



An Interdisciplinary Approach to Increasing Hand Hygiene Compliance

Penn State Milton S. Hershey Medical Center

Amy McCowan MEd, BSN, RN, Rahn Snyder RN, CIC, Krista Williamson BSN, CMSRN, CNML

Purpose

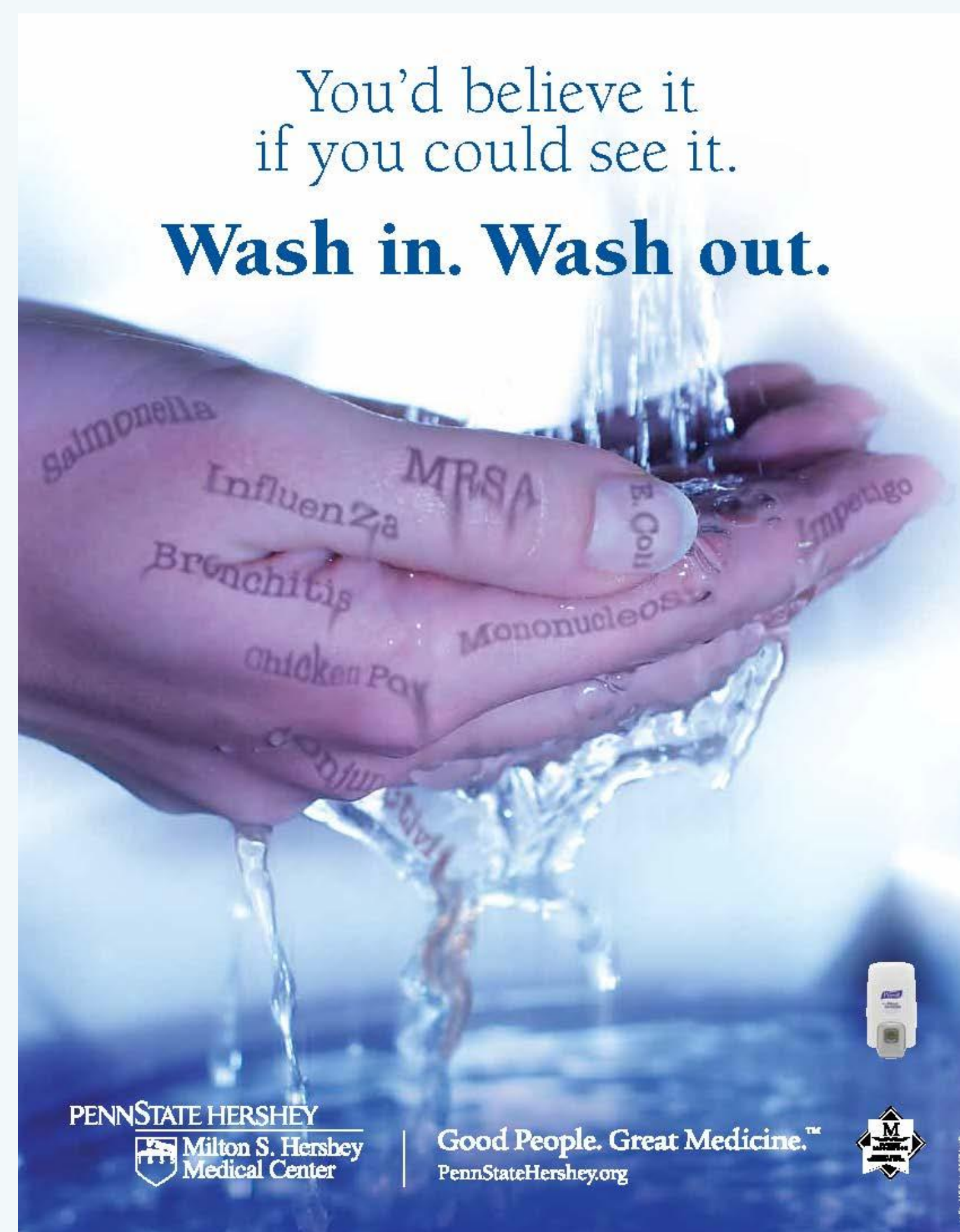
In response to low compliance rates with hand hygiene, the Penn State Hershey Medical Center identified an Intensive Care Unit and a Medical/Surgical Unit as designated pilot areas to create a unit targeted hand hygiene campaign. An interdisciplinary team was formed in each area to design and implement the campaign. The purpose of the campaign was to raise awareness of current compliance, establish routine hand hygiene practices, and provide a safe environment for our patients and families by decreasing the opportunity for transmission of nosocomial infections.

Significance

Prevention of nosocomial infections requires a systematic, multidisciplinary approach, which usually can be achieved under the leadership of an institutional infection-control program. The implementation of an optimal program may decrease the incidence of nosocomial infections by 30 to 50 percent.

Strategy

On the 5 Acute Care Unit, base line data revealed 53% compliance in hygiene practices. It was determined that an interdisciplinary approach was needed to enhance knowledge and improve compliance among all staff who have patient contact. Representatives from Nursing, Physicians, Human Resources, Strategic Services, Ancillary Departments, and Infection Control partnered and developed a campaign guided by the Joint Commission's "Wash In, Wash Out" program.



Implementation

During the 16 week pilot, the focus of the team was to create a positive, yet innovative approach to engage staff and leadership. This was accomplished by:

- Development of a marketing plan that was consistent through the inpatient and outpatient arenas
- Observer training to ensure accuracy of data collection
- Creation of a daily observation calendar to ensure auditing was accomplished
- A reward system for compliant behavior
- A positive reinforcement campaign for non-compliant behavior
- Disciplined approach to consistent real-time feedback by peers, leadership, and senior management
- Creation of staff and patient education that was unit specific
- Support from senior management, physicians, ancillary departments and unit leadership
- Identification and elimination of barriers that prevent successful hand hygiene practices
- Establishing open communication among various departments and physician service lines
- Implementation of a 100% Compliance Day

References

The Joint Commission, Target Solutions, 2012

Evaluation

Since the implementation of the program, the 5 Acute Care Unit hand hygiene compliance has risen to 70%. The unit has seen a 50% reduction in C-difficile transmission rate and a total hospital acquired infection rate reduction of 37.5% in the quarter following implementation of this intervention.

The four key strategies to a successful campaign were:

- Staff and provider engagement and ownership that started in the design phase
- Implementation of "Just in time coaching"
- Leadership diligence in providing daily assessment and feedback
- Individualizing each unit's campaign to fit the culture and needs

Implications for Practice

Although we have managed to improve compliance since the end of the official program, 5 Acute Care continues to strive for 100% Hand Hygiene compliance. We are currently working on a plan to sustain compliance and decrease transmission of nosocomial infections.

