

An Innovative Approach to Changing Hand Hygiene Compliance in an Acute Healthcare Setting

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PROBLEM: The Institute of Medicine reported ~2 million patients annually acquire preventable hospital-acquired infections (HAI) contributing to 90,000 deaths nationally and costing the US Public Health System billions (4). An effective, integrated infection control program can reduce the risk of acquiring and transmitting HAI by 28-32%. Saint Joseph HealthCare's (SJHC) Infection Control Program – with a particular emphasis on hand hygiene (HH) – experienced significant decreases in HAI exceeding CDC SENIC Project of 32% (2).

EVIDENCE: Hand hygiene baseline was evaluated by managers, line-level staff, and community volunteers and documented on observation tool. Direct observations, public perception, and pharmacy data analysis from a pharmacy-directed study identified process improvement opportunities for HH compliance. Baseline HH rates were measured at <50%.

STRATEGY: SJHC Hand Hygiene Program components were integrated to develop a systematic approach and deployment to meet hand hygiene goals of >80% compliance by healthcare workers.

PRACTICE CHANGE: Policies/Procedures developed to support organizational change; knowledge community-Please ask Us campaign; new associate orientation includes scripting and return demonstration HH competency activities; hospital-wide in-services performed-including non-clinical areas; product team developed to determine staff preference for hand hygiene products; hand rub dispensers installed throughout organization; Secret Shopper Team audits direct hand hygiene observations in clinical areas.

EVALUTION: Performance indicators included audits, observation tools, clinical patient safety rounds, executive senior leadership rounds, and monthly National Patient Safety Goal audits with transparent reporting to all leaders.

RESULTS: Deployment of SJHC infection control initiatives with emphasis on hand hygiene has increased HH compliance from <50% in 2004 to a sustained rate of >90%, resulting in dramatic reductions in device-related infections and hospital-associated multi-drug resistant organism rates to well below benchmark levels.

RECOMMENDATIONS: Integration of community volunteers, line-level staff, physicians, executive leadership, and Infection Control is key to successful Infection Control Program and directly affect hand hygiene compliance and HAI.

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