

Session #3 • Cohort 2
KHC HIIN Hand Hygiene Collaborative
Nov 1, 2019
11:00 a.m. to 12:00 p.m.

What Have YOU Touched Today?
Viruses and bacteria can live for several hours on many surfaces.

Scrub Those Germs Away!

623 SW 10th Ave. • Topeka, KS 66612 • (785) 235-0763 • www.khconline.org

Welcome and Introduction

Dial-in and Chat

- Participants may listen in on their computer speakers or by phone.
- Dial-in number: (800) 311-9409
- Passcode: SCRUB

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Welcome and Introduction

Presenters

Cynosure Health

- Barbara DeBaun, RN, MSN, CIC
Improvement Advisor
bdebaun@cynosurehealth.org

Qualaris Healthcare Solutions

- Daniel Bishop, Co-Founder, CEO
Daniel@qualaris.com

The University of Kansas Health System

- Sylvia Ford, MS, RN, CIC
Health System Infection Prevention Specialist
sford@kumc.edu

Hospital Sharing

- Minneola District Hospital
- Meade District Hospital
- Newman Regional Health

Kansas Healthcare Collaborative

- Chuck Duffield
Performance Improvement Manager
cduffield@khconline.org
- Eric Cook-Weins
Data and Measurement Director
ecook-wiens@khconline.org
- Michele Clark
Program Director
mclark@khconline.org



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Agenda

- Welcome, Intros, and Announcements
- Hand Hygiene Advisor
 - Recap of Aug 16
 - Recap
 - Observation Sharing
 - Homework
- Data Update
- Poll
- Hospital Sharing
- Accountability
- What's Next
- Dan Bishop
- KU Shadow and video
- Resources and Upcoming events



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Hand Hygiene Advisor

Welcome and Introductions



- Barbara DeBaun, RN, MSN, CIC
- Improvement Advisor
- Cynosure Health

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Recap – Aug 16

Recap of the Hand Hygiene webinar
Aug 16, 2019

- Review and findings of Barriers and Excuses exercise
- Hospital sharing and “ah-ha’s”
 - [Mitchell County Hospital Health Systems](#)
 - [Republic County Hospital](#)
- KHC data presentation
- Qualaris presentation
- Presented information about resources and upcoming events.

The May 3 and Aug 16 webinar recording links are available from the KHC Hand Hygiene Collaborative members page.

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Commitments

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 (Feb. 7, 2019-20)
- Create and implement a team-based action plan with SMART goals.
 - 44 of 81 hospitals have submitted action plans to date.
- Collect at least 30 hand hygiene observations each month.
- (Optional) Utilize the Qualaris web-based tool for monitoring hand hygiene compliance. *Note: Qualaris does not submit data to NHSN or QHi*
- 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.

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Hospital Sharing - Observations

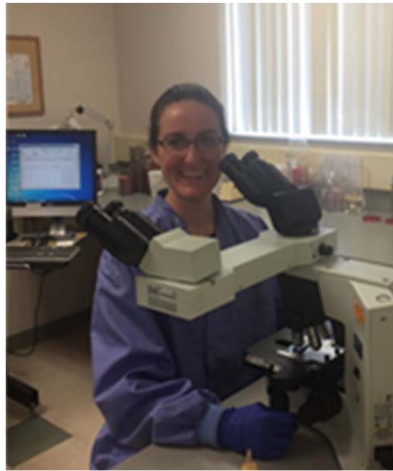
Ester Knobloch from Newman Regional Health



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Hospital Sharing - Observations

Ester's 'aha moments' from the
barriers/excuse exercise



- Face-to-face conversations with front line staff
- Role validation
- Response to correction of a barrier in the ED
- Education about ingredients in soap

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Hospital Sharing - Observations

NRH Senior Leadership – Got soap?



10/22/2019

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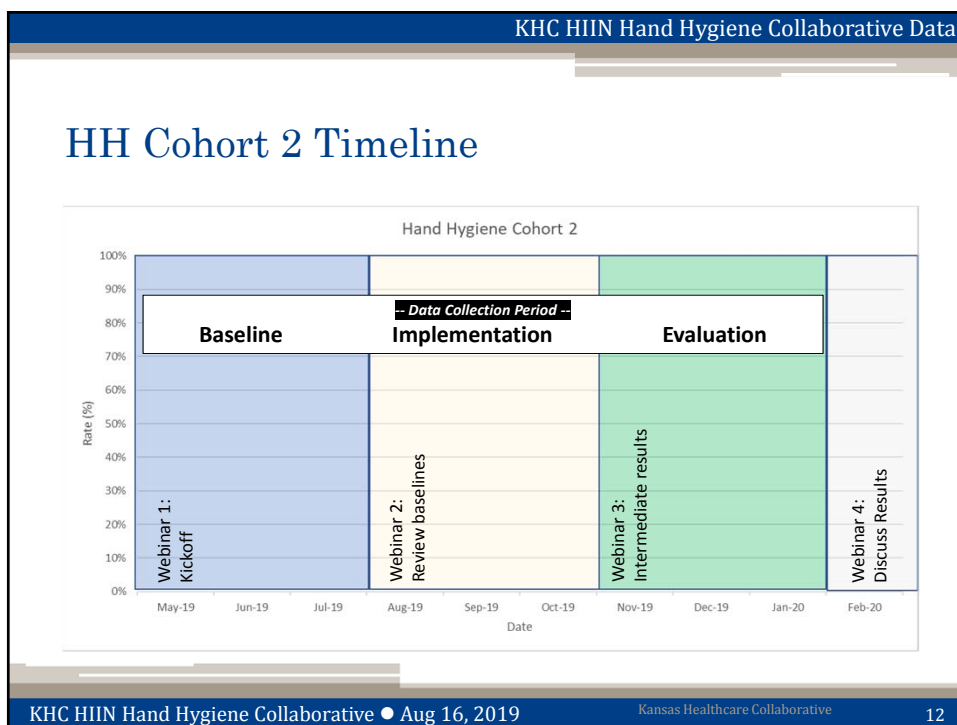
KHC HIIN Hand Hygiene Collaborative Data

