

INSIDE THIS EDITION

- Meet MPSC's New Executive Director
- Welcome New Board Members
- Upcoming Events
- Team STEPPS
- Annual Patient Safety Conference Highlights
- MPSC Leadership and Innovation Recognized
- Minogue Award Established
- News of Note



Meet MPSC's New Executive Director and President

On April 1, Patrick Chaulk, MD, MPH, FACPM joined the Maryland Patient Safety Center (MPSC) as its new Executive Director and President. As a clinician and member of the MPSC Board of Directors, Dr. Chaulk has a background in patient care delivery and has played an important role in shaping MPSC's strategic plan and vision. For the 16 years before coming to MPSC, Dr. Chaulk served as Senior Associate for Health at the Annie E. Casey Foundation in Baltimore where he managed the foundation's grant portfolio in health and public health. Dr. Chaulk, a pediatrician, has been a provider of primary care to children and adolescents in East Baltimore and in Baltimore City public health clinics.

As highlighted in *News of Note* on page four, Dr. Chaulk earned an international reputation for the instrumental role he played in reducing Baltimore's TB rate. The City's program of Directly Observed Therapy for pulmonary tuberculosis has served as a best practice for medication safety based on a nurse-supervised program to administer the right antibiotic combinations to the right person at the right dose.

Dr. Chaulk has been teaching at The Johns Hopkins Hospital Schools of Medicine and School of Public Health for 18 years. He has previous experience in government and legislative affairs.

In his welcome message to the MPSC community, Dr. Chaulk shared the following:



As I start my tenure with the Maryland Patient Safety Center, I've been focusing on the core of our mission—patients and making care safe for them. Patients are at the center of all of our initiatives and improving quality and safety is our utmost responsibility. We need to keep patients front and center as we move toward our goal—making Maryland's healthcare the safest in the nation. This means making sure that no matter where Marylanders touch the healthcare system, they can be sure that they are receiving the right care, of the highest quality.

MPSC Welcomes New Members of the Board of Directors

At its June meeting, the MPSC Board of Directors approved five new members to the Board.

- **Peter Beilenson, MD, MPH**, Health Officer, Howard County Health Department
- **Joseph DeMattos, MA**, President, Health Facilities Association of Maryland
- **Eugene Friedman, Esq.**, SVP, First Mariner Bank and Trustee, Lifebridge Health
- **Nancy Beth Grimm, RN, Esq.**, Director, Office of Health Care Quality
- **James Rost, MD, Medical Director**, NICU and Medical Director of Patient Safety, Shady Grove Adventist Hospital

"We are honored to welcome these extraordinary individuals as members of the MPSC Board of Directors," said Chair Kathleen M. White, PhD, RN, CNAA, BC, Associate Professor, The Johns Hopkins University School of Nursing. "Their skills, talents, and passion bring a new level of diversity and fresh perspectives that will further strengthen MSPC initiatives for engaging patients and families and improving the quality and safety of care for all patients."

UPCOMING EVENTS

MPSC Patient Safety Officer (PSO) Forums MHA Headquarters

- August 5, 2010
- October 14, 2010
- December 2, 2010

MEDSAFE Conference

October 7, 2010
Baltimore, Maryland

7th Annual Maryland Patient Safety Conference

April 8, 2011

Team STEPPS™—Strengthening Teamwork and Communications

Improving teamwork and communications skills is perhaps the most important cultural change for improving patient safety. Study after study shows that communication breakdowns and poor cooperation are leading underlying causes of medical errors.

The question for healthcare organizations is how can they improve communication and create more cohesive teams?

To assist healthcare providers in the region answer this question, MPSC adopted TeamSTEPPS™ (Strategies and Tools to Enhance Performance and Patient Safety) training, developed by the Department of Defense's Patient Safety Program in collaboration with the Agency for Healthcare Research and Quality. After several disastrous crashes, the military and commercial airlines applied a "crew resource management" concept to develop effective teams that practiced frequent, open communication. Significant improvements in the safety record of the airline industry were the result of crew resource management—and TeamSTEPPS™ is now applying that successful concept to healthcare.

