

# Organizational Update

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## Prince George's County Board of Health

*October 26, 2021*



- UM Capital Region Health: Update
  - New Hospital Opening and Throughput
  - Community Health Programs
  - Patient Quality
  - Service Excellence Initiatives
  - COVID-19 Response





## New Government Affairs Lead

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Bradford (Brad) L. Seamon has joined the UMMS External Affairs team as Vice President, Government Affairs, Prince George's County. In this capacity, Brad oversees government relations and public affairs in Prince George's County and is based at UM Capital Region Health. In addition to government and public affairs, he also works with Corporate Supply Chain on our strategy to expand and grow UMMS' Minority Business Program.

Brad Seamon, Vice President, Government Affairs, Prince George's County



## UM Capital – A couple of highlights since Largo opening

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- First Atrial Fibrillation Ablation performed in Southern Maryland
- Dr. Clarence Findley – Prince Georgian coming back to care for the Community
- Lung Tumor Board initiated at UM Capital
- Breast cases being performed at Laurel and Bowie



## Dr. Findley – Cardiac Interventionist/Structural Heart

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- Originally from Prince George's County; graduate of Eleanor Roosevelt High School
- Medical School – Duke University
- Cardiovascular Fellow – Stanford University
- Dr. Findley will bring TAVR/structural heart expertise to HVI and service high-risk interventions
- Start date: October 18<sup>th</sup>







# OCTOBER IS BREAST CANCER AWARENESS MONTH

## Prevention and early detection are key!

- Get mammograms annually starting at age 40  
*Women with certain risk factors may need to begin screening earlier*
- Know your family history and your risk
- Avoid alcohol and smoking
- Keep a healthy weight and exercise regularly

*"My practice is all about  
caring for the whole patient"*



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*Katerina Tsiapali, MD, FACS  
Surgeon and Director, Breast Health Program*

**For More Information, Call Our Breast Center @ 301-809-2013**

# New Hospital Opening and Throughput

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Dr. Vanzetta James, Senior Vice President & Chief Nursing Officer





## Increased Volumes

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Since the opening of the UM Capital Region Medical Center in Largo, we have experienced a **30% increase in emergency department volumes**. We have made adjustments to ensure that patients are being seen as quickly as possible without any sacrifice in the quality of care.





## The 15 States with the Longest ER Wait Times

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### #4 – Maryland

- Median time waiting for inpatient room (admitted patients): 152 minutes
- Median time in the emergency dept. (discharged patients): 210 minutes
- Percentage of patients leaving before being seen: 3%
- Emergency department visits per 1k residents: 392

### #1 – District of Columbia

- Median time waiting for inpatient room (admitted patients): 286 minutes
- Median time in the emergency dept. (discharged patients): 236 minutes
- Percentage of patients leaving before being seen: 3%
- Emergency department visits per 1k residents: 698



# Nurse shortage one of many contributing factors to long ER wait times in DC area

By Ayesha Khan | Published 11 hours ago | News | FOX 5 DC



**Nurse shortages impacting emergency rooms across the nation**

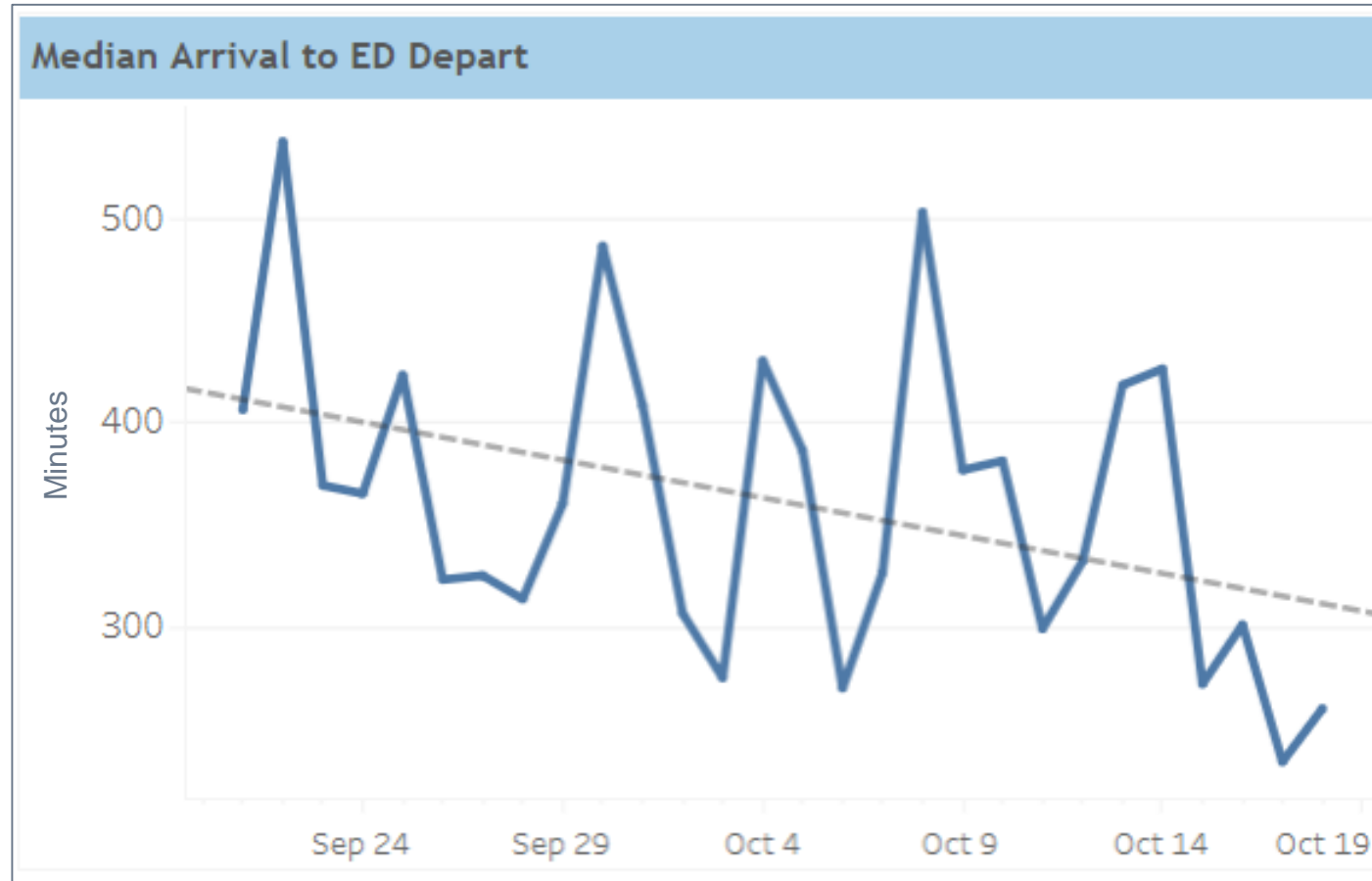
Nurse shortages have impacted hospitals across the U.S., even prior to COVID-19.