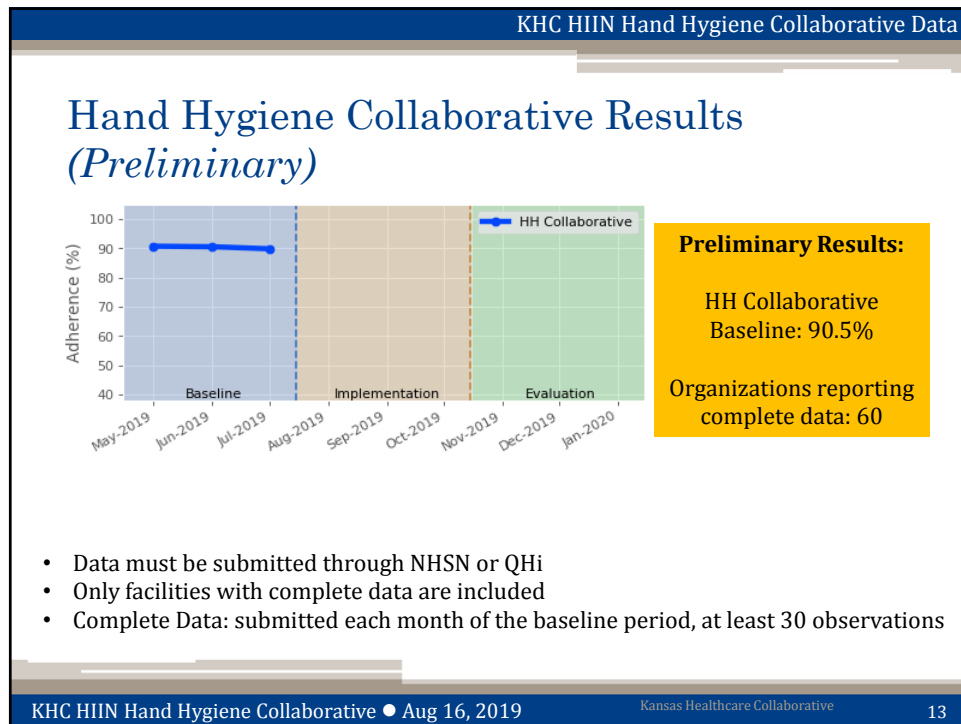
Hand Hygiene Collaborative Cohort 2

- Baseline Results (Preliminary)
- HH Collaborative Reports

Eric Cook-Wiens
MPH, CPHQ
Data and Measurement Director
Kansas Healthcare Collaborative
ecook-wiens@khconline.org
(785) 235-0763 x1324

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KHC HIIN Hand Hygiene Collaborative Data

Complete Baseline Data (as of 10/28/2019)

Anderson County Hospital	Hiawatha Community Hospital	Newton Medical Center
Atchison Hospital	Hillsboro Community Hospital	Norton County Hospital
Clay County Medical Center	Hodgeman County Health Center	Olathe Medical Center, Inc.
Cloud County Health Center	Holton Community Hospital	Osborne County Memorial Hospital
Coffey County Hospital	Kearny County Hospital	Ottawa County Health Center
Coffeyville Regional Medical Center	Kiowa District Hospital	Phillips County Hospital
Community HealthCare System, Inc.	LMH Health	Rawlins County Health Center
Community Memorial Healthcare, Inc.	Labette Health	Sabetha Community Hospital, Inc.
Decatur Health Systems, Inc.	Lindsborg Community Hospital	Saint John Hospital
Edwards Co. Hosp. and Healthcare Ctr.	Logan County Hospital	Saint Luke Cushing Hospital
Ellinwood District Hospital	Meade District Hospital/Artesian Valley HS	Saint Luke's South Hospital
Ellsworth County Medical Center	Memorial Health System	Salina Regional Health Center
Fredonia Regional Hospital	Mercy Hospital Columbus	Sheridan County Health Complex
Geary Community Hospital	Mercy Hospital, Inc.	Stafford County Hospital
Girard Medical Center	Miami County Medical Center, Inc.	Sumner County Hospital District No. 1
Goodland Regional Medical Center	Minneola District Hospital	Susan B. Allen Memorial Hospital
Gove County Medical Center	Mitchell County Hospital Health Systems	Trego County Lemke Memorial Hospital
Greenwood County Hospital	Nemaha Valley Community Hospital	Western Plains Med. Complex
Hanover Hospital	Ness County Hospital District No. 2	William Newton Hospital
Hays Medical Center	Newman Regional Health	Wilson Medical Center