MPSC's program, launched in 2008, applies a train-the-trainer model. It takes users step-by-step through implementation, detailing the roadmap for creating change and shifting the organization toward a sustained culture of safety. There are three phases of TeamSTEPPS™:

- 1) **A pre-training assessment to confirm a facility's readiness to implement this program**
- 2) **Training for on-site trainers and healthcare staff**
- 3) **Implementation and sustainment**



Healthcare facilities from around the region are engaged in TeamSTEPPS™. Like many participants of the MSPC Perinatal Collaborative, Holly Greever, RN and members of the Labor and Delivery team from Anne Arundel Medical Center in Annapolis looked to TeamSTEPPS™ to help meet the aim of improving nurse and physician communication—and they are in the midst of a highly successful implementation of the program.

First, Mrs. Greever and Tina Raab, RN attended the two-day MPSC TeamSTEPPS™ Train the Trainer Session. "This was a great experience, really an immersion, in proven knowledge and tools we could use to improve our communications and teamwork skills," said Mrs. Greever. "While we have enjoyed great patient outcomes, we recognize that there is always room to do better."

After gaining the support of the Medical Center's leadership, engaging a physician champion, and visiting another hospital in Maryland that was using TeamSTEPPS™, Mrs. Greever and her team began the roll out of the program in November 2008. They began by holding four-hour training sessions for all staff involved in the labor and delivery unit—and this includes all staff, from secretaries and registration staff to nurses and anesthesiologists.

"We've made an effort to conduct collaborative training with 'mixed' groups, not just sessions for physicians, for example," said Mrs. Greever. "This is a critical part of teamwork and communication training—respecting and appreciating each other's perspectives and problem solving together."

Cultivating teamwork and communications has led Anne Arundel to employ huddles twice a day to review the status and care plan for patients, identify any issues or potential changes, and then create the team plan for that shift. Huddles can also be called any time that a team member sees something that may require a change in plan or in a circumstance where team input and awareness may be needed. These multi-disciplinary huddles—which include nurses, physicians, anesthesiologists, technicians, and others engaged in patient care on the unit—offer the staff an opportunity to be involved in the care for every patient, which helps create the ownership of "our patients" by the team.

"Huddles are now part of our cultural norm and an integral part of our care process," said Mrs. Greever. "I think we all had an 'aha' moment about the significant value of these huddles for better patient care plan, better teamwork, and ultimately enhanced quality and safety for patients."

Another technique being used at Anne Arundel is SBAR (Situation-Background-Assessment-Recommendation), which provides a framework for communication between members of the healthcare team about a patient's condition. SBAR is an easy-to-remember, concrete mechanism useful for framing any conversation, especially critical ones, requiring a clinician's immediate attention and action.

"SBAR is extremely useful for timely and comprehensive communication," said Mrs. Greever. "It has strengthened our staff communication."

There are signs that TeamSTEPPS™ is having an impact on culture and employee empowerment at Anne Arundel. One telling example is an environmental services staff member pointed out to the team that a patient's anti-pneumatic stockings had come unplugged while preparing her for a c-section. Thanks to the culture of respect and open communications, all team members, like this staff member, feel empowered to play an even more important role today in ensuring safe, high quality care is delivered to patients.

(continued on page 3)

Highlights | March 19, 2010

The 6th Annual Patient Safety Conference

More than 1,100 healthcare professionals from Maryland, Washington, D.C., Northern Virginia, and Delaware convened in Baltimore to build their patient safety knowledge base. The 21 patient safety sessions offered attendees access to national and international experts, patient and family advocates, colleagues, and others who are committed to the patient safety movement.



James Rost, MD Medical Director, Patient Safety, Shady Grove Adventist Hospital;
Chair, MPSC Neonatal Collaborative; Lead Faculty, MPSC TeamSTEPPS™ Train-the-Trainer program

“The patient is trusting us to get it right each and every time.”

Susan Sheridan, MIM, MBA,
Co-founder and President,
Consumers Advancing Patient Safety

*Maryland, I invite you to
imagine a future. . . where we can do what
is right... your courage to challenge....
the status quo . . . your realization
that one person can make a difference.*



*“It is easier to act your way into a new way of thinking
than to think yourself into a new way of acting.”*

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

Team STEPPS (continued from page 2)

“I love to say that we’re turning a team of experts into an expert team,” said Mrs. Greever.

In the fast paced world of healthcare delivery, you need to always expect the unexpected—and TeamSTEPPS™ is certainly helping to hone skills for always being prepared. “Good communications skills are essential when you face unanticipated events,” pointed out Mrs. Greever. “In a changing situation, it’s the one critical skill you bring to the team and to the patient—it helps everyone remain calm and in control, which enables superior cooperation and results.”