**ROCKVILLE, Md. (FOX 5 D.C.)** - Nurse shortages have impacted hospitals across the U.S., even prior to COVID-19, and many medical systems within the D.C region are certainly not immune to that reality.

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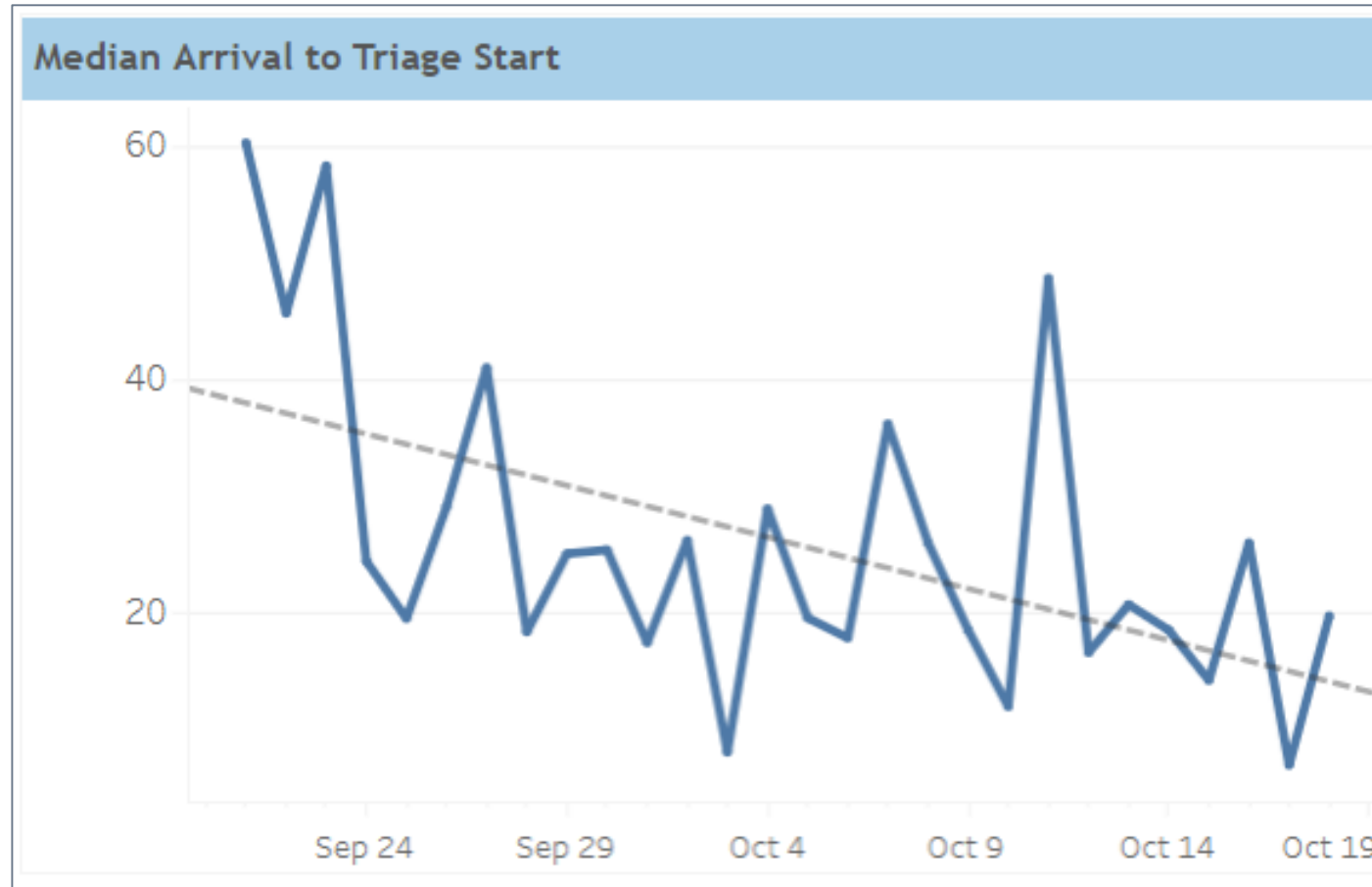


- Initiated new patient flow pathways to expedite patient movement in the ED
- Developed a throughput surge process to address high volumes and facilitate discharges
- Increased inpatient and observation capacity in various areas throughout our facility
- Analyzing other properties in Largo for our residency and Medical Group practices
- Improved turnaround of imaging and lab allow for more rapid diagnosis and improved flow
- Optimization of our care delivery model
  - Streamline documentation and practice
  - Care delivery model of team nursing
- Incorporating the use of technology in our ED for triaging



### September 21-October 19

- Median time from ED arrival to depart time for discharged patients
- This time **decreased over 140 minutes** during the 30-day period from **6 hours and 42 minutes** to **4 hours and 20 minutes**



