

# MARYLAND PATIENT SAFETY CENTER

January 2023

MHCC Update



# Table of Contents

Introduction .....	2
Structure and Activities .....	3
Staff .....	4
Membership.....	4
I. State Funding.....	5
II. Administrative Summary.....	5
Re-designation of Maryland Patient Safety Center as Maryland’s Patient Safety Center	
MPSC Board Development	
Alignment of MPSC Goals with Maryland State Agencies	
Development of Partnerships	
COVID-19	
III. Patient Safety Center Activities .....	8
Patient Safety Tools Education	
Conferences	
Patient Safety Officer Forums	
MPSC Revenue Generating Consultation Services and Products	
IV. Mid-Atlantic Patient Safety Organization .....	14
V. Grants and Consulting.....	15
VI. State Funding Tracking.....	18
VII. Future Considerations .....	18
VIII. Strategic Partners .....	19

## Introduction

The Maryland Patient Safety Center (MPSC) is an independent not-for-profit organization committed to improving patient safety across all aspects of healthcare. The Center serves as a resource not only in Maryland but in the surrounding region of Washington, DC, northern Virginia, Delaware, West Virginia and eastern Pennsylvania.

MPSC's mission is simple yet profound: Keeping Maryland Healthcare safe. To accomplish this, MPSC's vision is to be a model of patient safety innovation and implementation, convening providers, patients and families across the healthcare continuum to prevent avoidable harm and provide safe and equitable healthcare for all. MPSC engages a growing number of healthcare providers from around the state through ongoing initiatives, including education and training, safety culture collaboratives, special projects, research, and near miss reporting. As a result of their participation, health care providers, working with patients and their families, discover and create new ways to deliver improved care in Maryland.

MPSC maintains a relentless pursuit of innovative solutions to eliminate harm within the healthcare community. In its seventeen-year history, MPSC, its partners and providers have seen measurable improvements. MPSC has raised awareness among health care professionals about safety strategies that dramatically transform culture. Topics continue to include leadership and innovation in clinical information technology, human factors engineering and quality and safety tools, such as Lean/Six Sigma and Root Cause Analysis. Registration was 675 for the March 2022 Annual MPSC Patient Safety Conference and 278 for the November 2022 Annual MPSC Medication Safety Conference. The March 2022 was held in person in Baltimore with appropriate infection control precautions, our first in-person conference in 2 ½ years. The November Medication Safety conference was held in person and live streamed - our first live streaming event.

Under Maryland's Total Cost of Care (TCOC) Model for healthcare, it is increasingly important that safety and quality are continuously improved across all care settings. The key stakeholders involved with MPSC include hospitals, patients, physicians, long-term care and post-acute providers, and ambulatory care providers – all groups that are critical to the success of the TCOC Model. To achieve mutual health care goals for these stakeholders, MPSC has collaborated with Maryland's key health policy agencies including MDH, MHCC, HSCRC and OHCQ to establish and achieve these goals.

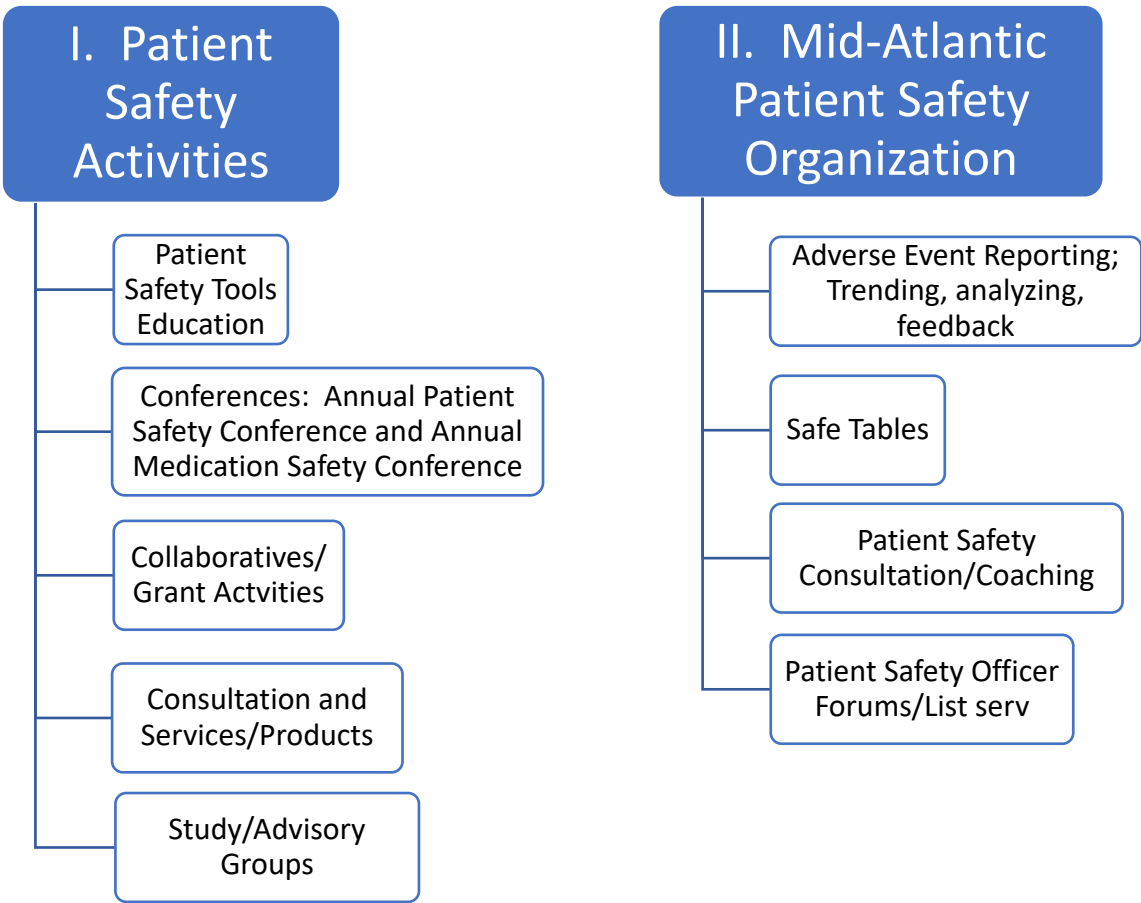
MPSC continues to serve as a trusted patient safety center to assist Maryland healthcare facilities in efforts to develop and implement patient safety strategies. MPSC conducts regular communication with patient safety officers, as well as leaders in patient and family engagement and peri- and neonatal services across the state to share best practices, resources and consultation, and coaching in order to improve safety and reduce cost and redundancy.