THANK YOU


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KHC HIIN Hand Hygiene Collaborative Data

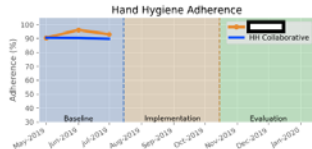
HH Collaborative Reports

- Distributed Wed. 10/30/2019
- Only facilities with complete data received a report
- Sent to HH collaborative contact(s)
- For this report, months with fewer than 10 observations are included, but marked red in reports.
- Infection counts in lower table

Hand Hygiene Collaborative Data Report



The KHC Hand Hygiene Collaborative Cohort 2 is composed of three data collection time periods: baseline (May 2019 - July 2019), implementation (August 2019 - October 2019) and evaluation (November 2019 - January 2020). This report includes data from hospitals within the collaborative that have complete data submission through NHISN or QIN. For this report, complete data is defined as reporting the results from at least 30 observations for each baseline month (May, June and July, 2019).



The time chart shows monthly status of your hospital compared to the Hand Hygiene Collaborative with 60 hospitals (21 excluded due to incomplete data). We are currently in the implementation phase of the collaborative.

Hand Hygiene Data											
	Baseline			Implementation			Evaluation				
	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20		
Monthly	125/138	156/110	96/102	-	-	-	-	-	-		
Month Rates	90.58%	96.36%	93.14%	-	-	-	-	-	-		
Quarter Rates	93.14%										

Hand Hygiene Collaborative Data: All Facilities (n=60)						
	Baseline	Implementation	Evaluation			
Month Rates	90.69%	90.51%	89.85%	-	-	-
Quarter Rates	90.33%					

Infection Counts			
	Baseline	Implementation	Evaluation
CAUTI	1		
CDI	0		
CLABSI	0		
MRSA	0		
SSI/COLO	0		
SSA/PSST	0		

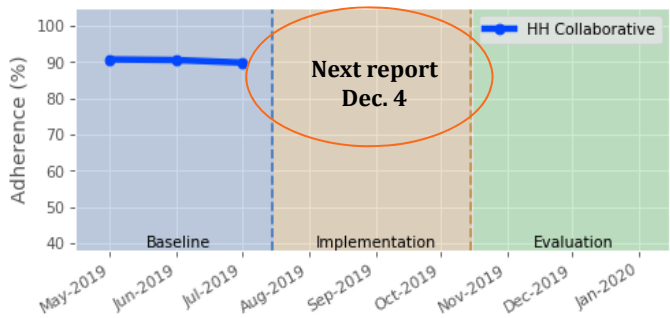
As part of the Hand Hygiene Collaborative, this report also includes counts of infections for each project period.

Snapshot Date: October 26, 2019

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KHC HIIN Hand Hygiene Collaborative Data

Hand Hygiene Collaborative Next steps



Let's get the rate over 95%

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Hospital Sharing

Polling Question

I believe hand hygiene by staff is more likely to happen if the Infection Preventionist is within sight:

- ☐ Yes
- ☐ No

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Hospital Sharing

Hospital Sharing

- Minneola District Hospital
- Meade District Hospital

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Hospital Sharing

Shannon and Jodi from Minneola District Hospital



- Night shift engagement
- What got their attention?
- How is Shannon's presence different from Jodi's?



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Hospital Sharing

Patient/Family Education and Empowerment

We would like to empower our patients and family to take an active role in preventing the spread of infection. It is okay to ask all staff to use proper hand hygiene (washing with soap and water or using the hand sanitizer before and after any patient contact.) It is

See the full handout in the download pod

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KHC Hand Hygiene Collaborative

Aim Statement
To increase hand hygiene adherence at Minneola Health Care to 95% compliance throughout the facility by November 1st, 2019.

Why is this project important?
Hand Hygiene is the best practice to prevent the spread of germs and decrease the risk for potential healthcare-associated infections.

Changes Being Tested, Implemented or Spread

- Increased observations per month, minimum 30 (I)
- Train hand hygiene observers on night shift (I)
- Share results with other departments. (I)
- Develop a non-verbal communication among staff members for noncompliance. (T)

Minneola Health Care
Hand Hygiene Progress Report as of 9/30/19

Hand Hygiene Data

Month	Compliance %	Count
May 19	93%	144
June 19	93%	144
July 19	93%	144

Lessons Learned

- Education on proper handwashing techniques with check off.
- Include other departments on data results and educate when warranted.

Next Steps

- Adding an observer from night shift.
- Empowering patients/families to ask staff to wash hands if needed.
- Educate staff to implement patients handwashing prior to meals.

