



HEALTH QUALITY INNOVATORS

Affinity Group: Education is Extremely Important, and Visual Reminders Can Help

5/14/24

Polling Question

Are you an active participant in your staff orientation training?

1. Yes
2. No



Objectives

- Engage assisting living and adult day care center facilities in common issue discussion and problem solving by peers
- Evaluate onboarding of team members and annual training for infection prevention
- Identify unique ways to teach infection prevention to staff and families
- Develop one or two enhancements to current facility education with plan to implement timeframe



Education Challenges/Opportunity Considerations

Who are you teaching?

- Staff: New hires vs Annual
- Vendors/Contractors/Volunteers
- Residents/Participants/Family Members

Why are you teaching?

- Requirements for employment (i.e., practical – how to do the work)
- Mandatory/Regulatory
- Process improvement/remediation
- Informative/collaborative

Consider a New Approach: Microlearning

What is Microlearning?

SHORT

3-15 min lessons using video, graphics, Power Point and audio as examples

FOCUSED

Often just one learning objective (process, model, idea)

OLD/NEW

Ancient best practice, but also modern, mobile

Consider a New Approach: Microlearning

ACCESSIBLE

Ideally just in time – when, where the learner needs it

HOLISTIC

Microlessons part of an overall goal or knowledge structure

COLLABORATIVE

Community of learners, contributors

Other Considerations

- “PIE”: increases **Participation, Impact** and **Engagement**
 - Creative
 - Engaging
 - Motivating
- Results: narrow the gap between goals and performance



Teaching = Learning

”

For people to learn something well, they must **hear it, see it, question it, discuss it,** and **do it.** They may even **teach it** to someone else to solidify their understanding of the information or skill...

“

Elaine Biech

Education Begins: Orientation

What are the basics?

- Hand Hygiene
- Standard and Transmission-Based Precautions
- Personal Protective Equipment (PPE)
- Blood Borne Pathogens
- Safe injection and blood glucose monitoring practices
- Respiratory hygiene and cough etiquette
- Cleaning – equipment, environment
- Chain of infection



Tools to Make Orientation Memorable



Teach concept of appropriate use of alcohol-based hand rubs and soap and water



[Simple Strategies: When to Practice Hand Hygiene | HQIN](#)



Practice, practice, practice!

- Brief quiz
- Return demonstration using Glo Germ

Orientation – Simple Read and Feedback

Did you know...

You touch your eyes, nose and mouth about 25 times per hour.

On average, health care providers perform hand hygiene less than half of the times they should.

When to Practice Hand Hygiene

1. Before and after physical contact with a patient
2. Before donning gloves and after removing gloves
3. After handling soiled or contaminated items and equipment, including linens
4. Before performing invasive procedures
5. Before handling sterile or clean supplies
6. When hands are visibly dirty or soiled with blood and/or bodily fluids*
7. Before and after eating or handling food*
8. After personal use of bathroom*

*Situations where soap and water preferred over alcohol-based hand rub

Simple Strategies to Prevent Infections



Use “Simple Strategies: When to Practice Hand Hygiene” to answer the following:

1. List three times you want to choose soap and water over using alcohol-based sanitizer
2. True or false: If you wear gloves, you do not have to wash your hands.
3. On average, how often do health care providers perform hand hygiene, compared to how often they should?

Education Begins: Orientation



Polling Question

Knowing there is limited time for orientation, do you want to:

1. Keep things as they are
2. Consider some of these suggestions to "refresh" your content



Polling Question

Do you ask your new employees to rate the content or the value of the time spent in orientation? Can be either immediately after, or prior to concluding orientation.

1. Yes
2. No



Another type of Microlearning



Accessible

Easily access training content at your convenience on your smartphone, **laptop or desktop computer.**



Concise

Short, interactive modules make it easy to complete training in minutes.



Relevant

Training modules provide guidance and education based on current health care requirements and standards.

HQI Academy

The interactive training modules are designed to be informative and engaging on a variety of topics focused on improving the quality, safety and value of healthcare. Available healthcare topics include:



Diabetes



Health Equity



Pre-Diabetes



Sepsis

New topics are being developed on an ongoing basis.

Polling Question

What is your preferred method to engage your staff in annual mandatory education?