**This report provides the MHCC a summation of the MPSC activities from June 2022 through December 2022.**

# Structure and Activities

The MPSC conducts activities to improve patient safety and manages the federally listed Mid-Atlantic Patient Safety Organization (MAPSO). MAPSO received its current 3-year relisting from the federal Agency for Health Care Research and Quality (AHRQ) in September 2020, expiring December 9, 2023. The structure and activities of MPSC are noted below and will be described further in detail.

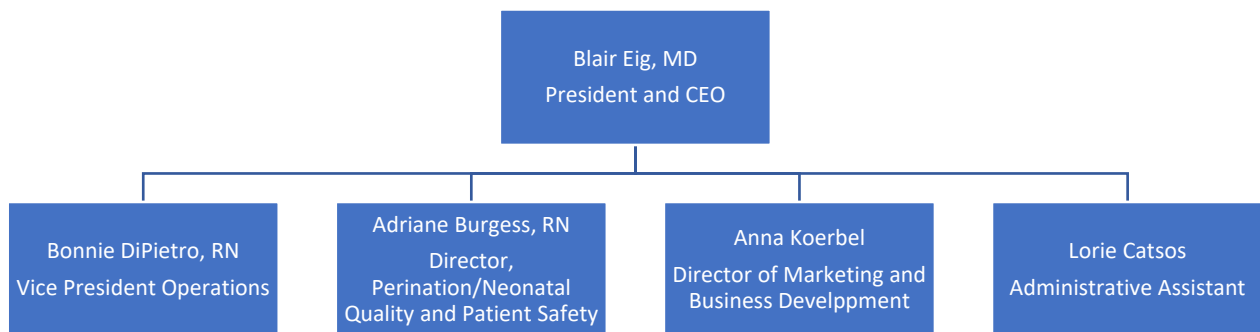
## Structure and Activities of Maryland Patient Safety Center



## Staff

MPSC employs five full time staff including the President and CEO, Vice President of Operations, Director of Perinatal and Neonatal Quality and Patient Safety, Director of Business Development and Marketing, and an Administrative Assistant. Blair Eig, MD, a board-certified pediatrician and former Chief Medical Officer for Holy Cross Health in Montgomery County, took over as President and CEO on June 1, 2020. He has maintained the Center's focus on collaborative safety projects and education, with an emphasis on healthcare equity, support for the resiliency of healthcare workers, expanding the center's activities into the outpatient setting and patient safety issues associated with the COVID-19 pandemic.

### Maryland Patient Safety Center Staff



## Membership

- Forty-nine (49) paid member facilities including 46 acute care hospitals, three rehabilitation hospitals, three long term care facilities, and one addiction recovery center
- Barriers to widespread non-hospital MPSC memberships:
  - Non-hospital budgets are limited for participation in quality and patient safety programs, so MPSC continues to seek funding to support collaboratives and programs targeting facilities, such as nursing homes during the COVID-19 pandemic.
  - Financial incentives are different for non-hospital organizations, presenting additional challenges in engaging participation.
- Patients and family participation in MPSC initiatives will continue to be actively sought. Patients and families are represented by two MPSC board members and patients and/or family members are sought to provide their perspective to our collaboratives.
- Paid membership provides member organizations with unlimited staff participation at education sessions and conferences free of charge or at a reduced rate (Six Sigma and Lean for Healthcare).
- Membership fees currently provide a significant portion of MPSC's annual revenue, supporting the educational programs and conferences.

## I. State Funding

Until the past year, the MPSC was funded through the Health Services Cost Review Commission, membership fees and program sales. Due to the discontinuation of HSCRC funding in FY2023, state funding was sought through legislative action this past session. A funding bill was cross-filed in the Maryland House and Senate, and with support from many state legislators, state healthcare organizations, the Maryland Hospital Association and the MHCC, the legislation was passed. In addition, the governor added this funding to the FY23 supplemental state budget, assuring that the funding started in FY23 and would continue annually. This funding guarantees that MPSC will have the resources necessary to carry out its mission of keeping Maryland healthcare safe going forward. For information on how this state funding is being used during the current fiscal year, please see section VI.

## II. Administrative Summary, June 2022 through December 2022

### Re-designation of the Maryland Patient Safety Center as Maryland's Patient Safety Center

MPSC received a 5-year re-designation from the Maryland Health Care Commission in April 2020. As part of this re-designation and the subsequent funding legislation, MPSC provides a written report twice a year to MHCC to update the commission on its activities. In addition, a MHCC commissioner, Marcia Boyle, joined the MPSC board in September 2020.