Team Members


- Shannon Brown LPN, ICN
- Jodi Miller RN

Adapted from the Institute for Healthcare Improvement. 2012

Hospital Sharing

Michele and Grace from Meade District Hospital

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Hospital Sharing

Meade District Hospital

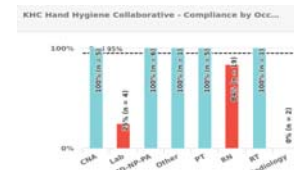
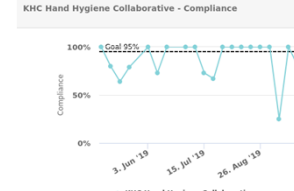
Hand Hygiene Report September 2019

KHC Hand Hygiene Collaborative

Aim Statement
To increase and hard wire hand hygiene compliance to 100% within the next 3 months. The month of September is at 81% compliance.

Why is this project important?
Hand Hygiene is the #1 way to help in preventing health-care associated infections in the hospital setting. It is extremely important for our facility to adhere to hand hygiene compliance to keep our patients, family members and staff infection free.

Hand Hygiene Data

Lessons Learned: Non-compliance this month was isolated to two specific departments. Department managers involved in discussion on ways to increase compliance along with new education provided to staff.

Education:
Germ Matching activity from APIC www.apic.org/infectionpreventionandyou


Hand Hygiene Reward:
Increased Hand Hygiene Super Stars to 2 this month. Each month they receive a bottle of Bath & Body Works hand soap.

Team Members

• Michele Dewell	Grace Kuhns
• Jami Roberts	Amy Meyer
• Lanica Millsap	Lee Ebeling
• LaDonna Trujillo	Dawn Ross
• Yolanda Martinez	

Changes Being Tested, Implemented or Spread

- Share hand hygiene adherence rate: monthly
- Expand team to include other departments: Completed
- Provide education to staff who are non-complaint: monthly
- Keep education fun & educational without being punitive: Complete
- Distribute new hand hygiene posters throughout the facility and clinic: Complete
- Ensure hand hygiene products are readily available: complete
- Develop a reward system for compliance: complete



Meade District Hospital

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Hospital Sharing

Resources

- <https://cleanhands.ucsfmedicalcenter.org/>

** Available in the link pods below


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KHC Presentation

Chuck Duffield

Accountability and Responsibility



Chuck Duffield
Performance Improvement Manager
cduffield@khconline.org

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HELLO
I AM...
ACCOUNTABLE

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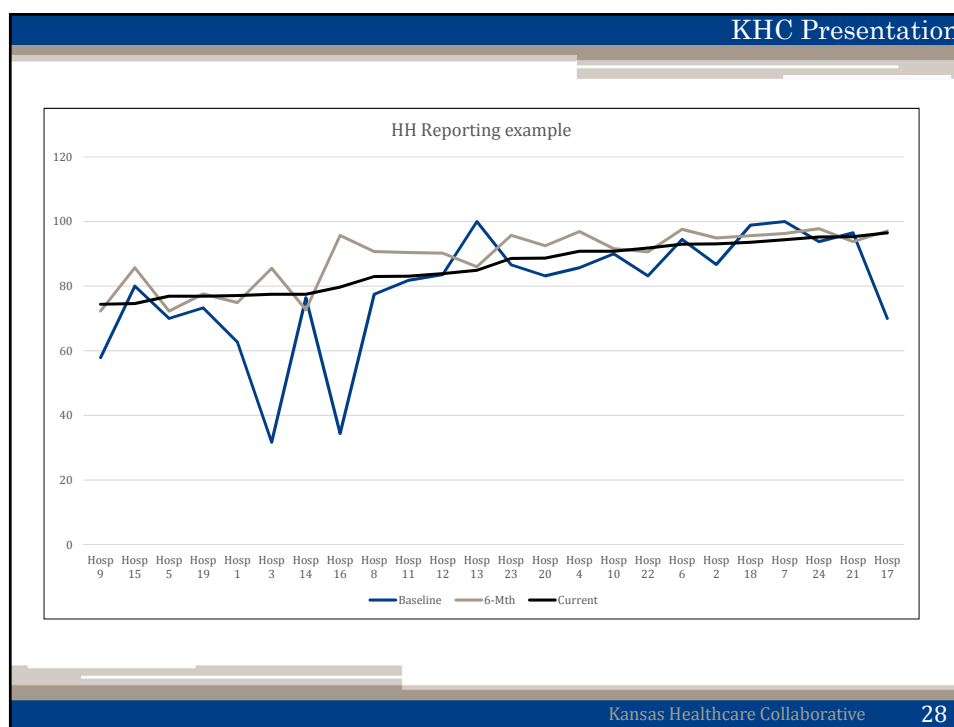
Accountable

