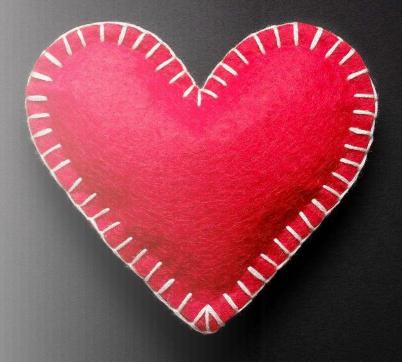
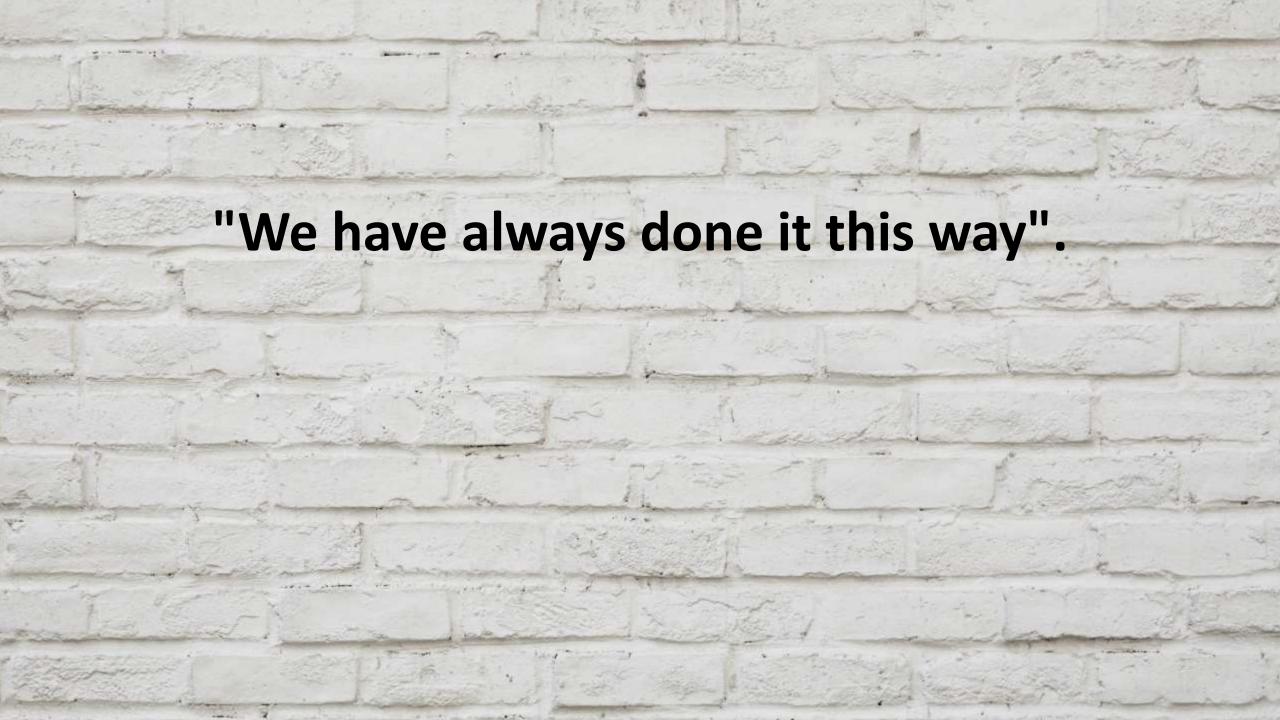
Heart of Change: Transitioning to Electronic Hand Hygiene Observations

Kyle Mataya RN, CIC, LTC-CIP, CRCST





### Objectives

By the end of this presentation, you will be able to:

- Define change management
- Provide an overview of the Heart of Change Model
  - Case study: Increasing hand hygiene 1100%

### What is change management?

• "Preparing, supporting, and guiding individuals, teams, and organizations through organizational change" (AHRQ, 2019).

