# Joint Commission Center for Transforming Healthcare

#### **The Joint Commission's**

Center for Transforming Healthcare aims to solve health care's most critical safety and quality problems. The Center's participants -- the nation's leading hospitals and health systems -- use a proven, systematic approach to analyze specific breakdowns in patient care and discover their underlying causes to develop targeted solutions that solve these complex problems. In keeping with its objective to transform health care into a high reliability industry, The Joint Commission will share these proven effective solutions with the more than 16,000 health care organizations it accredits.

# **Bringing the Leading Health Care Organizations Together to Solve Challenging Health Care Problems**

**Cedars-Sinai Health System** 

**Exempla Healthcare** 

**Froedtert Hospital** 

Memorial Hermann Healthcare System

The Johns Hopkins Hospital and Health System

**Trinity Health** 

Virtua

Wake Forest University Baptist Medical Center



**Intermountain Healthcare** 

**Kaiser Permanente** 

**Mayo Clinic** 

**New York-Presbyterian Hospital** 

North Shore-Long Island Jewish Health System

Partners HealthCare System

**Stanford Hospital & Clinics** 

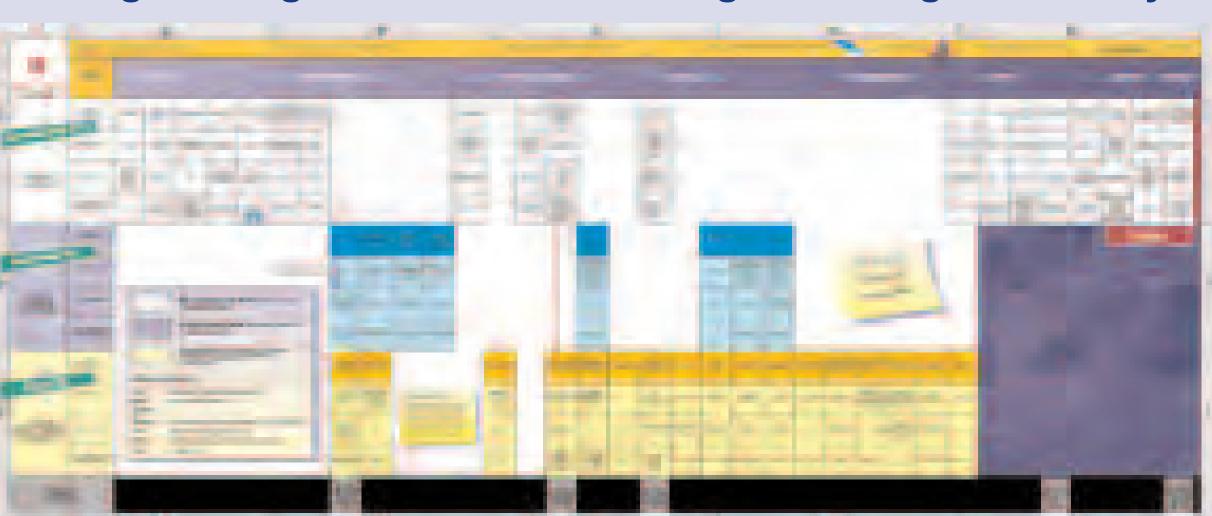
**Rhode Island Hospital** 

**Newport Hospital** 

### How Will We Get There?

Change Management • Lean Six Sigma • High Reliability

The Roadmap to Developing Solutions



- Measureable Success
- Targeted Solutions
- Industry Engagement
- Sustainability

