Get to Zero HAIs!

Hand Hygiene Targeted Solutions Tool® Implementation Guide for Health Care Organizations
ARE YOU PUTTING YOUR PATIENTS AND YOUR ORGANIZATION AT RISK?

YOU CAN GET HAIs TO ZERO USING THE TARGETED SOLUTIONS TOOL® (TST®)
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Improving Hand Hygiene

Improving hand hygiene of health care professionals is one of the most effective ways to reduce HAIs. Studies continue to confirm that HAI rates decrease as hand hygiene improves. According to recent studies, improved hand hygiene from 40% to 65% reduced HAIs by 37%.
Based on the work of the initial 8 participating hospitals we learned that the list below of significant causes for failure to clean hands can differ by health care organization. The TST®’s unique capability is that it guides organizations through a data collection process that reveals why their employees are unable to wash their hands consistently and provides targeted solutions to mitigate them. By targeting solutions to their specific causes, compliance starts to rise while using resources effectively and efficiently.

What is the Targeted Solutions Tool® (TST®)?

The TST® is an innovative online application that guides health care organizations through a step-by-step process to:

- accurately measure their organization’s actual performance,
- identify their barriers to excellent performance,
- and direct them to proven solutions that are customized to address their particular barriers.

<table>
<thead>
<tr>
<th>Main Causes of Failure to Clean Hands (across participating hospitals)</th>
<th>Hospital A</th>
<th>Hospital B</th>
<th>Hospital C</th>
<th>Hospital D</th>
<th>Hospital E</th>
<th>Hospital F</th>
<th>Hospital G</th>
<th>Hospital H</th>
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<tbody>
<tr>
<td>Ineffective placement of dispensers or sinks</td>
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<td>Hand hygiene compliance data are not collected or reported accurately or frequently</td>
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<td>Lack of accountability and just-in-time coaching</td>
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<td>Safety culture does not stress hand hygiene at all levels</td>
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<td>Ineffective or insufficient education</td>
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<td>Hands full</td>
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<td>Wearing gloves interferes with process</td>
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<tr>
<td>Perception that hand hygiene is not needed if wearing gloves</td>
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<td>Health care workers forget</td>
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<td>Distractions</td>
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Hospital A should not spend additional time or resources on the circled causes

Causes differ by hospital – so solutions for each hospital should be ‘targeted’

▲ = Significant Cause of Failure to Clean Hands at Their Hospital
“We fully attribute to the Center for Transforming Healthcare’s hand hygiene TST® the final drop in HAI rates to zero or near-zero system-wide. After implementing hand hygiene TST®, our hospitals began to report zeros as their most common monthly CLABSI and VAP result. Our mothers were right after all! Feel free to quote me. This actually saves lives.”

TJC Hand Hygiene Compliance
Center for Transforming Healthcare

Baseline Compliance 44%
Key Features of the Hand Hygiene TST® Module

- Define & measure hand hygiene issues that are specific to your organization
- Video scenarios to train observes on how to collect data
- Real time data analysis
- Improve your compliance rate with tailored solutions
- Can be completed in 12—16 weeks
- Control plan included to maintain success
The purpose of this TST® Hand Hygiene Implementation Guide is to provide a model for launching a system-wide hand hygiene performance improvement project within a health care organization.

This guide recommends that you:

- Build your complete team by identifying your core and site team members.
- Understand and clarify the roles and responsibilities of each member.
- Set a goal and start date to launch the initiative with your core team.
- Complete all of the Required Reading in each phase and view all of the Help tabs in each section.
- Follow all of the steps in TST® Hand Hygiene module.
- Launch the initiative in a few pilot areas first then add other areas/units over time that are in alignment with your goals.
- Use the change management tools and resources available in the TST® throughout the tool to:
  - Plan the Project
  - Inspire Your Staff
  - Launch the Initiative
  - Support the Change
- Share compliance results, demonstrate leadership support and increase awareness of hand hygiene using visual cues.
**Build the TST® Project Teams**

To ensure your project’s success, a team of individuals will work together to achieve the goals of your hand hygiene project and commit to achieve the project deliverables. The following information provides guidance on building a successful hand hygiene (HH) team – whether you already have a team established or you need to create one. The following are two organizational models for launching this project using the TST®:

- The Health Care Organization-Wide Team model for systems with multiple care settings and
- Single Site Health Care Organization model for a hospital or ambulatory care setting.

The core project teams for either setting should include:

<table>
<thead>
<tr>
<th>Executive Sponsor</th>
<th>Organization Project Leader</th>
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<tbody>
<tr>
<td>Healthcare Setting Project Leader</td>
<td>Clinical Champion</td>
</tr>
<tr>
<td>Process Owner</td>
<td>Subject Matter</td>
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**The Health Care Organization—Wide Team** is led by the Organization Project Leader and the core team consists of three to seven individuals who are also key stakeholders of your organization that meet regularly.

**The Health Care Setting Site Team** is led by the designated Hospital Project Leader and inspires others to support the project. This team consist of a group of three to seven individuals who are key stakeholders that meet regularly.

**Single Site Health Care Organization Team** is led by the Hospital Project Leader and inspires others to support the project. This team consist of a group of three to seven individuals who are key stakeholders at the site and meets regularly with unit Process Owners. The unit is the area where the project is being launched.

