Hand Hygiene Guided Cohort Targeted Solutions Tool (TST)®

Session 3 –Hand Hygiene Observers and Data Collection

March 5, 2014



© Copyright, The Joint Commission

Objectives

- Primary: To establish clear understanding of the project milestone's expectations and deliverables for training observers and collecting data.
- Secondary: To provide individual project progress, updates and learning, specifically from previous step.
- Other: To collaborate with other participating organizations in learning and achieving the same goal of improving Hand Hygiene compliance and reducing healthcare-associated infections.



© Copyright, The Joint Commission

Agenda

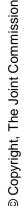


<u>Time Frame</u>	<u>Topic</u>	<u>Presenters/Facilitators</u>					
5 mins	 Check in: Introduction (Name/Title & Role for this Project/ Organization) Review of the Objectives and Ground Rules 	Emily					
15 mins	Selecting Hand Hygiene Observers If you have already selected your observers, who have you identified for: • Hand hygiene anonymous observers "secret-shoppers"? —Why have you selected these individuals? • Just-in-time coaches (JIT)? —Why have you selected them for this role?	Project Leads					
15 mins	Training HH observers and just-in-time coaches • Data collection methodology • Training components • Differences in responsibilities	Ziad					
15 mins	Data Collection Two phases of data collection Components of data collection form Representative sample Ongoing data collection throughout project	Ziad					
5 mins	Question: If you are in the Sustain phase from previous units you worked on, are you training new data collectors as needed?	Emily/Project Leads					
5 mins	Closing Remarks 1. Next deliverables 2. Action steps: WWW Optional: Individual questions & comments	Emily					



Review of Ground Rules

- 1. Full participation by project team.
- 2. Start on time. End on time.
- 3. All ideas welcome.
- 4. One conversation at a time. Please announce your name before speaking.
- Don't leave the call with unanswered question(s).
- 6. Anything else to add?





Selecting Hand Hygiene Observers

If you have already selected your observers, who have you identified for:

- Hand hygiene anonymous observers "secret-shoppers"?
 - Why have you selected these individuals?
- Just-in-time coaches (JIT)?
 - Why have you selected them for this role?



5

© Copyright, The Joint Commission

Session1: Start Phase Checklist



Reviewed the definitions and descriptions in Start – Overview
Named your project(s) in Start – Project Scope – Name Your Project
Identified the project area in Start – Project Scope – Name Your Project. • Name the pilot project area • Describe the specialty of the area
Identified Scope Agreement in Start – Project Scope – Scope Agreement
Selected HAI outcome metrics you will track in Start – Project Scope – HAI Outcome Metric
Completed the project charter in Start – Project Scope – Project Tools
Completed the Stakeholder Analysis in Start – Project Scope – Project Tools
Determined your core project team and invited them to join the project in Start – Project Access



Data Collection Method

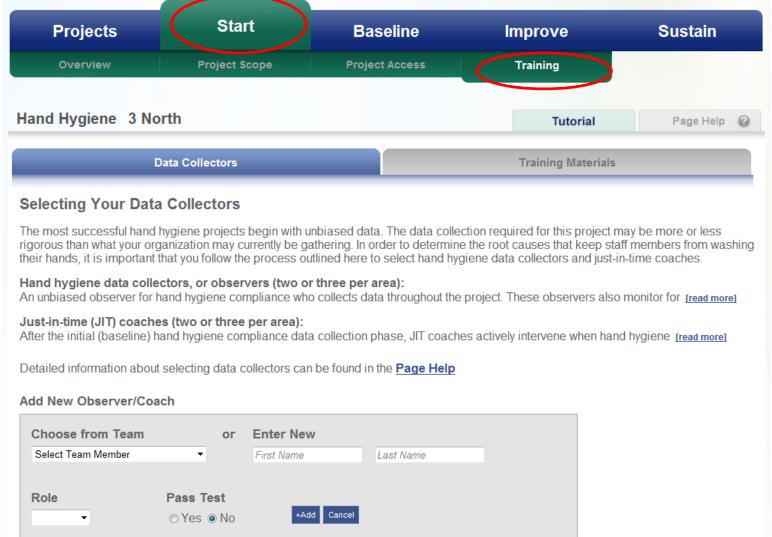
		HH data collector (observer)	Just-in-time coach
	Purpose	To be an unbiased observer for hand hygiene compliance	To collect data, intervene, and coach staff when hand hygiene non-compliance is observed
		Hand hygiene compliance data is used for establishing the baseline Hand Hygiene performance	Data collection will begin after the baseline data has been collected and the compliance data shared with staff
	Data Collected	"Secret shoppers": anonymous observers collected data on physical barriers of non-compliance without influencing the observed behaviors	JIT coaches capture non-observable cultural barriers by interviewing health care providers after an observed instance of non-compliance
	Who	Examples include: housekeeping, lab staff, chaplains, volunteers	Examples include: unit managers, charge nurses, infection control practitioners, executives/leadership, and quality coaches or unit-based educators



