



CMPQI Quarterly Progress Report (Oct – Dec 2018)

CMP Request No. 2018-04-TN-0423

WashSense HAI Reduction and Training Pilot at Spring Gate

The major objective and goals of this project are to reduce nosocomial infections and related hospital readmission rates by reducing the spread of infection through the use of the WashSense System and staff & resident training at Spring Gate Rehabilitation and Healthcare Center. Amendment for project extension granted and the WashSense Surveillance System was installed in late November.

Deliverables

Portal & Data Verification:

Sept	Gamma access granted for lab results
Oct-Nov	EMR Clean-Up, Portal & EMR Verification for Data Reliability
Nov	Go Live: Patient Summaries, Infection Management Tools, Antibiotic Stewardship and Risk Management Modules
Dec	Received authorization from CMP office to allow physicians additional services through ArsanaMD: Physician engagement and care coordination for remote monitoring and chronic care management.

Information, Communication and Training:

Sept-Oct	Pre-Installation In-Service: 2 Staff Training In-Services. Infection Surveillance incorporated into all new staff orientation process. In-service information and an example of the return demonstration checklist for employees is included below under Staff Education section of this report.
Oct	Introduction and Q&A with Resident Council at 10/26/18 Meeting (below)

RESIDENT COUNCIL MINUTES

New Business: Wash Sense:

Issue	Action Taken	Person Responsible
<p>New program that will be implemented potentially mid November, a hand washing device will be added to every residents room which will monitor how long staff are washing their hands. This is done in an attempt to assist w/ eliminating infections and cross contamination. Each staff member providing care to residents will be issued specialized name badges which hand washing device will monitor and track staff to monitor just how long handwashing is occurring to eliminating germs/bacteria. The Emergency Resident Council Meeting was held to inform residents of the new device that will be added to their rooms and make them aware of its purpose. Vice President (Deborah Burriss) and Former President (Eugenia Smith) were not able to attend scheduled meeting. Staff members met w/ both residents in their rooms and explain about the new program + device that will be added to each room and its purpose.</p>		<p>- Lavelita Lopez, MSN, SDC - Jennifer Chillis, BSW - Sharon Paylor, BSW</p>

Compliments/Notes of Appreciation: n/a

Resident Right(s) Reviewed: n/a

Facility Policies or Procedures Developed/Revised/Updated in Past 30 Days: n/a

Selicia Sea Allen

Next Meeting

Day: Friday Date: 11 / 16 / 2018 Time: 10⁰⁰ AM PM

Signature of Resident Council Secretary or Representative: _____ Signature and Title of Staff Liaison (if applicable): Jennifer Chillis, BSW

Form # CP-1903 Reorder From: MED-PASS 800-438-8884 © 2008 MED-PASS, Inc. IMR-2008

Dear Family Member,

November 15, 2018

Spring Gate Rehabilitation and Health Care Center is dedicated to providing compassionate, comprehensive care. This letter is to inform you of an exciting new program that Spring Gate is putting in place in our building to help reduce the risk of infections. The program is called Wash Sense, and has to do with washing hands properly and tracking infections in the building. We are excited about this program and wanted to share with you to keep you informed.

A Performance Device is installed at every sink in the building and will monitor the employee, guests and residents hand washing performance. It also provides education and training tips. It will ensure proper hygiene for incidental and in between contacts with residents. Medicare and the State of Tennessee has funded this program through a grant. The grant is awarded each year to help make nursing homes a healthy and more rewarding place to live for our residents. We believe that reducing the risk of infections is an important part of protecting community, residents and staff.

Please feel free to ask any questions or request more information regarding our exciting new program. And as always, thank you for the privilege of caring for your family member.

