

Question 11. Is staff empowered to speak up if hand hygiene is not performed effectively?

You indicated that staff are not empowered to speak up to remind colleagues to perform proper hand hygiene. A key aspect of preventing MRSA infection is preventing MRSA transmission. Staff should be encouraged and empowered to remind colleagues about strict glove use, wearing proper PPE and performing hand hygiene. Consider using a facility-wide common reminder phrase to get everyone on the same page and keep reminders from feeling punitive; it's about patient safety not punishment.

A. Hand Hygiene Essentials for Preventing MRSA

- Hand hygiene, using alcohol-based hand rub (ABHR), is the preferred method of hand hygiene in hospitals unless a hospital or unit has high endemic rates of *Clostridium difficile* infection (CDI) or hands are visibly soiled.
- Perform hand hygiene prior to donning and doffing gloves; glove use is not a replacement for hand hygiene.
- Incorporate hand hygiene procedures and technique into routine, competency-based training for all staff.
- Conduct regular hand hygiene audits to ensure staff are performing hand hygiene effectively and are correctly donning and doffing PPE.

B. Strategies for Creating a Culture of Safety and to Empower Staff to Remind Colleagues

Staff should be empowered to speak up and remind colleagues if they see something wrong in the hospital or a hospital unit; this is part of a hospital or unit's culture. However, culture can be difficult to change. Moving a hospital or unit from a punitive environment to one that focuses on and emphasizes open communication can have a profound impact on patient care and health outcomes. In a just culture, people are encouraged to report problems rather than hide them so issues can be addressed and prevented.

- Use of Champions. Recruit champions from different hospital disciplines to help bring the initiative to various hospital peer groups and units. Champions can help spearhead the initiative, provide support and guidance and empower colleagues to share concerns. They can also help be a voice for frontline staff, relating ideas, barriers or concerns to the MRSA prevention team and leadership.
- Create mutual understanding, using a common strategy or language to provide and receive feedback. Provide staff with the tools to help them speak up when Contact Precaution procedures are not being followed or when anything happens that could impact patient safety. The TeamSTEPPS Module 3 Communication and Module 6 Mutual Support can assist you in devising a strategy that will work for your hospital.
- Share stories to help highlight the impact MRSA and other infections have on patients. Staff engagement can be fostered or enhanced if all health care personnel appreciate the true risk associated with MRSA infections. Sharing stories will also help tap into individuals'

internal motivators (knowledge, attitudes, beliefs and values), which help to inspire human behavior.

- Share infection prevention data with staff. Data transparency can help motivate and engage staff, as well as encourage them to continue prevention efforts. Consider sharing the days the hospital or unit has gone without a MRSA infection. Staff can use this information to remind colleagues that proper hand hygiene will help them continue the hospital or unit's success of days since the last infection.

Tools, Resources and Further Reading

- STRIVE Content:
 - [Strategies for Preventing Healthcare Associated Infections](#) (SP 101)
 - [Giving Infection Prevention Feedback](#) (CBT 103)
 - [Hand Hygiene](#) (HH 101, HH 102, HH 103)
 - MRSA Tier 1 Course ([MRSA 101](#), [MRSA 103](#))
 - [Patient and Family Engagement](#) (PFE 101)
- TeamSTEPPS Fundamentals Course: Module 3. Communication. Content last reviewed March 2014. Agency for Healthcare Research and Quality, Rockville, MD. Available at <https://www.ahrq.gov/teamstepps/instructor/fundamentals/module3/igcommunication.html>
- TeamSTEPPS Fundamentals Course: Module 6. Mutual Support. Content last reviewed March 2014. Agency for Healthcare Research and Quality, Rockville, MD. Available at <https://www.ahrq.gov/teamstepps/instructor/fundamentals/module6/slmutualsupp.html>
- Calfee DP, Salgado CD, Milstone AM, et al. Strategies to prevent methicillin-resistant *Staphylococcus aureus* transmission and infection in acute care hospitals: 2014 Update. *Infect Control Hosp Epidemiol*. 2014; 35:772-96.
- Ellingson K, Haas J, Aiello A, Kusesk L, Maragaksi L, Olmstead R, et al. Strategies to prevent healthcare-associated infections through hand hygiene. *Infect Control Hosp Epidemiol*. 2014; 35(8):937-960.
- Grant AM, Hofmann DA. It's not all about me: Motivating hand hygiene among health care professionals by focusing on patients. *Psychol Sci*. 2011; 22(12):1494-9.
- Stickbert-Bennett EE, DiBiase LM, Willis TMS, et al. Reducing health-care associated infection by implementing a novel all hands on deck approach for hand hygiene compliance. *Am J Infect Control*. 2016; 44(5 Suppl):e13-6.