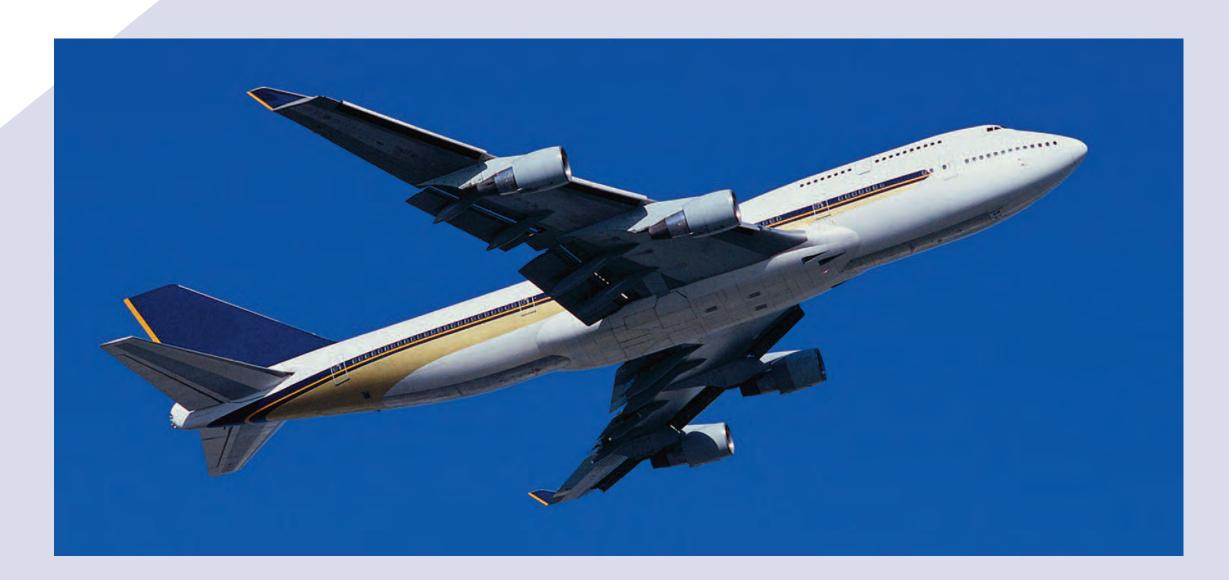


# Why Hand Hygiene?

In the United States, one in 136 hospital patients become seriously ill as a result of acquiring an infection in the hospital. This is equivalent to two million cases a year.

And the costs..... "the overall annual direct medical costs of HAI to U.S. hospitals ranges from \$28.4 to \$45 billion.. the benefits of prevention range from a low of \$5.7 to \$6.8 billion to a high of \$25.0 to \$31.5 billion."

R. Douglas Scott II, Economist, Division of Healthcare Quality Promotion, CDC, March 2009



"Every day, 247 people die in the USA as a result of a health care-associated infection."

This is equivalent to a 767 aircraft crashing every day or more than 90,000 deaths annually."

WHO Guidelines on Hand Hygiene in Health Care



Health Care Associated Infections (HAI) affect hundreds of millions of people worldwide and are a major global issue for patient safety.

"Yet hand hygiene improvement is not a new concept...
long lasting improvements remain difficult to sustain....."

WHO, Guide to Implementation of the WHO Multimodal Hand Hygiene Improvement Strategy



