



# **Hand Hygiene Guided Cohort Targeted Solutions Tool (TST)®**

## **Identifying Contributing Factors & Implementing Solutions**

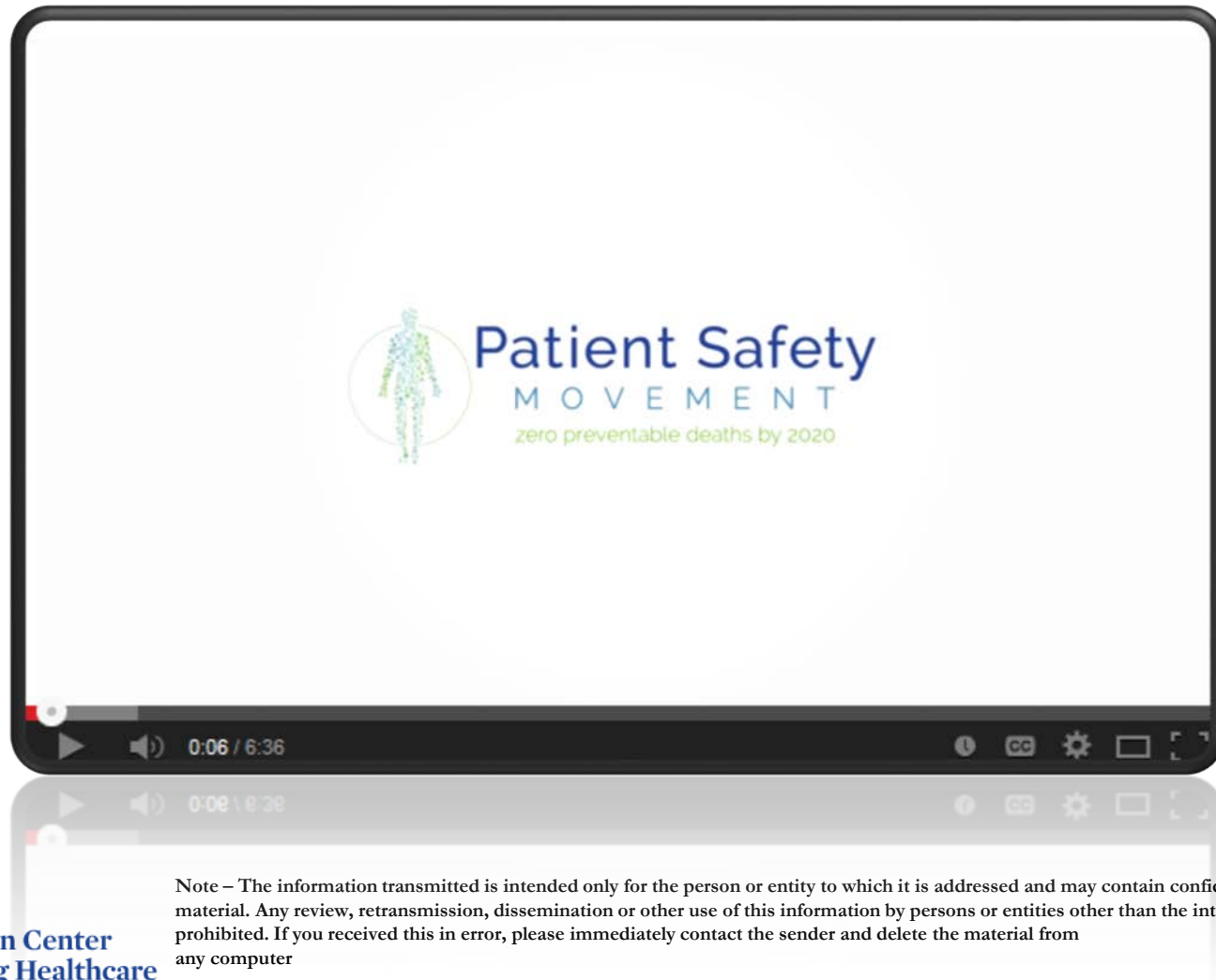
**April 2, 2014**

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| <u>Time Frame</u> | <u>Agenda</u>  | <u>Presenters /Facilitators</u> |
|-------------------|--|---------------------------------|
| 5 mins            | <b>Check in:</b> <ul style="list-style-type: none"> <li>• Updates from America's Essential Hospitals</li> <li>• Introduction (Name/Title &amp; Role for this Project/ Organization)</li> </ul>   | Ashley/Emily                    |
| 7 mins            | <b>Video:</b> <ul style="list-style-type: none"> <li>• 2014 Patient Safety Movement video on HAI's</li> </ul>  | Ziad/Ashley                     |
| 3 mins            | <b>New CDC Report:</b><br><a href="http://www.cdc.gov/media/releases/2014/p0326-hospital-patients.html">http://www.cdc.gov/media/releases/2014/p0326-hospital-patients.html</a>  | Ziad                            |
| 15 mins           | <b>Progress Update:</b> <ul style="list-style-type: none"> <li>• Have you selected HAIs you want to track for your chosen units?</li> <li>• Have you collected and entered baseline observations for your selected units?</li> <li>• At what point are your JIT coaches beginning to collect data?</li> <li>• Have your contributing factors varied from one unit to the other?</li> <li>• Any surprises? Is your baseline different than what you anticipated it would be?</li> </ul> | <b>All Teams</b>                |
| 5 mins            | <b>Baseline Observations</b>   | Ziad                            |
| 10 mins           | <b>Improve Phase: Implementing Targeted Solutions</b> <ul style="list-style-type: none"> <li>• If you have selected your improve date, what targeted solutions have you started to implement?</li> <li>• Are you currently collecting data in Improve?</li> <li>• Have you assigned a process owner for the solutions you selected?</li> </ul>   | <b>All Teams</b>                |
| 3 mins            | <b>Closing Remarks</b> <ol style="list-style-type: none"> <li>1. Next deliverables</li> <li>2. Action steps: WWW</li> </ol>  | Ashley/Emily                    |
| 5 mins            | Optional: Individual questions & comments  | All                             |

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# HAIs: A Patient's Experience



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# New CDC Report

- ~1 in 25 U.S patients has at least one infection contracted
- About 722,000 infections in 2011
- About 75,000 patients with healthcare-associated infections died during their hospitalizations

**Source: Centers for Disease Control and Prevention (CDC):**

**<http://www.cdc.gov/media/releases/2014/p0326-hospital-patients.html>**

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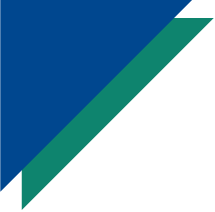
Most common germs causing infections were:

- *C. difficile* (12 percent),
- MRSA (11 percent),
- *Klebsiella* (10 percent),
- *E. coli* (9 percent),
- *Enterococcus* (9 percent),
- *Pseudomonas* (7 percent)

Source: Centers for Disease Control and Prevention (CDC):

<http://www.cdc.gov/media/releases/2014/p0326-hospital-patients.html>

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*“...The most advanced medical care won’t work if clinicians don’t prevent infections through basic things such as regular hand hygiene...”*

**CDC Director Tom Frieden, M.D., M.P.H.**

**Source: Centers for Disease Control and Prevention (CDC):**  
**<http://www.cdc.gov/media/releases/2014/p0326-hospital-patients.html>**

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# Progress Update:

- 
- Have you selected HAIs you want to track for your chosen units?
  - Have you collected and entered baseline observations for your selected units?
  - At what point are your JIT coaches beginning to collect data?
  - Have your contributing factors varied from one unit to the other?
  - Any surprises? Is your baseline different than what you anticipated it would be?

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# Baseline-Measuring Compliance

**Projects**   **Start**   **Baseline**   **Improve**   **Sustain**

Overview   **Data Collection**   HAI Data   Analyze

Hand Hygiene 3 North   Tutorial   Page Help ?

Baseline Observation Form - Add   Update Baseline Observations

Enter up to 10 observations and then submit your data before you start a new sheet. [Download Data Collection Form](#)

Date of observations:    Collected by:    Observer/Coach: Observer ▼

|                          |                     |                      |   |  |                          |                          |                          |                          |                          |                             | Observable               | Non Observable                   |                            |                          |                            |                               |                           |                          |                          |                          |                      |                                      |
|--------------------------|---------------------|----------------------|---|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-----------------------------|--------------------------|----------------------------------|----------------------------|--------------------------|----------------------------|-------------------------------|---------------------------|--------------------------|--------------------------|--------------------------|----------------------|--------------------------------------|
| Observed during rounds   | Time of observation | Role of HCP observed | Entry or Exit?  | Did the person wash?   | Dispenser location       | Dispenser empty          | Equipment broken         | Hands full of supplies   | Improper use of gloves   | Follow person entry or exit | Frequent entry or exit   | Admissions of discharges process | Lack of immediate feedback | Distracted or forgot     | Perception HH not required | Perception of skin irritation | Other contributing factor | Comments                 |                          |                          |                      |                                      |
| 1                        | 2                   | 3                    | 4   | 5  | 6                        | 7                        | 8                        | 9                        | 10                       | 11                          | 12                       | 13                               | 14                         | 15                       | 16                         | 17                            | 18                        | 19                       | 20                       | 21                       | 22                   |                                      |
| <input type="checkbox"/> | ▼                   | ▼                    | <input checked="" type="radio"/> EN<br><input type="radio"/> EX | <input checked="" type="radio"/> Yes<br><input type="radio"/> No | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/>         | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>   | <input type="checkbox"/>      | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> | <input type="button" value="+ Add"/> |

Please add your observations.

