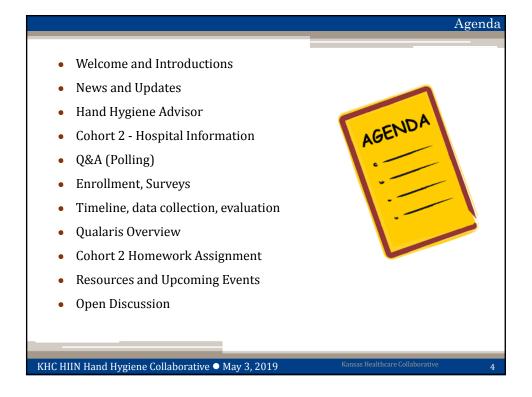


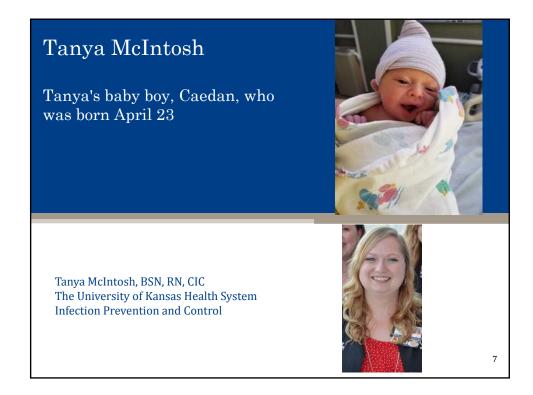


Welcome and Introduction **Presenters** Kansas Healthcare Collaborative **Cynosure Health** Chuck Duffield Barbara DeBaun, RN, MSN, CIC Performance Improvement Manager Improvement Advisor cduffield@khconline.org bdebaun@cynosurehealth.org **Qualaris Healthcare Solutions** Eric Cook-Weins Daniel Bishop, Co-Founder, CEO Data and Measurement Director Daniel@qualaris.com ecook-wiens@khconline.org Michele Clark Program Director mclark@khconline.org KHC HIIN Hand Hygiene Collaborative ● May 3, 2019

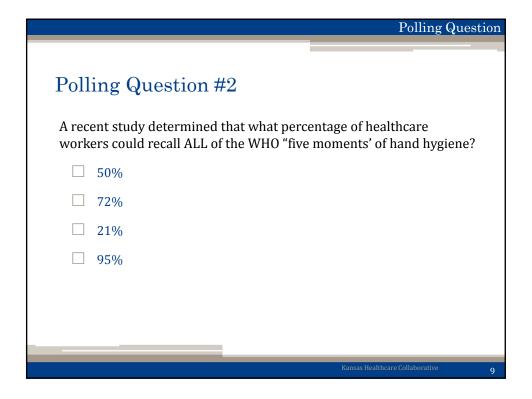


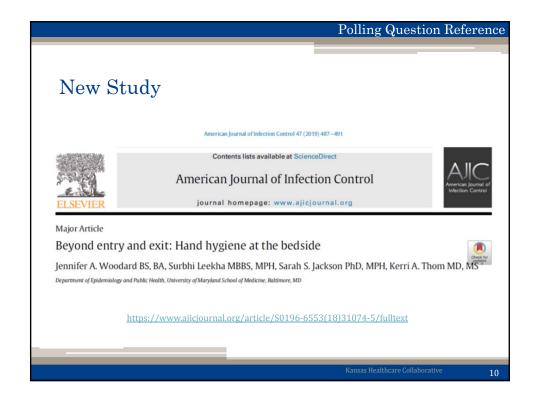
Polling Question #1 Which is accurate: | I participated in Cohort #1 of the KHC HIIN HH Collaborative and just had to come back for more fun. | I am new to this collaborative and have enrolled in Cohort #2. | I am curious about this collaborative and still deciding whether to enroll.



