On July 15, 2014, the Maryland Patient Safety Center (the Center) convened a task force of expert faculty to launch its new Sepsis Prevention Initiative. Among internationally recognized experts, the faculty includes two emergency department physicians from University of Maryland Charles Regional Medical Center, the winner of the 2014 Minogue Award for Patient Safety. That facility improved survival rates for patients with life-threatening sepsis significantly by using a rapid response team approach that developed evidence-based guidelines for early recognition, assessment and treatment.

A team including a human-factor engineering consulting firm will work with participating healthcare organizations to examine their existing practices. They will help facilities rapidly identify and treat sepsis to reduce mortality rates from the 2013 state level of about 14 percent. Early identification and intervention has been shown to reduce mortality rates by preventing the cascade of events that lead to organ failure and death.

The first of two cohorts, each consisting of 10 hospitals, launched in July; the second cohort is expected to begin about six to nine months later. The Center reviewed applications from hospitals throughout the State to select cohort participants. Participation is limited due to the high level of individual support that will be provided to each hospital. For more information, contact Bonnie Di Pietro at 410.540.5059.

GBMC Will Pilot CARING FOR THE CAREGIVER

In June, the Center began a pilot of its newest program called ‘Caring for the Caregiver’ at GBMC. Based on the RISE (Resilience in Stressful Events) program developed by the Armstrong Institute at Johns Hopkins Hospital, the new program will provide peer support for caregivers who have experienced psychological trauma due to involvement with a medical error or a stressful patient outcome.

There is growing awareness that such events take a significant toll on the mental health of the caregiver. These providers are at higher risk of leaving their positions because they’re afraid of harming another patient. Peer support can help reduce stress, provide a non-judgmental environment and improve caregiver well being.

The program helps facilities create a multi-disciplinary peer responder team that volunteers to support these ‘second victims.’ Representatives can include physicians, pharmacists, nurse managers, administrators, social workers, and others. Volunteers will receive initial training in an 8-hour workshop, supplemented by ongoing training.

The Center expects that the program will be available to market to hospitals and other healthcare providers by early 2015. For more information, contact Nicole Zuech at 410.540.5057.
Maryland Hospitals Achieve Zero Early Elective Inductions

Center Leadership Applauds Hospitals for Making Deliveries Safer

Over the past year, The Center has partnered with Maryland hospitals to achieve a difficult but important goal by having zero early elective inductions in December 2013, the latest month for which data is available. Elective caesarean sections for that month were close to zero.

Ann Burke, MD, FACOG, Co-Chairman, Perinatal & Neonatal Learning Network, and Medical Director, Obstetrics and Gynecology, Holy Cross, said, “We are thrilled to achieve such significant progress in such a short time. It’s so much safer for infants. Elective deliveries prior to 39 weeks gestational age are linked to increased complications for both mother and baby.”

The Center worked with the Maryland Hospital Association and Maryland hospitals to set a goal to reduce early elective deliveries—those that are scheduled for the convenience of patients or obstetricians rather than for medical reasons—to zero.

Robert Imhoff, President & CEO of the Center, said, “Maryland is making great progress in this important safety goal. The national average for elective deliveries is more than 10% and the Joint Commission and other healthcare agencies have set a goal of 3.5%, so Maryland has far surpassed expectations.”

“This is about avoiding preventable harm to babies,” Dr. Burke added. “Change is never easy. Without a push from the Maryland Patient Safety Center, and collaboration among hospitals, their staff and physicians, this would not have happened.”

By waiting until 39 weeks, when fetal development is complete, the risk of breathing and feeding problems, low blood sugar, jaundice and other problems are avoided.

Step Up Your Safety I.Q.
Don’t Miss Our Exciting Educational Lineup

- **Six Sigma Green Belt Certification**
  - A 5-Day Education Program
  - Leading to Green Belt Certification
  - Monday, October 27 – Friday, October 31, 2014
  - 9:00 am – 4:00 pm

- **Patient Safety Tools Training:**
  - Root Cause Analysis
  - Thursday, October 30, 2014
  - 8:30 am – 3:30 pm

- **Patient Safety Tools Training:**
  - Failure Modes and Effects Analysis
  - Thursday, November 20, 2014
  - 8:30 am – 3:30 pm

- **TeamSTEPPSTM Tools Training**
  - Tuesday, December 9, 2014
  - 8:30 a.m. – 4:00 p.m.

Registration and Continental Breakfast begin at 8:00 a.m.