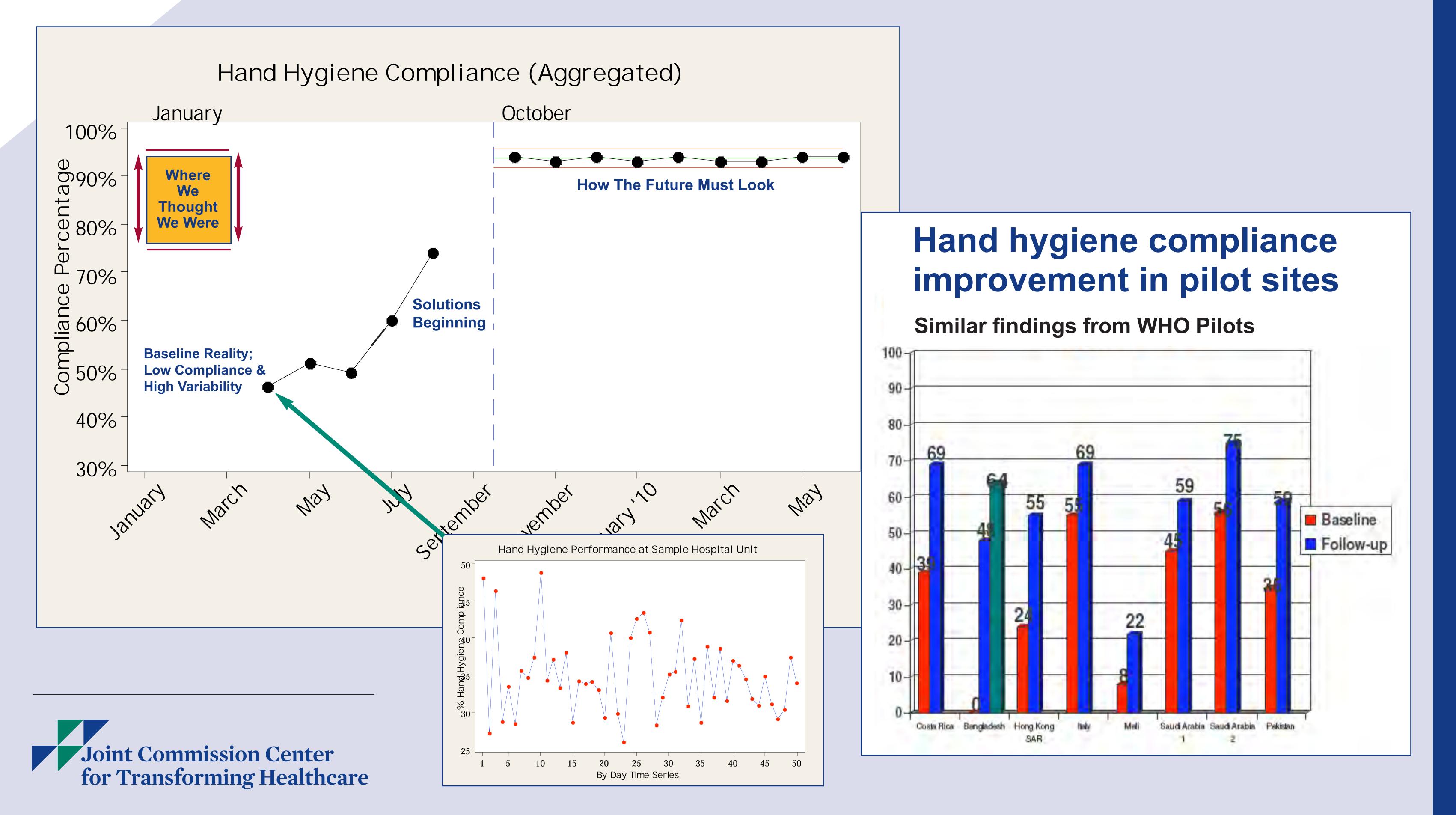
# Hand Hygiene Project: Participating Hospitals' Characteristics and Project Details

Hospital	Location	Teaching hospital	Number of Beds	Medical Surgical	Pilot Sites Intensive Care Unit	Other
Cedars-Sinai Health System	California	Yes	950	X	X	
Exempla Lutheran Medical Center	Colorado	No	400			<b>x</b> *
Froedtert Hospital	Wisconsin	Yes	486	X		
The Johns Hopkins Hospital	Maryland	Yes	1,041	X	X	
Memorial Hermann The Woodlands	Texas	No	252	X	X	
Trinity Health - St. Joseph Mercy Hospital	Michigan	Yes	537	X		
Virtua - Memorial	New Jersey	No	270	X	X	X
Wake Forest University Baptist Medical Center	North Carolina	Yes	872	X	X	

\*Implemented throughout hospital



# Hand Hygiene Measures: Expectations vs. Reality; Solutions Impact



# Main Causes of Failure to Clean Hands (across all participating hospitals)



- Ineffective placement of dispensers or sinks
- Hand hygiene compliance data are not collected or reported accurately or frequently
- Lack of accountability and just-in-time coaching
- Safety culture does not stress hand hygiene at all levels
- Ineffective or insufficient education
- Hands full
- Wearing gloves interferes with process
- Perception that hand hygiene is not needed if wearing gloves
- Health care workers forget
- Distractions



