

IMPERATIVE: CASE STUDY:

Improve Hand Hygiene, Lower HAIs **Bay Medical Center**

"When the CEO is looking at you and points out that you didn't watch your hands ... you wash your hands."

 Robert Campbell Director of Performance Improvement/ Patient Safety/Regulatory Compliance



Bay Medical Center Fights Healthcare-Associated Infections by Improving Hand Hygiene 300%

In a presumably aseptic environment such as a hospital, diligence of staff washing their hands when moving from patient to patient can easily be taken for granted. Yet, according to The Joint Commission, handwashing failures contribute to healthcare-associated infections that kill nearly 100,000 Americans each year and cost U.S. hospitals \$4 billion to \$29 billion annually to combat. At Bay Medical Center in Panama City, Florida, Compirion Healthcare Solutions, a healthcare consulting firm that was engaged to help improve ED Throughput, Finance and Core Measures compliance, found only 30% of the staff regularly washed their hands between visits with patients.

Handwashing originally fell under the auspices of Infection Control. Instead, Compirion's initial observations were brought before the Steering Team.

"Out of concern for patient safety, the Steering Team took ownership of handwashing protocols to a very personal level," said Chief Nursing Officer Lynette Svingen. "CEO acknowledgment of the issue certainly got the ball rolling."

Of three consulting companies that had been brought in, Compirion was the

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Bay Hand Hygiene ... (continued)





first that made changes with real impact. The hospital had had a lot of great ideas but struggled with implementation. Data was collected and reported, but no one took ownership of the idea, no one followed through, and no one was held accountable. To remedy that, the Compirion project leader put together an accountability spreadsheet that named names and then posted it for all to see. That single small act prompted the turning point in the project.

The Steering Team, working closely with Compirion consultants, assigned two phases to the handwashing initiative, Mentoring and Observation. The Mentoring phase involved rounding by select managers, directors and administrators who observed and recorded, but did not report, individual incidents of noncompliance. If non-compliance with handwashing protocols was ongoing with any one person, that person was warned. During the full Observation phase, the CEO, CFO, VP of Human Resources and other members of the leadership team joined in the rounding. As part of their rounding routine, each leader did 10 observations a week. Other individuals who were already rounding regularly became even more visible.

According to Robert Campbell, Director of Performance Improvement, Patient Safety and Regulatory Compliance and head of the Core Measures team, "When the CEO is looking at you and points out that you didn't wash your hands ... you wash your hands."

The baseline was 30%, and the target was set at 80%, but even with the leadership team involved, the numbers plateaued at 76%. In response, an internal marketing campaign was instituted. Following the lead of the CEO, posters were created that started a buzz throughout the hospital. The now famous poster pictured the CEO washing his hands and sported the tagline, "Hand hygiene: So easy, even our CEO can do it!" Rewarding those who demonstrated continual good hand hygiene with pocket sprayers of hand sanitizer provided further incentive. That positive reinforcement added personal gratification and helped motivate others.

Following the CEO poster, efforts focused on the physician groups. Neurosurgery featured a poster with two identical-twin neurosurgeons washing their hands. The tagline read, "Hand hygiene: It's not brain surgery!" The popularity of that new poster prompted other physician groups to get involved in the fun. To keep the goal in sight, only those with continual good hand hygiene could apply to be the subject of a poster. Each physician group elected the subjects. Only the key performers were featured.

Bay Hand Hygiene ... (continued)

The handwashing compliance measure is determined by the number of handwashing observations out of the number of opportunities. In the first four months, compliance increased by 293%. The target was 80%, but scores have remained in the 88-90% compliant range. Accountability is ensured by submitting names of the non-compliant to their immediate managers.

According to CNO Svingen, "Robert Campbell was the true shining star of the project. Robert is innovative, motivated and driven by success and the data. Don Morgan, Bay's COO, was also very supportive, but almost everyone at the leadership level was on-board. It was the support from the administration team that bought into Compirion's whole methodology and mandated it that made the project such a success."

For more information on Compirion's sustainable healthcare solutions, call **1-866-661-4677**, or visit **www.compirion.com/Bayhand.**

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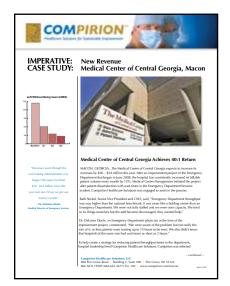


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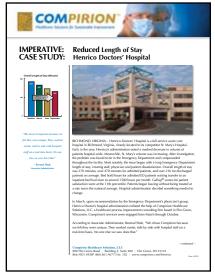
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