the top sources of deficiencies in nursing homes in the United States. According to the American Journal of Medicine there are 24 drug related injuries per year in the “average” nursing home.

This session is sponsored by the Beacon Institute, LifeSpan’s Educational Affiliate

Challenging the Impossible: Personal Safety for Persons with Dementia

ALVA S. BAKER, MD, Vice President for Health and Wellness Services, EMA; Executive Director, The Copper Ridge Institute; Director, The Center for the Study of Aging at McDaniel College

Cognitively impaired people are at risk for injury for a variety of reasons. Certain dementing illnesses are more likely than others to lead to behavior that results in injury. Knowledge and appreciation of the patient’s dementing diagnosis and therefore the patient’s potential behavior patterns are paramount in any effort to promote his or her safety. Staff education and training in the management of behavioral symptoms in demented persons are the cornerstone of any initiative to improve performance and reduce patient risk. This session will discuss the educational and competency requirements needed for any such initiative to be successful.
This session is sponsored by
Health Facilities Association of Maryland

Patient Elopement — What’s ‘Missing’ in your Facility Plans?

DAVE MEEK RN, BSN, BEd, TNS, CEN, CLNC,
Elopement Specialist, The National Institute for Elopement Prevention and Resolution

In this session we will look at several definitions for Patient elopement and how they might be applied in various types of facilities. We will also discuss how your policies might help or hurt you after an elopement incident occurs. Plans play an important role in today’s facilities and we will explore the difference between your elopement prevention and response plans. We will also review the critical elements you must have in your elopement response plan. Finally, this session will ask you to look at how prepared you are for elopement situations in your disaster/relocation response plans.

Patient Safety Solution
To be selected from the Call for Solutions

SPECIAL INTEREST TRACK

MPSC SAFE from FALLS:
A Roadmap to a Comprehensive Falls Management Program

CAMILLA J. ROGERS, JD, RN, Chair, Falls Task Force
BARBARA BOND, RN, Senior QIO Support Lead, Delmarva Foundation for Medical Care
SHARON FORREST, RN, Manager, Clinical Operations, Genesis HealthCare
TINA GIONET, RN, MBA, BS, Patient Safety Officer, Sinai Hospital of Baltimore
SHIRLEY J. KNELLY, Vice President, Quality and Patient Safety, Anne Arundel Medical Center
ANNE JONES, RN, BSN, MA, Patient Safety Unit, Office of Health Care Quality

This session will provide a report on the progress of the MPSC Falls Task Force. A representative from the Office of Healthcare Quality will present collected data on falls in Maryland. In addition, outcome measures from the work groups in long term care, acute care and home care will be presented.

Update:
The Maryland Hospital Association Nurse Retention Collaborative

PRESENTER:
CATHARINE CROWLEY, BSN, MBA, EdD, Vice President, Maryland Hospital Association

PANEL:
ALISON BURROW, MBA, RN, Vice President, Maryland Healthcare Education Institute
JEANNE DECOSMO, MBA, BSN, Director, Workforce Activities, MHA
CATHY SMITH, RN, BA, Manager, Recruitment and Retention, MHA

The Maryland Hospital Association Nurse Retention Collaborative is a unique application of IHI’s Breakthrough Collaborative Process. Twenty-eight teams from 19 Maryland hospitals are working to address unit-based issues that contribute to nurse retention. This session will provide an overview of the retention model and how it was blended with the IHI approach. Following the presentation there will be a panel discussion with members of the implementation team.

Debriefing and Data: Tools for Restraint and Seclusion Reduction in Behavioral Health Settings

MONICA COOKE, BSN, MA, RN, CPhQ, CPhRM, CEO, Quality Plus Solutions LLC

Restraint and seclusion are behavioral health safety interventions considered to be the “last resort” in maintaining the safety of patients and staff. The potential legal risks of these interventions are high and it is imperative that we work to decrease the frequency in which these techniques are implemented. The goal of this presentation is to assist organizational leaders and managers in understanding the importance of an effective debriefing process and the transparent use of restraint and seclusion data as an aid in minimizing the intervention of “last resort” in behavioral health care environments.
REGiSTER by Wednesday, March 25, 2009

NAME	DEGREES

TITLE

ORGANIZATION

ADDRESS

CITY	STATE	ZIP	DIRECT PHONE NUMBER

EMAIL ADDRESS — If you need confirmation of your registration, your email address must be included.