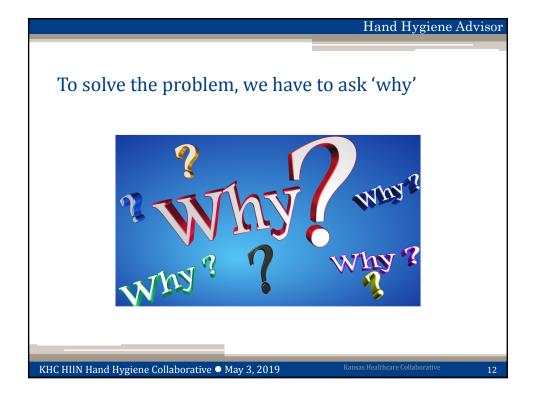


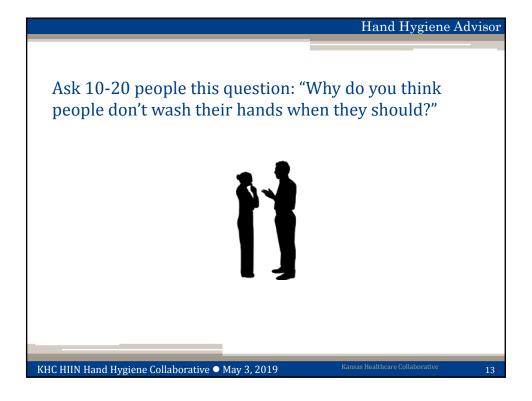




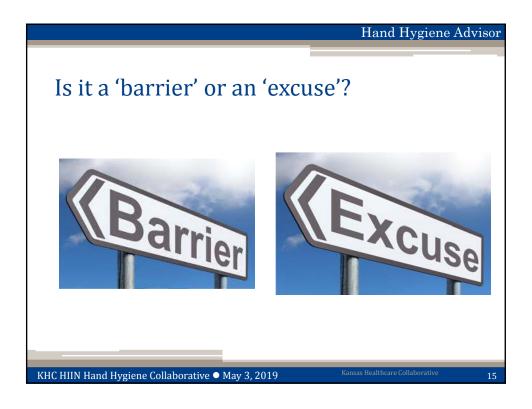


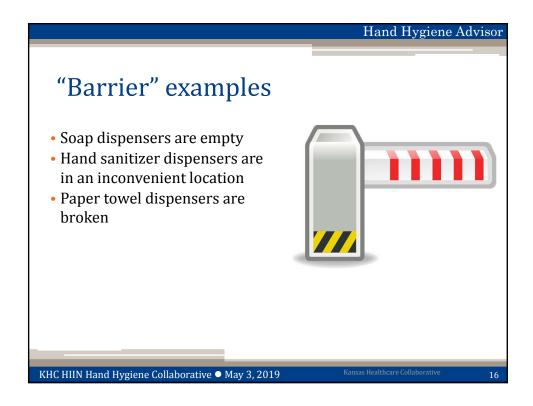


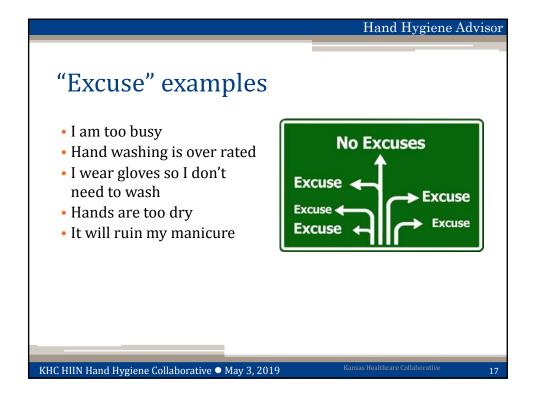


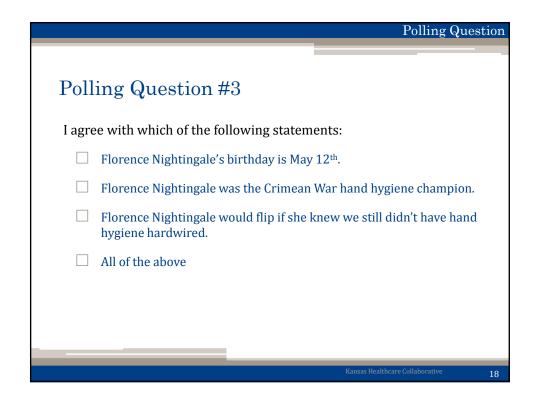


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KHC HIIN H	land Hygiene Collaborative ● May 3, 2019	Kar	nsas Healthcare C	ollaborative	14	