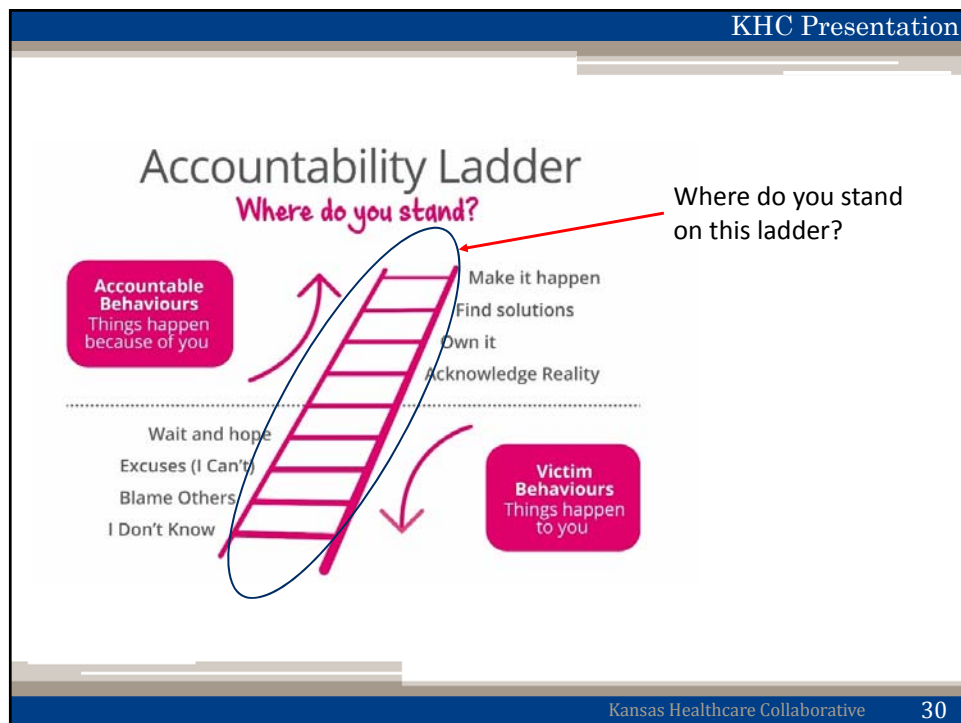
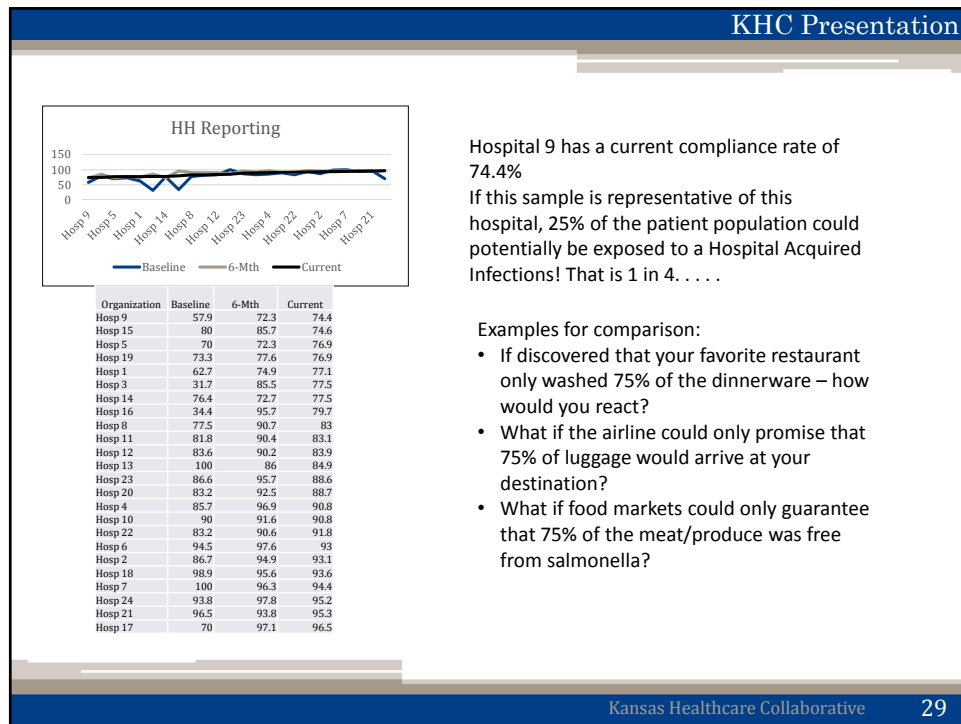
“Being responsible for those who are entrusted in your care!”

Please chat into the chat box what this means to you.

To be responsible means to be answerable for something within one's power or control. Notice the two aspects of this **definition** – the ability to control plus **being** able to answer for something. **To be accountable means to be** subject to giving an account or having the obligation to report, explain or justify something.

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A cartoon featuring two chickens. The first chicken says, "YOU'VE GOT A PROBLEM WITH AVOIDING PERSONAL ACCOUNTABILITY". The second chicken replies, "YA, AND WHOSE FAULT IS THAT?".



A sign with a red border and a cloud-like shape containing the text: "you either make Yourself accountable or you will be made accountable by your circumstances."

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Q&A

You and a co-worker are preparing to conduct a procedure. You wash you hands, but notice your co-worker did not!