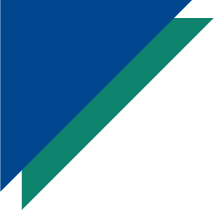
Save and Clear Form

Observable  
Versus Non  
Observable  
Contributing  
Factors

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# Data Collection

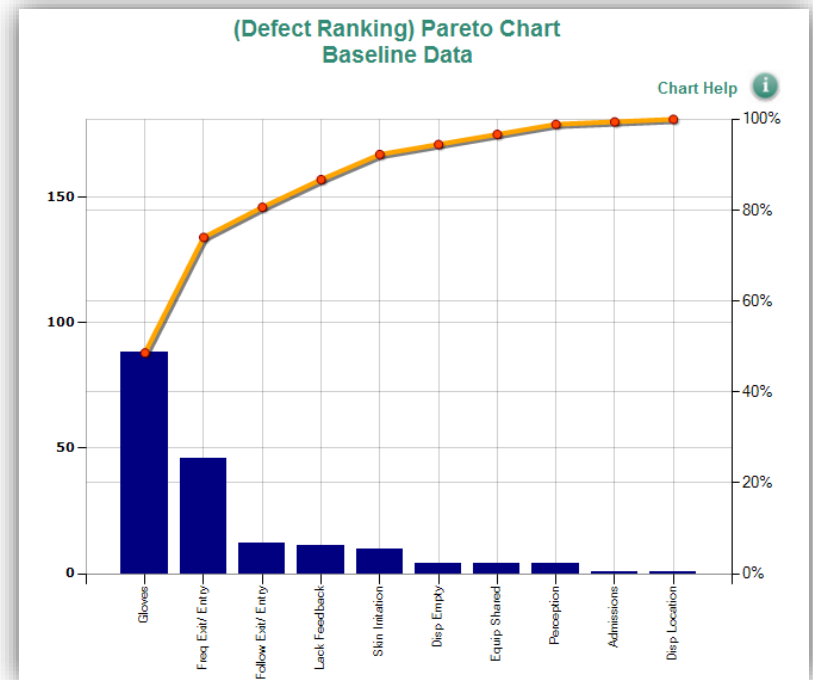
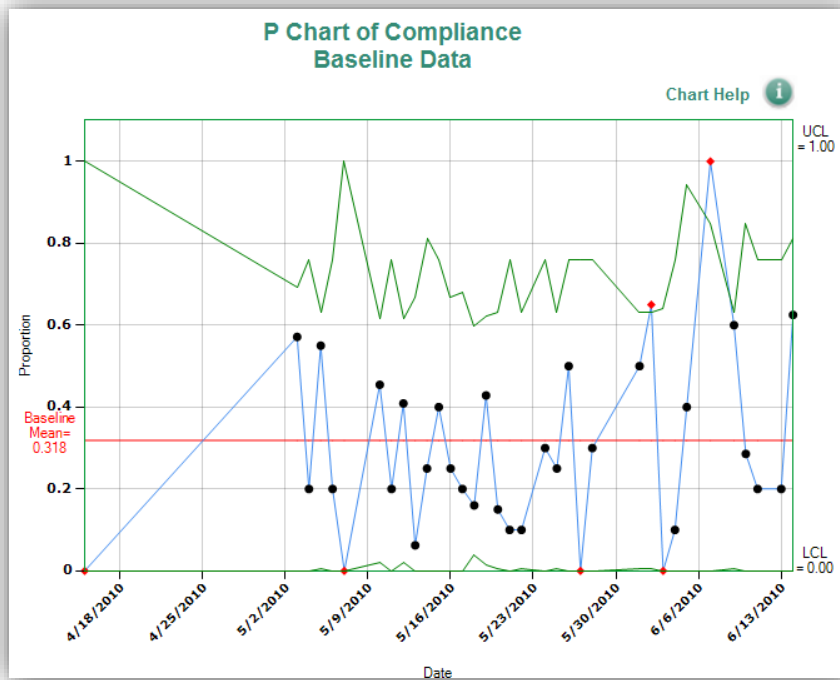
- 
- Done in two phases:
    - during the Baseline phase
    - in the Improve phase
  - Two types of data collected in both phases:
    - Anonymous observations: collect the baseline data over a two or three week period
    - Just-in time coaches: after baseline begin collecting data for about two weeks