### MPSC Board Development

The MPSC board provides a broad representation from Maryland healthcare, government and community including two members of the State legislature and a commissioner from the MHCC. One of the major activities for the MPSC board is the ongoing review and update of the center's strategic plan and its Mission, Vision and Goals for the next 5 years.

### Alignment of MPSC Goals with Maryland State Agencies

MPSC continues to work closely with Maryland State Agencies – MDH, MHCC, HSCRC and OHCQ – to align its activities and goals with the state's. This gained increased urgency during the COVID-19 pandemic. Elsewhere in this report is provided a more extensive discussion of the major MPSC initiatives that have been involved in the pandemic response:

- Caring for the Caregiver – In collaboration with the Armstrong Institute for Patient Safety and Quality at Johns Hopkins, MPSC coordinates a national program of support for the resiliency of health care workers in all health care settings.
- Health Equity – In collaboration with the Maryland Hospital Association and Dr. Nicole Rochester, MPSC created a series of seminars for Maryland hospitals discussing racial bias in healthcare and COVID-19 vaccine hesitancy in communities of color. Since May of 2021, we have been working with an advisory group of local experts on an initiative to combat racial disparities in maternity care. This ***B.I.R.T.H. Equity Maryland*** project delivers webinars, point of care tools and a library of resources to non-obstetric providers and patients alike on racial bias in healthcare and how to recognize and treat the complications of pregnancy in a timely fashion. The webinars kicked off the pilot group phase of the project in May 2022 and with commitment from each hospital CEO in Maryland, the program will spread throughout all Emergency Departments in the state over the next three years.

In addition to these collaboratives, MPSC is involved in many other statewide healthcare issues through consultation, education and/or collaboratives. These include:

- Opioid education
- Maternal healthcare improvement
- Patient safety in long term care (including assisted living)
- Diagnostic errors

## Development of Partnerships

With limited MPSC resources, developing partnerships has been key to expanding key products. Our longest standing partnership, the *Caring for the Caregiver: Implementing RISE* program with the Johns Hopkins Armstrong Institute for Patient Safety and Quality, has been extremely successful with 56 contracts sold nationally and internationally — bringing together 96 hospitals, five provider groups, three veterinary groups, one State Department of Public Health, and one School of Nursing in our *Caring for the Caregiver Partner Network*. In addition, the COVID-19 pandemic has shone a new light on the importance of healthcare provider wellbeing.

While state funding and membership dues are key financial resources for the MPSC, contracts from these partnerships also bring important revenue to MPSC. We continue to develop our partnership with the MedStar Institute for Quality and Safety (MIQS) for the Patient and Family Advisory Council for Quality (PFACQS) program as it recognizes the importance of including patients and families in quality improvement and patient safety projects to improve outcomes. We know that patients and families bring a unique firsthand perspective of performance gaps within our healthcare institutions.

MPSC's close partnership with the Maryland Healthcare Education Institute allowed us to combine knowledge, content, and resources in order to produce the *Workforce Retention and Resilience Toolkit* in response to the Maryland Hospital Association's recent report on the *2022 State of Maryland's Healthcare Workforce*. This complimentary toolkit provides an easy-to-access library of resources to healthcare organizations across the state and includes videos, podcasts, e-learning courses, and printable materials in the following categories:

- Relationship Building
- Leading for Retention
- Improving Workplace Culture
- Fostering Workplace Support

Aligning with state agencies is critical to the mission and vision of MPSC and playing a pivotal role in addressing statewide priority concerns is of the utmost importance to the organization. Recognizing the need to address workplace violence in healthcare settings in Maryland, Senate Bill 700 required the Secretary of Health to establish the Prevent Workplace Violence in Health Care Settings Public Awareness Campaign Workgroup. The workgroup, sponsored by the Maryland Health Care Commission, was asked to develop a public awareness campaign on preventing workplace violence in health care settings and to create a plan for implementing the campaign. MPSC staff served as leads on the workgroup and a final report was submitted to the legislature by MHCC on December 1, 2022. MPSC will work alongside MHA and MHCC to secure funding for the campaign. Suggested funding was \$2 million and once approved, MPSC hopes to play an important role in development and oversight of the campaign.

## COVID-19

The advent of COVID-19 changed MPSC priorities. In addition to the grant funded collaboratives mentioned later, we have evolved our learning modalities and now provide remote E-learning and other capabilities to bring education to caregivers who may not be able to leave work or to congregate on site. We developed several COVID-19 related activities:

- Frequent patient safety newsletters including resources
- Free of charge Caring for the Caregiver Manual to allow self-guided interventions for caregivers in healthcare (130+ copies distributed throughout the world)
- Two webinars dedicated to Patient and Family Engagement with continuing education for Patient Experience professionals:
  - "Patient and Family Engagement During COVID-19"
  - "Exploring the Role of Patient and Family Advisory Councils (PFAC) in a COVID-Shaped World"

- Recordings of these webinars remain available on our website at no cost.
- E-learning modules on opioids, Appreciative Inquiry, Data Visualization, and Performance Improvement
- Web-based seminars for Root Cause Analysis, Lean, Six Sigma and other safety/quality tools
- Increase in the use of the Patient Safety Officer Listserv, with questions posted to the data base daily on such topics as COVID testing for labor and delivery and policy issues such as visitation during COVID.
- MPSC completed a four-part Vaccine Hesitancy in Communities of Color Series. Targeting hospitals, long-term care organizations and all healthcare providers, we reached over 700 attendees to present information on the root causes of hesitancy among Black and Brown communities and strategies to increase vaccine acceptance. Recordings of these webinars remain available on our website at no cost.

