IHI SHARES ACHIEVEMENTS OF THE 5 MILLION LIVES CAMPAIGN

Enrollment Reaches 4,030 Hospitals – Approximately 80% of U.S. Hospital Beds

Cambridge, MA – October 23, 2008 – The Institute for Healthcare Improvement (IHI) announced today the progress of the organizations enrolled in the 5 Million Lives Campaign, a national effort to help U.S. hospitals dramatically reduce incidents of avoidable medical harm. The Campaign asks hospitals to introduce up to 11 evidence-based health care interventions and to engage their trustees in the effort, in order to protect patients across the nation from five million incidents of medical harm over a 24-month period, ending December 9, 2008. While the Campaign will continue for another six weeks and fuller reporting on progress will come after December, many hospitals participating in the effort have already dramatically improved the care patients receive, setting the stage for further progress.

1) Participation
To date, 4,030 hospitals across the nation have enrolled in the Campaign – approximately 80% of U.S. hospital beds. Highlights include:

- **Participation from hospitals in all 50 states and the District of Columbia.** Every type of acute-care hospital is represented, including over 86% of the nation’s 2,000 rural hospitals.
- **Eight states with 100% of acute care hospitals enrolled:** Arkansas, Delaware, Maine, New Hampshire, Rhode Island, South Carolina, Vermont, and Washington.
- **18 states with at least 90% of all acute care hospitals enrolled:** Alabama, Arkansas, Colorado, Connecticut, Delaware, Indiana, Iowa, Maine, Massachusetts, New Hampshire, New Jersey, New York, North Carolina, Oregon, Rhode Island, South Carolina, Vermont, and Washington.
- **Participating hospitals have committed to implementing up to 12 quality improvement changes, including:** Preventing Adverse Drug Events —by implementing medication reconciliation— (3,146 hospitals); Preventing Surgical Site Infections (3,045 hospitals); Deploying Rapid Response Teams (2,844 hospitals); Preventing Ventilator-Associated Pneumonia (2,711 hospitals); Preventing Central-Line Infections (2,679 hospitals); Reducing Methicillin-Resistant *Staphylococcus aureus* (MRSA) infections (2,477 hospitals); and Getting Hospital Boards on Board with Quality Improvement (2,057 hospitals).
Eight other countries have launched initiatives inspired by the Campaign, including England, Denmark, Netherlands, Sweden, Canada, Wales, Scotland, and Japan.

2) National Learning Network
The Campaign has catalyzed the development of an extensive national network that supports hospitals in the hard work of making improvement – sharing information and reinforcing energy and optimism among the thousands of participating hospitals. The network currently features:

- **Field offices, or “nodes,” in all 50 states**, to support communication and implementation of the Campaign interventions. Nodes are organizations, such as hospital associations or medical societies, often working together as a coalition, that have committed to guiding improvement efforts around the country.
- **197 mentor hospitals** volunteering to serve as teachers of peer facilities on all 12 of the Campaign interventions.
- **Practical resources available at no cost, including** frequent teleconference sessions on Campaign topics, each attended by hundreds of hospitals; evidence-based how-to guides, co-authored by partners and specialty societies, downloaded 96,204 times since the start of the Campaign; and extensive tools on every Campaign intervention.
- **A series of dedicated learning days, designed to bring the entire network together** – such as the upcoming “National Network Day” on Monday, October 27th, during which over 4,000 doctors, nurses, and other health care professionals are expected to join in a series of free web-based learning exercises hosted by IHI and featuring exceptional facilities from around the nation.

3) Available Data on Reduction of Patient Injuries
Encouraging reports of important progress in improving patient safety have begun to emerge from the field:

- In a survey of hospitals participating in the Campaign, **65 hospitals** reported going a year or more without a Ventilator-Associated Pneumonia (VAP), and **35 hospitals** reported going a year or more without a Central Line-Associated Bloodstream Infection in at least one of their intensive-care units (ICUs) – results once considered nearly impossible.
- **Rhode Island** hospitals active in the Campaign reported a 42% decrease in Central Line-Associated Bloodstream Infections from 2006-2007, achieved through an ICU collaborative with every hospital in the state.
- **In South Carolina and Washington state**, over 50% of hospitals enrolled in the Campaign have implemented family-activated Rapid Response Teams.
- **New Jersey** has seen a 70% reduction in pressure ulcers (also known as bed sores) through the work of 150 organizations throughout the state.