**The Unit Team** is led by the Process Owner and should include their unit key stakeholders and ancillary staff involved in the project and meet regularly.
## Key Roles and Responsibilities

<table>
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<tr>
<th>Roles</th>
<th>Responsibilities</th>
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| **Executive Sponsor**    | • Representative from the C-suite executive level  
• Supports and inspires others to support the project  
• Provide high-level oversight for the project and become more heavily involved should any issue resolution be necessary  
• Approves needed resources for implementation of solutions |
| **Core Team**            |                                                                                                                                                  |
| **Organization Project Leader** | • Key individual who manages the day-to-day project activities across all settings, helps gain support from stakeholders and leads others in the use of the TST® until the project is completed  
• Primary point of contact for the organization-wide hospital teams  
• Supports the hospital project leader by providing expertise in care delivery, implementation of clinical protocols, physician engagement, and cultivating organizational teamwork  
• Ensure deliverables are on time and meet expectations  
• Participate in creation, review, and presentations of deliverables as needed  
• Key individual responsible for continued success that includes the organization’s ongoing data collection plan, aimed at showing whether the improvements made during the project have been sustained |
| **Hospital Project Leader** | • This role is similar to the Health Care Organization project leader but has oversight of the project at their hospital or care setting  
• Primary point of contact for the Organization-Wide project team model  
• Key individual who manages the day-to-day project activities, helps gain support from stakeholders and leads others in the use of the TST® until the project is completed  
• Participate in implementation of recommended solutions  
• Ensure deliverables are on time and meet expectations |
| **Clinical Champion**    | • Clinical leader who has the influence to lead the improvement initiative and spread the success of the project to other patient care units/areas in your organization. |
| **Process Owner**        | • Leader of the project in the patient care area, for example the inpatient unit’s director, manager, supervisor or local clinical director  
• Responsible for day-to-day management of the initiative in their area  
• Responsible for on-going data collection to maintain the gains  
• Ensure deliverables are on time and meet expectations |
| **Subject Matter Experts** | • Individuals who are knowledgeable about specific areas or topics (such as infection control) and can provide guidance to the Core Team, as needed. |

### Concepts to Internalize

- Staff may be weary of hand hygiene projects based on past experience.
- It is important to let staff know that the focus of this project is to reduce the barriers that prevent them from performing hand hygiene so that it will be easier for them to wash hands and care for patients.
Getting Started

This section focuses on laying the groundwork for a successful project from identifying your project scope, to project access, to training your data collectors.

There are videos displayed throughout the tool providing tips from the original participating organizations that worked with the Center to develop the Hand Hygiene tool.

Also, you will find links to the CDC and WHO guidelines for additional Information.

Training Observers

The TST® provides detailed information on how to select and train hand hygiene data collectors, “observers” and “just-in-time coaches”.

The tool outlines the distinctive roles each data collector has, as well as, the data collection methodology in order to obtain a representative sample and non-bias data.
Downloadable Training Materials

- In the Training section of the tool, there are downloadable training materials and different video scenarios and practice exercises with the data collection form.
- At the end of the training session, there is a brief assessment exam that data collectors will take to ensure that the data collection process is accurate and consistent.

Baseline—Measuring Compliance

- This is an example of the data collection form.
- It lists the observable versus the non-observable contributing factors.
- Data collectors will be able to fill it out accordingly, and it will give real time feedback in terms of number of observations entered by the data collectors and the HH compliance rate.
Baseline Results

After entering baseline data, the TST® will show your baseline compliance rate and also rank your contributing factors from highest to lowest frequency based on your data collected.

Analyze Baseline Data

- The various charts have filtering capability to analyze by date, shift range and role type.
- The charts are updated real-time as new information is input into the TST®.
Targeted Solutions & Implementation Guides

- In the TST®, you will find specific Solutions and Implementation Guides that have been developed that address the corresponding Defects to Improve.
- Implementing these guides will reduce the causes that keep staff members from washing their hands, so your unit's hand hygiene compliance will increase.

Summary of Project Improvement Information

- There is a dashboard for the project baseline and improve phase to summarize information.
- The Analyze tab will lead you to charts and graph displays of your data.
Analyze Baseline and Improve Data

- Once you have entered both baseline and improve data, the TST® provides charts to compare your baseline to improve, to validate that the solutions you implemented are improvements and not just changes.
- You can see in the chart that baseline has a beige background and improvement a green background to help distinguish the two phases.

Sustaining The Gains

- In the Sustain phase, you will still need to continue to collect data, although on a much smaller scale.
- This section focuses on sustaining the improvements made in your unit, replicating these results in other areas of the organization, and other considerations to take your project to a higher level than wash-in and wash-out.
- There is a control plan which is a tool to document and plan the main activities that need to continue in order to sustain the gains of your project.
Outcomes—Which HAIs to Track?

- In the Baseline phase you were given the option to select HAIs as additional measureable outcomes.
- It is recommended that you enter HAI data for your project area for the six month period just before you started your project and continue to enter the monthly data into the TST® as your project progresses from Baseline to Sustain for evidence of the full impact of your work.

HAI Data Tracking Chart

- In the TST®, you can also see the impact of the project on the HAIs you selected earlier.
- In this graph, you can see the correlation between hand hygiene compliance and C. diff rates.
- In this example, as the rate of hand hygiene compliance increases, the rate of C. diff decreases throughout the months.
- As part of sustaining the gains you can continue to update outcome data.
We Invite You to Join the Growing Number of TST® Users

For more information about the TST®:

- Visit the Center website at www.centerfortransforminghealthcare.org or
- Call Customer Service at (630-792-5800) or
- Send an email to tst_support@cth.org