### III. Patient Safety Center Activities

#### MPSC Patient Safety Tools Education

- **The demands of COVID-19 continued to affect the number of registrants to the educational offerings this past year, but a slight increase was noted with 250 registrants this past year.**
- Classes scheduled between June 2022 and December 2022 have returned to an in person or hybrid format. These include:
  - Root Cause Analysis (RCA)
  - Failure Mode and Effects Analysis
  - Return on Investment for Quality Improvement
  - TeamSTEPPS for Diagnostic Improvement
  - Human Factors
  - Lean for Healthcare
  - Identification and Assessment of Elder Abuse
- Appreciative Inquiry and a Performance Improvement series, including Change Management and Process Maps, are offered in an enduring education format - accessible to registrants 24/7 to take when convenient.
- A five module Data Visualization course is also offered as an e-learning program available 24/7 with 8.0 continuing education credits for Public Health professionals.
- Opioid Awareness: What you need to know (for consumers) previously presented in community settings is available via e-Learning.
- Through a partnership with RxALI MD, MPSC also offers the RALI Cares Virtual Experience for free on our website.

## MPSC Conferences

### MPSC Annual Patient Safety Conference: I Thought We Fixed That: Chronic Issues in Patient Safety

- The MPSC 2022 Annual Patient Safety Conference was provided in-person on March 4, 2022 .
- 675 registered for the conference
- Participants from across healthcare attended - acute care hospitals, long term care, rehabilitation hospitals, ambulatory surgery centers, state agencies and quality improvement organizations.
- A panel of internationally known patient safety experts provided the opening keynote discussion and laid the foundation for the day by discussing where we have been and how so much more needs to be done for patient safety.
- Other presentations throughout the day equipped participants with new strategies to address age old patient safety topics that continue to be issues for healthcare.
- Five (5.0) continuing education credits for seven clinical disciplines were offered.

### Medication Safety Conference:

The 2022 annual medication safety conference was held in person and live streamed on November 3, 2022. The topic was **Improving Medication Safety: Focusing on System Vulnerabilities and Building a Just Culture**

- 311 registered for the conference
- Attendees included medication safety officers, pharmacists, quality improvement professionals, physicians and other disciplines.
- The keynote address was given by Larry Smith, JD who provided an overview on the risk vulnerabilities in healthcare systems
- Five and a half (5.5) continuing education credits were awarded for five disciplines.

## Initiatives

### Improving Diagnosis

- MPSC participated as an expert consultant to the MedStar Quality Improvement Program on an AHRQ grant to develop a TeamSTEPPS® module to improve diagnosis in ambulatory settings. The work was submitted to AHRQ , was piloted across the country and is now available on the AHRQ website for dissemination. MPSC offered the course in person in the fall for the first time nationally.
- MPSC remains active with the Society for Improvement in Diagnostic Medicine.

### Health Equity

- **COVID-19 Vaccine Acceptance Among Communities of Color**  
MPSC, in partnership with the Maryland Hospital Association, offered a complimentary series of webinars featuring nationally recognized local pediatrician and expert in patient advocacy and healthcare inequities, Nicole Rochester, MD. Dr.

Rochester focused on addressing the systemic racism and the healthcare disparities that have led to a current state of medical mistrust among minority communities and a hesitancy to accept the COVID-19 vaccine. She presented thoughtful and practical methods for building vaccine acceptance among the Black and Brown communities -- both in the public and among healthcare providers -- and introduced local healthcare-community partnerships as successful models for improvements. The series received over 700 unique registrants and the recordings of all four sessions remain available for viewing on the MPSC website along with helpful resource guides.

- **B.I.R.T.H. Equity Maryland: Breaking Inequality Reimagining Transformative Healthcare**

With the leadership and support of an advisory group comprised of local experts in the fields of maternal health, emergency medicine, family practice, racial bias and health care inequities, MPSC, in partnership with the Maryland Hospital Association, has created educational tools to address the substantial disparity in maternal morbidity rate for black mothers in Maryland - a central focus of the Maryland Statewide Integrated Health Improvement Strategy, or SIHIS. A gap has been identified relative to racial equity in maternal health training for non-obstetric providers and patients. The work of the advisory group began on May 6, 2021 and the pilot sites started to implement the work on May 9, 2022. MPSC received a grant from the Baltimore-based France-Merrick Foundation to fund implementation at five pilot sites:

- University of Maryland Baltimore Washington Medical Center Emergency Department
- Mercy Medical Center Emergency Department
- Baltimore Health Start
- Comprehensive Women's Health Primary Care
- University of Maryland BWMG Hanover Primary Care

In January 2023 we will kick off the next cohort of sites and plan to begin statewide implementation of the program by March of 2023 with the goal of providing education to all Emergency Departments in the state by the end of 2024.

Additionally, we have expanded the patient education resources offered through the program. We have dedicated a portion of our MPSC website to house patient education resources on urgent obstetric warning signs and, in consultation with Dacia Jones MS, RN, we created 4 educational Tik Tok (which are also housed on YouTube) for easy viewing for those who may otherwise not have access to Tik Tok. The resources can be viewed on this website-

[B.I.R.T.H. Equity Maryland Patient Resources – MPSC \(marylandpatientsafety.org\)](https://www.marylandpatientsafety.org)

## MPSC Statewide Patient Safety Officer Forums

- All hospitals are required by the Joint Commission to designate a patient safety officer.
- MPSC convened three virtual 1-hour PSO Forums between 2022 and December 2022. All were held via Zoom and attended by patient safety officers, risk managers, quality improvement staff at hospitals and long-term care facilities.
- The PSO Listserv has continued to be utilized weekly, and at times daily to connect the above individuals via e-mail for sharing of policies, procedures and best practices; over 150 individuals participate in the listserv.
- Networking among patient safety officers is a result of the forums and coaching.
- The forums and Listserv are open to all who are interested in patient safety.
- MPSC has continued to provide coaching and consultation to individuals in the group when requested.