Change is difficult but necessary

# Heart of Change Model

• "Heart" – belief system



1. Create Urgency

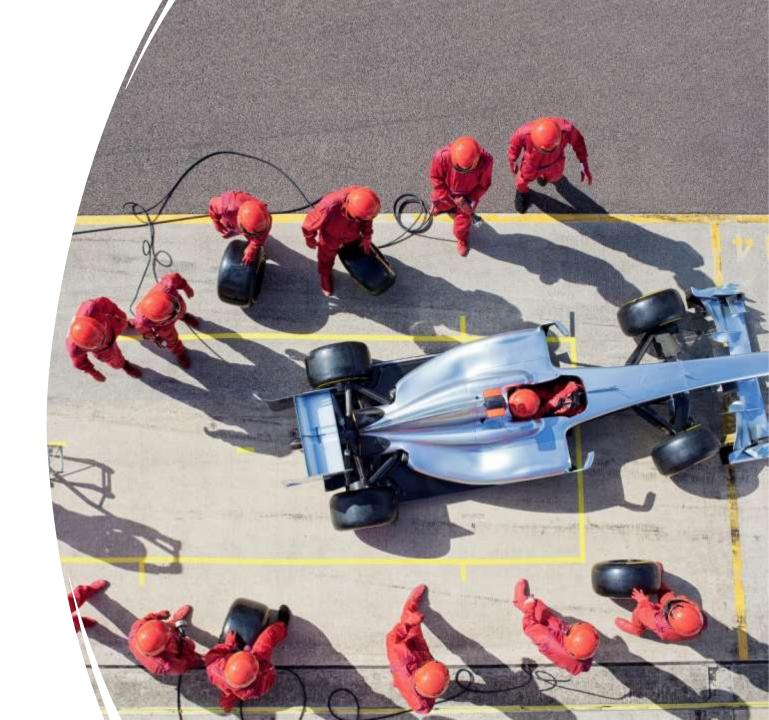


### 1. Create Urgency

 Opportunity for improvement in HH observations

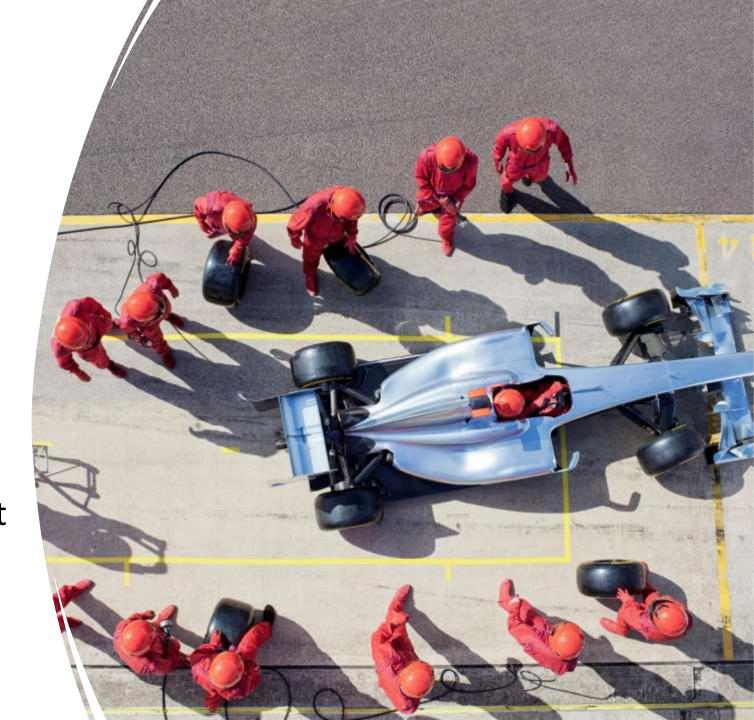


2. Build a guiding team



#### 2. Build a guiding team

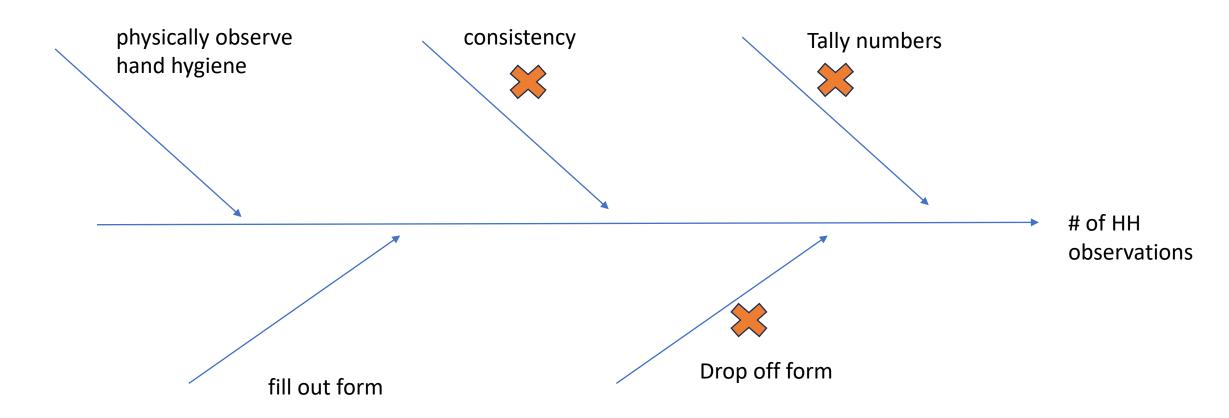
 Recruited Nursing directors, unit leaders, IT, Performance improvement , front line staff



