

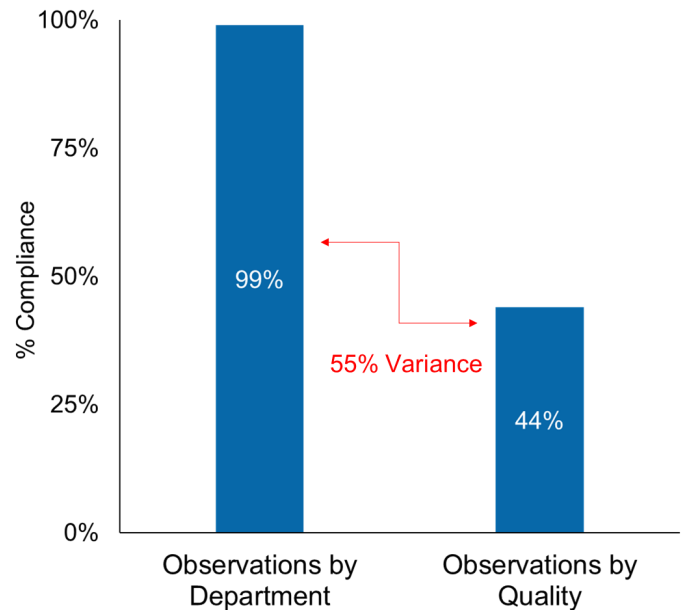
# Pressing Reset on Hand Hygiene to Reduce Methicillin Resistant Staphylococcus Aureus (MRSA) Bacteremia

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## Problem/Background

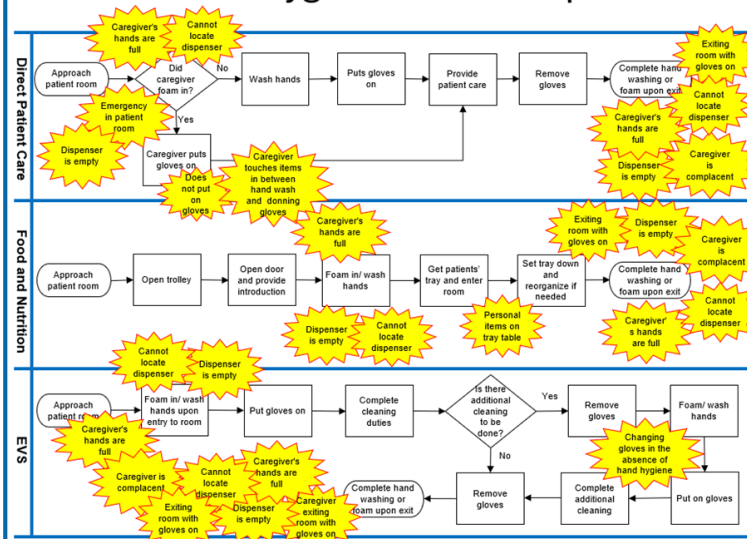
- Cleveland Clinic Weston Hospital was experiencing an increase in hospital onset MRSA Bacteremia cases.
- Analysis of the MRSA bacteremia cases revealed hand hygiene non-compliance to be a suspected cause.
- Comparison data on hand hygiene compliance was collected by the Quality department. Data revealed a 55% variance in surveillance, indicating non-compliance was not accurately reported and true compliance was poor.