## MPSC Revenue Generating Consultation Services and Products

### Patient Safety Education and Certification

This program utilizes collegial collaboration, classroom instruction and practical application methodology, facilitated by a consulting team with expertise in patient safety, performance improvement and regulatory requirements. Goals are to improve the organization's culture of safety. The training is offered in person or virtually and may be in a hybrid format in the future.

### Caring for the Caregiver: Implementing RISE

Now a six-year long partnership with the Johns Hopkins Armstrong Institute for Patient Safety and Quality, MPSC handles all marketing, contracts, administrative work, and sustainability for this program. Currently MPSC has contracted with 56 hospitals and/or healthcare systems, creating the *CFC/RISE Partner Network*—a group of 96 hospitals, five provider groups, three veterinary groups, one State Department of Public Health, and one School of Nursing. This group provides shared and experiential learning opportunities, along with inspirational ideas and encouragement.



2. **Online Learning** - MPSC and Johns Hopkins University have executed a contract with Siemens Healthineers to develop online learning modules for *Caring for the Caregiver: Implementing RISE*. Development is underway and when complete will transition the two days of live training into 10 online learning modules available for purchase through Siemens. This will not only allow for a lower cost option requiring significantly less resource allocation but will also market the *Caring for the Caregiver* program to hundreds of thousands of Siemens users worldwide. Projected release in the Spring of 2023.
3. **HRSA Grant on Healthcare Worker Wellbeing** - MPSC has a leading role in a recent grant awarded to Johns Hopkins Medicine for RISE training. MPSC will oversee training at two rural hospitals in Maryland in 2022 and at participating Community Based Organizations in the two years to follow.

### **Patient and Family Advisory Council on Quality and Safety (PFACQS®) Update with seminar**

The PFACQS® Program, in collaboration with the Center for Engaging Patients as Partners at the MedStar Institute for Quality and Safety, has been designed to help organizations take their patient and family engagement strategies to the next level with a focus on improving outcomes, reducing costs, promoting transparency and reinforcing staff joy and meaning in healthcare work. While the COVID-19 pandemic has effected utilization and expansion of Advisory Councils, we expect that the PFACQS® program will effect change in the following areas:

- Patient-provider partnerships
- Addressing racial disparities in healthcare through a diverse and inclusive PFAC
- Patient and family engagement during the COVID era and utilizing patient and family advisors to assist with post-COVID transformation of care (i.e. telemedicine, delayed diagnosis with reluctance to seek care, etc.)

### **Online learning**

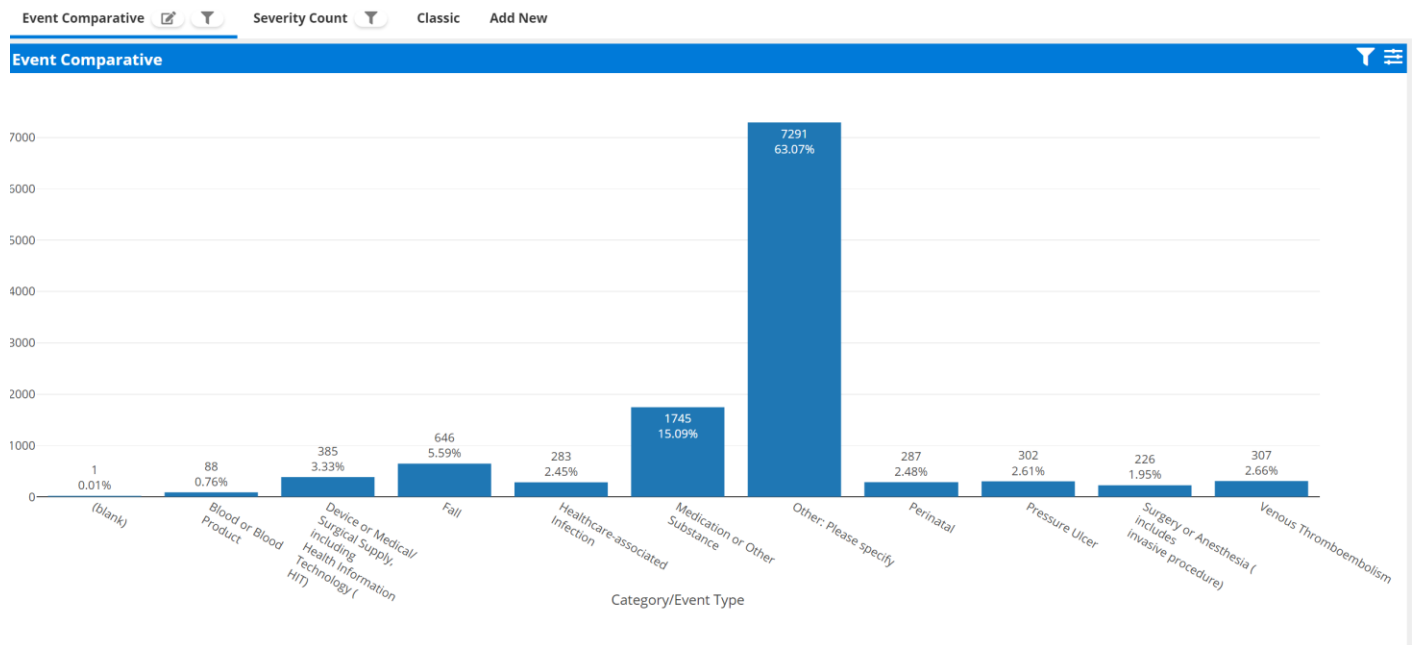
MPSC currently offers four e-learning courses for healthcare professionals:

- **Data Visualization: From Spreadsheet to Story**, a five module Step-by-Step Guide to Communicating Health Data that offers a hybrid learning experience for healthcare professionals desiring to bring data to life through engaging and meaningful messages.
- **Performance Improvement: Change Management**, helps hospitals and practices achieve their organizational goals with minimal pushback or resistance to adopting changes to processes, policies, technology, or even the people that provide the care.
- **Performance Improvement: Process Maps**, a simple, but powerful and effective tool that is widely leveraged today in Lean Six Sigma to provide insight into a process.
- **Appreciative Inquiry**, a self-guided, one-hour class providing a foundational knowledge on AI, introducing the methodology as a tool to enhance the culture of patient safety at the unit and organizational levels, and demonstrate the principles of AI and its application.

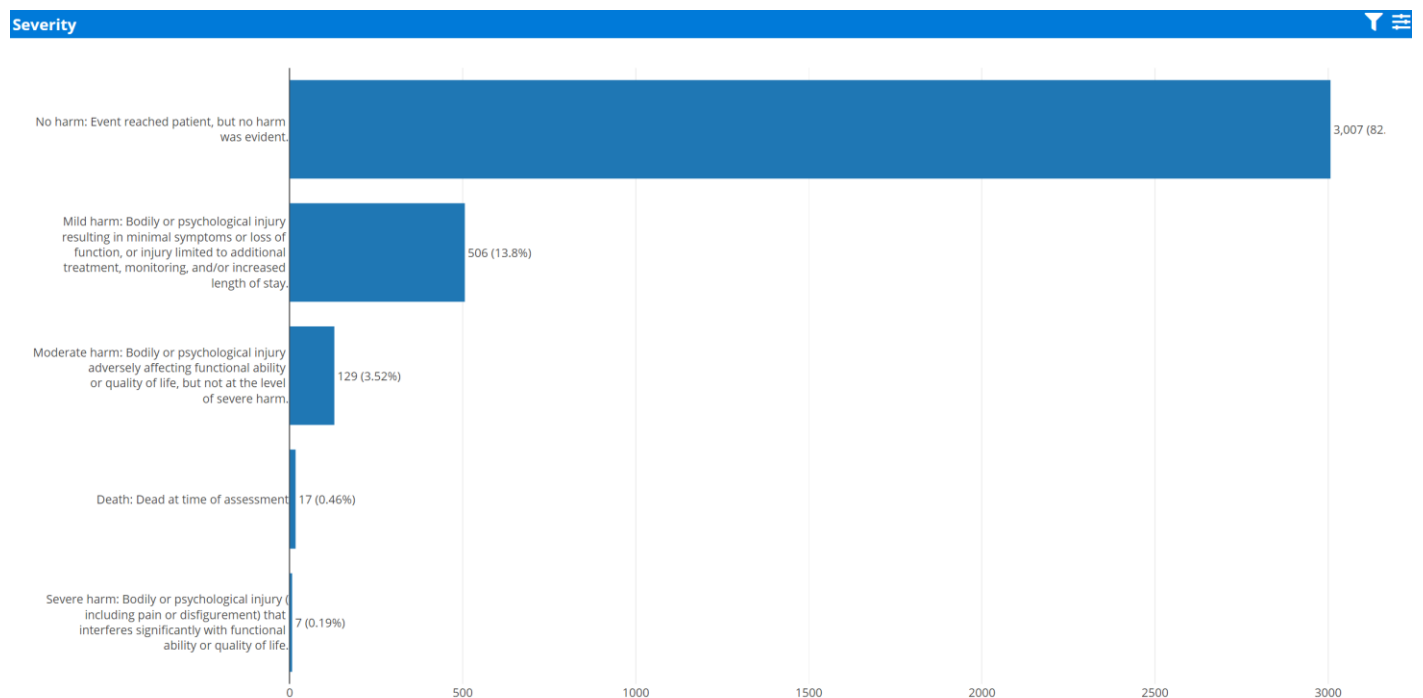
## IV. Mid-Atlantic Patient Safety Organization

- **Mid-Atlantic PSO:** The PSO currently has 42 members. Below is a breakdown of the safety event trends between June 2022 and December 2022.
- Safe Tables continue to be highly valued by the Mid-Atlantic PSO members. One Safe Table was convened virtually on October 6, 2022 on Workplace Violence. Twenty -nine were in attendance.
- In April 2023, in support of statewide initiatives to improve maternal health, we will offer a safe table focused on severe maternal morbidity, along with an educational session on severe maternal morbidity and mortality.