© Copyright, The Joint Commission

© Copyright, The Joint Commission

Overview of Step 2: Training Observers and Coaches





Training Components

- Three main components to training both data collectors and JIT coaches:
 - Classroom education
 - View scenario videos and practice with the data collection form
 - Written scenario-based testing
- While training is same for both, it is recommended that they are trained separately



HH Observers

- Be in a position where they can secretly observe staff while performing their regular job duties.
- Not seem out of place during their time on the unit.
- Collect data that is representative of the patient population. In most cases, this will involve night shift and weekend data collection.

JIT Coaches

- Provide coaching to various staff whenever possible.
- Collect data about two weeks.
- Coach on all shifts so that all staff benefit from coaching and have the opportunity to share their contributing factor information.
- Discover the most important root causes across all shifts and staff.
- Give staff positive reinforcement for performing good hand hygiene practices



Session 2: Training Observers Phase Checklist



Selected your hand hygiene data collectors and JIT coaches and entered their information in Start – Training – Data Collectors
Viewed scenario videos and practiced with the data collection form in Start – Training –Training Materials
Conducted written scenario-based testing for HH observers and JIT coaches and all have passed with 90% or higher in Start – Training –Training Materials
Provided data collectors and JIT coaches with the tools they will need in Start – Training –Training Materials



Data Collection

- Done in two phases:
 - during the Baseline phase
 - in the Improve phase
- Two types of data collected:
 - Anonymous observations: collect the baseline data over a two or three week period
 - Just-in time coaches: after baseline begin collecting data <u>for about two weeks</u>



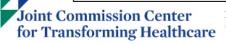
Copyright, The Joint Commission

Data Collection Form

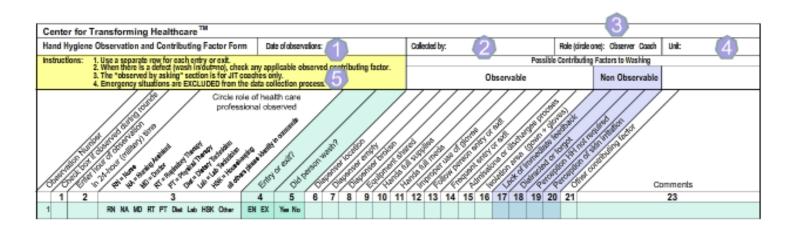
Hand Hygiene Observation and Contributing Factor Form Date of observations:							Co	Collected by: Role (circle one): Observer						er Coach	Unit:									
Instructions: 1. Use a separate row for each entry or exit. 2. When there is a defect (wash in/out=no), check any applicable observed contributing factor. 3. The "observed by asking" section is for JIT coaches only. 4. Emergency situations are EXCLUDED from the data collection process.										Possible Contributing Factors to Observable									Non Observable					
68	Series Con		profession	of health care all observed	The Control of the Co	ernoreser	Parket	THE STATE OF THE S			2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	\$ 15 SE	4 4 4 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		00 LE 10 10 10 10 10 10 10 10 10 10 10 10 10	\$ 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	10 S	Comm	nents
Ť	1	2	3	, , ,	4	5	6	7	8	9	10	11 1	2 1	3 14	15	16	17	18	19	20	21		22	?
1	Т		RN NA MD RT PT Diet Lab HSK CM/SW F	ham Rad Other	EN EX	Yes No																		
2	Т		RN NA MD RT PT Diet Lab HSK CM/SW P	harm Rad Other	EN EX	Yes No							T	Т										
3	T		RN NA MD RT PT Diet Lab HSK CM/SW F	ham Rad Other	EN EX	Yes No																		
4	Т		RN NA MD RT PT Diet Lab HSK CM/SW F	harm Rad Other	EN EX	Yes No																		
5	T		RN NA MD RT PT Diet Lab HSK CM/SW F	ham Rad Other	EN EX	Yes No																		
В			RN NA MD RT PT Diet Lab HSK CM/SW P	ham Rad Other	EN EX	Yes No																		
7			RN NA MD RT PT Diet Lab HSK CM/SW P	ham Rad Other	EN EX	Yes No					\dashv													
3	T		RN NA MD RT PT Diet Lab HSK CM/SW P	harm Rad Other	EN EX	Yes No							T											
9			RN NA MD RT PT Diet Lab HSK CM/SW P	ham Rad Other	EN EX	Yes No					\dashv													
1	T		RN NA MD RT PT Diet Lab HSK CM/SW P	ham Rad Other	EN EX	Yes No																		
	_		·							_	_		_		_	_								