FEE: ☐ NO CHARGE for Maryland healthcare professionals and employees of Nanticoke Health Services, Sibley Memorial Hospital, and Washington Hospital Center

☐ Non-Maryland healthcare professionals and all other participants, $150/person before March 25; $200/person after March 25

☐ Check Enclosed — Make Payable to Maryland Patient Safety Center

☐ VISA ☐ MasterCard ☐ AmEx

CARD NUMBER	EXP. DATE

NAME ON CARD	SIGNATURE

BILLING ADDRESS FOR CARD	ZIP CODE FOR CARD

Return registration form to:
Robbie Heacock	rheacock@mhaonline.org
Education Coordinator	410-796-6239
Maryland Patient Safety Center	410-379-9541 fax
6820 Deerpath Road	Elkridge, MD 21075

To register online, go to www.mhei.org, and click on Programs

Late registrations (received after March 25)
$50/person

On-site registration fee
$50/person

Payment information for program registration must accompany this form.

Weather Policy:
In the event of adverse weather conditions, the decision to cancel or delay the Conference will be made by 6:15 the morning of the Conference. To find out if the Conference is delayed or cancelled, please call 410-540-9210 after 6:15 a.m. on April 2.

Special Note:
The Maryland Patient Safety Center wishes to ensure that no individual with a disability is excluded, denied services, segregated or otherwise treated differently from other individuals because of the absence of auxiliary aids and services. If you need any of the auxiliary aids or services identified in the Americans With Disabilities Act, please call Mary Hofbauer Brown at 410-379-6200.

Continuing Medical Education:
The Maryland Healthcare Education Institute (MHEI) is accredited by Med Chi, the Maryland State Medical Society, to sponsor continuing medical education for physicians. MHEI designates this educational activity for a maximum of 5 credit hours in category 1 credit towards the AMA Physician’s Recognition Award. Each physician should claim only those hours of credit that he/she actually spent in the educational activity.

Long Term Care Administrators:
This program has been submitted to the National Continuing Education Review Service (NCERS) of the National Association of Boards of Examiners for Nursing Home Administrators for continuing education credit.

MNA approval for contact hours has been applied for.
Green Teams Efforts: Promoting Health, Safety, and Sustainability

Facilitator:
JOAN D. PLISKO, PHD, Technical Director,
Maryland Hospitals for a Healthy Environment

Panel:
VICTORIA E. STEWART, MBA, Director, Business Operations,
Perioperative Services, University of Maryland Medical Center
DENISE CHOINIERE, RN, BSN, Environmental Health
Coordinator, University of Maryland Medical Center
COLLEEN CUSICK, RN, Clinical Products Specialist,
Materials Management Department, Johns Hopkins Health System
CHRIS SEAL, BA, Director, Department of
Environmental Services, Johns Hopkins Medical Institution

Recognizing that hospitals are a place for healing and that sustaining a healthy environment is essential to maintaining both personal and public health and safety, hospitals are now incorporating sustainable practices into their operating plans. Over 70% of Maryland hospitals are now working on issues related to environmental sustainability and one-third have a Green Team. During this session, representatives from The Johns Hopkins Hospital and the University of Maryland Medical Center will present information on their organization, priorities, and implementation of environmental programs as part of their Green Team effort. Particular emphasis will be on patient, worker, and community health and safety.

There will be exhibits and a poster session by hospitals/long term care facilities showing solutions to patient safety problems.

MPSC Board of Directors

Chair:
Kathleen White, PhD, RN, CNAA
Associate Professor
Johns Hopkins University School of Nursing

Members:
David Almquist
Executive Vice President
President, Southern Area
Genesis HealthCare Corporation

John C. Astle
MD, MPH
Senior Associate
The Annie C. Casey Foundation

Raymond Coxx, MD, MBA
Chair, Obstetrics & Gynecology
St. Agnes Hospital

John R. DiBona, PharmD
Corporate Director, Pharmacy
LifeBridge Health

Susan L. Glover, RN, MHA
Vice President & Chief Quality & Integrity Officer
Adventist HealthCare

Christian Jensen, MD, MPH, CPE
President & Chief Executive Officer
Delmarva Foundation for Medical Care

Vahé Kaxandjian, PhD, MPH
Senior Vice President
Maryland Hospital Association

Sorrel King
Consumer

Wendy A. Krummiller
Executive Director & President
Maryland Patient Safety Institute

Paul Martin
President
Maryland Healthcare Education Institute

Brian McHale
Member, Maryland House of Delegates
(Baltimore City)

William F. Minogue, MD, FACP
Executive Director & President
Maryland Patient Safety Institute

Stephen Ports
President & CEO, Bon Secours Baltimore Health System

Joseph P. Ross, FACHE
President & CEO
Shore Health System, Inc.

Samuel L. Ross, MD, MS
Chief Medical Information Officer
Bon Secours Baltimore Health System

Stephen Schenkel, MD, MPP
Chair, Emergency Medicine
Mercy Medical Center

Jon Shematsen, MD
Senior Vice President & Chief Medical Officer
CareFirst BlueCross BlueShield

Craig B. Weller
Chief Financial Officer & Chief Operations Officer
Delmarva Foundation for Medical Care