Making patient and employee safety a top priority for your healthcare organization

In the business of providing healthcare to over 35 million inpatients and performing over 51 million procedures annually[1], it is critically important that everyone – from hospital executives down to front-line workers – understands and embraces patient and employee safety. If a culture of safety is not at the heart of the organization, the health of patients, employees and the organization's bottom line can all be adversely affected.

The risks and financial burdens are not trivial. The Centers for Disease Control and Prevention estimate that 5%-10% of patients get a hospital-associated infection (HAI) or nosocomial infection during their stay.[2] Nosocomial infections are commonly transmitted when healthcare workers become complacent and do not practice correct hand hygiene regularly (30%).[3]

"Hand-washing by healthcare workers – or their failure to do so – has received repeated attention by the media. But the hand-washing compliance rate remains frustratingly low – as little as 30 percent of the time that healthcare workers interact with patients. That's right – more than two-thirds of the time they interact with patients, doctors and nurses fail to wash their hands. Hand-washing is the first line of defense against HAIs. Hand-washing can save lives and prevent life-long disabilities due to infections."[3]

Since medical staff move from patient to patient, the staff themselves may serve as a means for spreading pathogens. Essentially, the staff acts as vectors.

Additionally, long-term care facilities continue to send many of their residents to hospital emergency departments and the majority of them end up becoming inpatients. In those long-term care facilities, "...between 1 and 3 million residents get a healthcare-associated infection and up to 380,000 succumb to those infections."[4]

Beyond patient and employee safety, there is also the financial risk to hospitals from loss of Centers for Medicare and Medicaid (CMS) and insurance reimbursement. An HAI could potentially add 19 days to the average 4.8 day length of stay[5], and possibly, at the expense of the hospital.

While the estimated cost to hospitals for these unintended consequences of providing patient care added nearly $43,000 to the cost of stay (HAI average cost $52,096 vs. $9,377 for non-complicated patient stay)[5], HAIs in US acute-care hospitals lead to direct and indirect societal costs totaling $96-$147 billion annually.[6]

Given the risks to patients and healthcare workers, how can hospitals ensure that everyone understands the importance of safe and effective hand hygiene and gloving? How do they inculcate a culture of safety that provides for best-in-class healthcare?

# Cultivating a just culture of safety

While there is a myriad of tactics, some of which we will discuss here, for influencing the culture in an organization, they all stem from the same basic fact. Culture is determined by actions.

Documentation, training and signs can serve as reminders or explanations, but if the people in the organization, particularly those in leadership positions, don't follow words with actions, they won't replace the dominant culture.

To create a culture of patient and employee safety in an organization, senior management must be truly committed, in words, in actions and in investment dollars. If management talks about safety, then questions spending on gloves, the safety message will be lost.

One of the best things management can do to ensure a culture of patient and employee safety is to create a feedback loop consisting of a combination of both rewards for good behavior and consequences for poor behavior. Some institutions often have campaigns to promote new initiatives or improve patient satisfaction, but these techniques work equally well for reinforcing safety behaviors.

"Hospitals use different methods to try to raise hand-washing compliance of healthcare workers and doctors, who have the lowest compliance levels. The Greater New York Hospital Association, for example, trains some of its employees to be hand-washing "coaches", who give out red cards or gold stars to other employees based on their hand-hygiene compliance. It sort of sounds like the rewards we remember from grade school, but if it works to increase hand-hygiene compliance, it's a win for patients."[3]
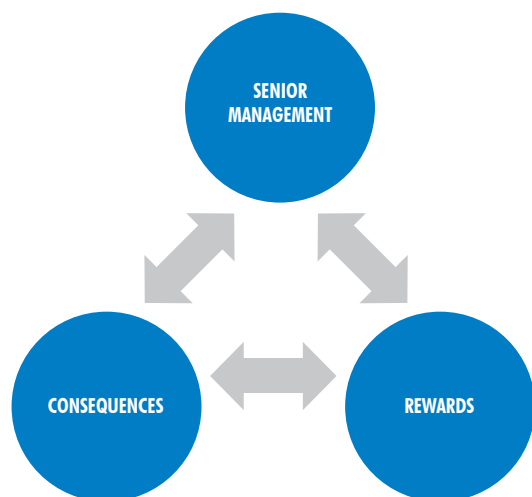
OSHA can now fine healthcare facilities for safety infractions

In June 2015, OSHA's new initiative, outlined in an "enforcement memo" that the agency sent to its 10 regional offices, takes the agency from merely recommending safe practices to potentially fining hospitals and other healthcare facilities if they do not adopt them.

According to an OSHA official, a typical penalty would likely be $7,000 per facility, but it could be as high as $70,000 in cases where evidence suggests that healthcare administrators deliberately ignored the problem.