Who is accountable and Why?

Who is responsible and Why?

Please feel free to chat in a response!

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KHC Faculty Presentation

Barb DeBaun

What's Next?



Barbara DeBaun, RN, MSN, CIC
Improvement Advisor
Cynosure Health

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KHC Faculty Presentation

The last time we met...



BARRIERS **EXCUSES**

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Polling Question

What have you found is easier to 'fix'?

- ☐ Barriers
- ☐ Excuses

Did you break down any barriers?



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Polling Question

Are you fed up with the excuses?

☐ Yes

☐ No

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A Truth About Quality Improvement: you
can't fatten a cow by weighing it



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So we can measure until the cows come home...



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But measuring (alone) won't move the dial



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So what is it going to take?

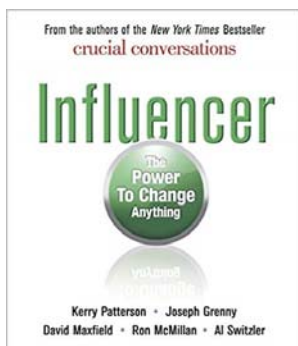


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What can we learn from others?



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Delancey Street: vital behaviors to drive change

- Take responsibility for someone else's success
- Demand that everyone confronts everyone else about every single violation
 - Speak up to people who are breaking the rules, drifting off, becoming verbally aggressive, and otherwise behaving badly

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Another vital behavior: praise rather than punishment



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So what does this have to do with hand hygiene?



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All Washed Up: learning from kids



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Six Sources of Influence

	Motivation	Ability
Personal	<i>Do they want to engage in the behavior?</i> Make the undesirable, desirable	<i>Do they have the right skills and strengths to do the right thing?</i> Help them surpass their limits
Social	<i>Are other people encouraging or discouraging behaviors?</i> Harness peer pressure	<i>Do others provide the help, information and resources required?</i> Find strength in numbers
Structural	<i>Are systems rewarding the right behavior and discouraging the wrong ones?</i> Design rewards and demand accountability	<i>Are there systems that keep people in place and on progress?</i> Change the environment


Source: Influencer

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How do we move from ‘measure’ to ‘measure-vention’?

- See something, say something



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I'd like to share a personal experience...

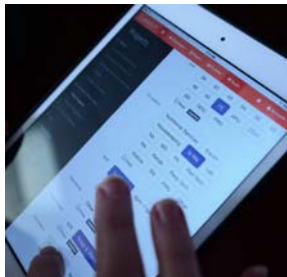



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Qualaris

Qualaris Data and reports

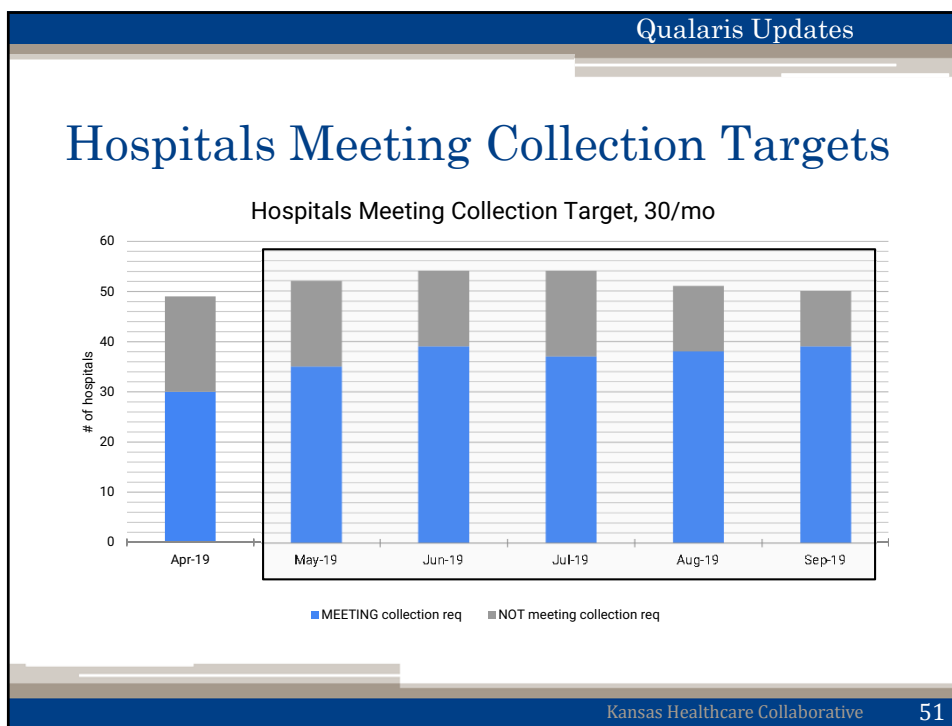
- Hospitals Meeting Collection Target
- Each hospital's minimum goal is being set to 30 to assist with tracking and reporting



Qualaris 

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Qualaris

For additional information contact Dan Bishop:

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Qualaris 

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Resources and Upcoming Events

Resources and Upcoming Events


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KU Presentation


 THE UNIVERSITY OF KANSAS HEALTH SYSTEM

Peer Sharing and Coaching Video Series Instructional PPT Recordings



Sylvia Ford, MS, RN, CIC
Infection Prevention Nurse 2
The University of Kansas Health System

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 THE UNIVERSITY OF KANSAS HEALTH SYSTEM

Peer-to-Peer Sharing and Coaching

Take advantage of the opportunity to shadow a system-level Infection Preventionist

Share ideas and receive coaching on

- Methods for monitoring hand hygiene compliance
- Communicating performance feedback in real time
- Making data meaningful
- Improvement strategies


Available in multiple locations across Kansas

- If interested, contact JPAC@kumc.edu

Shadow Opportunity!