1. Relias or another corporate education product for annual education
2. Binder with monthly subjects; staff reads and signs attendance sheet
3. Monthly or regularly scheduled in-services
4. Other



Annual Education – Go Beyond

What are barriers to good hand hygiene compliance?
Select all that apply:

- _____ Skin irritation and dryness
- _____ Dispensers and sinks that are hard to access
- _____ Lack of belief that it makes a difference
- _____ Too little time
- _____ Lack of support from colleagues for hand hygiene-related workflow interruptions



Virtual vs Binder vs In-Person Annual Education

Pros and Cons of “**Canned**” Annual Education:

PRO

You don't have to do it.

Can be assigned with tracking for compliance.

CON

Cost associated with use.

Boring.

Virtual vs Binder vs In-Person Annual Education

Pros and Cons of **Binder** Updates:

PRO

Can be very timely and current.

Predictable, with employee sign-in attestations.

CON

Someone (probably you) has to come up with content.

No way to be sure if information is retained.

Virtual vs Binder vs In-Person Annual Education

Pros and Cons of **In-Person** Updates:

PRO

Can be very timely and current.

Can actively engage participants.

CON

Time consuming for person leading.



How to reach off-shift or working staff?

Family and Resident Engagement Suggestions

Call for Help Action Plan

This plan will help you know when to call your doctor or nurse (when you are in the Yellow Zone) from going into the Red Zone. Please share this with your care partners.

Name: _____ Emergency Contact: _____
 Primary Care Physician: _____ Phone: _____
 Specialist: _____ Specialist: _____

Problem	Yellow Zone	Red Zone
Infection & Sepsis 	Call your doctor or nurse specialist. State the reason you are calling or go to urgent care. <ul style="list-style-type: none"> • Hard to breathe or more difficult than usual • Fever of 100°F - 101.4°F or cold/shivering • Body aches or pain • Too tired to do any activity • Infection symptoms are included in other sections below 	Call 911 or go to the ER. <ul style="list-style-type: none"> • Fast breathing and/or cannot catch breath • Fast heart rate or chest pain • Temperature 101.5°F or above, 96.8°F or below (with other symptoms in this section) • Drop in blood pressure, light-headed, fainting • Confused, unable to think clearly, tired • Skin becomes warm and flushed • Less pee/urine output, prolonged vomiting, or diarrhea (could indicate dehydration)
Lungs: Pneumonia, COPD, Asthma 	<ul style="list-style-type: none"> • Short of breath or wheezing • Cough that gets worse • Change in mucus sputum/phlegm: color (yellow, green, bloody), thicker, has odor or increased amount • Restless, agitated, nervous, shaky • Fever over 101°F for 24 hours, chills • Chest pain when breathing 	<ul style="list-style-type: none"> • Hard to breathe, does not respond to or breathing treatments • Fast or irregular/abnormal breathing • Blue-to-gray color to lips or fingernails • Coughing up blood • Sudden squeezing chest pain • Confusion and agitation

About Me

My name is _____ I like to be called _____

I like to get up around _____ and first thing I do is _____

I love to talk about _____

When I get angry I _____

When I feel sad I _____

What I really enjoy is _____

One thing I am very proud of is _____

My favorite kind of music is _____

I really laugh when _____

I love to eat _____

I really hate to eat _____

I can go to sleep best when _____

One of my pet peeves _____


One of my favorite objects that I own is _____

I have always wanted to _____

One more thing I want you to know is _____

Preventing and Treating Common Cold

Are you sneezing, or do you have a stuffy and runny nose? You might have a cold. Antibiotics do not work against viruses that cause colds and will not help you feel better.



What is Common Cold?

A common cold is a mild upper respiratory illness that resolves in a short period of time.

Symptoms

Symptoms of a cold usually peak within 2 to 3 days and can include:

- Sneezing
- Nasal congestion
- Sore throat
- Cough
- Fever (although most people with colds do not have fever)

When viruses that cause colds first infect the nose and sinuses, the nose makes clear mucus. This helps wash the viruses from the nose and sinuses. After 2 or 3 days, mucus may change to a white, yellow, or green color. This is normal and does not mean you need an antibiotic.

Some symptoms, especially runny or stuffy nose and cough, can last for up to 10 to 14 days. Those symptoms should improve over time.

Colds can have similar symptoms to flu. It can be difficult (or even impossible) to tell the difference between them based on symptoms alone.

Causes

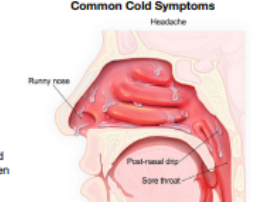
More than 200 viruses can cause a cold, but rhinoviruses are the most common type. Viruses that cause colds can spread from person to person through the air and close personal contact.