### Mid-Atlantic PSO Adverse Events by Type June 1, 2022 to December 31, 2022



## Mid-Atlantic PSO Adverse Events by Severity June 1, 2022 to December 31, 2022



## V. Grants and Consulting

### Clean Collaborative Phase III

The COVID-19 pandemic highlighted the importance of facility surface cleanliness and infection prevention measures in our state's long-term care facilities. With designated funding approved through hospital rates by HSCRC for ten LTCs, MPSC began an 18-month collaborative with those facilities to reduce infection-related ED visits and hospital admissions, and COVID, MRSA and C- Difficile rates. Data collection ended in March 2022 and we are in the process of an in-depth analysis, comparing self-reported infection data with Medicare claims data provided to us from CRISP. We do not expect to have all the CRISP data until December 2022 and will provide a full final analysis and report of the work in early 2023. Preliminary data is illustrated below, with Relative Light Units showing a measure of improved surface cleanliness in the facilities and a reduction of ED visits and hospital admissions for MRSA, C-Difficile, Wound infections and COVID-19. Two of the ten facilities withdrew from the collaborative before it was completed, and one facility did not submit infection data in April 2021. The goals of the Clean Collaborative Phase III were as follows:

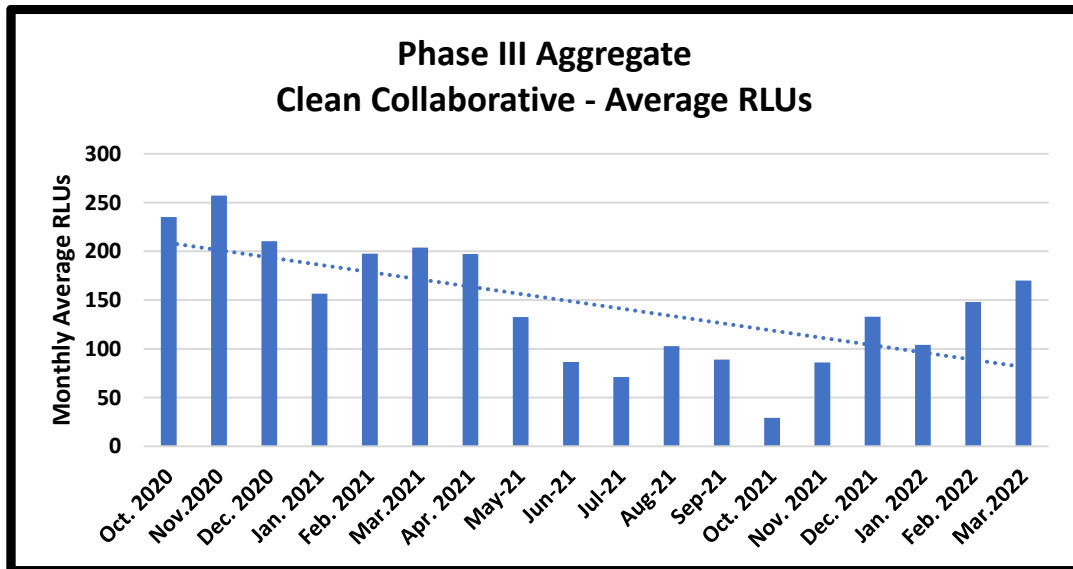
1. Decrease the average Relative Light Units on specified surfaces in participating facilities

2. Decrease rate of facility acquired COVID-19, MRSA and C-Difficile in participating facilities
3. Decrease ED visits for infection related diagnoses in participating facilities
4. Decrease ED hospital admissions for diagnoses in participating facilities

The following facilities participated in Phase III:

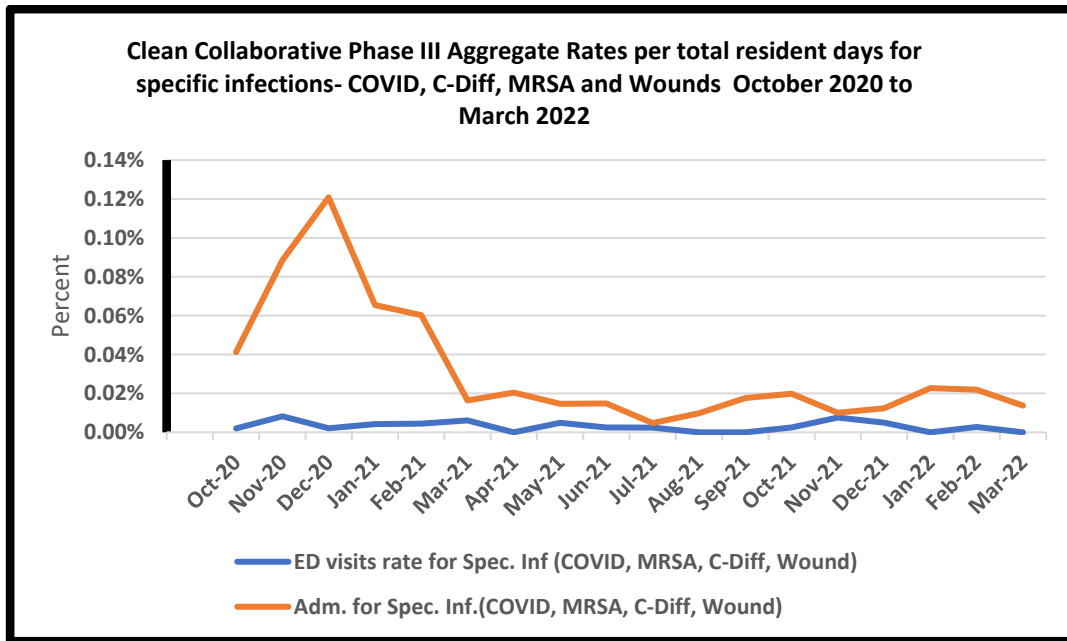
Facility	County
Orchard Hill	Baltimore County
Keswick	Baltimore City
Egle	Alleghany County
SagePoint	Charles County
Charlotte Hall (Veterans)	St. Mary's County
Lorien Columbia	Howard County
Clinton	Prince George's County
Birch Manor	Carroll County
Salisbury Genesis	Wicomico County
Hebrew Home	Montgomery County

