



London Health Sciences Centre



Creating a Culture of Safety  
Physician Playbook

**An Influencer Approach to Improving  
Hand Hygiene**

December 2011

# Spectrum Health – West Michigan

- 7 hospitals
  - 8,000 employees
  - 1,500 physicians
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- Used the Influencer model to create behaviour change to close the gap to 100%
  - In 6 months they reached 100% and have sustained it for 2 years

# Overwhelm the problem

Utilize all six sources of influence to create sustainable behaviour change in hand hygiene.

	Motivation	Ability
Personal	1 Make the Undesirable Desirable	2 Surpass Your Limits
Social	3 Harness Peer Pressure	4 Find Strength in Numbers
Structural	5 Design Rewards and Demand Accountability	6 Change the Environment

Influencer VitalSmarts 2008

The goal: To overwhelm the problem with influence strategies so that change becomes inevitable.

# A Culture Change will require:

- Full engagement throughout the ICU
- How will we obtain full engagement?
  - A shared purpose: The safety and protection of our patients
  - Commitment cards and commitment posters
  - Utilizing all 6 sources of influence simultaneously

# Identifying Measurable Objectives

- The Measurable Result that worked at Spectrum Health was “Compliance with the Wash In / Wash Out (WIWO) policy
- The procedure is to wash your hands with soap and water or use an alcohol based hand sanitizer each time you enter and each time you leave a patients room
- In the ICU we will measure compliance of Wash in, Wash out, not infection rates
- How will we measure compliance?
  - Our own ICU Infection Control Champions will monitor for Wash in and Wash out
  - ICU Infection Control Champions will continue to audit all 4 moments of hand hygiene for corporate submission
  - Standard Consistent protocol for observation and monitoring of Wash in and Wash out
  - Continuous ongoing measurement of compliance
  - Keeping rates visible and share rates with unit

# Measurable Objectives

**Where are we at?** In the ICU, our current rates are:

- 55% for Moment 1 and
- 86% for Moment 4.

**Our goal is simple:**

All those who enter the Intensive Care Unit have the potential to contaminate their hands and the environment. It is our expectation that you Wash in and Wash out! Our goal is to reach 100% in Moment 1 and Moment 4 in 100 days, launching January 16th.

# The Creating a Culture of Safety Project focuses on the following 3 Vital Behaviours:

1. Appropriate hand washing or appropriate use of hand sanitizer every time you enter or leave a patients room.
2. 200% Accountability. I am 100% accountable for my own hand washing behaviour and I am also 100% accountable for your hand washing behaviour. When I see someone failing to wash their hands, I will speak to them, remind them and work to resolve the problem.
3. Say “Thank you.” This phrase meant that when someone reminded me to wash my hands (even if I’d just washed them) I would thank them for reminding me and wash them again. I would not get defensive. Instead, I would do my best to make it safe and easy for people to remind me. This fosters a feeling of “it’s safe to speak up”.

# What do we need physicians to do?

- Role model the behaviours
  - Wash in and Wash out
- When you are reminded say Thank-you
- Hold others accountable to Wash in & Wash out
- When you see someone has missed the opportunity, remind them and speak up
- We need full engagement from the physicians



# Source 1 – Personal Motivation

- The goal is to ignite every person's passion for hand hygiene
- To cause every person to see the Vital Behaviors as moral imperatives, as “ the right thing to do”
- Our goal is to reach 100% compliance in 100 days and be the first unit at LHSC to reach 100%
- Share our stats/rates for infection, death, mortality and morbidity at LHSC
- Stories–Vicarious experience... Share the Spectrum Health Story

# Source 1 – Personal Motivation

## Clean Hands save lives

- Staff and physicians are asked to speak up and hold others accountable to WIWO.
- See something Say something!!!

# Source 1 – Personal Motivation

## Glow Light Experience

- Leaders will randomly go to bedsides and do glow light demonstrations with physicians
- This gives them the opportunity to personally observe how effective is their hand washing
- Demonstrate gloving and washing with glow germ
- Creating a vicarious experience is a strong personal motivator

## Source 2–Personal Ability

The primary goal is to make sure everyone feels competent and comfortable at holding others accountable for appropriate hand hygiene .

Secondary goals are to make sure everyone understands when, why and how of washing in and out, yes these are rarely the true obstacles to hand hygiene. The toughest skill is holding others accountable especially when they are peers, managers, or physicians.

**Formal training.** Crucial Conversations training for Safety Culture Champions where they practice applying their new skills to hold others accountable for hand hygiene. Often this application (hand hygiene accountability) was easier than other situations these courses address, and makes a nice introductory application.