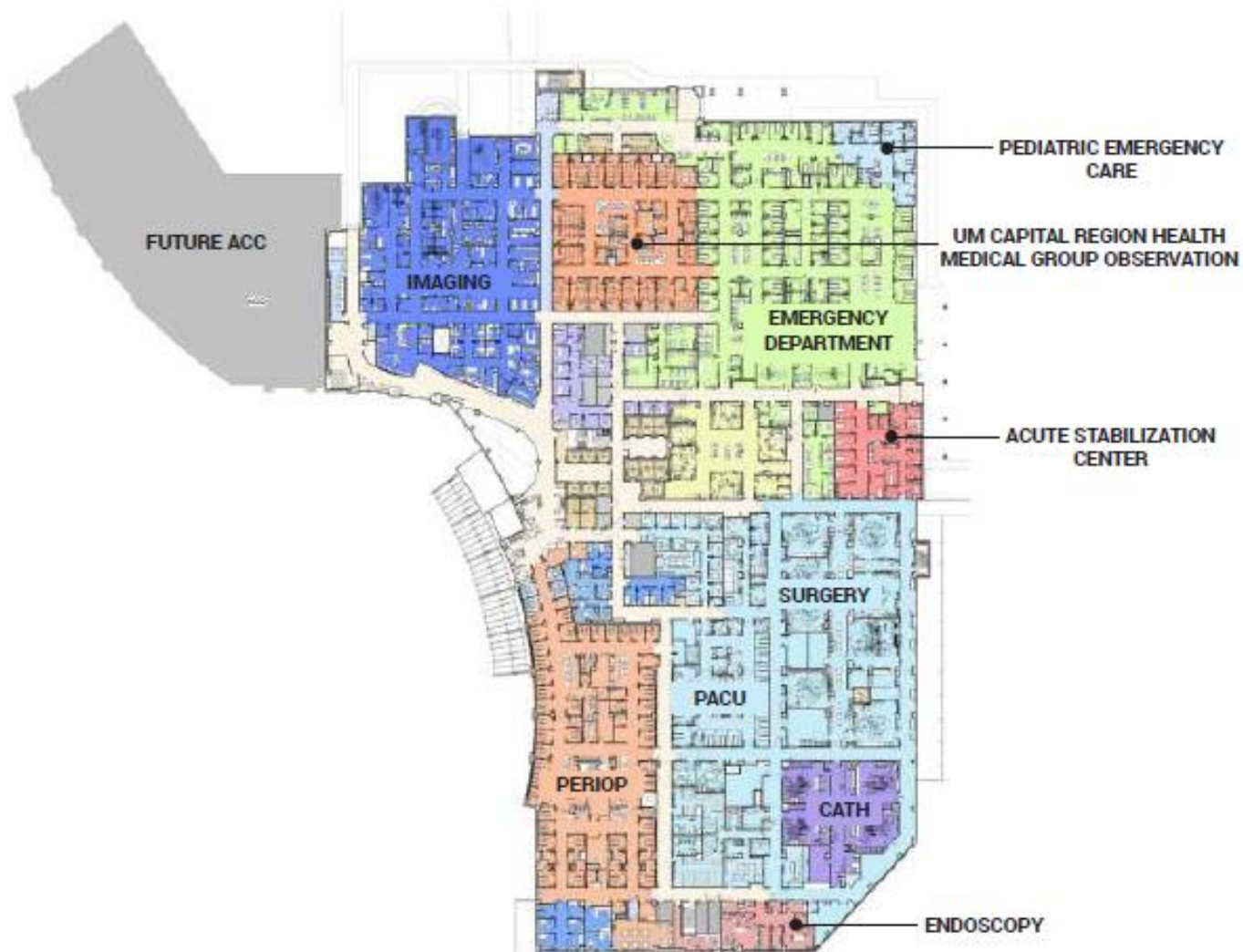
### September 21-October 19

- Median time from ED arrival to start of triage
- This time **decreased 40 minutes** during the 30-day period from **60 minutes** to **20 minutes**



## Expanding Space

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## Elements of Level II Trauma Centers

- 24-hour immediate coverage by Trauma and Emergency General surgeons, as well as coverage by the specialties of orthopedic surgery, neurosurgery, anesthesiology, emergency medicine, radiology and critical care.
- Injury prevention and Outreach coordinator provide courses to the community on injury prevention and awareness
- Violence intervention program works with survivors of injury to help reduce violence and criminal recidivism
  - Counseling and resource support
  - Traumatic brain injury support
- Trauma prevention and continuing education programs for staff and providers



- A primary stroke designation center with national recognition by the American Heart Association and the American Stroke Association
- Recognized nationally for the Get with the Guidelines-Stroke Gold Plus; Target Stroke Elite Honor Roll, Target type 2 Diabetes Honor Roll award
- Recognized by the Joint Commission for our education to the community about stroke care and our partnership with our first responders

# Community Health Programs: Disease Prevention

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Dr. Stacey Little, Vice President, Community & Population Health

## CDC Diabetes Prevention Program

- 2 Groups Exceeding CDC Performance Measures
- 3<sup>rd</sup> Group beginning November 2021
- UM Capital is in *Pending Recognition* status



## Mental Health First Aid

- National Evidence-based Intervention
- Provide training for Adult and Youth MHFA
- Provide trainings free of charge to the Community



## Dine Learn and Move

- Exercise, Diet and Nutrition Program (in-person to virtual)
- Collaboration with PGCO Parks and Recreation and PGCO HD





## Mobile Health Unit: Mama Baby Bus

### Mama and Baby Mobile Health

- Supportive Pregnancy Care (Group Sessions)
- Well-Women Exams & Education
- Pregnancy Testing
- Pregnancy Care Education
- Clinical Breast Exams
- Maternal & Child Health Education
- Care Coordination and Social Support Services
- Assistance with MD Medicaid Emergent and Non Emergent Applications







# COVID Mobile Community Vaccine

## Ongoing Mobile Sites (April 2021 – Present)

Casa de Maryland, Hyattsville MD Tuesday-Weekly

Riverdale Station, Riverdale MD Saturday-Biweekly

Creative Suitland, Suitland MD Sunday-Biweekly

Milagros de Jesus Church Oxon Hill MD Wednesday-Biweekly

## Short-Term Mobile Sites


PGCO Barbershop Site (Dr. Stephen Thomas) November 2021

Golds Gym Ritchie Station, Capital Heights MD November 2021

St. Paul Towne Center/Athletic Republic District Heights MD November 2021

Crossover Church Hyattsville MD September 2021

Bob Hall Upper Marlboro MD August 2021



# GET VACCINATED!


UM Capital Region Health has partnered with various community-based organizations to offer **FREE** COVID-19 vaccines.