Five areas of focus are:

- Musculoskeletal disorders relating to patient or resident handling,

- Workplace violence,

- Bloodborne pathogens,

- Tuberculosis, and

- Slips, trips and falls.

For a copy of the memorandum, go to:

https://www.osha.gov/dep/enforcement/inpatient_insp_06252015.html

Addressing patients' fears

"Not everyone feels the same way about the blue "H" sign indicating a hospital's proximity. For Colleen Sweeney, RN, the sign is a reminder to whip out her phone to go on hospitalcompare.com and see how the hospital stacks up next to Memorial Hospital and Health System in South Bend, IN, where she works as director of innovation, ambassador and customer services.

In one form or another, everyone has some fear or anxiety surrounding hospitals and healthcare, she says. Sweeney recently completed a patient empathy project in which she interviewed patients on what they fear about hospitals and healthcare systems. Ninety-six percent of patients suffer from "Clinicophobia", a term Sweeney coined meaning the fear of healthcare.

'If you don't address patient fear, it will work its way in,' Sweeney says. 'If we give you instructions and you are too busy thinking about how scared you are or who's going to take care of you – before you know it, you're back in the hospital.'"[7]

> " Ninety-six percent of patients suffer from 'Clinicophobia', a fear of healthcare. "

The most common patient fears are:

1. Infection
2. Incompetence
3. Death
4. Cost
5. Mix-Ups
6. Needles
7. Rude doctors and nurses
8. Germs
9. Prognosis
10. Communication issues
11. Loneliness[7]
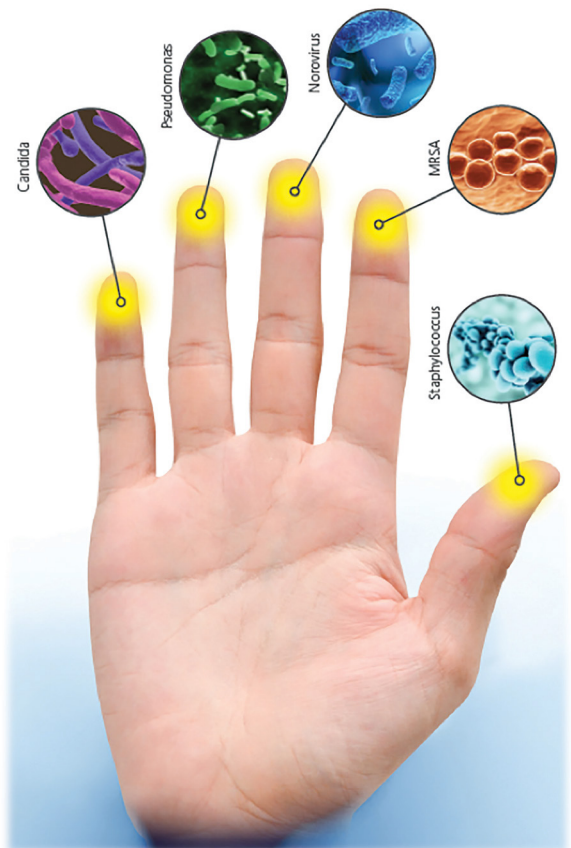
Patients' #1 fear of being hospitalized is that they might get a hospital-acquired infection, by means of #2 fear, the incompetence of staff, which could ultimately lead to their #3 fear, death. Sweeney contends that hospitals must address these fears (http://www.sweeneyhealthcareenterprises.com).

Healthcare is facing challenges like never before. The rules have changed and so has the pace. Medical team members are working longer, harder and faster than ever... and the results are many times disappointing.

What if we:
- worked differently?
- began to realize the power in caring about patients?
- recognized and addressed what is most concerning to patients?

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Implement tools and technology

Training, incentives and demonstrations can only do so much to inculcate a culture of safety. Another important factor is providing effective tools and technology to make it simple and fast to observe best practices for safety. Patient-care areas need to provide an adequate number of hand washing sinks or hand sanitizing dispensers in convenient, easy-to-reach locations. If these are out of the way or poorly stocked with supplies, physicians and employees will be tempted to skip the important step of proper hand washing. This is of particular importance for those in clinical roles, to ensure they do not feel as if proper hygiene reduces patient care. Next, employees need the right tools, including disposable, single-use gloves. The Occupational Safety and Health Administration (OSHA) states gloves are worn for three important reasons in hospitals:

• First, gloves are worn to provide a protective barrier and to prevent gross contamination of the hands when touching blood, body fluids, secretions, excretions, mucous membranes, and non-intact skin; as mandated by the OSHA Bloodborne Pathogens Standard 1910.1030.[8]