Sincerely,

Felicia Nicks-Speaks, LNHA, Administrator

Jackie Brown, RN, DON, Director of Nursing

Nov	Meeting with WashSense, Spring Gate Infection Control team and Patricia Lawson, Public Health Nurse Consultant, TN Department of Health Implementation and Q&A session for Spring Gate clinical staff and Prestige regional leadership – meeting was attended by Regional Director of Operations, Admissions Director, Director of Nursing, ADON, Unit Managers, Administrator, Regional Director of Business Development, Staff Development Coordinator and lead by Wash Sense team. Demonstration of messaging capabilities on devices, overview of installation process, and education regarding how software infection surveillance mapping and reports will be utilized was reviewed.
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Information, Communication and Training (cont'd):

Dec	Spring Gate Annual Infection Control Training Resident Training at Beauty Parlor/Barber Shop
On-going	QA meetings with Spring Gate Clinical Team, Medical Directors & Physician Care Team

Confidential

Installation & Implementation:

Nov

WashSense Performance Device installation & network set-up:

- Performance Devices at Sinks in resident rooms, staff bathrooms and areas and public restrooms
- Soap Companions in resident rooms, staff bathrooms and areas and public restrooms
- Hand Sanitizer Companions in resident rooms and public areas
- Network and Mapping Devices through out facility



Dec

Performance Device Public Messaging

Public Screens:



“Soap and Water are Your Best Protection”



“Falling Star” Fall Risk / Intervention on Performance Device static screens in resident’s room if had fall within

Soap Phase Screen:



“Did you know” Campaign:
 Trivia questions and answers about hand hygiene and spreading germs

Results Measurement

Healthcare –Associated Infection Metrics & Quarterly Review

Total number of HAI’s differentiated by type, i.e.: UTI, Sepsis, Respiratory, C. Diff, MDRO etc.

Infection Control team uses Portal daily to ensure reliability of data entry, trend and track infection within the facility. Provides daily update at morning meeting for awareness and early intervention.

Baseline numbers used for the grant are current period compared to 2017. It includes Average Daily Census (ADC), active infections admitted from the community, nosocomial infections listed by category and active nosocomial infections resulting in hospitalization.

	Oct-18	Nov-18	WashSense System Installed		
			Dec-17	Dec-18	Dec 2018 Hospital
ADC	171	174	165	175	
Community Acquired					
Admitted	16	14	9	15	
Nosocomial					
UTI	9	7	7	6	1
Respiratory	4	6	3	5	2*
Skin	1	1	4	5	
Other	3	6	7	3**	
Total	17	20	21	19	

* (1) Respiratory Returned to Hospital within 30 days of admission

** (2) conjunctivitis, (1) nasal
 2017 & Oct-Nov 2018 Historical data obtained from CareWATCH.

Readmission:

The readmission totals below use CareWATCH criteria: Date Range 10/1/18 – 12/31/18. Entry must be from acute care (hospital)/ unplanned discharge/ all payer excluding Medicaid or Medicaid pending/ facility entry in date range.

<= 30 Day Readmissions Total: 28% (23 Residents)
 <= 30 Day Readmissions Pneumonia: 2 Pneumonia (8% of total)
 December 2018 – 36% (9) total patients; 1 Pneumonia (nosocomial)

RTH Q3 2018 All Payer excluding MCD/ MCD Pending	RTH Q3 All Payer hospitalizations secondary to infection	RTH Q4 All Payer excluding Medicaid or Medicaid pending	RTH Q4 All Payer hospitalizations secondary to infection
25 total (48%)	Pneumonia 8 total (32% of total)	23 total (28%)	Pneumonia 1 total (8% of total)

WashSense Hygiene Events Review

There are more than 400 device units (Performance Devices/ Soap Companions/ Sanitizer Companions/ Mapping Devices) installed in the Spring Gate Facility. More than 40,000 anonymous hygiene events were recorded and include guests, residents, contractors and staff. These totals incorporate interactions of curiosity of a “new” system as well as authentic engagement.

Results of the project will be shared at All-Staff meetings.

Below is a break down of events by area/access:

December 2018	Performance Score	# of Events
<i><u>Hand Washing Events</u></i>		
Dedicated Nursing/Staff Areas	81	3,384
Beauty Parlor (resident training)	57	543
Contractor Bathrooms	55	1,050
Public Bathrooms	83	905
Total Patient Rooms	73	26,499
<i><u>Sanitizer Events</u></i>		
Resident Rooms	-	2,794
Public Area / Hallways	-	9,381

Highest performance score - 100 Hall Dedicated Staff Area.