**Pfizer Vaccines**  
Ages 12 and Over  
No Appointment Necessary

**Riverdale Station**  
6621-B Baltimore Ave  
Riverdale Park MD, 20737  
Bi-weekly beginning Saturday, August 14th  
10 am - 3 pm

**Creative Suitland**  
4719 Silver Hill Rd  
Suitland, MD 20746  
Bi-weekly beginning Sunday August 15th  
12 pm - 3:30 pm

**MPCC Milagros de Jesucristo Church**  
5427 Indian Head Hwy  
Oxon Hill, MD 20745  
Bi-weekly beginning Wednesday, September 1st  
3 - 8 pm  
(DRIVE-THRU)

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## Community Committee Involvement and Participation

### **Dr. Stacey Little, VP, WIS and Community and Population Health**

Prince George's Health Action Coalition Community Co-Chair (LHIC)- 2021

- Health Equity Work Group Member and HIAP Subcommittee Chair 2019-2021 and Health Literacy Subcommittee Co-Chair 2019-2020
- Ad Hoc Vaccine Working Group 2021

PGCO HD Enhanced Care Management Steering Committee Member 2021

PGCO HD Community Care Coordination Team Member 2019-2021

MD Loan Assistance Reimbursement Program (MLARP) Committee Member 2021

MD Food Security Task Force Member 2021

MDHA Hospital Bond Program Review Committee 2021`

Total Linking of Care (TLC) Board Member 2019 - 2021

BWHI Vaccine Awareness and Equity Task Force 2021

PGCO Family Connects Community Advisor Board Member 2020 -2021

### **Sabra Wilson, Director of Community Health**

Prince George's Health Action Coalition

- Healthy Eating Active Living Member 2018 -2021
- Ad Hoc Vaccine Working Group 2021

Achieve the IHI Triple Aim - improve the patient experience of care (including quality and satisfaction); improve the health of populations; and reduce the per capita cost of health care through an improved continuum of care in Prince George's County and surrounding areas.



## Program Enhancement: Building up existing initiatives

- **Connect Program:** Connect is a patient discharge outreach program that contacts discharged patients within 24-72 hours of discharge and identifies patients at high-risk due to clinical or service-related concerns.  
→ Target population: All patients discharged
- **Care Transitions Team:** The team's primary focus is to provide care coordination services for those patients that are readmitted to the hospital within 30 days of discharge and those patients that are at high risk for readmission as evidenced by having a General Risk Assessment of a 4 or above or a BAME score of .5 or higher.  
→ Target population: High Acuity Patients at risk for readmission
- **Readmission Committee:** Workgroup focused on decreasing preventable readmission hospitalizations through innovative and efficient methodologies across all service lines and teams.  
→ Target population: Any patients readmitted



## Partnership Development: Exploring new engagements with critical stakeholders

- **DaVita:** ED diversion program for eligible patients with only dialysis needs and End-Stage Renal Disease Care Coordination program for patients served by UM Capital Medical Group & DaVita dialysis clinics
- **HCDI:** Caring for your Health Social Determinants of Health program funded by the COVID-19 CareFirst grant, connecting patients and their families positive for COVID-19 to community resources, such as food vouchers or temporary housing
- **Prince George's Healthcare Alliance Inc.:** Intensive and continued care management for UM Capital's highest need patients
- **Sickle-Cell Disease Care Management:** Building a transitions program for adolescent patients with SCD to adult care and increasing infusion services for pain management needs
- **TLC-MD:** Collaborate with regional Prince George's County hospital systems to address population health challenges through a multi-system approach

- **Care Transition Initiatives:** Submitted proposed improvements in population health outcomes for UM Capital patients receiving care coordination services and palliative care
- **Medicare Performance Adjustment:** Performing favorable in the program, comparing the Total Cost Of Care of UM Capital attributed Medicare beneficiaries to the state benchmark
- **Readmissions Reduction Improvement Program:** Performing favorable in the program, comparing the UM Capital risk-adjusted readmissions rate to the state benchmark
- **Regional Partnership Grant:** Awarded \$30 million from HSCRC in collaboration with TLC-MD entities to build up the behavioral health and diabetes care infrastructure in the county

# Patient Quality

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Dr. Ingrid Connerney, Vice President & Chief Quality Officer