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# Remember

- Secret Observers data goes towards compliance charts

- JIT Coaches data goes towards contributing factors chart



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# Improve Phase

**Projects**   **Start**   **Baseline**   **Improve**   **Sustain**

Overview   Solutions   Data Collection   HAI Data   Analyze

**Hand Hygiene 3 South**

**Implementing Solutions**

After reviewing the baseline charts, many organizations find the staff on the unit—helps in gaining support for the next phases of implementing both basic and targeted solutions that will increase outcomes. Here is a brief explanation of the sub-sections under

**Improvement start date**

6/15/2010   Save

**Identify your Improvement Start Date when you have:**

- shared the baseline data with staff
- deployed your Just-In-Time (JIT) coaches to collect contributing factors, including non-observable data

It is now time to start implementing solutions targeted specifically to your unit's causes (the contributing factors). By now you should have shared the baseline data with staff and deployed your Just-In-Time (JIT) coaches to reinforce hand hygiene compliance and to collect contributing factors, including non-observable data.

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# Improve Phase: Demo

**Projects** **Start** **Baseline** **Improve** **Sustain**

**Overview** **Solutions** **Data Collection** **HAI Data** **Analyze**

**Hand Hygiene 3 South** **Tutorial** **Page Help ?**


The top causes (or contributing factors) of hand hygiene non-compliance in your unit are found below, in the **Select Defects to Improve** section. Specific Solutions and Implementation Guides have been developed that address their corresponding defects. Implementing these guides will reduce the causes that keep staff members from washing their hands, so your unit's hand hygiene compliance will increase. [\[read more\]](#)

**Select Defects to Improve** **i**

|  |   |  |   |
|--|---|--|---|
| 49% <a href="#">Improper use of gloves</a>       | 25% <a href="#">Frequent entry or exit</a>    | 7% <a href="#">Follow person entry or exit</a> | 6% <a href="#">Lack of immediate feedback</a>   |
| 5% <a href="#">Perception of skin irritation</a> | 2% <a href="#">Perception HH not required</a> | 2% <a href="#">Dispenser empty</a>             | 2% <a href="#">Equipment shared</a>             |
| 1% <a href="#">Admissions / discharges</a>       | 1% <a href="#">Dispenser location</a>         | 0% <a href="#">Distracted or forgot</a>        | 0% <a href="#">Isolation area (gown+gloves)</a> |
| 0% <a href="#">Hands full supplies</a>           | 0% <a href="#">Hands full meds</a>            | 0% <a href="#">Dispenser broken</a>            |   |

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# Implementing Targeted Solutions

- 
- If you have selected your improve date, what targeted solutions have you started to implement?
  - Are you currently collecting data in Improve?
  - Have you assigned a process owner for the solutions you selected?

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# Session 3: Baseline Phase Checklist



|  |  |
|--|--|
|  | Collected and entered baseline compliance data (at least 100 representative samples) in <b>Baseline – Data Collection</b>  |
|  | Entered HAI data in <b>Baseline – HAI Data</b>   |
|  | Reviewed you unit's baseline and hand hygiene results in <b>Baseline – Analyze – Summary of Findings</b>   |
|  | Viewed the charts that show your unit's hand hygiene baseline compliance in <b>Baseline – Analyze – Charts:</b> <ul style="list-style-type: none"> <li>• <u>The contributing factors for non-compliance</u></li> <li>• <u>The differences in compliance between groups</u></li> <li>• <u>HAI and compliance rates</u></li> </ul> |
|  | 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 <b>Baseline – Data Collection</b>   |
|  | Completed contributing factor data collection (done by the JIT coaches) and entered it in <b>Baseline – Data Collection</b>  |

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# Session 4: Improve Phase Checklist



|  |  |
|--|--|
|  | Implemented the Basic Solutions in <b>Improve–Overview</b>   |
|  | Identified the top 3 contributing factors in <b>Improve – Solutions</b>  |
|  | Identified targeted solutions based on your data and the analysis of your contributing factors in <b>Improve – Solutions – Implementation Guide</b>        |
|  | Identified who would lead the implementation of the targeted solutions and complete the implementation checklist in <b>Improve – Solutions – Checklist</b> |
|  | Continued to collect and enter data in <b>Improve– Data Collection</b>   |
|  | Updated HAI rates in <b>Improve– HAI Data</b>  |
|  | Reviewed your unit’s baseline and improve hand hygiene results in <b>Improve – Analyze– Summary of Findings</b>  |
|  | Viewed the charts that show your unit’s hand hygiene baseline and improve compliance in <b>Improve – Analyze – Charts</b>                                  |

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# QUESTIONS OR COMMENTS?



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