



2008 Share Conference Working Together for Quality and Service

**Quality Coaches in Action:
NewYork-Presbyterian Hospital –
Milstein Hospital Building
January 9, 2008
Sharing Outcomes from the
Infection Prevention Coach Training Program**





Project Participants

Site Coordinator:

*Grimilda Mendez-Augsburg, MBA
Director of Operations
Department of Epidemiology*

Management Representatives:

*Elenita Ramos, RN
Patient Care Director*

Department:

5 HN Cardiothoracic Step-down

Coaches:

- *Maria Estillo, RN, CN 3*
- *Rowana Hibbert
ICU Technician*
- *Sandra Smith
ICU Technician*





Project Goal

The goal for this project are three-fold:

- 1) to improve hand hygiene compliance before and after patient contact
- 2) to increase staff immunization rates, and
- 3) to improve cleanliness of the environment.





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What is different?

❖ **Most significant achievement:**

- **Strong team work to roll-out infection prevention education to unit staff**

❖ **Compliance data collection method:**

▪ **Hand Hygiene:**

- Sanitarians (aka: mystery observers) conduct anonymous rounds
- Observations are recorded on Palm Pilots and downloaded to central database

▪ **Flu Vaccination:**

- Occupational Health Services monitors compliance

❖ **Quantitative Results:**

- Hand Hygiene compliance increased 24%
- Flu Vaccination compliance is 25% higher than the national average for healthcare workers

❖ **Qualitative Results:**

- Increased staff awareness of the importance of infection prevention using interactive and fun activities
- Strengthened labor-management relationship
- Modeled behavior for other staff members to increase compliance





What is different?

❖ Hand Hygiene Compliance:

	Overall		Before Touching Patient			After Touching Patient			After Touching Patient Environment			After Removing Gloves		
	Count	Rate	Count	Portion	Rate	Count	Portion	Rate	Count	Portion	Rate	Count	Portion	Rate
September	32	50%	11	34%	36%	8	25%	63%	5	16%	60%	8	25%	50%
October	68	72%	12	18%	58%	21	31%	86%	13	19%	62%	22	32%	73%
November	54	65%	9	17%	33%	17	31%	71%	12	22%	67%	16	30%	75%
December	66	74%	11	17%	45%	17	26%	94%	28	42%	71%	10	15%	80%

❖ Flu Vaccination Compliance: 61%





What did you do to achieve results?

- ❖ **Planned curriculum, set schedule and time frame for activities**
- ❖ **Engaged staff by distributing buttons and hanging posters**
- ❖ **Approached non-compliant staff to correct behavior**
- ❖ **Used Halloween stickers to tag non-compliant staff**
- ❖ **Conducted interactive educational activities with staff**
- ❖ **Partnered with unit Flu Champion to encourage staff vaccination**
- ❖ **Met with Environmental Services to clarify equipment cleaning responsibilities and create sticker identification system**





Challenges and Strategies

- ❖ Biggest challenges:
 - Staff non-compliance with performing hand hygiene

- ❖ Steps taken to meet or manage the challenge:
 - Continue correcting non-compliance





What's Next?

Describe the commitments you have or will make to continue progress.

- *Unit Teams or Department*
- *Hospital-wide*
- ❖ Continue to reinforce infection prevention methods
- ❖ Seek assistance from management and epidemiology
- ❖ Request increase in the number of IPC Quality Coaches

