

100,000 LIVES/5 MILLION LIVES FROM HARM CAMPAIGNS

Where we've been...

In December 2004, the three hospitals that comprise Baystate Health (BH) joined over 4,000 other hospitals nationwide to participate in the Institute for Healthcare Improvement's (IHI) "100,000 Lives Campaign." In December 2006, the second phase, focused at decreasing or eliminating harm resulting from health care, was announced as the "5 Million Lives From Harm Campaign." These campaigns were based on the conviction that if proven interventions are reliably applied on a wide enough scale, many deaths and healthcare related errors that occur while patients are in hospitals could be avoided. In late 2008, the next IHI-sponsored improvement initiative launched was the "Improvement Map." The Improvement Map brings together the best knowledge available on the key process improvements that were successful during the previous campaigns that can lead to exceptional hospital care if reliably implemented. The Map offers clear guidance through an often confusing healthcare landscape, helping hospitals set change agendas, establish priorities, organize work, and optimize resources. All three initiatives are focused on prevention of harm while continuing to fight needless deaths and accelerating efforts to reduce medically-induced, not-fatal injuries in healthcare. Through adoption of these initiatives, Baystate Health has helped to save an estimated 122,000 lives nationwide, and is preventing harm to patients that seek care at our facilities. The three campaigns continue to challenge American hospitals to adopt proven changes in care that are known to save lives and reduce patient injuries.

The six continuing interventions from the 100,000 Lives Campaign are:

Delivering Reliable, Evidence-Based Care for Acute Myocardial Infarction (AMI) Ensure that every patient who comes to BH with an acute myocardial infarction receives all appropriate interventions to reduce morbidity and mortality.

Creating a Rapid Response Team (RRT) This team can be summoned at any time by anyone in the hospital to assist in the care of a patient who appears acutely ill, before the patient has a cardiac arrest or other adverse event.

Preventing Adverse Drug Events Verify each patient's medication at every point of transition across the hospitalization, from admission to discharge, to prevent the patient from getting the wrong medications, and to decrease the chance of a medication being omitted.

Preventing Central Line-Related Bloodstream Infections Ensure that preventative activities that decrease or eliminate the risk of infection are used every time a central venous catheter is inserted into a patient.

Preventing Surgical Infections Reliably deliver the correct peri-operative antibiotics within 60 minutes before incision, stop antibiotics within 24 hours of surgery end time, clip instead of shave, keep patients warm and oxygenated, and control blood glucose levels. These interventions have been shown to decrease rates of surgical infections if they are applied correctly every time.

Preventing Ventilator-Associated Pneumonia (VAP) Ensure that every patient on a ventilator receives all interventions that have been shown to reduce/eliminate the risk of developing a VAP.

The six interventions from the 5 Million Lives From Harm Campaign include:

Preventing Harm from High-Alert Medications Focus on appropriate use of anticoagulants, sedatives, narcotics, and insulin.

Reducing Surgical Complications Reliably implement all of the changes in care recommended by the Surgical Care Improvement Project, to prevent not only infection, but also post-operative myocardial infarction and DVT/PE.

Preventing Pressure Ulcers Reliably use evidence-based guidelines for the prevention of hospital-acquired pressure ulcers.

Delivering Reliable, Evidence-Based Care for Heart Failure (HF) Reliably deliver the key care components to all patients who come to BH with HF.

Reducing Methicillin-Resistant Staphylococcus Aureus (MRSA) Infections Reliably implement proven infection control practices to reduce/eliminate the risk of developing this serious healthcare-acquired infection.

Getting Boards on Board Define and spread the best-known leveraged processes for hospital Boards of Directors, so that they can become more effective in accelerating organizational progress toward safe care.

Improvement Map work includes:

Implementation of the World Health Organization (WHO) Surgical Safety Checklist Designed as a tool to improve the communication of surgical teams and to ensure patients are accurately identified and prepared for surgery.

Prevention of Catheter-Related Urinary Tract Infections Reliably use evidence-based guidelines for the prevention of catheter-related urinary tract infections.

Link Quality and Financial Management: Strategies to Engage the Chief Financial Officer and Provide Value for Patients Spread broad-based strategies for reducing waste and enhancing value in healthcare.