- Dispenser location is not in path of person or is obstructed or hidden
- Dispenser is empty
- Dispenser is broken
- Equipment shared or disposal area (use of equipment shared between patients i.e. vital sign machine, portable x-ray, etc)
- 10. Hands full: supplies or equipment (e.g., food trays, lab supplies)
- 11. Hands full meds
- Gloves (e.g., improper use of or not washing before or after putting gloves on or off).
- 13. Person entering or exiting followed someone who did not wash
- Frequent entry and exit of patient area

- Admissions or discharge process
- Isolation area (gown + gloves when required)
- 7. Lack of immediate feedback to person for hand hygiene compliance
- Distractions/forgets/lack of knowledge/chose not to wash
- Perception that if nothing is touched in the patient care area hand hygiene is not necessary
- 20. Perception of skin irritation or dislike of alcohol-based hand rub
- 1. Other



Data Collection Form



The top of the form provides the following information:

Date of observation, if this is a third shift use the date that the shift began

prohibited. If you received this in error, please immediately contact the sender and delete the material from

Collected by (name or initials)

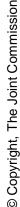
any computer

- Role of data collector (HH observer or JIT coach)
- Unit name
- Instructions for completing the form



Representative Sample

- Taking into account the following attributes that define the patient care environment:
 - By healthcare provider type
 - By shift or time of day
 - By day of week (weekday vs. weekend)
- Having a large enough sample



Collecting Data Throughout the project

- Data should be collected throughout the project, at a smaller scale in <u>Sustain</u> phase
- JIT coaching should be used as an intervention and to sustain success

Question:

If you are in the Sustain phase from previous units you worked on, are you training new data collectors as needed?



st 100

Session 3: Baseline Phase Checklist



	Collected and entered baseline compliance data (at least 100 representative samples) in Baseline – Data Collection							
	Entered HAI data in Baseline – HAI Data							
	Reviewed you unit's baseline and hand hygiene results in Baseline – Analyze – Summary of Findings							
	Viewed the charts that show your unit's hand hygiene baseline compliance in Baseline – Analyze – Charts: •The contributing factors for non-compliance •The differences in compliance between groups • HAI and compliance rates							
	Reviewed the baseline data with your project team							
	Informed HCP of the project by meeting with leadership and shared baseline compliance data							
	Mobilized your JIT coaches to collect additional data on contributing factors							
	Continued to collect hand hygiene observation data and entered it in Baseline – Data Collection							
ı	Completed contributing factor data collection (done by the							

confidential and/or privileged he intended recipient is

Next call & Project Schedule

Date:



Next steps

What	Who	When	Status



© Copyright, The Joint Commission