Main Causes of Failure to Clean Hands (across all participating hospitals)	A	В	C	D	E	F	G	Η
Ineffective placement of dispensers or sinks		X		X	X		X	X
Hand hygiene compliance data are not collected or reported accurately or frequently	X	X		X	X			X
Lack of accountability and just-in-time coaching		X	X	X	X		X	X
Safety culture does not stress hand hygiene at all levels			X	X	X	X		X
Ineffective or insufficient education		X	X	X	X		X	
Hands full		X	X	X	X		X	
Wearing gloves interferes with process	X	X	X	X			X	
Perception that hand hygiene is not needed if wearing gloves			X	X	X		X	X
Health care workers forget	X	X		X			X	
Distractions	X	X				X	X	

Note that not all of the main causes of failure appear in every hospital. The chart above represents the validation of the root causes across hospitals. This underscores the importance of understanding hospital-specific root causes so that appropriate solutions can be targeted.

# Identifying Causes, Targeting Solutions

### Causes

Hand Hygiene compliance data are not collected or reported accurately or frequently

Safety culture does not stress hand hygiene at all levels

Ineffective placement of dispensers or sinks

Hands full

# Solutions

- Data provide a framework for a systematic approach for improvement
- Utilize a sound measurement system to determine the real score in real time
- Scrutinize and question the data
- Measure the specific, high-impact causes of hand hygiene failures in your facility and target solutions to those causes
- Make washing hands a habit as automatic as looking both ways when you cross the street or fastening your seat belt when you get in your car
- Commitment of leadership to achieve hand hygiene compliance of 90+ percent
- Serve as a role model by practicing proper hand hygiene
- Hold everyone accountable and responsible doctors, nurses, food service staff, housekeepers, chaplains, technicians, therapists
- Provide easy access to hand hygiene equipment and dispensers
- Create a place for everything: for example, a health care worker with full hands needs a dedicated space where he or she can place items while washing hands





# Effective Hygiene is in Our HANDS

### Habit

- Always wash in and wash out upon entering/ exiting a patient care area and before and after patient care
- Make washing hands a habit as automatic as looking both ways when you cross the street or fastening your seat belt when you get in your car

#### Active Feedback

- Coach and intervene to remind staff to wash hands
- Clearly state expectations about when to sanitize hands to all staff members
- Communicate frequently provide visible reminders and ongoing coaching to reinforce effective hand hygiene expectations
- Engage staff real time performance feedback
- Tailor education in proper hand hygiene for specific disciplines
- Provide just-in-time training
- Use technology-based reminders and real time feedback
- Celebrate improved hand hygiene

# No One Excused

- Protect the patient and the environment – everyone must wash in and wash out
- Make it comfortable to wash hands with soap or use waterless hand sanitizer
- Identify proper hand hygiene as an organizational priority and performance expectation
- Hold everyone accountable and responsible

   doctors, nurses, food service staff, house keepers, chaplains, technicians, therapists
- Apply progressive discipline from the top managers must hold everyone accountable for proper hand washing
- Commitment of leadership to achieve hand hygiene compliance of 90+ percent
- Serve as a role model by practicing proper hand hygiene

### Data Driven

- Data provide a framework for a systematic approach for improvement
- Utilize a sound measurement system to determine the real score in real time
- Use trained, certified independent observers to monitor appropriateness of hand hygiene
- Scrutinize and question the data
- Measure the specific, high-impact causes of hand hygiene failures in your facility and target solutions to those causes

# Systems

- Focus on the system, not just on people
- Make it easy; examine work flow of health care workers to ensure ease of washing hands:
  - Provide easy access of hand hygiene equipment and dispensers
  - Create a place for everything: for example, a health care worker with full hands needs a dedicated space where he or she can place items while washing hands
  - Limit entries and exits from a patient's room – make supplies available in room and eliminate false alarms that require staff to leave room to turn alarm off
- Identify new technologies to make it easy for staff to remember to wash hands, i.e. radio frequency identification, automatic reminders, warning systems, real time scoring