NOTE: The next TeamSTEPPS™ Train the Trainer session is September 15-16, 2010. For information, please see the TeamSTEPPS™ page of the Collaboratives and Learning Network section of the MPSC Web site.

MPSC Receives Funding to Extend Perinatal Initiative

Support and funding from the Maryland Department of Health and Mental Hygiene Center (DHMH) for Maternal and Child Health will help to bolster and sustain the MPSC Perinatal initiative. DHMH recently awarded \$250,000 in grant funding to MPSC for the Perinatal Learning Network. MPSC is exploring an expansion of the mother and baby portfolio by engaging physicians and patients in patient safety opportunities during the prenatal period.

MPSC Leadership and Innovation Being Recognized Nationally

The Maryland Patient Safety Center's innovative programs have recently been highlighted in national publications and at national conferences. The Maryland Hospital Hand Hygiene Campaign, being led by MPSC, was showcased in media articles and trade press journals as a unique, statewide initiative. The Campaign toolkit is also a prominent resource on the new Promotional Resources section of the Centers for Disease Control and Prevention (CDC) Hand Hygiene in Healthcare Settings website, with a direct link to the Maryland Collaborative site. Our state's Collaborative was also recognized and discussed at a webinar presentation, *Frontiers in Implementation and Measurement of Hand Hygiene Practices*, conducted by the CDC's Emergency Management and Response Clinician Outreach and Communication Activity group.

MPSC's very successful Perinatal program was also showcased at the National Patient Safety

Foundation (NPSF) Congress in May. The Collaborative poster display highlighted the tremendous program results, including reduced NICU admissions, reduced returns to the operating room and labor and delivery, and reduced maternal death.

The statewide launch of two previous pilot projects—SAFE from FALLS and Condition H—also garnered attention in leading healthcare quality and safety publications. SAFE from FALLS was featured in the May 21 edition of *HealthLeaders Quality* newsletter. The article not only examined the program, it shared the experience of the Peninsula Regional Hospital Falls Program. Look for news about the MPSC Condition H (Hospital) initiative that was featured at the MPSC Annual Conference—it will also be featured in the July/August edition of *Patient Safety and Quality Healthcare* magazine.

Wishing Dr. Minogue a Fond Farewell New Award Established in His Honor



Friends, family, and colleagues came together to honor and recognize the achievements of William Minogue, MD, FACP upon his retirement as President and

Executive Director of the Maryland Patient Safety Center. Dr. Minogue was presented with a Governor's Citation and a General Assembly Citation from the 46th Legislative District that recognized and honored the contributions made by Dr. Minogue to the "welfare of patients in Maryland" and offered "sincere gratitude for the significant contributions you have made during your 55 years of service in healthcare."

In honor of Dr. Minogue's enduring contributions and legacy of patient safety innovation and in recognition of the leadership, passion, and tireless pursuit of improving patient safety, the MPSC Board of Directors established the **Minogue Award for Patient Safety Innovation**. The **Minogue Award** will be presented annually to an organization that or individual who has made a demonstrable difference in patient safety through an innovative solution, employing the key attributes Dr. Minogue has brought to the field of patient safety, including:

- Leadership;
- Collaboration and teamwork;
- Quantifiable change;
- Spreading best practices;
- Innovation; and
- Strengthening the culture of safety.



Thank you, Dr. Minogue, from us all and best wishes to you and your family.

NEWS OF NOTE

The June 9, 2010 Prevention Action article, "Lessons from Public Health: What TB can teach us," featured the work done by MPSC Executive Director and President, Dr. Pat Chaulk, and his colleagues to combat TB in Baltimore in the 1970s and 1980s. It noted that their work resulted in a decline in the city's TB rate by 60% and its TB infection rates fell from second in the nation to twenty-eighth—it is also estimated to have saved between \$20 million and \$30 million.

"Identifying the hospitalised patient in crisis"—A consensus conference on the afferent limb of Rapid Response Systems," co-authored by MPSC's Director of Operations and Development, Inga Adams-Pizarro, appeared in *Resuscitation*, the monthly interdisciplinary medical journal recognized by The European Resuscitation Council (ERC) as its official journal.

The MPSC 2010 Directory of Solutions is now available on the MPSC website in the Publications & Tools and Education sections.

MPSC's innovative Condition H Toolkit will be available on the MPSC website this summer.

All of these resources and articles are available on the MPSC website, www.marylandpatientsafety.org.