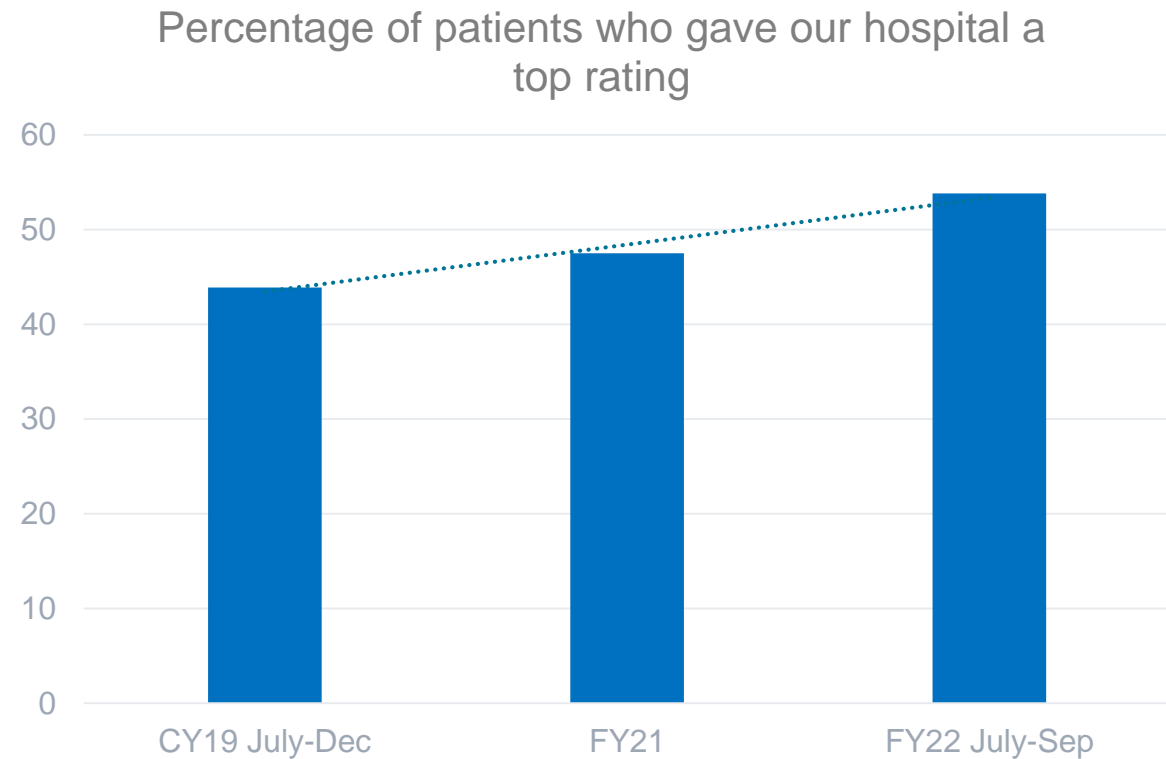


## Improved Patient Experience

*Continued focus on creating a culture of excellence to drive significant improvements in quality, safety, and patient experience.*

*Seeing steady increase in percentage of patients who are giving the hospital a top overall rating*

Desired direction ↑



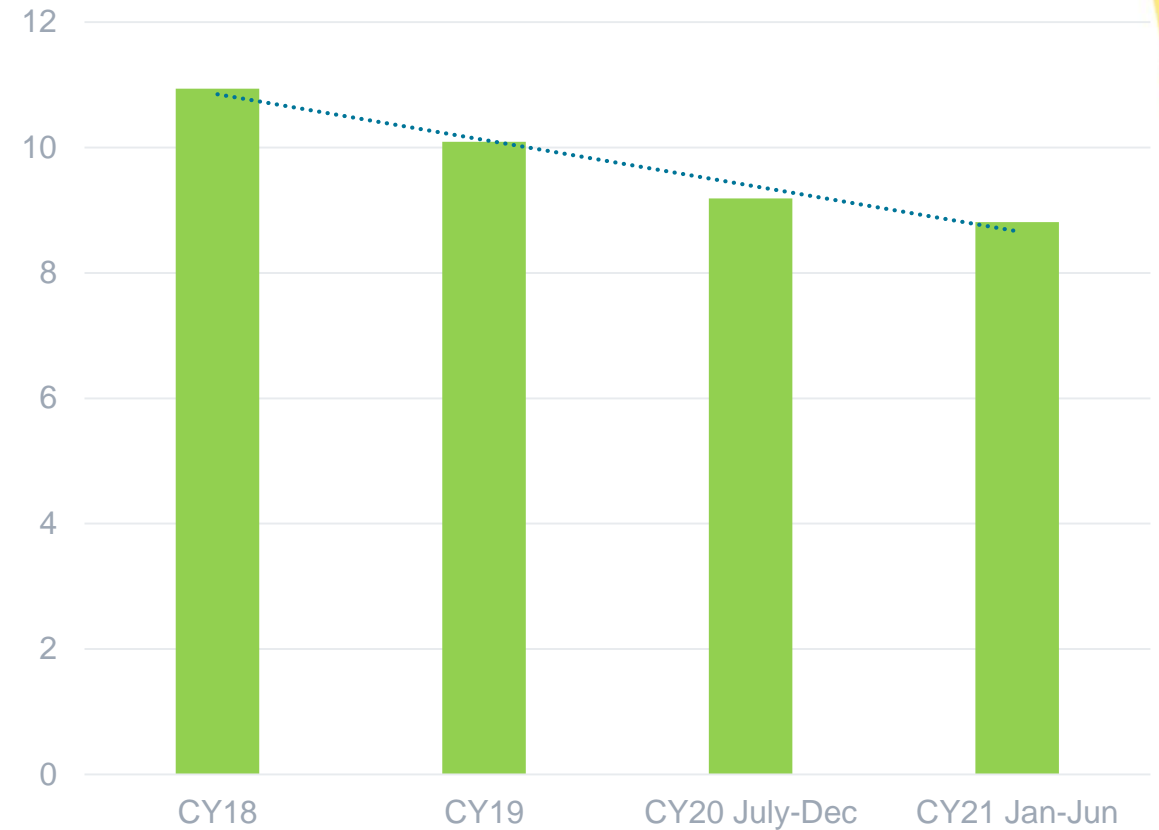


## Improved Quality

Focus on safe discharge from the hospital and making sure patient has what they need at home, so they do not have an unplanned visit to the hospital. This has resulted in steady improvement to percentage of patients needing readmission.