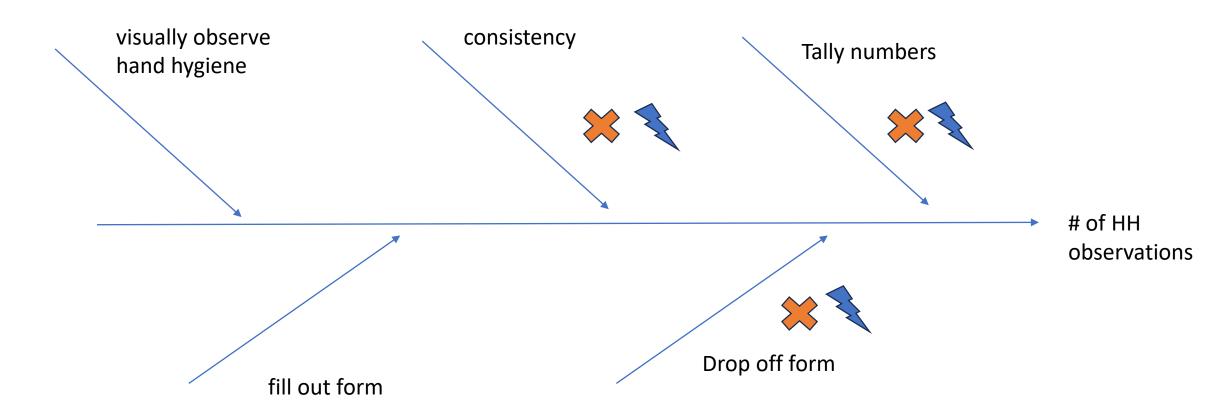
3. Develop the vision and strategy



#### 3. Develop the vision and strategy



#### 3. Develop the vision and strategy



4. Communicate for buy-in - HEART



4. Communicate for buyin "HEART"

- Talk to front line staff, test beta
- Faster, time and energy saving



5. Empower action – remove barriers



### 5. Empower action

User friendly, accessible, educated



6. Produce short term wins



6. Produce short term wins

Daily verbal recognition



7. Don't let up – keep on top of the process



7. Don't let up – keep on top of the process

Monthly feedback and rounding on status



# Grounding stage

8. Ground into the culture