Highest # of hand washing events - 300 Hall Dedicated Staff Area

Staff Training and Education

Staff Development Coordinator is using the WashSense device in service with all new employees during orientation as well as during clinical capability check offs for handwashing compliance. During orientation-in-service, our SDC reviews the Wash Sense Devices with new

employees, assists them in engaging with the device as the handwashing demonstration displays on the screen. For handwashing skills check off, staff complete a handwashing “step-by-step” check sheet (example shown below), return demonstrate to the SDC, while engaging with the Wash Sense Device. An example of the orientation information as well as an actual employee check off is shown below.

Hand Hygiene/Washing
Clinical Performance Evaluation Checklist

WashSense is an early detection system that will assist us with monitoring infections (hand washing) and providing intervention that can be used to assist with preventing and reducing infections cause by lack of proper and effective hand washing. This will assist the organization with reducing costs to treat infections related to poor hand washing, increase our efficiency (effectiveness) and improve our quality outcomes (patient care).

Hand Hygiene/Washing
Clinical Performance Evaluation Checklist

Action	Met	Unmet	Comments
Turned on and adjusted water flow	✓		
Wet hands	✓		
Applied skin cleanser or soap to hands	✓		
Vigorously rubbed hands together in a circular motion for at least 15-20 seconds	✓		
Washed all surfaces of the hands and fingers	✓		
Cleaned under nails (if needed)	✓		
Rinsed hands thoroughly from wrist to fingertips, keeping fingertips down	✓		
Dried hands on paper towel	✓		
Discarded towel	✓		
Turned off faucet with a clean paper towel	✓		
Did not lean against sink or faucet handles with clean hands	✓		
Responded to examiner's questions concerning hand washing (as appropriate)	✓		
Wash Sense	✓		

Employee Bryan Bates B. Bates
(Print Name) (Signature)

Nurse Observing A Heath Bonnell A Heath Bonnell 12-12-18
(Print Name) (Signature) (Date)

Since October 1st 2018, 62 new employee orientees have participated in the handwashing orientation using the Wash Sense device, and an additional 170 employees have completed handwashing in-service. The next annual skills/ handwashing in-service is scheduled for April of 2019. In-service sign in sheets are available upon request.

Contracted employees in housekeeping and dietary departments will have an additional handwashing in-service for their departments in January/February to assist with increased quality of handwashing events for those specific departments per the Administrator.

Conclusion

Performance scores indicate effort and areas for improvement. Beauty Parlor scores reflect the resident efforts to complete all 9 of the hand transitions in the 20-second wash. Scores in dedicated staff areas and public bathrooms show high engagement with time and vigor. Guests engage with the devices and staff is available to answer questions and provide additional coaching. Contracted staff areas indicate a need for improvement and evaluation and training is underway. Badge distribution will begin in mid-February with all staff badged by March 1, 2019. Badges will identify staff by name and department. This will enable patient specific protocol intervention messaging at the Performance Devices located in the residents' rooms and training in the dedicated staff areas. More specific trending data about hygiene performance in rooms with infections and performance by hall vs public spaces will be available and provided in future reports.

Staff feedback includes:

- Administrator, Felicia Speaks, and RDO Heidi Hawkins have stated that the devices prompt them to wash their hands more thoroughly than they normally would.
- Vanessa Jamerson, LPN, Infection Control Nurse & Unit Manger stated that the messages and reminders offer ongoing education which is a positive thing for the staff and residents
- SDC is using the WashSense device in service with all new employees during orientation. She noted that several of the orientees and employees agreed that the devices prompted them to wash their hands thoroughly.
- ,Lavetta Lopez, MSN, RN, SDC states she believes the staff have a higher level of conscientiousness about hand hygiene due to the system.

Once more data is collected and available, Prestige will schedule meetings with VA, Methodist, Baptist and St. Francis health systems to discuss the goals of the project share results.