When to Seek Medical Care

See a healthcare professional if you have:

- Trouble breathing or fast breathing
- Dehydration
- Fever that lasts longer than 4 days
- Symptoms that last more than 10 days without improvement
- Symptoms, such as fever or cough, that improve but then return or worsen
- Worsening of chronic medical conditions

This list is not all-inclusive. Please see a healthcare professional for any symptom that is severe or concerning.



When you have a cold, mucus fills your nose and could cause post-nasal drip, headache, and a sore throat.

Talk to a healthcare professional right away if your child is under 3 months old with a fever of 100.4 °F (38 °C) or higher.

BE ANTIBIOTICS AWARE
SMART USE, BEST CARE


CDC

Family and Resident Engagement Suggestions


About HQIN

The Health Quality Innovation Network (HQIN) brings together organizations and individuals who are making health care better for millions of Americans through funding provided by the Centers for Medicare & Medicaid Services Quality Improvement Organization Program. Members include providers, community-based organizations, health care associations and families in Kansas, Missouri, South Carolina and Virginia.

To learn more about our initiatives, visit: www.HQIN.org or call 877.731.4746



Resident and Family Guide To Understanding Sepsis



What is Sepsis?

Sepsis is a very serious illness. It occurs when the body's response to infection rapidly spreads from its original site. Sepsis can quickly impact vital organs and tissues, causing permanent damage or even death.

Can you prevent Sepsis?

Preventing infection is one of the best ways to stop Sepsis from occurring. Clean all scrapes and wounds and wash your hands by touching open areas or providing care to a loved one. Handwash key to preventing the spread of infection.

SEPSIS Fact Sheet:

Sepsis is a Medical Emergency

AWARENESS!
THE SIGNS OF SEPSIS*

- Shivering
- Extreme pain
- Pale skin
- Sleepiness
- 'I feel like I might die'
- Shortness of breath

TIME MATTERS
It's a race against the clock!

Sepsis is treatable with antibiotics if caught in time. The more time you spend without antibiotics, the less time you have to fight for your life.

Get medical care immediately and ask your health care provider "Could my infection be leading to sepsis?"

WHAT IS SEPSIS?

Germs cause an infection that can enter your bloodstream and, if not stopped, can lead to sepsis. Sepsis is the body's extreme response to an infection, causing your organs to shut down one by one and can be deadly.

Those at highest risk for sepsis are:

- Children less than one year old
- Elderly greater than 60 years old
- Those with chronic conditions or weak immune systems
- Those with wounds or surgical incisions

LIFE AFTER SEPSIS

More patients are surviving sepsis but many suffer from new problems:

- ✓ Memory loss
- ✓ Anxiety or depression
- ✓ Weakness and difficulty with routine tasks
- ✓ Difficulty sleeping
- ✓ Recurrent infection
- ✓ Medical setbacks from chronic conditions of the heart, lung or kidney

WAYS TO PREVENT SEPSIS


- ✓ Wash your hands often and keep cuts and wounds clean to prevent infection
- ✓ Stay up to date on all vaccinations
- ✓ Know the signs of sepsis
- ✓ **ACT FAST** if you have an infection or wound that is not getting better or is getting worse



HOW CAN I HELP MYSELF RECOVER?

- Set small goals for yourself—like bathing
- Rest to rebuild your strength
- Eat a balanced diet
- Exercise as you feel up to it—like walking
- Surveillance helps
 - ✓ Watch for signs of new or repeat infection
 - ✓ Take your temperature twice a day

LEARN MORE: www.cdc.gov/sepsis
 *Sepsis Alliance at www.sepsis.org

SEPSIS IS A MEDICAL EMERGENCY



Add logo here

Sepsis Fact Sheets modified with permission from The Hospital and Healthsystem Association of Pennsylvania. This material was prepared by Health Quality Innovators (HQI), a Quality Innovation Network-Quality Improvement Organization (QIN-QIO) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this document do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. 1/2016/HQI/09-020-04/1/1/14

23 Patients, Families & Caregivers: Sepsis | HQIN

Support for Education

[Vaccination Resources with QR Codes: Flu and COVID-19 | HQIN](#)



Vaccination Resources with QR Codes: Flu and COVID-19

The resources on each page below will help you to educate your patients, customers, or constituents about various vaccination topics. Click the links on the menu below to access the resources of your choice. You can print any page and post them in your office, practice, facility or community organization. Do not post this first page. A link is included for each resource in case accessing a QR code is not possible.