Desired direction ↓

Percentage of patients readmitted within 30 days of discharge from the hospital

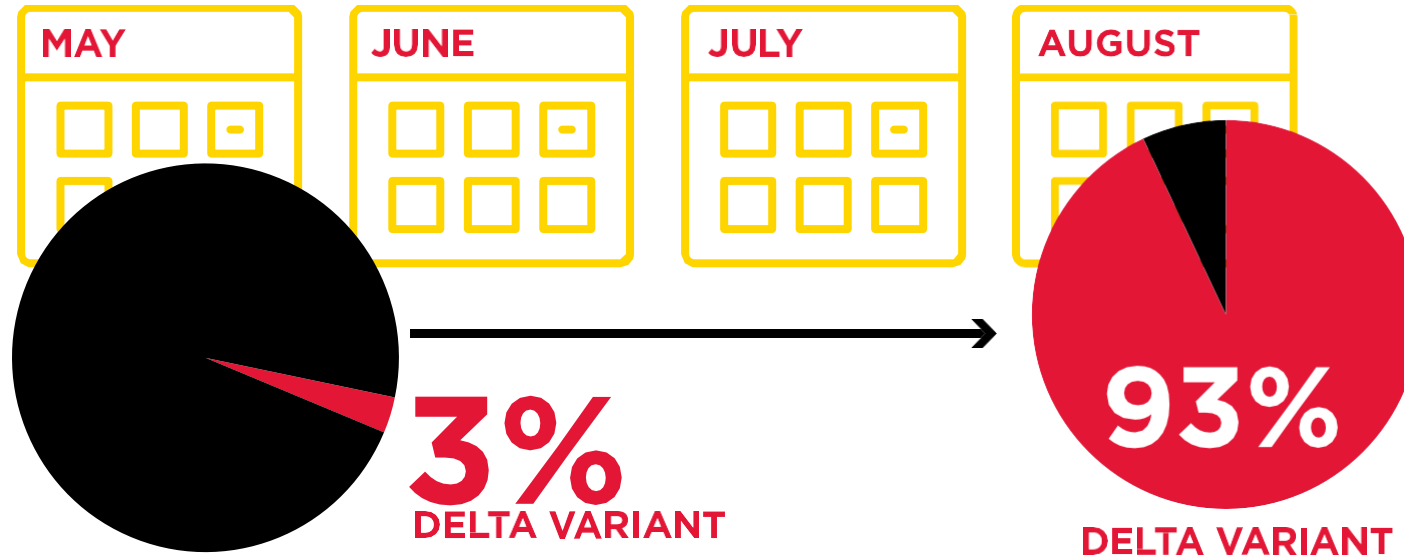


# COVID-19 Response

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Dr. Joseph Wright, Senior Vice President & Chief Medical Officer

# COVID-19 Status Update




As of 10/20/21:

- **53** COVID-positive patients across UM Capital Region *[137 UMMS total]*
- **12** Patients Under Investigation (PUI) UM Capital Region *[95 UMMS total]*

# As of 10/1/21 Requiring the COVID-19 Vaccine



- Since the vaccines became available, the only team members lost to COVID-19 have been those who were not fully vaccinated.
- This is why UMMS accelerated plans to require COVID-19 vaccination as a condition of employment.
- 98% compliance as of 10/20/21

The F.D.A. grants full approval to the Pfizer-BioNTech Covid-19 vaccine. 



Pfizer said it presented the Food and Drug Administration with data from 44,000 clinical trial participants in United States, the European Union, Turkey, South Africa and South America. Saul Martinez for The New York Times

The Food and Drug Administration on Monday granted full approval to Pfizer-BioNTech's coronavirus vaccine for people 16 and up, making it the first to move beyond emergency use status in the United States.

# UM Capital Vaccination Response



## COVID-19 Vaccination Dashboard

Data up-to-date through October 19, 2021

If you have questions or feedback on this dashboard, please reach out to Katrina Smith at [katrina.smith@umm.edu](mailto:katrina.smith@umm.edu)