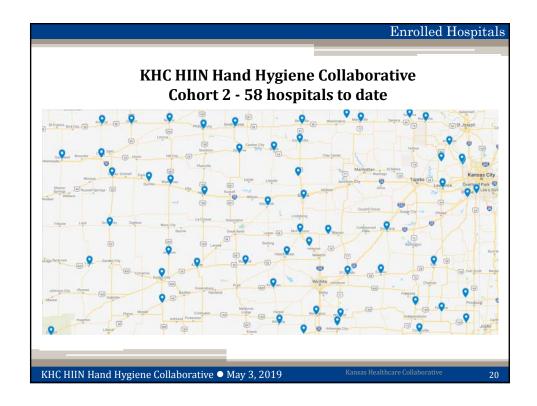












Enrolled Hospitals

KHC HIIN Hand Hygiene Collaborative Participant Commitments

By enrolling in Cohort 2 of the KHC HIIN Hand Hygiene Collaborative, your hospital's hand hygiene leaders are committing to be active in the following ways:

- Attend quarterly hand hygiene webinars (May 3, Aug. 16, Nov. 1 and Feb. 7, 2019-20)
- Create and implement a team-based action plan with SMART goals.
- Collect at least 30 hand hygiene observations each month.
- (Optional) Utilize the Qualaris web-based tool for monitoring hand hygiene compliance.
- Submit hand hygiene data monthly to NHSN or QHi.
- Share hand hygiene data with others in your facility.
- Be engaged in learning and sharing with your colleagues and peers.
- Engage in the collaborative's "SOAP UP" list-serv.
- Participate in occasional coaching calls.

KHC HIIN Hand Hygiene Collaborative ● May 3, 2019

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21

Enrollment Survey

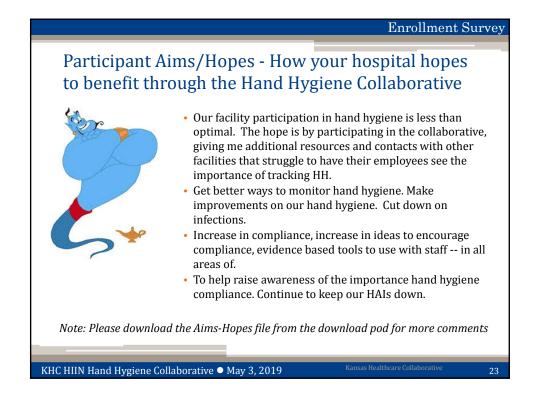
Participant Aims/Hopes - How your hospital hopes to benefit through the Hand Hygiene Collaborative

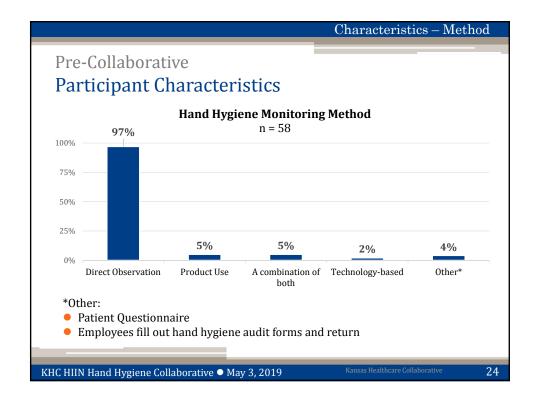
- Hope to get new ideas on how to monitor effectively, creative ideas for educating staff on hand hygiene, get access to Qualaris and effectively track audits and analyze data
- Improve and maintain Hand hygiene compliance to greater than 90%.
- Conversations about it and sharing results with departments has improved our compliance rate. Also the fun facts that are sent out, we share within our organization and everyone has really enjoyed those.

