Are You Gel-in? A Culture Change Campaign To Improve Hand Hygiene Performance
Heather M Limper, Cynthia Perez, Jennie Sierra, Thomas Siminski, Julie Fitzgerald, Mark Abe, Allison H. Bartlett
University of Chicago Medicine

Background

• In December 2013, a the Pediatric Intensive Care Unit (PICU) requested approval for palivizumab in inpatients at high risk for severe complications from RSV.
• Evaluation of the request by the antibiotic stewardship team uncovered an underlying concern of poor compliance with transmission control efforts including hand hygiene (HH) and use of personal protective equipment (PPE).
• A campaign to improve hand hygiene (HH) throughout the PICU was deemed necessary for patient safety as an adjunct to approval of palivizumab for selected patients.
• HH is required on entry and exit of a patient room.

Aims

• To improve HH compliance in the PICU from 33.6% to 80%
• To sustain compliance for a 3-month period.


Table 1. Baseline HH Compliance in PICU

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Compliance before entering (%)</th>
<th>Compliance after exiting (%)</th>
<th>Total compliance (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>RN</td>
<td>18.9</td>
<td>37.8</td>
<td>25.9</td>
</tr>
<tr>
<td>Attending</td>
<td>15.9</td>
<td>67.8</td>
<td>45.6</td>
</tr>
<tr>
<td>Resident</td>
<td>7.6</td>
<td>25</td>
<td>16</td>
</tr>
<tr>
<td>EVS</td>
<td>53.3</td>
<td>75</td>
<td>63</td>
</tr>
<tr>
<td>Other</td>
<td>22</td>
<td>79.5</td>
<td>41.6</td>
</tr>
<tr>
<td>Total</td>
<td>21.9</td>
<td>47.9</td>
<td>33.6</td>
</tr>
</tbody>
</table>


The Intervention

Physician Directed

• An electronic survey was administered to pediatric residents to measure baseline knowledge, attitudes, and beliefs around HH
• Physicians participated in group education around the importance and proper procedures for HH

Nursing Directed

• Nursing leadership and the Unit-Based Council (UBC) participated in brainstorming sessions to address the root-cause of poor HH compliance on the unit
• Increased signage was identified as an appropriate component of the intervention

Combined

• A HH Pledge was signed by unit faculty and staff to:
  1) Perform HH when indicated
  2) Remind others to perform HH and
  3) Respond positively when reminded by others
• Administrative staff on the unit chose a ‘universal phrase’ “Are you Gel-in?” to remind each other to perform HH. This phrase could be stated in front of families without causing concern to parents or embarrassment of staff.
• Process measure: HH compliance information was distributed electronically to unit leadership for weekly dissemination and posted in workrooms by IC.

Results

• Average HH compliance across all occupations increased from 33.6% in Sept-Nov 2013 to a sustained average of 90.4% in Jan-March 2014.


Lessons Learned

• Staff engagement and ownership is difficult to cultivate but necessary for sustained culture change.

Contact: Heather M. Limper: hlimper@medicine.bsd.uchicago.edu