Clean Collaborative Phase III- Average RLUs by month



Month	10.20	11.20	12.20	1.21	2.21	3.21	4.21	5.21	6.21	7.21	8.21	9.21	10.21	11.21	12.21	1.21	2.21	3.21
N	9	10	10	9	10	10	10	8	8	9	9	9	7	8	8	8	7	8

### Clean Collaborative Phase III- Aggregate Infection data by month



Month	10.20	11.20	12.20	1.21	2.21	3.21	4.21	5.21	6.21	7.21	8.21	9.21	10.21	11.21	12.21	1.21	2.21	3.21	
N	9	9	9	9	9	9	7	7	7	7	7	7	7	7	7	7	7	7	6

- MD MOM:** MPSC is a partner in the five-year \$10.3 million HRSA grant to the Johns Hopkins Bloomberg School of Public Health for the MD Maternal Health Innovation Program. MPSC is a sub-awardee and is facilitating implicit/unconscious bias training, quality improvement training and training in substance use disorder in pregnancy and consultation to birthing hospitals.
- Healthcare Worker Wellbeing:** MPSC is a partner in a \$2.7 million HRSA grant to Johns Hopkins Medicine to facilitate widespread R.I.S.E (Resilience in Stressful Events) training in multiple sites of care throughout Maryland.
- B.I.R.T.H. Equity Maryland:** MPSC was awarded a grant from Baltimore-based France-Merrick Foundation to fund the first round of pilot sites in non-obstetric provider education on Bias in Maternal Healthcare
- Maryland Maternal Mortality Review Team:** MPSC was awarded \$175,000 per year for two years to serve as the administrative support for the team. MPSC is working with Epic to provide case abstractors with review-only access to electronic health records at Epic facilities. At this writing UMMS, Meritus, Kaiser, and Luminis have provided agreement to access Epic for review. MPSC was required to obtain and successfully completed an IT security audit and a Data Use Agreement has been signed so that cases can be shared from Vital Statistics. We have begun to review and MMRT meetings are to begin February.

- Maternal Health:** We have submitted for a grant through the Maryland Department of Health for the Maryland Maternal Mortality Review Program—Work Option 1 to Convene a Maternal Mortality Summit. We also submitted a grant in partnership with the UMSON to the Maryland Department of Health for the Maryland Maternal Mortality Review Program—Preventing Maternal Mortality Through Community Collaborations. Through this grant we hope to provide education on trauma informed obstetric care to birth workers throughout Maryland. Additionally, we have created a Perinatal Safety Webinar Series on foundational topics in perinatal quality and patient safety including perinatal safe staffing standards, medication safety in perinatal settings, fetal monitoring, best practices in perinatal documentation, and teamwork and communication in labor and delivery. The series will run once monthly from February to June 2023.

## VI. State Funding Tracking

As noted above, legislation passed last session provides funding of \$1M each year for MPSC activities starting in FY23. MPSC has established tracking of the use of this funding as both a good business practice and in compliance with the requirements of MPSC’s agreement with MHCC concerning the funding. MPSC received the initial transfer of a portion of the funds late this calendar year, so that as of this report it is still very early in the development of this process. As of December 31, 2022, the following has been spent:

BIRTH Equity Program	\$ 93,185
Administration	\$ 88,764
Adverse Event Reporting	\$ 35,633
<u>Other expenses</u>	<u>\$ 26,879</u>
Total	\$244,461

It should be noted that a larger portion of the state funding is planned to be spent on additional programs in the second half of FY23, including additional patient safety education programming, a patient safety collaborative in assisted living, expansion of the Caring for the Caregiver program to include modules on workplace violence and health equity, and a new Perinatal Safety webinar series. MPSC will continue to provide the state funding tracking data to MHCC through these semiannual updates.

## VII. Future Considerations

- Improving care transitions
- Patient Safety Collaborative in Assisted Living
- Antibiotic Stewardship in Primary Care
- Telemedicine safety

- Clean Collaborative on soft surfaces in LTC
- Statewide disclosure model, such as CANDOR
- Addressing racial disparities in healthcare through programmatic peer support
- Administer and analyze Safety Attitudes Questionnaire for member hospitals
- Perinatal Quality and Safety Consultation
- Perinatal Safety Conference

## VIII. Strategic Partners

- **Qlarant** – Maryland QIO
- **Alliance for Innovation in Maternal Health** - National alliance promoting maternal and infant health
- **Health Facilities Association of Maryland** - A leader and advocate for Maryland’s long-term care provider community
- **LifeSpan Network** – The largest senior care provider association in the Mid-Atlantic region
- **Maryland Healthcare Education Institute** – The educational affiliate of the Maryland Hospital Association
- **Maryland Hospital Association** - The advocate for Maryland's hospitals, health systems, communities, and patients before legislative and regulatory bodies
- **MedChi** - Statewide professional association for licensed physicians
- **CRISP** - Regional health information exchange (HIE) serving Maryland and the District of Columbia
- **Society to Improve Diagnosis in Medicine** - National non-profit that catalyzes and leads change to improve diagnosis and eliminate harm
- **Maryland Ambulatory Surgical Association** - The state membership association that represents ambulatory surgery centers (ASCs) and provides advocacy and resources to assist ASCs in delivering high quality, cost-effective ambulatory surgery to the patients they serve
- **Johns Hopkins Medicine & The Armstrong Institute for Patient Safety and Quality** – The patient safety center within Johns Hopkins Medicine
- **MedStar Health & the MedStar Institute for Quality and Safety**
- **State entities** - HSCRC, MHCC, MDH, OHCQ
- **Centers for Disease Control and Prevention**
- **Clemson University**
- **Epic Systems Corporation**
- **Siemens Healthineers**
- **Readyworks Health, Inc.**