Hand Hygiene Surveillance Gaps Pre-Intervention

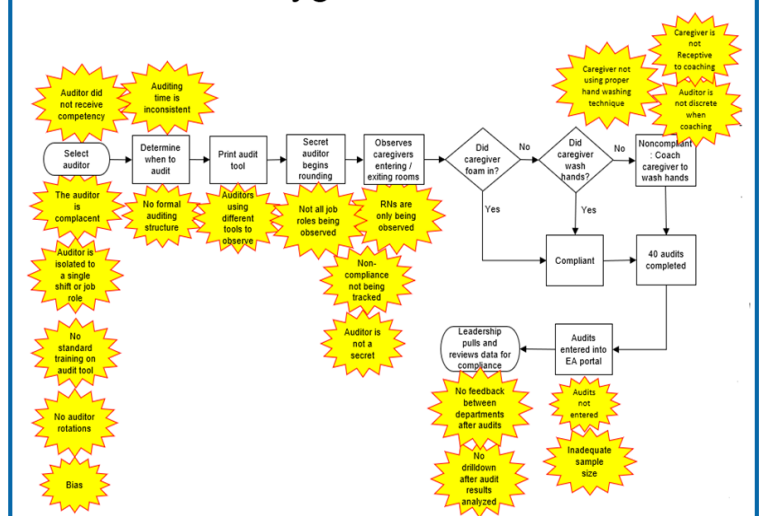


## Measurement/Analysis

### Hand Hygiene Non-Compliance

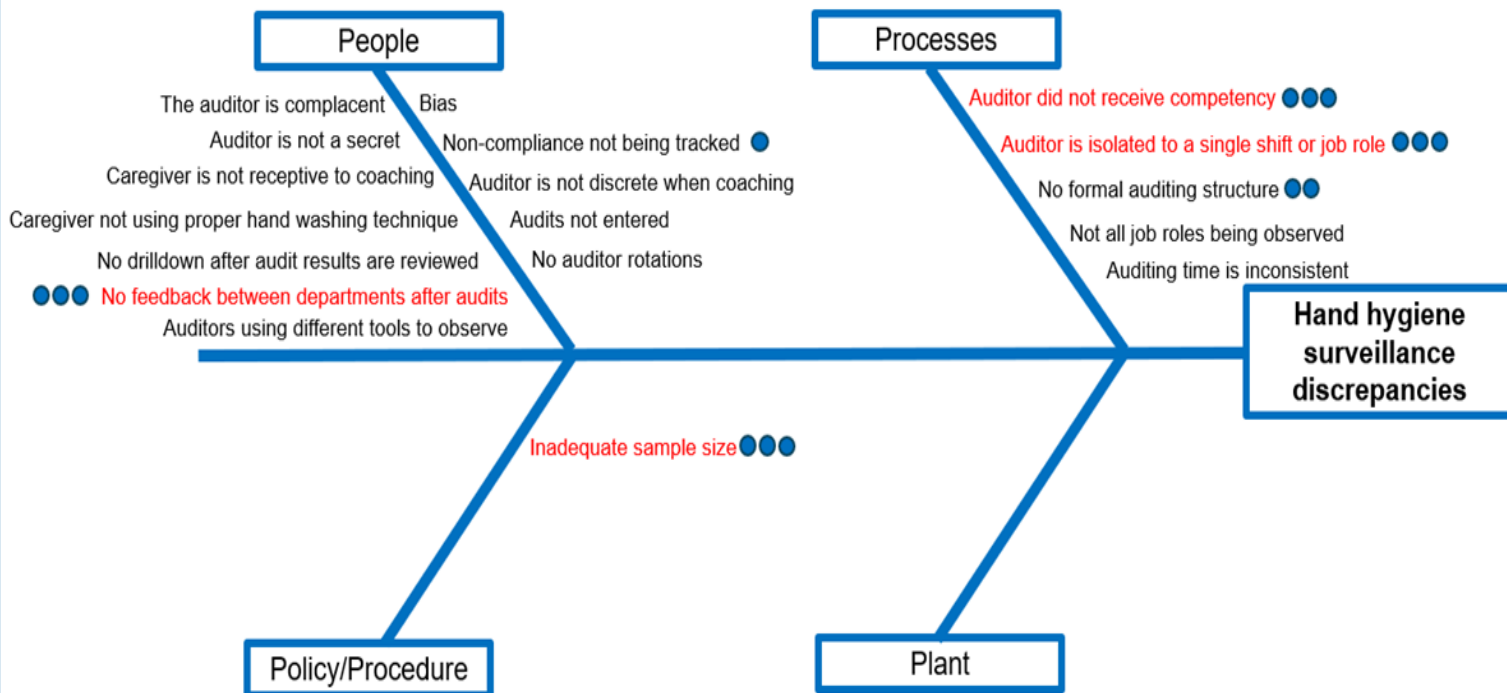


### Hand Hygiene Surveillance

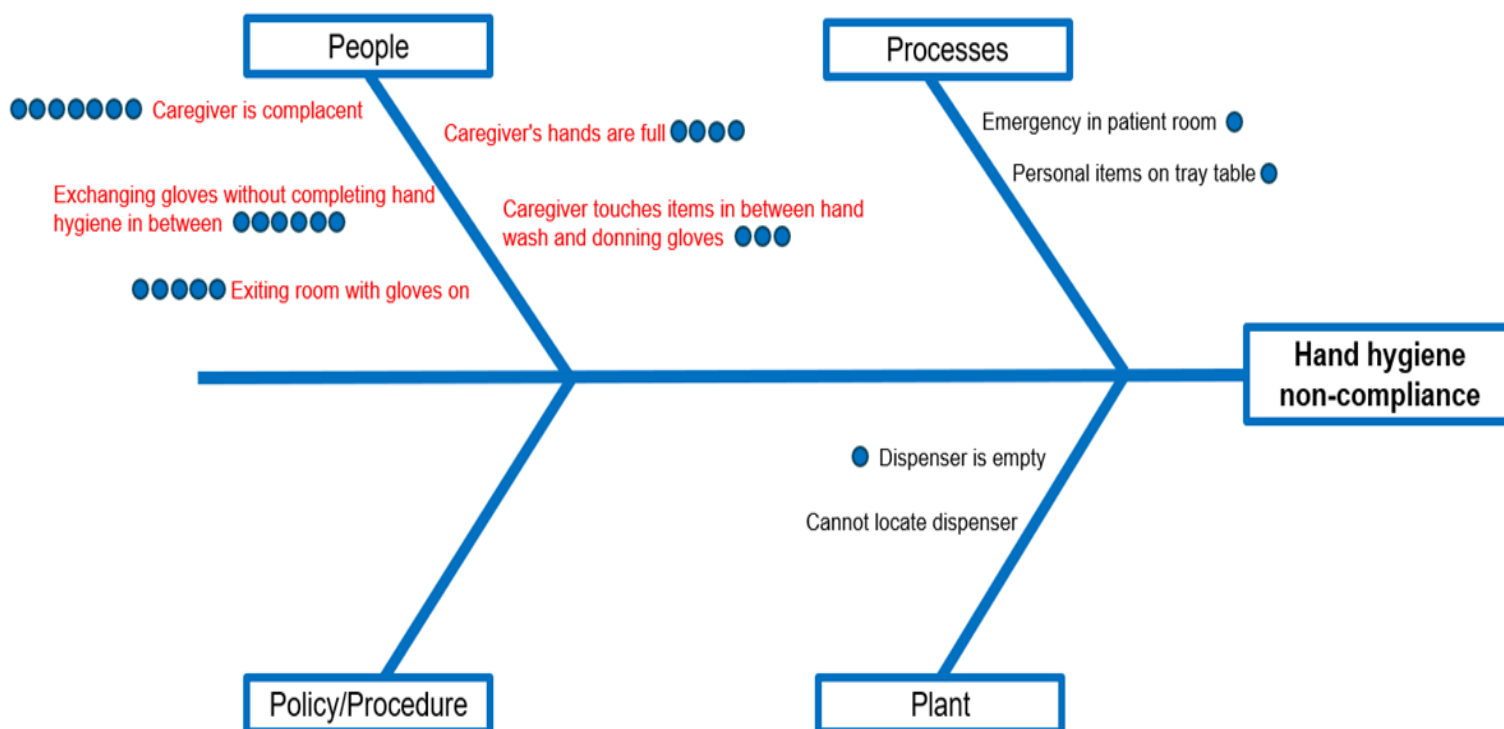


# Measurement/Analysis

## Fishbone Diagram: Hand Hygiene Surveillance



## Fishbone Diagram: Hand Hygiene Non-Compliance



# Implementation

## Education/Training

- Return demonstration competencies:
  - Hand hygiene (new hires)
  - Surveillance auditors (new and annually)

