YOUR ROADMAP TO

Engaging Patients & Families in Hand Hygiene



Start with this Aim.

Within the next six months, we will implement at least one new process for better engaging patients and families in hand hygiene during hospitalization and begin evaluating the impact of this new process.

HINT

Chose a time when your patient and family team members can attend.

TOOLS

Kick-off presentation

PDSA worksheet

Hold a kick-off meeting. Discuss the Aim, describe the Hand Hygiene Huddle (HHH) concept and potential impacts (Driver Diagram), share an implementation example, brainstorm how it might be adapted to work here, and leave with a first PDSA(s) to try by next meeting. Be sure to assign someone to attend the next Patient and Family Advisory Council for additional insights!

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The Model for Improvement





Engage at the bedside.

Patients and families can be overwhelmed with information when in the hospital. Select engagement processes that help them "connect the dots" and feel part of the healthcare team. A little bedside conversation goes a long way.

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Transforming care at the bedside

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TeamSTEPPS

Continuous

Learning

Organizations



Make it the new Normal.

Once you find a promising process, get everyone on board with how to do it. Use existing channels of communication, like change of shift Staff huddles through staff huddles, to tell staff about the new process, set expectations, and elicit feedback.

Pick a floor & form a team.

Include a bedside nurse, nurse manager, infection preventionist, executive sponsor, and at least one patient or family advisor. Identify who will act as the Project Lead (schedule meetings, facilitate meetings) and arrange to meet monthly for 6 months.



TOOLS

Collaborating With Patient and Family Advisors

Schedule monthly debrief.

Discuss what was tried, what worked, what was learned, what to do differently in the coming month. Complete an action plan to capture your journey and jumpstart your next meeting. Project Lead shares action plan with team.

TOOLS

Action Plan template

Action Plan example



Build engagement into existing workflow.

When/where does it fit? For whom? What will make it part of a reliable system? Can you add a hand hygiene education box to your admission documentation screen? To your orientation to room checklist?

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Improving reliability of processes



Spread the word.

Be an example for other floors in your organization. Share this and your implementation ex to encourage other floors to create new engagement processes that will be embraced and sustained by the local team.



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Framework for spread









This material was prepared by Qualis Health, the Medicare Quality Improvement Organization for Idaho and Washington, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. WA-C10-QH-1424-06-14