

Agency for Healthcare Research and Quality

FOR IMMEDIATE RELEASE  
Thursday, February 19, 2009

Contact: AHRQ Public Affairs  
(301) 427-1864  
(301) 427-1855

**10-State PROJECT TO Study methods to Reduce Central Line-Associated  
BloodStream Infections in hospital ICUs**

Hospital associations in 10 states have been selected to participate in a program to test methods of reducing central-line associated blood stream infections in hospital intensive care units (ICUs), according to HHS' Agency for Healthcare Research and Quality.

The states are California, Colorado, Florida, Massachusetts, Nebraska, North Carolina, Ohio, Pennsylvania, Texas, and Washington. In addition, the California Hospital Patient Safety Organization, the North Carolina Center for Hospital Quality and Patient Safety, and the Ohio Patient Safety Institute will participate in the project.

The hospital associations and patient safety groups were chosen to participate based on their capability and infrastructure to implement the safety protocols being tested in the project. In addition, they provide a broad geographic representation.

“We are excited about this project, which will spread the knowledge that we learned in one of our initial patient safety research projects,” said AHRQ Director Carolyn M. Clancy, M.D. “This new project will help hospitals in their ongoing efforts to provide the patients they serve with the safest, highest quality care possible.”

Last October, AHRQ awarded a 3-year, \$3 million contract to the Health Research & Educational Trust (HRET), an affiliate of the American Hospital Association, to coordinate the project. The project will continue the work that originated at the Johns Hopkins University School of Medicine in Baltimore and was later implemented statewide in Michigan by the Johns Hopkins Quality and Safety Research Group and the Michigan Health & Hospital Association. The project will implement a comprehensive unit-based patient safety program across the 10 states to help prevent infections related to the use of central line catheters. Central venous catheters or central line catheters are tubes placed into a large vein in a patient's neck, chest or groin to administer medication or fluids or to collect blood samples.

Each year, an estimated 250,000 cases of central line-associated bloodstream infections occur in hospitals in the United States, leading to at least 30,000 deaths, according to the Centers for Disease Control and Prevention. The average additional hospital cost for each infection is over \$36,000, which totals over \$9 billion in excess costs annually. Thus results from this project can potentially improve care, save lives, and lead to substantial cost savings for participating hospitals and the health care system.

The comprehensive safety program is designed to help ICU staff ensure patient safety. The program, which has been used successfully in more than 100 ICUs in Michigan, includes tools to help health care professionals identify opportunities to reduce potential health care-associated infections and implement policies to make care safer. Within 3 months of implementation in Michigan, the program helped reduce infection rates to zero in more than 50 percent of participating hospitals.

The new 10-state project aims to reduce the average rate of central line-associated blood stream infections in hospitals by 80 percent, from the national average of five infections per 1,000 catheter days to one infection for every 1,000 catheter days. Researchers from HRET, Johns Hopkins University School of Medicine, and the Keystone Center for Patient Safety & Quality in Michigan will work together to provide participating hospitals with the necessary tools and training to reduce these infections in their ICUs. Participating hospitals will implement a checklist to ensure compliance with safety practices, educate staff on evidence-based practices to reduce bloodstream infections, educate staff on team training, provide feedback on infection rates to hospitals and hospital units, and implement monthly team meetings to assess progress.

This project is funded through AHRQ's Accelerating Change and Transformation in Organizations and Networks initiative, an implementation model of field-based research designed to promote innovation in health care delivery by accelerating the diffusion of research into practice. For more information on AHRQ's patient safety research, visit <http://www.ahrq.gov/qual/errorsix.htm>.

A number of additional states have expressed interest in being part of a large-scale initiative to reduce blood stream infections, and the Johns Hopkins Quality and Safety Research Group has received private funding to work with additional state hospital associations and their patient safety partners.

In January, HHS released its first departmental action plan for preventing health care-associated infections. This comprehensive plan establishes national goals and outlines key actions for enhancing and coordinating HHS-supported efforts. These include development of national benchmarks, prioritized recommended clinical practices, a coordinated research agenda, an integrated information systems strategy, and a national messaging plan. This 10-state project supports the actions outlined in the plan and fosters a safer, more affordable health care system through rapid translation of research into practice.

# # #