Helpful Tip: Each page contains a QR code with instructions for using a cell phone to access the tool. Familiarize yourself with the use of QR codes if the person wanting to access a resource has questions.

Resource Contents

1. [Find COVID-19 Vaccines Near You](#)
2. [Find Flu Vaccines Near You](#)
3. [Myths and Facts about COVID-19 Vaccines](#)
4. [Flu or COVID-19?](#)
5. [Key Facts About Influenza \(Flu\)](#)
6. [How COVID-19 Spreads](#)
7. [Influenza \(Flu\): Frequently Asked Questions](#)
8. [7 Questions about the COVID-19](#)
9. [What is Long COVID?](#)
10. [COVID-19 Shots and You](#)
11. [Who Needs the COVID-19 Vaccine](#)
12. [Important Information About Adult Vaccinations](#)

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Resources and Education for Residents and Families

- VIPTA
- AHRQ – can be customized with your facility logo:
 - Antibiotics: When do you need them?
 - Skin and soft tissue infections
 - Urinary tract infections
 - Acute bronchitis
 - The flu



[Toolkit To Educate and Engage Residents and Family Members | AHRQ](#)

What's Wrong With This Picture?



Don't forget that
sometimes pictures are
worth a thousand words

What's Wrong With This Picture?



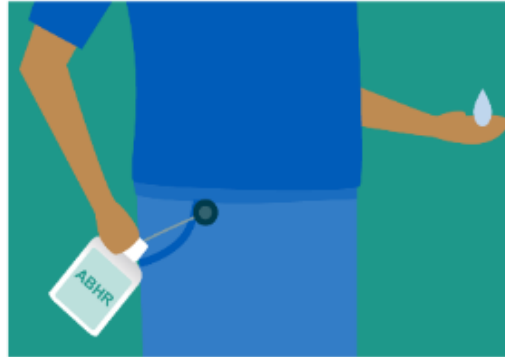
ABHR: Getting it Right is a Key to Success!



Pull the ABHR container out of the pocket and dispense an adequate gel or foam onto one hand.



Dispense enough to cover all surfaces of hands



Place container back in pocket with other hand before performing hand rub.



Perform hand rub, thoroughly coating all surfaces of both hands.



Rub hands until dry



Go directly to the resident without touching anything or placing hands in pockets.



Or begin a new task without touching anything (other than what is associated with the task)

References

- *Flow: The Psychology of Optimal Experience* by Mihaly Csikszentmihalyi
- *Communities of Practice: Learning, Meaning, and Identity* (Learning in Doing: Social, Cognitive and Computational Perspectives) by Etienne Wenger
- *Mindset: The New Psychology of Success* by Carol S. Dweck
- *The Power of Full Engagement: Managing Energy, Not Time, is the Key to High Performance and Personal Renewal* by Tony Schwartz and Jim Loehr
- *A Mind for Numbers: How to Excel at Math and Science* by Barbara Oakley, PhD
- *Make it Stick: the Science of Successful Learning* by Peter Brown, Henry Roediger III, and Mark McDaniel
- *The End of College: Creating the Future of Learning and the University of Everywhere* by Kevin Carey

Resources

- *The Art and Science of Training* by Elaine Biech, Association for Talent Development
- *New Power: How anyone can Persuade, Mobilize, and Succeed in our Chaotic, Connected Age* by Jeremy Heimans and Henry Timms
- *The Surprising Truth About How we Learn: When, Where, and Why It Happens* by Benedict Carey
- [Project Firstline Infection Control Training | CDC](#)
- [Virginia Infection Prevention & Control Training Alliance \(VIPTA\) - VIPTA](#)
- YouTube video links for instructional videos:
 - [Donning & Doffing](#)
 - [Universal Masking](#)
 - [Staying Safe in the Splash Zone](#)
 - [Chain of Transmission](#)



There is Still Time for Participation in On-site Assessments!



Benefits:

- Establish relationship with personable and knowledgeable infection preventionist
- Obtain resources to assist with building a robust infection prevention program
- Glo-germ demonstration to elevate hand hygiene campaign
- Fit testing (on-site)

For more information, contact:

IPCTeam@dss.virginia.gov

HQI: mlocklin@hqi.solutions

Please Mark Your Calendars

Final Affinity Session: That's a Wrap!

June 11 10:00 am

Register

