

Antimicrobial Stewardship in Long-Term Care Facilities Kick-Off Summit PARTICIPANT'S HANDOUT

Activity 1. Root Cause Analysis

85 year old female resident started complaining of abdominal pain and diarrhea two days ago. Early today she was diagnosed with C. difficile infection. She had no known previous history of C. difficile infection or previous hospitalization. Similar cases have been consistently observed during the last six months, which has led to an increase of C. difficile infection rates in your facility. As the head of the QAPI team, you are asked to identify the underlying factors or causes of this observed increase of C. difficile infection rates.

Strategy #1a: Five Whys (Allotted time: 10 minutes for team work, 10 minutes for whole-group discussion)

In order to brainstorm potential causes of this phenomenon, you decide to follow the Five Whys Strategy. This strategy involves looking at any problem and drilling down by asking “why?”, “what caused this problem?”, or “what cause the previous why?”

Discuss with your team members the personal experiences in your institution that could explain the previous scenario. Please complete the following 5 Whys and conclude some potential root causes based on this strategy.

Problem statement: C. difficile rates increasing in your facility

→	1 st WHY?
→	2 nd WHY?
→	3 rd WHY?
→	4 rd WHY?
→	5 th WHY?

Root causes:

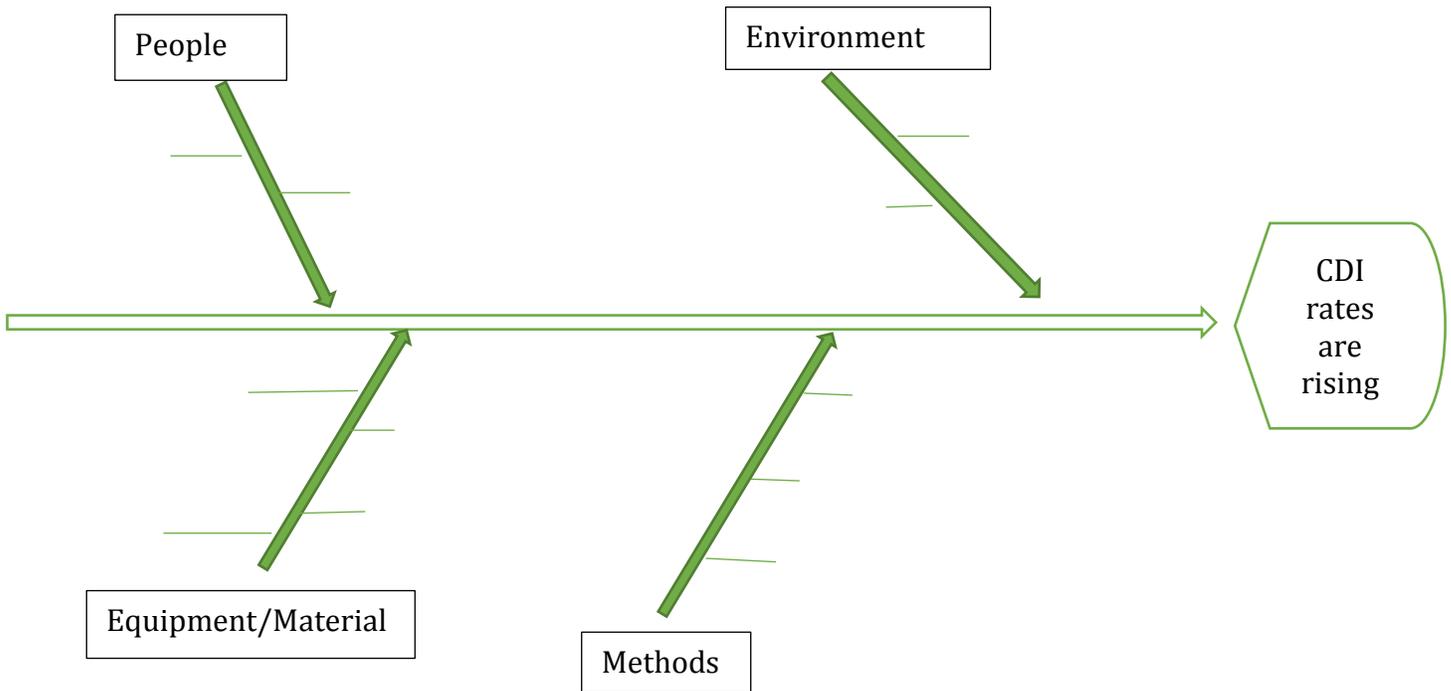
1. _____
2. _____

To validate root causes, ask the following: If you removed this root cause, would this event or problem have been prevented?

Before deciding on a root cause, you agree to review and analyze the available clinical data on the residents diagnosed with C. difficile infection in the last six months in your facility. You discovered that C. difficile tests were appropriately ordered 80% of time. In other words, the residents met the necessary clinical criteria for potential C. difficile diagnosis. However, you realize that 100% of CDI positive patients received antibiotics in the previous month. Furthermore, 90% of these residents received antibiotics after a suspected UTI. Additionally, you also realized that all residents diagnosed with CDI are very social within the facility and have participated in several recreational activities organized by the facility during the last six months.

Strategy #1b: Fishbone Diagram (Allotted time: 10 minutes for team work, 10 minutes for whole-group discussion)

Based on this new data, you decide to perform a secondary root cause analysis, this time using the Fishbone diagram. A fishbone diagram can help with brainstorming to identify possible causes of a problem and in sorting ideas into useful categories. The problem is displayed at the head of the fish. Possible contributing causes are listed on the smaller bones under various cause categories. Please brainstorm with your teammates on all the potential contributing factors. Ask “why does this happen?” As each idea is given, please write the causal factor as a branch from the appropriate category. Causes can be written in several categories.