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 THE UNIVERSITY OF KANSAS HEALTH SYSTEM

Coming Soon!

Three-part Video Series (Nov.)

Short video snippets demonstrating standard tasks in hand hygiene monitoring and improvement:

1. Collecting an observation (paper or electronic)
2. Reviewing and sharing your results
3. Planning a small test of change

Watch KHC's SOAP UP list-serv for announcement and links when released.

Instructional PPT recording (Feb.)

Recorded presentation addressing hand hygiene in the ambulatory setting and continuum of care.

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Hand Hygiene Homework Assignment

KHC HIIN Hand Hygiene Cohort 2

Homework assignments Nov 1, 2019

- 1. Pre-register for final webinar:** Feb. 7
- 2. Review your hand hygiene project or aim statement** and update your project template. Send an updated copy to Chuck by Jan. 25.
- 3. Collect data:** A minimum of 30 observations monthly.
- 4. Submit data:** Into NHSN or QHi. Sept data was due by Oct. 31.
- 5. Identify next steps:** Type into chat pod your next steps to advance your hand hygiene program between now and our Feb. 7 webinar.
- 6. Formulate a sustainment plan:** Begin building your plan to sustain your improvements in the future beyond this project and collaborative. Formalize this plan into a working model for others to follow if someone else takes over this responsibility.

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Hand Hygiene Homework Assignment

KHC HIIN Hand Hygiene Cohort 2

Homework assignments Nov 1, 2019

Additional tasks to perform in your role as a Hand Hygiene Collaborative team.

- 1.** Share your surveillance data
- 2.** Share an intervention on the list serve
- 3.** Update your project summary sheet (project/AIM)
- 4.** Decentralize Hand Hygiene observations
- 5.** Establish a “zero-tolerance” for failure to perform Hand Hygiene

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Hand Hygiene Project template

KHC HIIN Hand Hygiene - Cohort 2

Aim Statement

Box 1
(complete by Aug. 16)

Why is this focus important?

Box 2
(complete by Aug. 16)

Changes Being Tested

Box 3
(update monthly through Feb 2020)

Hand Hygiene Data

Box 4
(Add after Aug 16, update regularly with chart from HIIN report and/or Qualaris reports)

Lessons Learned

Box 5
(Start by Aug. 16, update monthly)

Next Steps

Box 6
(Start Aug 16, update monthly)

Team Members

Box 7
(complete by Aug. 16)

← Add team photo (optional)

Adapted from the Institute for Healthcare Improvement, 2012
When completed, email to info@khconline.org

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Hand Hygiene Project template

KHC HIIN Hand Hygiene - Cohort 2

Aim Statement
By when, what, for whom, how much
eg: By _____ improve _____ for _____ by ____%.

Why is this focus important?
Preventing the spread of germs is especially important in hospitals and other facilities such as dialysis centers and nursing homes. Hand hygiene is a great way to prevent infections.

According to the CDC, studies show that on average, healthcare providers clean their hands less than half of the times they should. This contributes to the spread of healthcare-associated infections that affect 1 in 25 hospital patients on any given day.

Changes Being Tested
Add a bullet for each change currently being tested (T), Implemented (I), or Spread(S).

- Change (X)
- Change (X)
- Change (X)

Hand Hygiene Data

Lessons Learned

- Bullet 1
- Bullet 2

Next Steps

- Bullet 1
- Bullet 2

Team Members

- Team Leader name, title
- Team Member, title
- Team Member, title
- Team Member, title

← Add team photo (optional)


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Resources and Upcoming Events

Next HIIN Webinars

- **KHC HIIN Webinar**
 - Nov 20, 2019 • 10:00 to 11:00 am
 - *Topic: Antibiotic Stewardship – Peer-to-Peer Sharing*
 - Register here: <https://khconline.adobeconnect.com/khc-hiin-11-20-19/event/registration.html>
- **Hand Hygiene Collaborative – Session #4**
 - Feb 7, 2020 • 11:00 am - 12:00 pm CT
 - *Topic: Sustainability*
 - Register here: <https://khconline.adobeconnect.com/khc-hh-020720/event/registration.html>




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Resources and Upcoming Events


CDC Quick Observation Tools (QUOTS)



**Standard Precautions: Observation of Hand Hygiene
Provision of Supplies**

Instructions: Observe patient care areas or areas outside of patient rooms. For each category, record the observation. In the column on the right, sum (across) the total number of "Yes" and the total number of observations ("Yes" + "No"). Sum all categories (down) for overall performance.