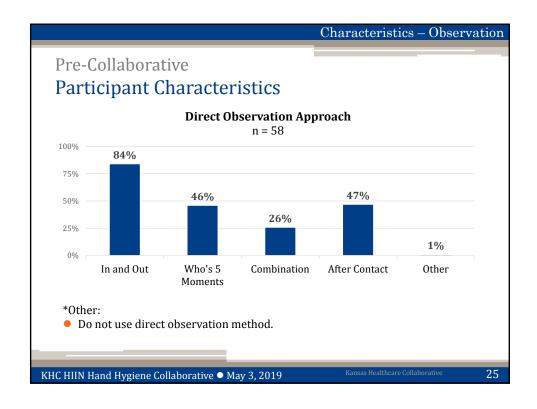


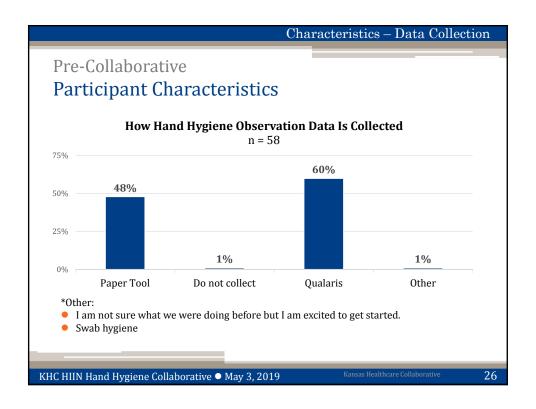
KHC HIIN Hand Hygiene Collaborative ● May 3, 2019

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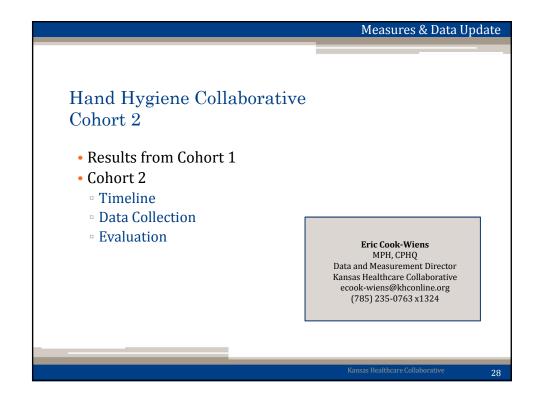


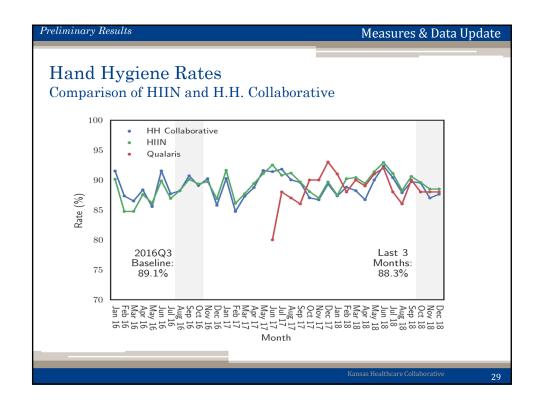


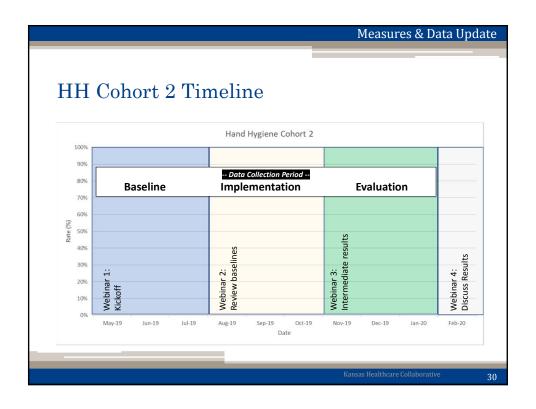












HH Cohort 2 Collaborative Data collection Baseline Period • May, June and July 2019 Implementation Period • August, September, October 2019 Evaluation Period • November, December, 2019 and January 2020 early in an analysis of the collection of the collection

Expectations for full participation

- Observations for EACH month
- · At least 30 observations per month per facility

NHSN or QHi will be used for the evaluation.

NOTE:

Measurement & Evaluation Strategy

Turnaround time before quarterly HH webinars is short. Could everyone strive to submit data a week early in July, October and January?

This would allow us to have as complete of data as possible for the webinars.

