Healthcare Organization Commitment

Contact Details

Name
Tore Laerdal

Phone
+4751511700

Email
tore.laerdal@laerdal.com

Position
CEO

Organization Name
Laerdal Global Health

Organization Address
30 Tanke Svilands gate
, 4002
Norway

Commitment Details

How many hospitals are represented in this commitment?

<table>
<thead>
<tr>
<th>Last Report</th>
<th>Current</th>
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<tbody>
<tr>
<td>5000</td>
<td>5000</td>
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Action Plan
Low Income Countries (LIC): Laerdal and its partners (listed above) are supporting training in 80 LIC, including ministry of health led training program in over 25 countries, to: a) scale up the current Helping Mothers Survive (HMS) and Helping Babies Survive (HBS) programs; b) introduce additional educational modules to these programs; c) enhance quality of the
implementation of both current and additional modules. The HMS and HBS programs address the three dominant causes of mortality at birth, accounting for over 75% of both newborn and maternal deaths. Studies from 4 countries show that when well implemented, these programs can reduce mortality at birth by as much as 50%. Furthermore, in February 2018, Laerdal and ICM will launch the 50,000 Happy Birthdays program in Ethiopia, Tanzania, Rwanda, Malawi and Zambia. This program will train 50,000 birth attendants in these countries in a suite of HMS and HBS educational modules over a 22-month period. As one of the first two Global Impact partners of the WFSA, Laerdal is also supporting the implementation and national scale-up of the SAFE-T course for Safer Anesthesia in Tanzania, Zimbabwe, Nepal and Bangladesh.

Commitment Update
Since 2010, in low-income countries, Laerdal has partnered with USAID, Save The Children, Jhpiego, the American Academy of Pediatrics and others to develop and deliver the Helping Babies Survive and Helping Mothers Survive programs. These programs address the causes of over 75% of newborn and maternal deaths. Studies from 4 countries show that, when well-implemented, these programs can reduce mortality at birth by as much as 50%. Over 500,000 birth attendants in 80 low-income countries have now been trained in these programs, including birth attendants in an estimated 5,000 hospitals.

Other
Challenge 10 - Systematic Prevention and Resuscitation of In-Hospital Cardiac Arrest

Please describe any best practices your organization has learned through your commitment and share valuable lessons or challenges that were overcome

Impact Details

<table>
<thead>
<tr>
<th>Initial Commitment</th>
<th>Commitment Update</th>
<th>Project Next Year</th>
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</thead>
<tbody>
<tr>
<td>Lives Lost 0</td>
<td>Lives Lost 0</td>
<td>Lives Lost -300</td>
</tr>
<tr>
<td>Lives Spared Harm Target 0</td>
<td>Actual Lives Spared Harm in last 12 months</td>
<td>Lives Spared Harm Target for following calendar year</td>
</tr>
<tr>
<td>Lives Saved Target 200</td>
<td>Actual Lives Saved in last 12 months (might differ from initial target) 300</td>
<td>Projected Target of Lives Saved for following calendar to try to finish commitment</td>
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</table>
New Lives Lost (lives lost – actual lives saved)

-300

Acknowledgement

Yes, I acknowledge that this commitment may be used for external communication and publicly announced at the World Patient Safety, Science & Technology Summit. Furthermore, I agree that this commitment may appear on the website of The Patient Safety Movement Foundation or the Masimo Foundation. I also give permission for my commitment to be used in support of the promotion of the World Patient Safety, Science & Technology Summit as well as The Patient Safety Movement initiative.