Standard Precautions: Observation Categories	Room 1		Room 2		Room 3		Room 4		Room 5		Summary of Observations	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	Total Observed
1 Are functioning sinks readily accessible in the patient care area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2 Are all handwashing supplies, such as soap and paper towels, available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3 Is the sink area clean and dry?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4 Are any clean patient care supplies on the counter within a splash-zone of the sink?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
5 Are signs promoting hand hygiene displayed in the area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
6 Are alcohol dispensers readily accessible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7 Are alcohol dispensers filled and working properly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Total YES and TOTAL OBSERVED												



<http://ipcoobservationtools.site.apic.org/observation-tools-library/>

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Resources and Upcoming Events

KHC 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 has sent to all members of the Cohort 2. Be sure to watch your mail for more information coming soon.



Hand Hygiene Collaborative



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Resources and Upcoming Events

KHC 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.) [Recommended guidelines](#) (pdf)



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Resources and Upcoming Events


Additional Resources

MMWR Guideline for Hand Hygiene in Health-care Settings



<https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5116a1.htm>

Strategies to Prevent Healthcare-Associated Infections through Hand Hygiene






<https://www.cambridge.org/core/journals/infection-control-and-hospital-epidemiology/article/strategies-to-prevent-healthcare-associated-infections-through-hand-hygiene/2AA26D45C59B8F963DF991EF760C2A4D>

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Resources and Upcoming Events

Additional Resources

Patient Education Posters: Hand Hygiene for Patients From CDC

https://www.cdc.gov/handhygiene/pdfs/Patient-Poster-Ask-For-Safe-Care_508.pdf

<https://www.cdc.gov/handhygiene/pdfs/patient-poster-its-ok-to-ask-508.pdf>

<https://www.cdc.gov/handhygiene/pdfs/patient-poster-speak-up-for-clean-hands-508.pdf>

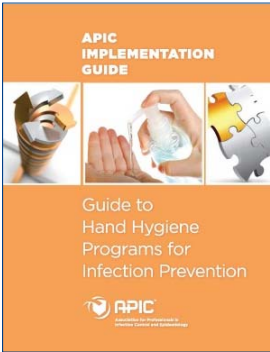
https://www.cdc.gov/handhygiene/campaign/promotional.html#anchor_1555100516

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Resources and Upcoming Events

Additional Resources

APIC Guide to Hand Hygiene Programs for Infection Prevention



[Click here for the PDF Guide](#)

IHI How to Guide: Improving Hand Hygiene



[Click here for the PDF Guide](#)


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Resources and Upcoming Events

Learn more at: <http://www.hret-hiin.org/engage/up-campaign.shtml>

Communication Resources	
Watch The UP Campaign How It Helps YOU The Patient video	
Download the Up Campaign Brief	More Info
Download the UP Campaign Sample Presentation	More Info
View The UP Campaign: Patient Facing Posters	More Info

Audience Specific Resources	
Download The Up Campaign Leadership Focus Poster	More Info
Download The Up Campaign Physician Focus Poster	More Info
Download The Up Campaign Quality Leaders Focus Poster	More Info
Download The Up Campaign Nursing Staff Focus Poster	More Info
Download The Up Campaign State Leaders Focus Poster	More Info



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Resources and Upcoming Events

Up Campaign Posters

For Patients



For Nursing Staff



<http://www.hret-hiin.org/engage/up-campaign.shtml>

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Resources and Upcoming Events

HRET HIIN Soap Up Campaign

Recorded "Soap Up" Webinars

"Making It Fun Makes A Difference"

"Soap Up Hand Hygiene Game"

<http://www.hret-hiin.org/resources?topic=soap-up>



<http://www.hret-hiin.org/engage/up-campaign.shtml>

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Resources and Upcoming Events

Learn more at: <http://www.hret-hiin.org/engage/up-campaign.shtml>

Implementation Tools	
Download The Up Campaign Implementation Self-Assessment Tool	More Info
Download The Up Campaign Performance Monitoring Tool	More Info

Virtual Events	
Watch Past GET Up Webinars	
Watch Past SOAP Up Webinars	
Watch Past WAKE Up Webinars	
Watch Past SCRIPT Up Webinars	

Other Up Campaign Resources	
Access Additional Up Campaign Resources	




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Resources and Upcoming Events

Hand Hygiene Resources

- [Joint Commission-updated hand hygiene standards for 2019](#)
- North Carolina Statewide Program for Infection Control and Epidemiology [hand hygiene competency checklist](#)
- APIC [2016](#), [2017](#) and [2018](#) Festival Winners
- [Veteran's Administration hand hygiene posters](#)



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Open Discussion




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Resources and Upcoming Events

Please provide feedback to this webinar.
Let us know your next steps.

<https://www.surveymonkey.com/r/HH-Webinar-11-1-2019>



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Contact Us

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Kansas Healthcare
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For more information:
→ KHConline.org

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