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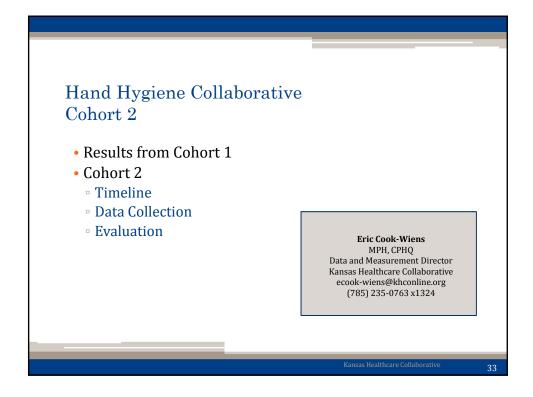
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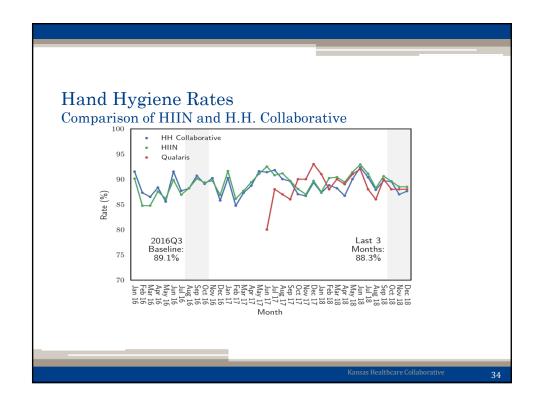
Measurement & Evaluation Strategy

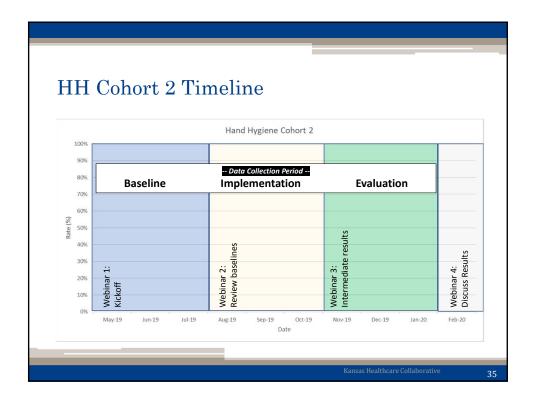
HH Cohort 2 Collaborative *Evaluation*

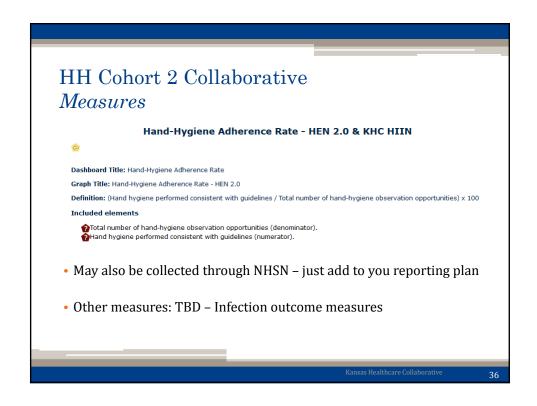
- KHC will collect and aggregate data for each period.
- New facility-specific reports will include:
 - Submitted hand hygiene data over time
 - Comparative hand hygiene data for the collaborative
 - Current status of related infection measures
 - Ex. CAUTI, CLABSI, SSI, CDI, MRSA
- Only facilities with complete data will receive reports.

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HH Cohort 2 Collaborative Data collection

Baseline Period

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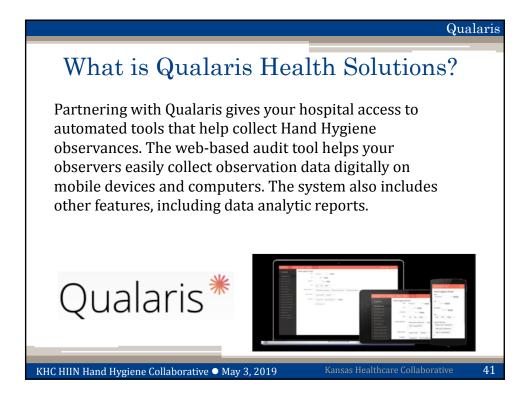
HH Cohort 2 Collaborative *Evaluation*