### UM Capital Total (EHO, Inpatients, FBCG & Mobile)

#### Administered vs Allocated

**74693**

Administered

**108172**

Allocated

**69%**

#### % Prince George's County Residents

**46%**

PGHC  
Workforce

**65%**

PGHC Non-  
Workforce

**77%**

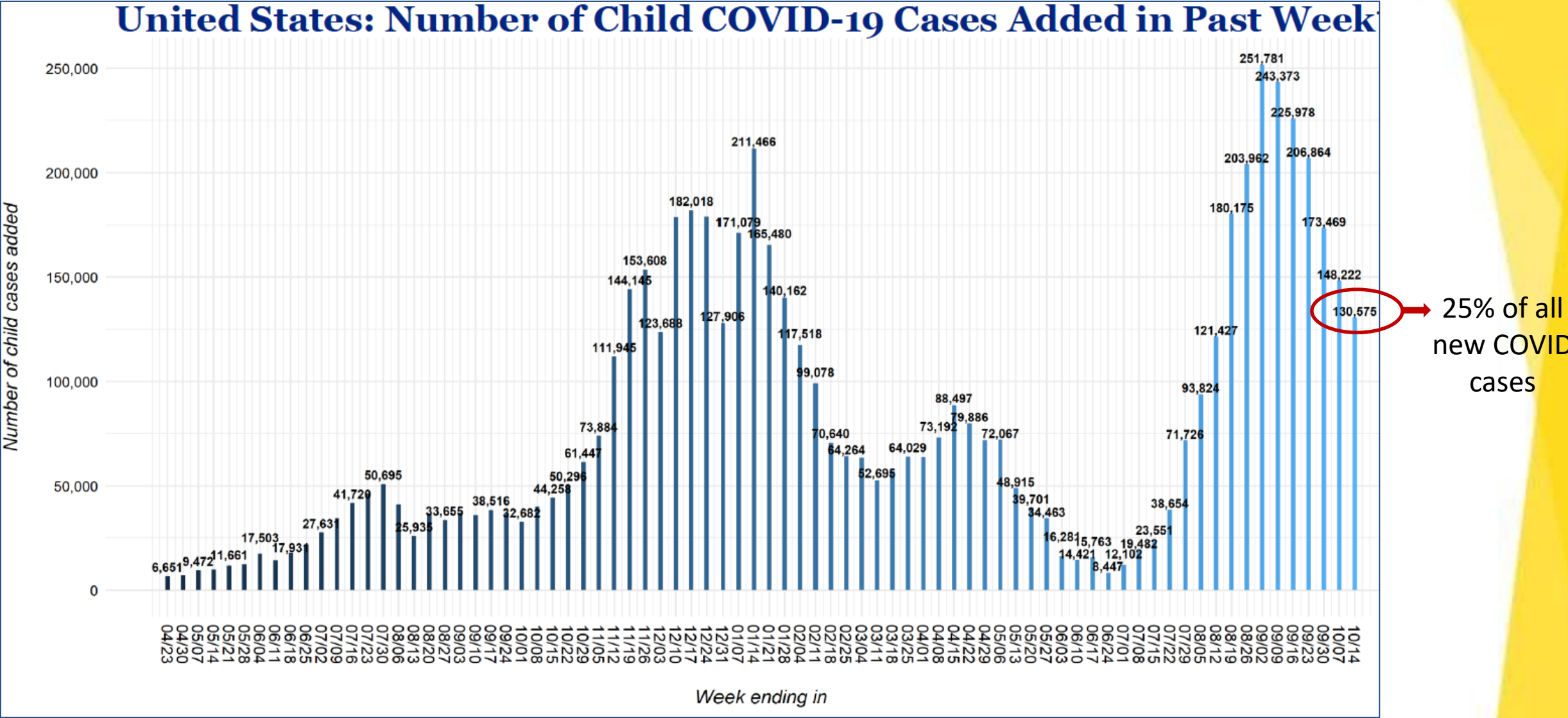
FBCG

#### Key Milestones

- UM PGHC EHO Start Date: 12/16/2020
- UM PGHC Inpatient Start Date: 1/20/2021 (paused 2/17/2021 - 4/5/2021)
- FBCG Clinic: 3/16/2021-6/30/2021
- Casa Mobile Start Date 4/6/2021



# Pediatric COVID Cases





## Immediate Priorities Include:

### Pediatric Surge Capacity

- Making progress toward goal of being able to care for any child that comes through our doors
- Preparing for 10/26 FDA VRBPAC decision on EUA for Pfizer in 5-11 year olds

### Increasing Vaccination Rates

- Continuing to educate communities as *“trusted voices”* on vaccine safety/efficacy
- Leveraging community partnerships to emphasize the importance of *“Public Health”*



## 1 Corinthians 10:4

*Let no one seek his own, but each one the others well-being.*

## Philippians 2:4

*Let each of you look out not only for his own interests, but also for the interests of others.*

10-5-2021 <https://www.youtube.com/watch?v=JsCgpSY7ago>

**Upcoming 10-29-2021: Reid Temple Christian School Health Symposium**

# Service Excellence Initiatives

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Lisa Jibril, Corporate Director, Patient & Family Experience



*Patient experience is:*

**“The sum of all interactions, shaped by an organization’s culture, that influence patient perceptions across the continuum of care.”**

...The Beryl Institute



### Training

- UM Capital is one of only a few to open a new hospital and also launch a new Electronic Medical Record, New Human Resource Information System (timekeeping, benefits, personnel). Team Members are being trained 24/7 and progress is being observed weekly.

### Turnover

- Nursing turnover, Agency/Travel Nursing opportunities, Cultural Transformation Turnover.

### Union

- Education, Understanding, Partnership





## Initiatives



- ☐ Distributed the Google review cards hospital wide (August)
- ☐ Language Line Services training (August, 40 New Devices)
- ☐ Five Things To Know about the ED (September)
- ☐ Patient Experience Advisory Council (September)
- ☐ Nurse Leader Rounding (September)
- ☐ Customer Experience Flyer (September)
- ☐ Partnering with Organization Development – Customer Service Training (November)



## Commitment to Service Excellence

**Thank you for your visit.  
We appreciate your trust.**

***YOU MATTER TO US!***

If something wasn't quite right during your visit, please let us know before you leave or call patient experience at 240-677-1058.



SCAN ME



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SHARE YOUR EXPERIENCE ON



Thank you for visiting UM Capital Region Health. Would you consider writing us a review on Google? If so, simply search for University of Maryland Capital Region Medical Center.

On the right, click on ***Write a Review.***

***We appreciate you taking the time to share your thoughts.***

**You may receive a survey asking you about your visit.**

In addition to the sharing your experience on Google, please complete the survey. We will use your feedback to make improvements.

**Thank you for entrusting  
the University of Maryland  
Capital Region Health  
Team with your care.**



*Nathaniel Richardson Jr.*

**Nat Richardson Jr.**  
*President and CEO*

As part of our organization's mission, we promise to provide compassionate care with dignity and respect. That means that you should receive excellent care and communication from your caregiver.

Please give us a call if we have not fulfilled our promise. Either I or another member of my executive team can be reached at 240-677-1088.



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**Thank you for letting us take care of you.**





## Welcome to UM Capital Region Medical Center Emergency Department (ED).

Thank you for trusting us with your care. Please know that we will do our best to meet your medical needs as quickly as possible.

This flyer will explain the five (5) steps we will be taking to care for you during your visit.

Please pre-register at the self-serve kiosk or with the registration desk when you enter the ED.

Thank you for your patience.

### Step 1: Triage Nurse

After you are pre-registered, you will see a triage nurse. This nurse will review your reasons for visiting the ED to determine the severity of your illness. The triage nurse will ask you questions and gather more information to determine how quickly and in which area of the department you will receive care.



We have recently implemented Tele-Triage where a provider will assess your symptoms virtually using a secured computer connection. This allows us to provide more timely care when there are a large number of patients waiting to be seen. This provider may also begin diagnostic testing, labs or imaging to ensure quick care.

After triage, the nurse may move you to one of our treatment rooms or ask you to have a seat in the waiting room until a room becomes available. We also have a "flow nurse" fully dedicated to ensuring the quickest arrival to your room.

### Step 2: Registration

After seeing the triage nurse, someone from Registration will get your personal and insurance information if you haven't already provided it.

### Step 3: Rapid Diagnostics

We have several designated rooms for the collection of laboratory samples and other testing. Collecting your samples before you leave the waiting area allows us to have the samples processed while you wait for a treatment room and an ED provider. This step decreases your wait time. Tests we may order for you include one or more of the following:

Test	Est time for results (once completed)
X-Ray	1 - 2 Hours
CT Scan (without oral contrast)	3 - 4 Hours
CT Scan (with oral contrast)	2 - 4 Hours
Ultrasound	1 - 2 Hours
MRI	3 - 4 Hours

When do I get my lab results? The provider you will see in our treatment room is best equipped to interpret your laboratory test results because they have the information necessary to assist with diagnosing your problem. He or she will review your medical history and share the results with you.

## 5 Steps of Emergency Care: What to expect during your Emergency Department Visit

### Step 4: Waiting Room

As you wait to be seen by our providers we will make you as comfortable as possible. Please let us know if we can do anything to make you more comfortable or if you have any questions or concerns about the Emergency Department.