Root causes:

1. _____
2. _____

To validate root causes, ask the following: If you removed this root cause, would this event or problem have been prevented?

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Program Management Plan

Problem Statement: *C. difficile* infection rate is increasing and poor hand hygiene is identified as a critical root cause.

Aim statement: We want to improve hand hygiene compliance (to above 80%) to help reduce our facility CDI rate by December of 2018

Intervention: Implement a hand hygiene education strategy for increasing hand washing compliance by healthcare personnel, residents and family

Activity 2: Team Engagement (Allotted time: 10 minutes for team work, 10 minutes for whole-group discussion)

Before implementing your intervention in your facility, who do you need to engage in this process? What could motivate them to collaborate in your intervention and how can they help?

Who?	What could motivate them?	What can they do?
Executive leadership	Data, dollars: bottom line focus. Focusing in QAPI can improve nursing home Compare Ratings and Quality Measure composite scores.	Buy-in for the work at the top level, convey institutional priority

Activity 3: Communication (Allotted time: 10 minutes for team work, 10 minutes for whole-group discussion)

To improve the success of your intervention, you decide to develop a communication plan. In order to direct resources appropriately you choose to focus on two target audiences.

	Nurses	Residents/ Families
Purpose: Why is it important to communicate to this audience? What is the goal of your communication? Do you have a specific need or request?		
Values: What does this audience most value when it comes to this topic? How will you incorporate or include this?		
Concerns: What is the audience's greatest concerns when it comes to this topic? How can you address their concerns?		
Message: What is the key message you want to deliver? Make sure to tie their values and concerns		
Channels: Which communication channel will you use? Potential channels: in-person channels (face-to-face meetings, lunch and learn events, off-site meetings, town meetings, etc.), media channels, print channels (banners, newsletters, fact sheets, etc.), electronic channels (blogs, video, social networking, etc.)		

<p>Messenger: Who will deliver the message? Should it be different for each channel used?</p>		
<p>Evaluation: How will you know you were successful? What output will you track? How will you monitor the effectiveness?</p>		