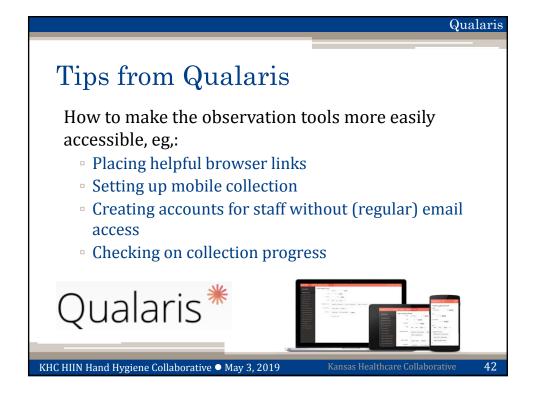
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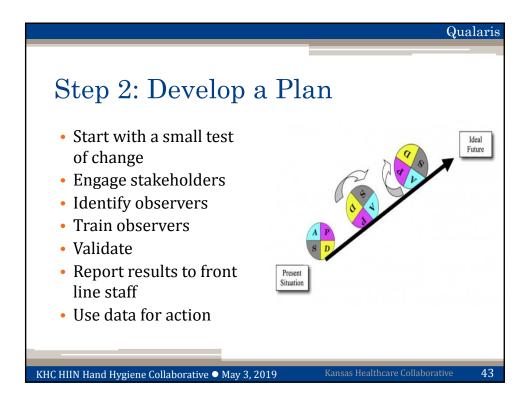
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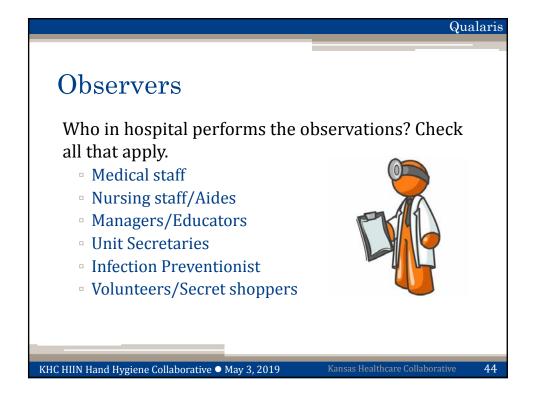




