Marylanders for Patient Rights Coalition, Anna Palmisano, Ph.D.

1) Please **introduce** yourself including a bit about your background.

Marylanders for Patient Rights is a health care advocacy coalition of 22 groups with a total membership of about 1.1 million Marylanders. I am a microbiologist and the Director.

2) Through **what lens do you see emergency department** throughput.

I see the problem through lens of patients who have suffered long and dangerous ER wait times, avoided the ER despite serious illness, left ERs without receiving needed help after waits as long as 24+ hours, or driven to another state to get care.

3) What's your **assessment**? Describe your evaluation or understanding of emergency department throughput in Maryland, including important contributing factors.

ER patients are repeatedly told by ER staff that the reason for long waits is that they are short staffed. This is a fixable problem.

The current ratio of nurses to patients in the ER is approximately 1:15. This ratio needs to be reduced ASAP to 1:5 or less.

4) Where are **opportunities to make differences?**

Improve nurse: patient ratios in ER. This can be achieved by <u>reallocating</u> **personnel and resources to properly staff the ER,** <u>retraining</u> **personnel to work in ER, and** <u>recruiting</u> **qualified medical staff by offering incentives.**

- Learn from comparable sized states such as Wisconsin, Indiana, and Missouri with shorter wait times.
- Develop a pipeline for appropriately staffing ER. Currently Maryland is are 36th out of 50 states in nurses per 1000 population. Nurses' salaries must be competitive to recruit.
- Increase bed availability in ER where needed

5) What defines **success** for this workgroup? Describe what indicators or **metrics** you will use to decide the extent to which the workgroup, and your participation on it, was successful?

<u>**Success is clearly defined by a reduction ER wait time**</u>.

- In the near term (months), reduce wait time to that of comparable states, that is, from the current 228 min. average wait time to 140 min.

- In the longer term (one year), reduce wait time to 60-90 min.