Healthcare Organization Commitment

Contact Details

Name
James Cappon

Phone
7145098590

Email
jcappon@choc.org

Position
Chief Quality Officer

Organization Name
CHOC Children’s Hospital

Organization Address
1201 W. La Veta Ave.
Orange, California 92868
US

Commitment Details

Commitment Name
Challenge #2A: Hand Hygiene

What Patient Safety Challenge does your Commitment address?
Challenge 2A - Hand Hygiene

Commitment Start Date
01/07/2013

How Many Hospitals Will This Commitment Represent

Patient Safety Movement Foundation | patientsafetymovement.org
Commitment Summary
The lack of consistent, appropriate hand hygiene in all patient care areas can be considered a “medical error” that can result in avoidable infections, morbidity and mortality. The World Health Organization (WHO) continues to describe hand washing as the most effective way of preventing the spread of infections. In order to implement a program to improve hand hygiene and reduce HAIs, CHOC Children’s has been actively engaged in a hand hygiene surveillance and performance improvement plan that has required actionable steps. This has required substantial enterprise-wide commitment to awareness, education and tracking. With this, organization-wide hand hygiene compliance for the recently completed fiscal year was 96%.

Commitment Description & Detail
The measurement of hand hygiene performance proves to be quite difficult. Self-reporting is notoriously optimistic, "secret shopper" methodology can introduce bias and is hampered by logistics, and technologic modalities are in early stages and in the case of pediatrics, unproven and largely untested. Remote video observations, akin to cardiac telemetry, are fraught with similar human factors limitations. Given the above, for the past 7 years, CHOC has used a secret shopper observation methodology of hand hygiene “5 Moments” compliance, which technologic solutions cannot fully capture at this time. Results are reported and widely displayed by unit and role, including in Communication Boards in each unit. Patients, families and visitors can view this data. Last year’s high performance was garnered from over 3500 blinded observations, and is part of a 7 year improvement trend. Ongoing education of staff, physicians, volunteers and families and visitors is an integral aspect of this performance improvement project. CHOC Children’s has offered to be a willing partner in pilot projects to test additional techniques of hand hygiene compliance measurement in children. In alignment with the Patient Safety Movement Foundation’s Actionable Patient Safety Solutions (APSS) checklist, CHOC Children’s Hospital is continuously improving hand hygiene compliance and surveillance system plan and will report our results on an annual basis.

Action Plan
• Accountability for Performance Improvement at facility and unit leadership levels as part of an overall Organizational Hand Hygiene Guideline. Ensure that alcohol-based hand rubs and soap are available as close to the point of care as possible. • Establish a multi-disciplinary hand hygiene team responsible for implementation of the Hand Hygiene Protocol, including nursing, physicians, infection preventionists and administration. • The protocol must include mandatory training for all healthcare workers (HCWs) upon hire and at least once annually. • Training to include: • Proper technique for hand rubbing and soap and water washing • Indications for hand rubbing vs soap and water washing (WHO or CDC Guideline) • How to speak up when fellow HCWs do not comply. • Education for patients, family members and visitors. • Performance Evaluation and Feedback • Hand hygiene compliance must be
measured using a validated method of capturing and reporting all hand hygiene events. Such compliance systems have been shown to lead to sustainable improvement, reduced infections and costs and a positive impact on patient safety culture (Bouk, Mutterer, Schore and Alper, 2016) (Kelly, Blackhurst, McAtee and Steed, 2016)(Michael, Einloth, Fatica, Janszen and Fraser, 2017)(Son et al., 2011). • Provide performance feedback to unit leadership and frontline staff on a regular basis, using evidence-based behavior change feedback models (Welsh, Flanagan, Hoke, Doebbeling and Herwaldt, 2012). • Reminders in the workplace, such as posters, brochures, leaflets, badges, stickers, can be used, provided they are consistent with the overall Hand Hygiene Protocol. - Regarding direct monitoring of hand hygiene compliance through hand hygiene monitoring technologies: - CHOC research found no pediatric experience with three compliance technology vendors, and thus volunteered to be a pediatric test site for evidence-based investigations. At this time, the value has not been established for this methodology in the pediatric population.

**Commitment Timeline**

This implementation plan has been in place at CHOC Children’s for over a decade and our commitment will be ongoing and reported annually.