4) Forthcoming Studies
Analysis of the Campaign’s primary aim – massive reduction of patient injuries – has
begun through several mechanisms, including:

- **A study in North Carolina** to assess the reliability and validity of a harm assessment methodology, the IHI Global Trigger Tool, and to estimate harm in a single state over a 6-year period (2002-2007). The study protocol was developed by two prominent independent health services researchers who work in the patient safety field: Chris Landrigan, MD, MPH (Principal Investigator) and Paul Sharek, MD, MPH (Co-Principal Investigator). Additional input was provided by a distinguished independent Scientific Advisory Group. Preliminary results should be available soon. IHI’s hope is that a national study, using the results and methodology of the North Carolina-based study as a guide, will follow this work to provide the country with continuous reliable measurement of progress in reducing harm.

- **Detailed studies will be published** on the progress of hospitals in the Campaign, in major peer-reviewed publications. These articles will cover such topics as the relationship between active Campaign participation and reductions in hospital mortality, and best practices for reducing hospital-acquired infections.

"Campaign participants have altered the health care landscape by joining forces as never before to make care safer and more reliable for all hospital patients,” said Donald M. Berwick, President and CEO of IHI. “Hospitals met IHI’s appeal for urgent action, showing a commitment to adopt best practices and reduce harm along with a striking willingness to learn together, to help each other, to measure progress, and to build on every success. This culture change has now become embedded in the daily work of many hospitals – from the boardroom to the frontlines of care – and promises to keep igniting further improvement.”

At its 20th Annual National Forum on Quality Improvement in Health Care (December 10-11, Nashville, TN), IHI will celebrate the progress of facilities from across the nation. The Campaign will announce hospitals' progress in pursuit of a recently-issued "Boards Challenge" (an effort to get 80% of the nation's hospital boards to adopt the Campaign's governance intervention) and discuss the future direction of its national learning network.

**For a complete list of all interventions, along with a state-by-state list of hospitals taking part in the 5 Million Lives Campaign, please visit [www.IHI.org](http://www.IHI.org).**

The 5 Million Lives Campaign is made possible through the generous leadership and support of the BlueCross BlueShield Association and America’s Blue Cross and Blue Shield health plans who – through a large gift and generous in-kind support – have allowed IHI to better support thousands of hospitals in this initiative. IHI also acknowledges the leadership and support of the Cardinal Health Foundation, and the support of the Blue Shield of California Foundation, the Aetna Foundation, Baxter International, Inc., and Abbott Point-of-Care. This initiative builds on work begun in the 100,000 Lives Campaign, supported by Blue Cross Blue Shield of Massachusetts, the Cardinal Health Foundation, the Rx Foundation, the Gordon and Betty Moore Foundation, The Colorado Trust, the Blue Shield of California Foundation, the Robert Wood Johnson Foundation, Baxter International, Inc., The Leeds Family, and the David Calkins Memorial Fund.
More than 20 national partners are actively supporting and promoting the Campaign, including, among others: the American Medical Association, American Hospital Association, American Nurses Association, Centers for Disease Control and Prevention, Centers for Medicare and Medicaid Services, and the Joint Commission. Scientific partners in this work are led by the American Heart Association (and its closely aligned Get-With-The-Guidelines Program), the American College of Cardiology, American Society of Health-System Pharmacists, the Association for Professionals in Infection Control and Epidemiology, the Institute for Safe Medication Practices and The Society for Healthcare Epidemiology of America.

A full list of Campaign and scientific partners is available online at: www.IHI.org.

The Institute for Healthcare Improvement (IHI) is an independent not-for-profit organization helping to lead the improvement of health care throughout the world. Founded in 1991 and based in Cambridge, Massachusetts, IHI works to accelerate improvement by building the will for change, cultivating promising concepts for improving patient care, and helping health care systems put those ideas into action.

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