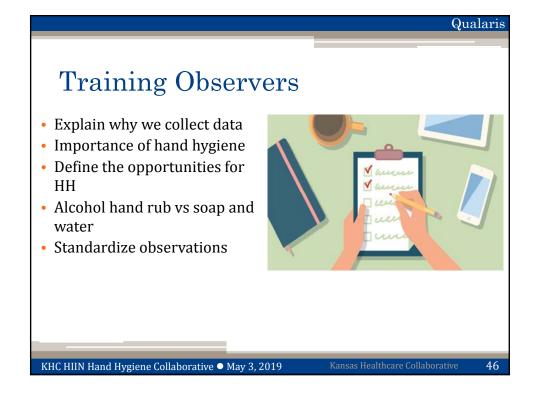


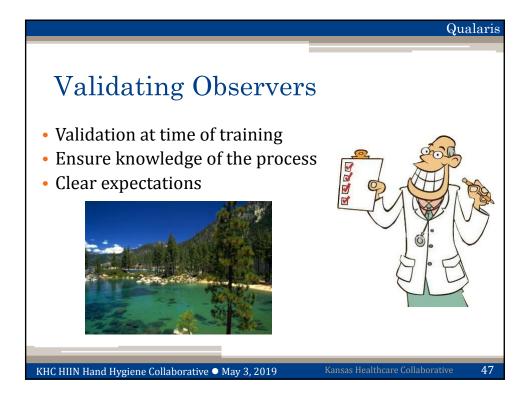


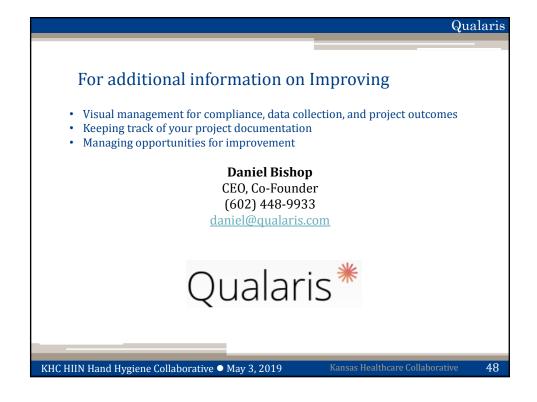








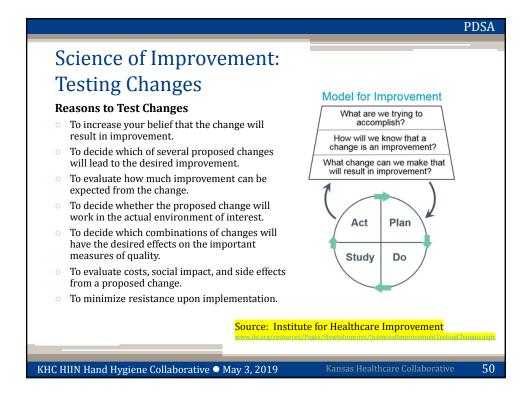


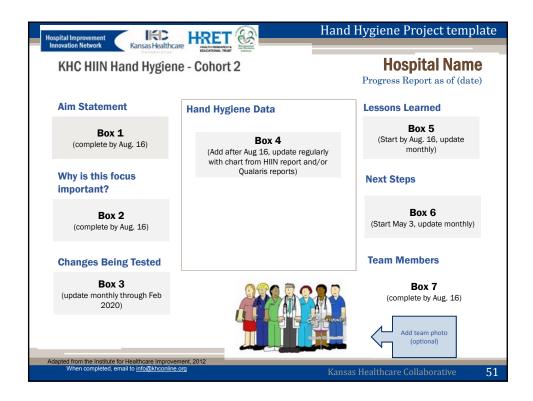


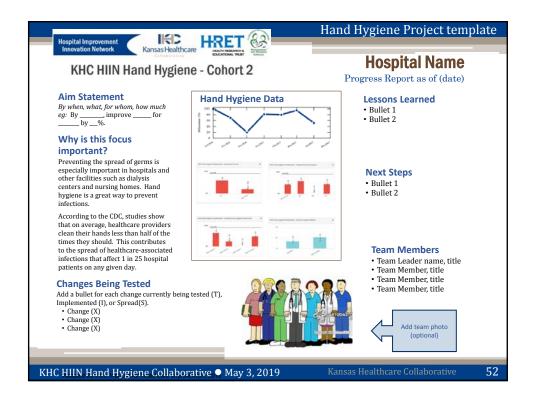
Melanie Burnett William Newton Hospital

A quick word from Melanie about Hand Hygiene at William Newton Hospital and their use of Qualaris in obtaining and reporting observations.

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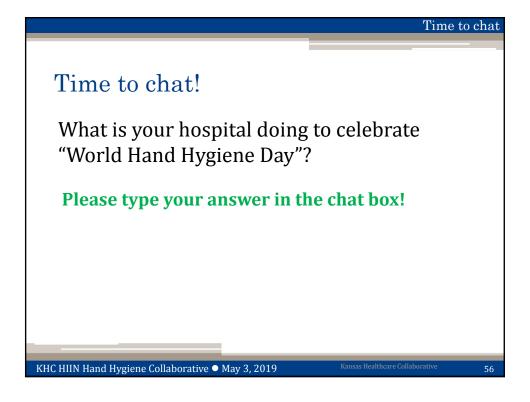




Hand Hygiene Homework Assignment KHC HIIN Hand Hygiene Cohort 2 Homework assignments 1. Pre-register for webinar series: Aug. 16, Nov. 1, Feb. 7 2. Brief staff interviews In the next 2-3 weeks, ask 10-20 people this question: "Why do you think people don't wash their hands when they should?" • Download the worksheet "Barrier or Excuse" in the webinar pods • Document the responses (no names) • Send the results by May 31 to: cduffield@khconline.org or fax to 785-861-7482 2. Draft an aim statement and start your project template. 3. Collect data: A minimum of 30 observations monthly. 4. Submit data: Into NHSN or QHi