## Surveillance

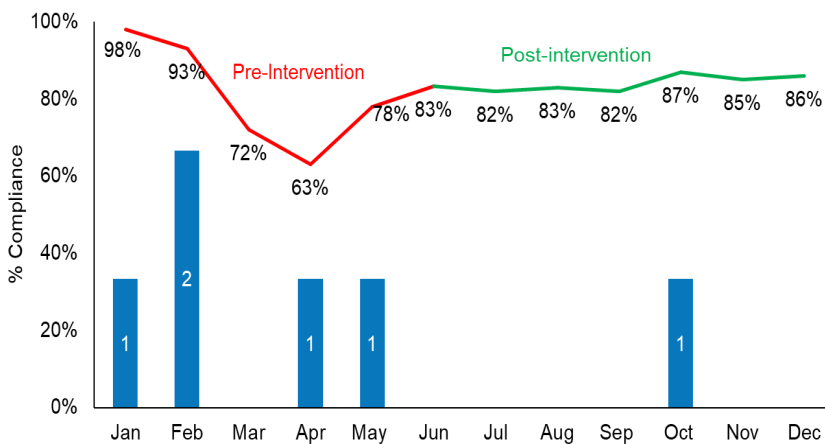
- Increase to 100 audits per month/unit
  - Department to conduct 60 audits
  - Infection Prevention/Quality to conduct 40 audits
  - Standardize sampling criteria to include all shifts and job roles

## Action Planning

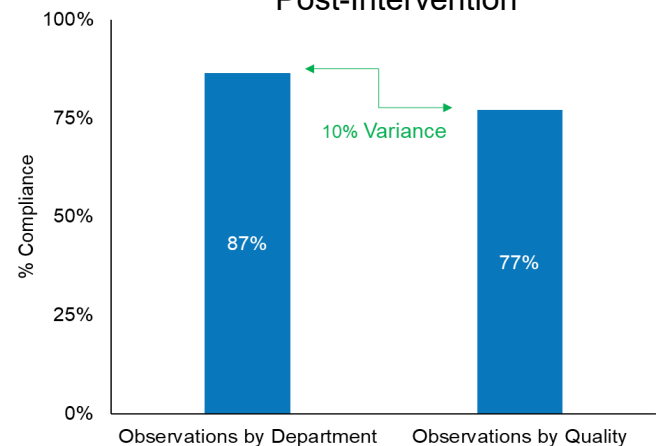
- Standardize review of compliance data in Tableau dashboard
- Collaborate with all leaders to develop department specific action plans

# Results

Hand Hygiene Compliance vs. MRSA Cases



Hand Hygiene Surveillance Gaps Post-Intervention



# References

Bharadwaj, S., Ho, S. K., Khong, K. C., Seet, A., Yeo, K. C., Chan, X. Y., Wong, L. L., Karlin, R. B., Chan, D. K., & Ling, M. L. (2019). Eliminating MRSA transmission in a tertiary neonatal unit—A quality improvement initiative. *American Journal of Infection Control*, 47 (11), 1329-1335. <https://doi.org/10.1016/j.ajic.2019.06.001>

Pada, S. M., Chee, P. L., Rathenam, S., Ng, K. S., Alenton, L. S., Poh, L., & Tambyah, P. A. (2019). Effectiveness of a ward level target accountability strategy for hand hygiene. *Antimicrobial Resistance and Infection Control*, 8(1). <https://doi.org/10.1186/s13756-019-0641-0>

World Health Organization. (2009). WHO guidelines on hand hygiene in health care: First global patient safety challenge : Clean care is safer care