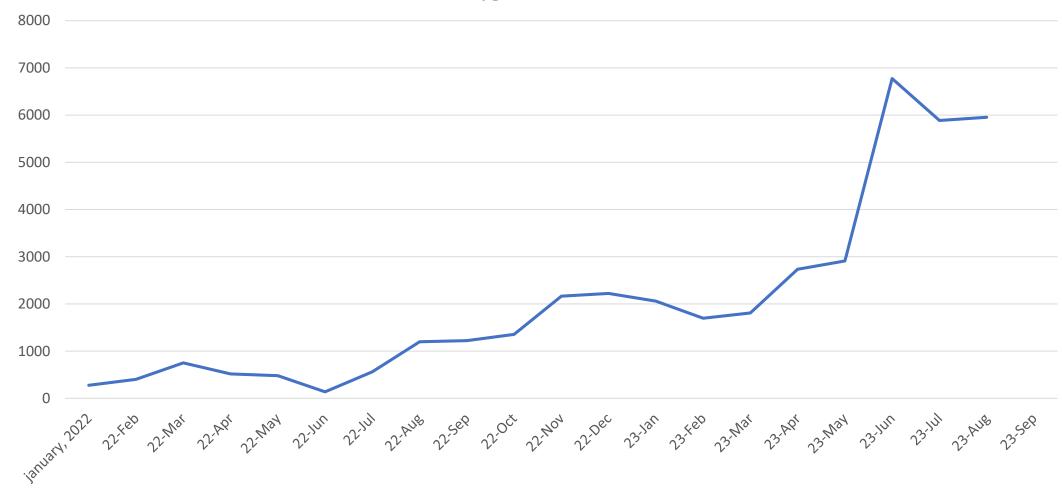
# Grounding stage

8. Ground into the culture

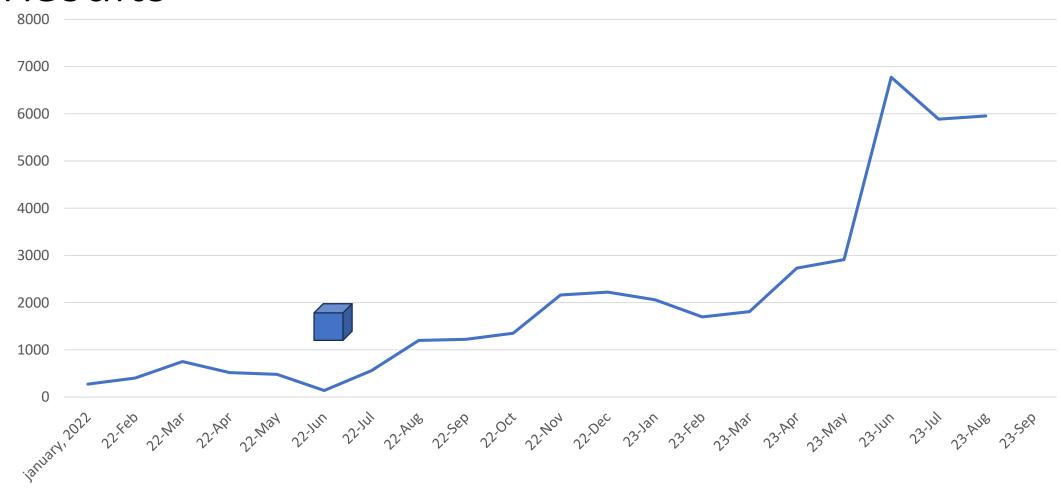
Culture of patient safety



#### Hand Hygiene observations

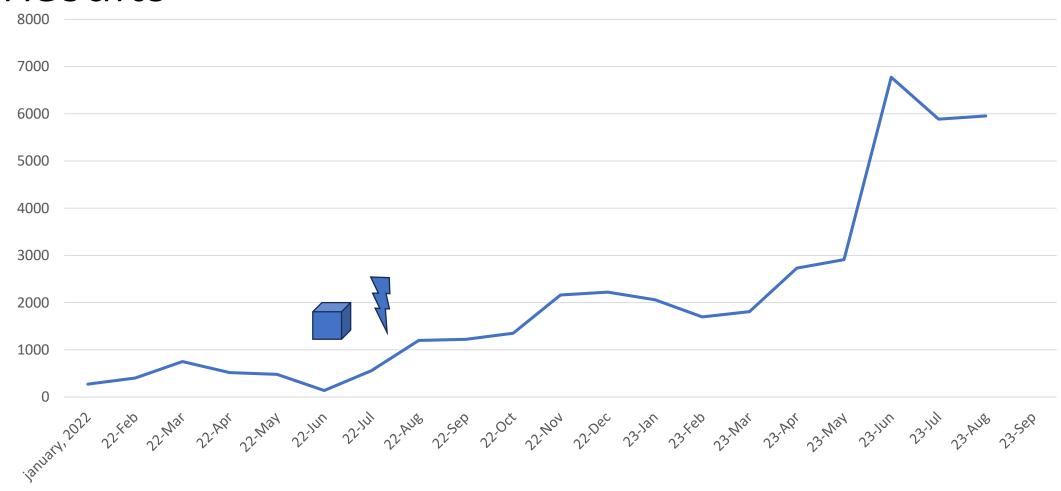


#### Hand Hygiene observations



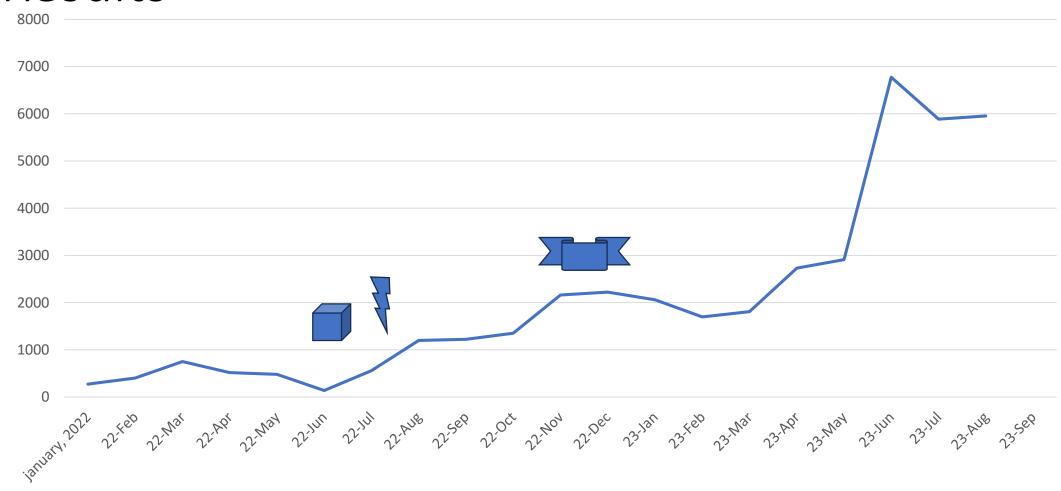
—Observations

#### Hand Hygiene observations



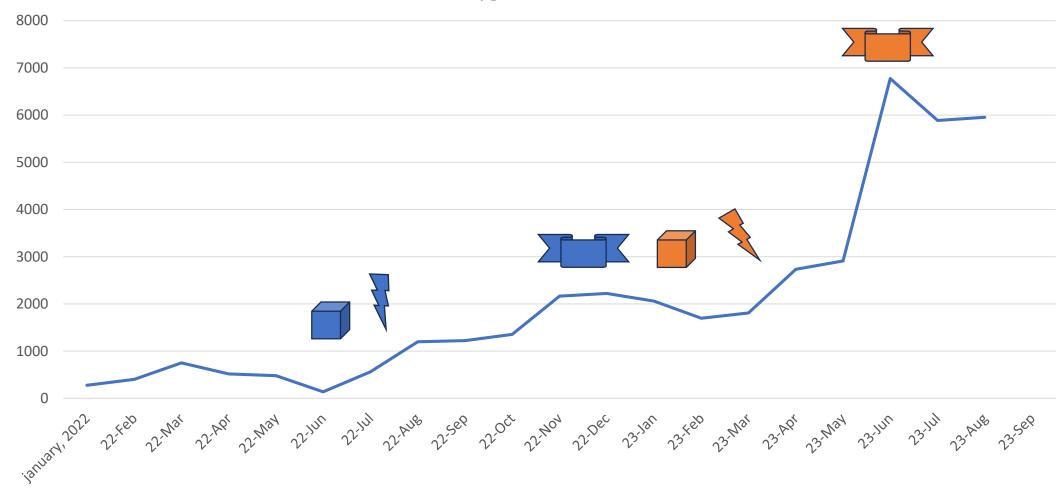
—Observations

#### Hand Hygiene observations



—Observations

#### Hand Hygiene observations



#### Hand Hygiene observations



### Results - financial

### THE DIRECT MEDICAL COSTS OF

Healthcare-Associated Infections in U.S. Hospitals and the Benefits of Prevention

Author – R. Douglas Scott II, Economist

Division of Healthcare Quality Promotion National Center for Preparedness, Detection, and Control of Infectious Diseases Coordinating Center for Infectious Diseases Centers for Disease Control and Prevention March 2009 Min savings = \$9,174.4 Max savings = \$36,702.4

### References

Agency for Healthcare Research and Quality. (2019). Healthcare Solutions. Oxford University Press.

Scott II, R. Douglas. (2008). The Direct Medical costs of Healthcare-Associated Infections in U.S. Hospitals and the Benefits of Prevention. American Journal of Infection Control, 36(5), S1-S2. doi: 10.1016/j.ajic.2008.03.005

## THANK YOU!