



THE PROBLEM

Decreasing compliance of hand washing by medical and nursing staff from 78% (of standard 100%) from January 2020 to 53% in March 2020, whereas this is an effective and efficient measure to control infection, including Covid19, in the hospital.

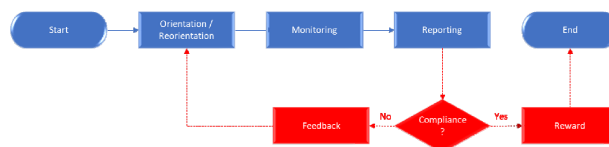
AIM

To achieve 100% standard hand washing compliance rate for all medical and nursing staff in 3 (three) months or by June 2020 and to be maintained till December 2020.

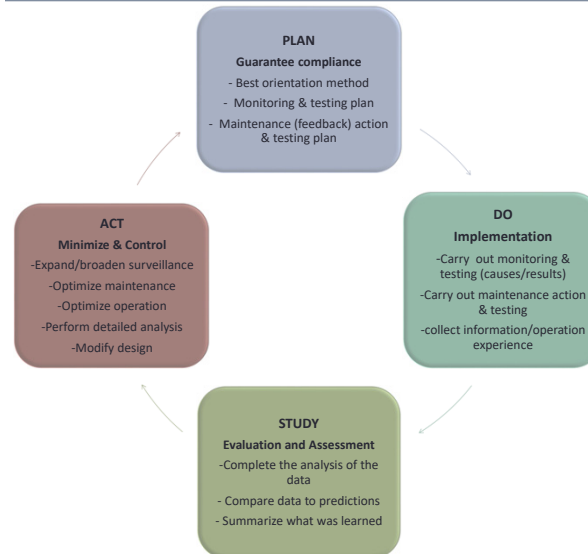
FLOW MAP OF PRESENT STATE



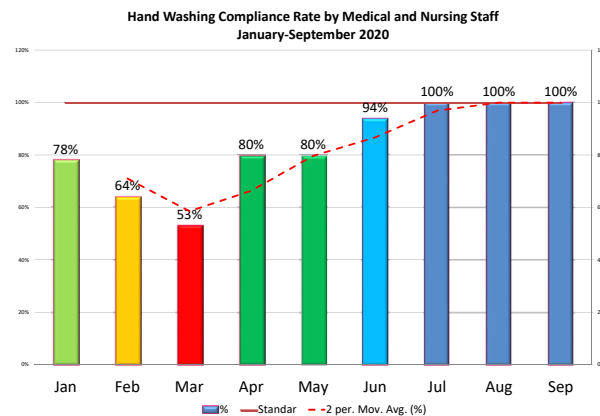
FLOW MAP OF FUTURE STATE



PLAN DO ACT STUDY CYCLE



DATA



RESULTS

- Compliance immediately improved by +27% to 80% of standard within 2 months of implementation (April and May 2020) and to 94% at 3 months (June 2020).
- Complete 100% compliance was achieved since July 2020 or after 4 months implementation and maintained till current time of reporting (September 2020).

SUMMARY

- Implementation of feedback of compliance rate results to medical and nursing staff was able to improve their motivation and implementation of hand washing activity (as predicted in this Quality Improvement Project).
- However, "reward" method has not been implemented yet.
- Method of giving feedback should be come a "best practice" in efforts to improve compliance of involved subjects.
- Achievement of Total Handwashing Compliance gives patients and institution the assurance of Patient Safety against possible Nosocomial (including Covid19) Infection.

FUTURE STEPS/ WHAT'S NEXT?

- Try to maintain Total Handwashing Compliance with effective, efficient "feedback" or find other more effective and efficient ways.
- Try to apply "feedback" method to other low compliance conditions.
- Try to give "reward" to compliant medical and nursing staff, including determining the best effective and efficient kinds of rewards.
- Study the accuracy of monitoring data.