• Second, gloves are worn to reduce the likelihood that microorganisms present on the hands of personnel will be transmitted to patients during invasive or other patient-care procedures that involve touching a patient's mucous membranes and non-intact skin.[8]

• Third, gloves are worn to reduce the likelihood that hands of personnel contaminated with microorganisms from a patient or object can transmit these microorganisms to another patient. In this situation, gloves must be changed between patient contacts and hands washed after gloves are removed.[8]

Healthcare workers and physicians need to understand that gloves protect patients and themselves.[8] For an extra measure of safety, consider employing single-glove dispensing technology to reduce the risk of cross contamination. The strategic placement of hand washing stations (sink, soap, paper towels), alcohol-based hand sanitizer and glove dispensers needs to be well thought out. Single-glove dispensers need to be conveniently placed so as to encourage usage by healthcare workers.

Create procedures

Once employees have internalized the importance of proper patient safety practices and a facility has provided the right tools and technology, the final ingredient in creating a culture of patient safety is to implement procedures that support and reinforce best practices. A single session of training will not prompt ongoing and consistent attitude changes, and even a robust communication plan will fade from memories over time and with staff turnover. The key is being consistent and making sure that everyone understands the organization's expectations where safety is concerned.

Procedures that encourage healthcare safety should include purchasing and management processes as well. By mitigating incentives for management to save on safety supplies such as cleaning agents and gloves, organizations can send a strong signal that patient and employee safety is more important – and ultimately more valuable – than incremental savings on supplies.

Did you know?

Single-glove dispensing systems that dispense at the cuff are shown to greatly decrease cross-contamination

REDUCTION IN SURFACE CONTAMINATION[9]
96%

93%
LESS
BACTERIA
VERSUS TRADITIONAL DISPENSERS[9]
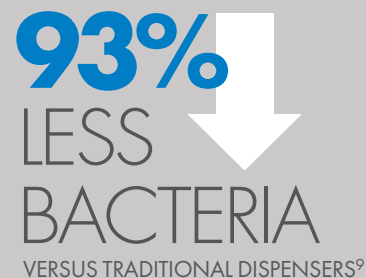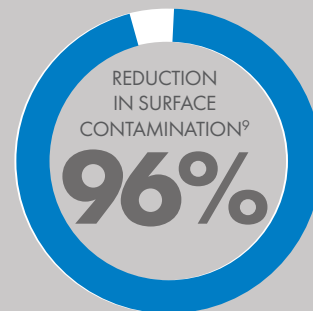
50%
faster to put on versus traditional dispenser gloves

For more details on the advantages of single-glove dispensing, see the Swann-Morton Study available at www.oneSAFEsystem.com

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Bring it
all together

Addressing the patient's #1 fear of getting a hospital-acquired infection is one of the most important things clinicians can do to make the patient's hospital stay a time of healing and as brief as possible. The vast majority of patients gets well and goes home to their loved ones. When a just culture of safety becomes the fabric of an organization, both patients and employees win. The predictable outcome is that the hospital's bottom line improves as well.

In order to ensure that patient safety is a priority throughout the organization, hospitals need to dedicate resources and take actions that create a just culture of safety. They need to implement technologies that make best practices a natural part of doing business, and finally, they need to reinforce those practices with the right policies and procedures.

[1]Centers for Disease Control and Prevention, *Hospital Utilization (in non-Federal short stay hospitals), Hospital Inpatient Care-Number of Discharges; Procedures Performed,* May 14, 2015; http://www.cdc.gov/nchs/fastats/hospital.htm

[2]Centers for Disease Control and Prevention, "*CDC at Work-Preventing Healthcare-Associated Infections*"; http://www.cdc.gov/washington/~cdcatWork/pdf/infections.pdf

[3]Safe Patient Project, "*Health Care Worker Hand-Washing Compliance Remains Frustratingly Low*", June 13, 2013; http://www.safepatientproject.org/posts/4569-health-care-worker-hand-washing-compliance-remains-frustratingly-low

[4]Centers for Disease Control and Prevention, *Nursing Homes and Assisted Living (Long Term Care Facilities [LTCFs])*, January 27, 2015; http://www.cdc.gov/longtermcare/

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[6]Pub Med, National Center for Biotechnology Information, "*Economic Burden of Hospital-Acquired Infections in US Acute Care Hospitals: Societal Perspective*", October 18, 2013; http://www.ncbi.nlm.nih.gov/pubmed/24024988

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[8]Occupation Safety and Health Administration (OSHA), Hospital e-Tool--Healthcare Wide Hazards, "*To help protect exposure to infectious materials, wash your hands: Wear gloves*"; https://www.osha.gov/SLTC/etools/hospital/hazards/infection/infection.html

[9] Swann-Morton Study, 2009 & 2010 available at www.oneSAFEsystem.com

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