

Transforming Nursing Home Care Together (TNT) Program

Unit #2, Week # 2: Questions and Answers

Didactic Session: (10/12/22)

Question:	Do you recommend wearing gloves when feeding residents in the yellow zone and red zones?
Answer:	PPE should be donned according to the appropriate transmission-based precautions (TBPs). For COVID-19, novel respiratory precautions are recommended for residents with suspect (Yellow) and confirmed SARS-CoV-2 infection (Red). Novel respiratory precautions include wearing gloves when providing any resident care including feeding residents regardless of where the care takes place. Remember, hand hygiene is still required before donning gloves and gown as well as after doffing gloves and gown.

Question:	What if MDs (physicians) are not following proper hand hygiene practices?
Answer:	<p>Various strategies may be helpful to address the concern over physicians or other clinical providers not following proper hand hygiene practices:</p> <ol style="list-style-type: none">1) If not done so already, provide additional or a “refresher” training on the importance of hand hygiene and how it significantly helps to prevent transmission of infectious diseases including HAIs. It would help to target not only the culprit providers but all providers and maybe even all clinical staff.2) Initiate a performance improvement project (PIP) on improving hand hygiene by staff type (clinical providers, nursing, rehab, activities, dietary, housekeeping/laundry, social work, administration, etc.).<ol style="list-style-type: none">a. Select key individuals for the PIP’s team including the medical director who could be a great champion as well as “laggards” like physicians/clinical providers who have the lowest hand hygiene adherence rates. Remember involving laggards from the beginning of PIPs can really help a PIP succeed. For more inspiration, see Session 4, Unit 1 (recording and slides).b. Include root cause analysis (RCA) on why certain staff type’s hand hygiene adherence rates are not as high – you may find it’s a lack of accountability (lack of consequences for low hand hygiene adherence rates and/or lack of incentives for high hand hygiene adherence), poor culture of safety (no role models for on-the spot education of clinical providers and/or no role models among the clinical providers for excellent hand hygiene practices), or something else surprising.c. Visually display hand hygiene adherence rates (“quality dashboard”) in easily accessible areas of the facility, e.g., staff break rooms, physician work rooms, nursing stations, etc. This can help raise awareness, cultivate friendly competition, and increase transparency for this PIP.

Question:	Would it be possible to do a QAPI example for eye protection compliance? We struggle with creative ways to motivate staff to wear eye protection in the Green Zone.
Answer:	<p>For any QAPI project, the steps are the same.</p> <ol style="list-style-type: none">1. Make your problem statement2. Find out the situation in your facility3. Find out the root cause of why you have the problem4. Make a goal

5. Try out interventions
6. See if any of them worked by collecting data and comparing it to data you should have collected on the problem previously
7. Then either continue the interventions or find new ones.

A3 Project Title		Project Lead: COORDINATION	Project Team:	
Facilitator:		Project Champion(s):		
Date Updated:				

1) Problem Statement: (description of the problem and its effect)

2) Current State: (depiction of the current state, its processes, and problems)

Best Practices/Literature Search:

3) Goal: (how will we know the project is successful; standard/basis for comparison)

PLAN

4) Root Cause Analysis: (investigation depicting the problems' root causes)

5) Solutions: (action plans and findings of tested solutions)

Root Cause	Tested Solution	Responsible	Due	Finding

DO

6) Check: (summary of the solutions' results, overall goal success, and any supporting metrics)

Goals and Metrics	Baseline	Target	Current
Goal			
Supporting Metric			
Supporting Metric			

CHECK

7) Act: (action taken as a result of the Check, and a plan to sustain results)

- 1.
- 2.
- 3.

ACT

In this case, here is an example for improving eye protection adherence:

1. **State the problem:** Staff are not wearing eye protection when they need to.
Optional: The current adherence rate as of 10/18/22 is XX % (proper eye protection occurrences out of total observations).
2. **Current State:** Find out what is going on in your facility with the eye protection (use staff interviews or process mapping). This step may *not* be necessary if your facility already knows the current adherence rate for eye protection.
3. **Design a SMART* goal** to get everyone to wear eye protection in the Green Zone
For example – All staff, including clinical, dietary, housekeeping/laundry, rehab, activities, social work, working in the Green Zone in all shifts will be wearing eye protection by Oct. 31st.
**Remember SMART goals are Specific, Measurable, Attainable, Relevant, and Time-bound.*
4. **Root cause analysis:** Find out why eye protection adherence is low using staff interviews, fishbone diagramming, process mapping, etc. For example, an RCA for one facility discovers that 1) the facility's current supply of eye protection is uncomfortable and 2) staff are seeing other staff not wearing eye protection and thus following their lead (poor culture of safety, lack of role models), 3) lack of accountability – lack of consequences and/or lack of incentives.
5. **Implement/Do:** Prioritize 1-2 root causes to tackle first using the prioritization matrix. Pick ones that are easiest to do and likely to have the most impact.

			Easy to do	Hard to do
		High impact	<i>Prioritize</i> For example – Current supply of eye protection is uncomfortable for many staff.	<ul style="list-style-type: none"> - Poor culture of safety, lack of role models - Lack of accountability: lack of consequences and/or lack of incentives
		Low impact		

6. Put interventions in place to try to eradicate the root causes

7. Collect data on whether people are wearing eye protection more, less, or the same amount after the interventions are in place.

8. Continue or adjust your interventions
(If they're working, continue them. If not, change them a little)

***In terms of motivation. Can you brainstorm ways to make it fun? (ex. What things are green (for Green Zone)? (Incredible Hulk – mad without eye protection. Oscar the Grouch – Grouchy without eye protection. Green = Go (put your eye protection on))*

Office Hour:

Question:	If I missed the Small Group my facility was invited to, can I attend another one?
Answer:	Please email TNTEducation@ph.lacounty.gov immediately with your request. In your email, include your full name, your facility name and your request.

Question:	Where can I access the recording of the Didactic sessions?
Answer:	Didactic session recordings, slides and post-session evaluation quizzes as well as any other materials shared during the sessions can be found on the TNT Website . Expect the Didactic session materials to be available on the website within 1 week following each session.