# Source 2–Personal Ability

## Creating Scripts

- ICU created it's own scripts. They'd create a script for the reminding someone, for responding to a reminder, and for pushing a bit harder if they met resistance.
- The goal was to keep the scripts brief, nonjudgmental, and friendly.
- It is rare to know for certain whether a person a person has just washed their hands out of your sight, so the reminders and responses often included a “I know you might have just done this....” element of tentativeness.

# Source 2–Personal Ability

## Role Playing

- It was important to practice the scripts until everyone felt comfortable with them. A simple goal was to use the script with all the other team member roles (nurse, physician, environment services, pharmacy, etc.) during a brief practice session.
- ICU always has a variety of roles at the practice sessions. Having a physician participate in the script creation and role plays goes a long way to convince staff that the hierarchy is really asking and expecting reminders.

# Source 3–Social Motivation

- The goal is to use social pressure to make sure people practice perfect hand hygiene and demand it of others.
- The hierarchy in the hospital is a huge obstacle. Staff may not believe they have permission to hold peers, physicians, and managers accountable. Simply telling staff they have permission is not enough. Staff need to see their respected peers holding others accountable without getting into trouble and observe high status managers, physicians and staff thanking the people who hold them accountable.

## Demonstrate Support from Senior Leaders

- Our project supports the CEO's call to action. Director, VP and CEO will round during the 100 day campaign to support the Hand Hygiene initiative.

# Source 3–Social Motivation

## Use Leaders and Physicians

- It is essential to have unit leaders and key physicians on board as active supporters
- Our unit has champions that are respected physicians. These champions show their passion, and help transform the initiative from an imposition into a commitment or moral imperative.
- These leaders and physicians will make a point of asking staff to remind them when they forgot to wash their hands. It is very important to make it easy for people to remind each other.



# Source 3–Social motivation

## Work through Safety Culture Champions

- Unit safety culture champions will lead the way in practicing perfect hand hygiene and reminding others

# Source 3–Social Motivation

## Public commitment and Permission

- Colourful posters that share the commitment to hand hygiene will be placed in the ICU waiting room and unit entrance
- Staff and physicians will sign these commitment posters.
- The project team will create posters that feature photos of prominent physicians asking, “Remind me to wash my hands.”

# Source 3–Social Motivation

## Make it a Party

- Confronting others can be stressful, both staff and physicians found ways to lower the pressure.
- Launch Party planned for January 16<sup>th</sup>, 2011
- These extra steps helped to communicate that we can hold each other accountable, still be friends and even have fun with it.

## Source 4–Social Ability

- The goal is to create social support for 200% accountability.
- No individual or unit can master the vital behaviors without help. It will “take a village” to make these positive Vital Behaviors as reliable as we need them to be—especially when staff and physicians have to deal with emergencies, disruptions, and unhappy patients.

## Source 4–Social Ability

- An article in the Page describing our project; 100% in 100 days Campaign will be published in early February .
- Ongoing Page articles in every edition during the 100 day period.
- Physicians leaders to have their own project that influences other physician leaders to elicit their support and compliance with hand hygiene.

# Source 5–Structural Motivation

- The goal is to build in organizational incentives and sanctions that provide lasting support for the vital behaviors related to hand hygiene. The delay is to use Source 5 is intentional because staff are seeing hand hygiene as a compliance issue being imposed on them, instead of owning the issue.
- So we will begin by emphasizing Sources 1 and 3 the personal and social reasons for proper hand hygiene. Once we have strong commitment to the vital behaviors, we plan to introduce incentives that provide the occasion for personal and social pride but are not the sole reason for engaging in proper hand hygiene.
- **Peer rewards.** People on units will be given stickers , travel hand sanitizer, hand shaped cookies with WIWO, and E-Cards. These will be used to reward peers when they see something, say something and are speaking up about hand hygiene.
- MAC recently carried a motion that any push back to anyone engaging in HH will be tracked as a AEMs level 4.

# Source 5–Structural Motivation

## Accountability

- Staff are allowed a “grace period” to get used to the new hand hygiene behaviors
- After 3 weeks, a failure to practice hand hygiene will be treated like any violation using coaching, mentoring and disciplinary action

# Source 6–Structural Ability

- Hand Hygiene rates will be posted on a monthly basis
- Rates will be posted at the entrances to the organization and on each unit (MAC approved)
- Rates will include percentages and raw data



# Source 6–Structural Ability

The goal is to create structures and systems that make hand hygiene behaviours more convenient and even difficult to avoid. These systemic changes include tools, feedback, cues, and changes to the physical space.

**Ensure availability and operation of hand sanitizers & dispensers.** The unit leader leads audits with unit team members to identify and barriers or inconveniences that could get in the way of perfect hand hygiene.

The Environmental Service workers rounds regularly to refill or conduct maintenance on the dispensers. Dispensers in common areas also have a pager number on them for easy reporting of a dispenser that is out of sanitizer or not working.