### Step 5: Treatment Rooms

We have several areas in the ED for treating our patients, including Vertical Care (Fast Track), Results Waiting, and the "Main" ED.

Once your course of treatment is determined, you will be directed to one of the following areas:

- Vertical Care (Fast Track) and/or Result Waiting area: Sprains, colds, sore throats, stitches, ear infection, etc.
- Results Waiting: Patients waiting on lab results or diagnostic testing before being roomed
- Main ED: Patients requiring more testing and treatment due to the complexity of their diagnosis

You will move to a treatment room as soon as one is available. Once there, a nurse will conduct a more thorough assessment and then you will be seen by an ED Physician, Nurse Practitioner or Physician Assistant who will determine your course of treatment.

### Providing you safe, quality care is our highest priority.

Many patients want to know why some patients are seen before others - including themselves! We want you to know that every patient is important to us and you will be seen as quickly as possible.

As a busy Trauma Center, we treat patients who walk through the front door as well as those who arrive by ambulance and helicopter.

Your injury or illness is important to us! Patients are called to different areas based on their needs.

Please tell staff right away if your condition gets worse during your visit. A nurse will reassess you.

*Our goal is to treat you as quickly as possible and help you in every way. We will try to ensure your safety and comfort during this wait.*

*We appreciate your patience.*



### Language Access at UM Capital Region Health

Italiano Tagalog Español Polski  
اللغة العربية Kreyòl  
Հայերէ՛ս  
Русский Deutsch Português

From August 10<sup>th</sup>-12<sup>th</sup>, representatives from LanguageLine Solutions will be on site conducting training. Your attention and assistance will be greatly appreciated.

Make sure to attend the training when the team goes to your area, to learn about how to:

- ✓ Identify a patient's preferred language & communication needs
- ✓ Access a professional interpreter 24/7
- ✓ Work effectively with a professional interpreter

LanguageLine Solutions®

© LanguageLine Solutions www.LanguageLine.com ver.030619



**“Your actions speak so loud, I can’t hear what you say.” Ralph Waldo Emerson**



## **Customer Experience: Traveling Through Your Work Environment**

### **Walk With Me**

Walk our patients and visitors to their destination or to the information desk. It is okay if you are late when doing this. Your team and manager will not mind.

### **Lend a Hand**

- Keep your area neat and organized
- If you see trash on the floor, pick it up
- Call x71153 if you see spills or a need maintenance

### **Meet and Greet**

- Smile, make eye contact and say hello as you pass others in halls or enter an elevator
- Be aware of body language and ask our patients and visitors if they need assistance

### **Practice Elevator Etiquette**

- If a patient on a stretcher enters the elevator you are on, exit the elevator
- If a patient on a stretcher is in the elevator, do not enter
- If a patient in a wheelchair is on the elevator, it is OK to ride with him/her
- One up, two down—Take the stairs and free elevators up when possible
- Never discuss patients or their care on elevators
- It is appropriate to remind fellow employees of our etiquette guidelines

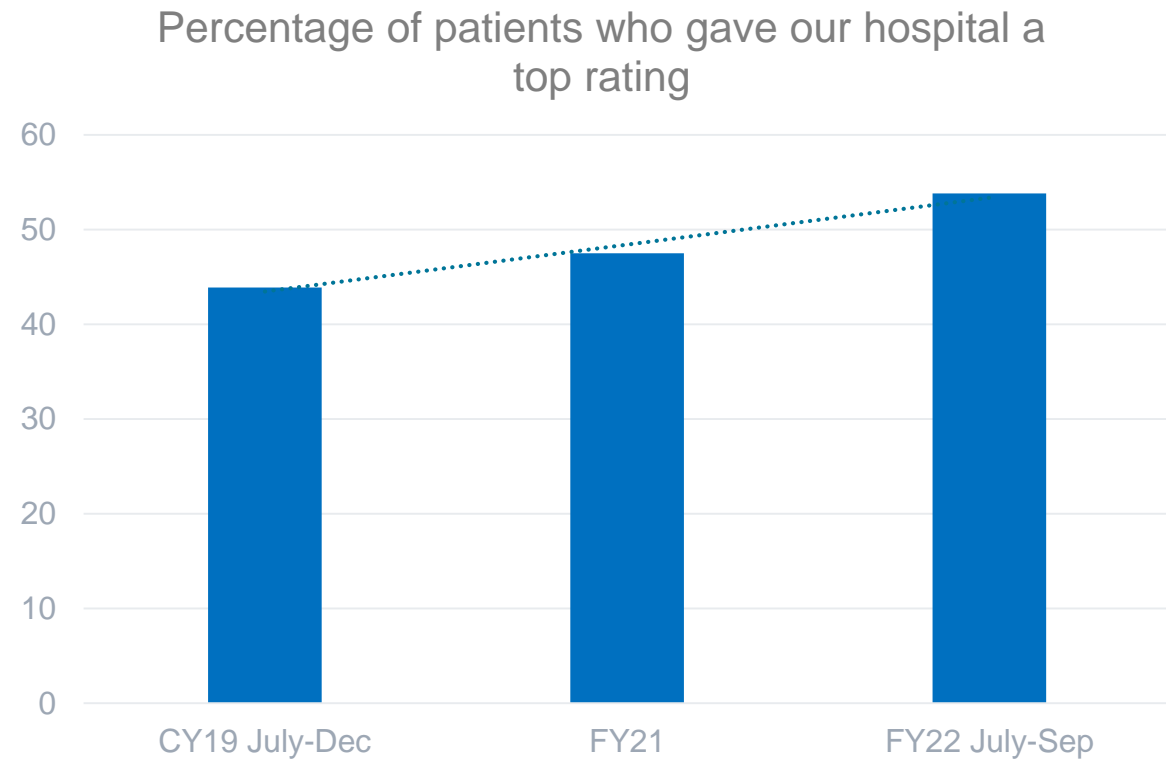


## Improved Patient Experience

*Continued focus on creating a culture of excellence to drive significant improvements in quality, safety, and patient experience.*

*Seeing steady increase in percentage of patients who are giving the hospital a top overall rating*

Desired direction ↑







## Next Steps







# Questions?