**EDGETHEMED**

The Maryland Patient Safety Center Challenges You to Get Centered!

Share the mission of patient safety with your coworkers in a positive way. Whether you’re working in an exam room or a hospital parking lot, focus on patient safety at all times!

**MEDICATION SAFETY CONFERENCE**

**SAVE THE DATE!**

The all-day conference will be held on Wednesday, November 19th at the Turf Valley Conference Center. This year’s title is *Pharma Karma*. Hold the date and look for more details soon.

Register for all programs at MarylandPatientSafety.org

Making healthcare in Maryland the safest in the nation
10th Annual Conference Examines Evolution 2 Revolution in Patient Safety

Hundreds of healthcare professionals from throughout the region gathered on March 21st at the Gaylord Hotel in the National Harbor for the 10th Annual Maryland Patient Safety Conference. The event carried the theme of Evolution 2 Revolution and featured a full day of presentations and sharing of best practices of how the treatment of patients, the training of staff and the culture of healthcare institutions can impact patient safety.

The morning featured welcoming remarks from Susan Glover, Chair, Center Board, and Senior Vice President and Chief Quality and Integrity Officer, Adventist HealthCare. Attendees were treated to a morning keynote speech from Lee Woodruff, the wife of ABC News Correspondent Bob Woodruff. Bob was originally slated to speak, but was called away to cover the ongoing story of missing Malaysian Airlines Flight 370.

Both the Woodruffs have become staunch patient advocates in recent years following the life-threatening injuries Bob sustained from an IED while he was covering the war in Iraq. In hindsight, it was an advantage for the assembled group to hear from Lee, who was Bob's chief caregiver. Bob was in a medically induced coma for 36 days and was unaware of much of the care he was receiving and decisions that were made on his behalf.

Lee shared her family's struggle in the weeks and months after Bob's injuries and how the hope and care offered by all levels of the medical staff helped them, but was also a key factor in Bob's recovery.

“It was a touching story and drives home that we all need to stay focused on the needs of patients and their families and not focus just on test results and treatment plans,” said Sajeet Shohi, MD, a second-year resident at GBMC.

Following the morning keynote, winners of the Minogue Award for Patient Safety and Distinguished Achievement in Patient Safety were recognized. From there, attendees took part in dozens of breakout sessions focused on a wide variety of patient safety issues. Many took time to visit sponsor booths and interact with storyboard display presenters in the foyer of the conference center.

A closing keynote address on Patient-Centered Accountability Following Medical Injury was presented by nationally-recognized experts Terry Fairbanks, MD; Thomas Gallagher, MD and David Mayer, MD. Their engaging talk covered recent developments in this area and provided a peek into the future of patient-centered accountability.

The annual conference continues to grow in prominence and evolve to meet the needs of our members and other attendees. Look for details soon on the 2015 conference and feel free to share with us your ideas how we can make this event an even more meaningful resource.
Over the past few weeks, our team has taken great pride in the achievement of some significant patient safety goals we have been working towards for quite some time. It was recently announced that Maryland hospitals have achieved the goal of zero early (less than 39 weeks) inductions without medical indication for the month of December 2013; the first time ever for Maryland hospitals to reach this milestone.

Additionally, we are thrilled to share that the 44 Maryland acute care hospitals participating in our hand hygiene initiative have achieved a 90 percent plus hand hygiene compliance rate for eight consecutive months. The initiative was led by our team, but was bolstered by strong working relationships with the Maryland Department of Health and Mental Hygiene, Maryland Health Quality and Cost Council and the Maryland Hospital Association. It is important to note that this is the only statewide hand hygiene initiative we are aware of in the nation.

This achievement is due in large part to the dedication and very focused efforts from the participating hospitals. It has been rewarding to work with them as their commitment to safer care practices was evident with these many months of hard work.

Based on our success in this area, we are planning on expanding our efforts by tracking hand hygiene compliance in emergency departments and long term care facilities. These are two areas where hospital and healthcare leaders feel that preventing the spread of healthcare-associated infections is paramount. We are in the process of developing methodology and conducting initial research to establish baseline data. Look for more details soon.

Further, we have launched a new Sepsis Prevention Initiative that you can learn more about in this issue.

I and the rest of the Center team thank you for your continued support and feedback on our programs. We wish you a safe and fun fall season!

Sincerely,

Robert H. Imhoff, III
President & CEO

To find out more about Maryland Patient Safety Center, please contact Nicole Zuech at 410-540-6057 or nzuech@marylandpatientsafety.org

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