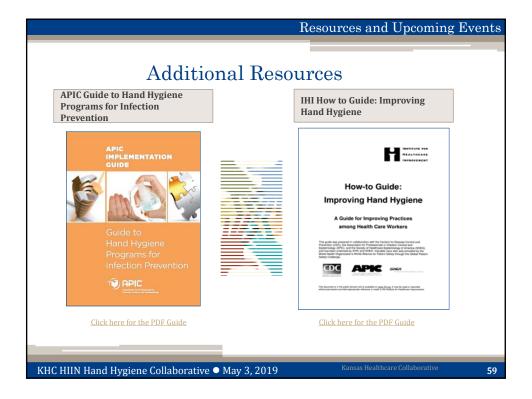


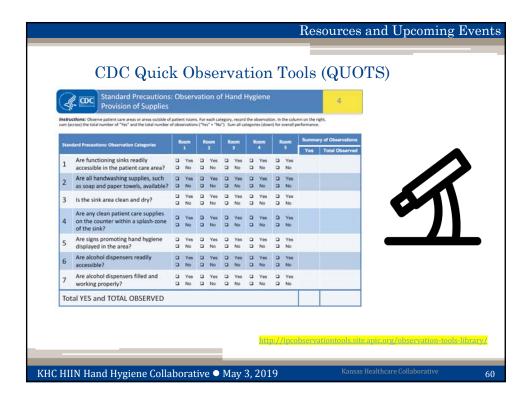


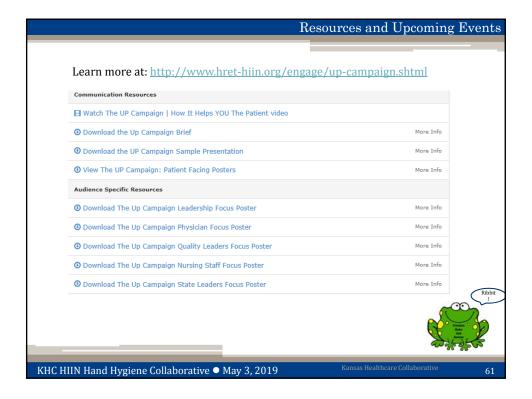




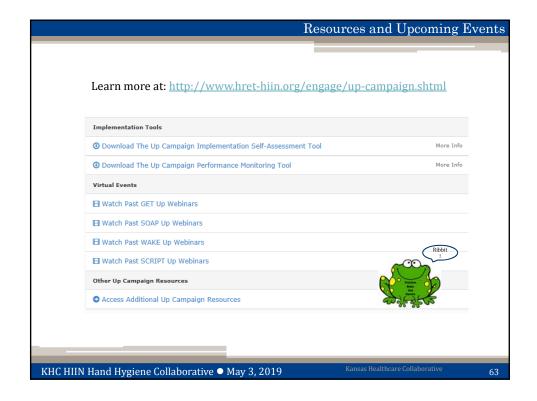














Hand Hygiene Website Access • Hand Hygiene Web page for members • https://www.khconline.org/ • The Hand Hygiene members page and the Hand Hygiene Toolkit access instructions will be sent to all members of the Cohort 2 on Monday May 6, 2019 in a message using the SoapUp Listserv. Be sure to watch your mail for more information coming soon. KHC HIN Hand Hygiene Collaborative ● May 3, 2019

Resources and Upcoming Events

Hand Hygiene Listserv

- The Hand Hygiene LISTSERV serves as a primary communication platform for the members of the KHC Hand Hygiene (HH) Collaborative Cohort 2
- The primary goal of this LISTSERV is to provide participants an engaging community to seek and share information, practical strategies, resources and project updates in support of your continued growth in Hand Hygiene development.
- To send an email to the HH LISTSERV: KHC-SOAPUP@LIST.KHCONLINE.ORG
 - (Note: The email address is case-sensitive, so be sure to use all upper-case letters. A slight delay may be expected as your message is processed.) <u>Recommended guidelines</u> (pdf)



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