

Building a Team of Champions: Turning the Tide in Infection Prevention



The concept of infection prevention has been around for decades. One way to ensure infection prevention, is with standards of care which exist to reduce nonsocial infections.

So, why should organizations consider creating a program for champions in infection prevention and control (IPC)? Read on to learn more about the ongoing impacts of this patient safety issue and how to build an effective champion program in your hospital to address it.



UNDERSTANDING TRENDS

While much progress has been made in infection prevention, it remains a leading health concern. Healthcare-associated infections (HAIs) compound the issue of antimicrobial resistance, increase costs in health care and negatively impact patient outcomes. According to the CDC, an estimated 1.7 million HAIs in the United States occur annually, and 99,000 of these result in death.

In addition, according to the Joint Commission data on organizations' compliance with standards, in the first half of 2022, three of the top 10 Joint Commission findings were from the infection control chapter:

- High-level disinfection and sterilization
- Storage of equipment
- Implementation of the infection control plan

The data on rates and survey findings show room for improvement in the world of infection prevention. However, it can be challenging for an organization to know where to start.

THE EXECUTIVE'S ROLE IN INFECTION PREVENTION: SUPPORT

IPC is a nuanced undertaking. A highly trained and collaborative infection prevention team is vital to the effort, but not the only essential piece. That's where leadership comes in.

Leadership functions as the change agent. Not only do they understand the vision, but they create a culture that supports the work and helps others understand why change is needed.

The *American Journal of Infection Control* cited results from a study that reviewed management practices that promote and sustain an infection prevention program.

Three management practices rose to the surface:

- Engagement of executive leadership
- Information sharing
- Manager coaching



Developing Champions

The study results highlight the need for an IPC champion program. The most effective programs share some essential characteristics.



THE THREE C'S OF INFECTION PREVENTION CHAMPION PROGRAMS:



Culture: Infection prevention is everyone's job — this adage still rings true today.

Whether it is bedside clinical staff, ancillary providers, patients or family members, each person has the potential to cause — or prevent — HAIs. Promoting the culture that everyone has a role in infection prevention fosters engagement and attacks potential sources of infection from many angles.



Collaboration: Work closely to identify barriers in practice and address them as a group. Infection preventionists do not function best in a bubble — outside perspectives on barriers in practice are critical in developing relevant interventions.



Cooperation: In the world of infection prevention, it truly takes a village. Without teamwork, policies and procedures remain just words on a document, but an engaged and invested team brings them to life.

THE IDEAL TEAM ROSTER

The science behind infection prevention is complex and good hand hygiene, while essential, is only part of the solution. Addressing the issue necessitates the development of a multidisciplinary team to ensure comprehensive infection prevention and control.

A rigorous program should include members from the following areas:

- **Front line clinical staff:** Hand-selected by management to ensure the staff members are engaged and active participants.
- **Executive leadership:** These team members keep the momentum going by cutting through red tape and bringing in needed resources
- **Doctors:** Physicians on the team can share information with their peers and communicate initiatives with the medical executive committee (MEC). The MEC can incorporate resulting strategies into quality improvement initiatives.
- **Support services:** Other hospital departments have a role in infection prevention, too. Any service that a patient, provider or family member comes into contact with is a potential source for illness transmission. Representation from respiratory, environmental services, lab, radiology and facilities is essential.
- **ER and outpatient staff:** HAIs are rarely connected to these departments, though data from the National Healthcare Safety Network (NHSN) indicates that patient care typically originates from these areas. For this reason, staff from these areas can provide insight into potential areas of concern.

▲ A STRUCTURE FOR SUCCESS

Creating an impactful IPC champion program involves more than assembling a comprehensive team. The structure of the team makes a difference and should be individualized to meet each specific organization's needs.

For example, a complex hospital may decide to elect multiple champions assigned to the unit to focus on discrete priorities:

- Hand washing
- Central line-associated bloodstream infection (CLABSI)
- Catheter-associated urinary tract infection (CAUTI)



TRAINING FOR INFECTION PREVENTION CHAMPIONS

With the team structure and key players identified, next-level planning includes ensuring champions are proficient in the different aspects of infection prevention. Trainees should grow in the following areas to increase their effectiveness. An ideal training program involves two main themes: interpersonal skills and foundational knowledge.

1. Enhance Interpersonal Skills

The goal of every infection prevention champion is to recruit and maintain participation from their fellow hospital staff members. Training in the following aspects leads to success in this goal.

- **Interpersonal Communication** - How champions present information to front-line staff is arguably just as important as what is being said. Learning various communication skills and techniques helps leaders effectively share critical knowledge.
- **Change Acceptance** - Changes to the status quo can create difficult conversations, allowing advocates to practice strategies that manage resistance and noncompliance helps reduce the challenging nature of these situations.
- **Positive Reinforcement** - Infection prevention measures languish when staff is disengaged or unwilling to participate. To combat this, champions should learn different ways to acknowledge when staff follow procedures.

2. Build Foundational Knowledge

Knowledge lends to credibility and trust, which promotes connection to the team, allowing for collaboration and information sharing. Ideal champions should develop a firm grasp of the following concepts:

- **Best Practices for Prevention** - The science behind IPC continues to evolve. New unit champions should sharpen their skills in the current best practices. One example includes learning about evidence-based care bundles for different types of HAIs.
- **Current Data** - Real-time data sharing allows for greater impact with improvement efforts. Therefore, keeping current with hospital-wide and unit-specific data regarding hand hygiene and infection facilitates meaningful collaborations with team members.
- **NHSN Surveillance Definitions** - The NHSN surveillance system includes definitions and criteria for all the different reportable infections. Developing a working knowledge of the basic NHSN surveillance definitions supports staff education.

RESPONSIBILITIES OF INFECTION PREVENTION CHAMPIONS

So, what does being an infection prevention champion entail?

The following list reviews the essential components of the role:

- **Share Information** - Share updates from champion meetings with peers on their units and request to be added to staff meeting agendas to present the information more formally.
- **Observe Unit Practices** - Policies and procedures are only part of the process. Note infection control practices on the unit and communicate with real-time coaching to improve safety, efficiency and transparency.
- **Engage with the Unit Leader** - Communicate real-time observations with the unit leader, helpful in situations with ongoing concerns.
- **Share Unit Observations** - Discuss unit observations during champion team meetings. Lessons learned from different departments can help solve issues in other service areas.
- **Model Best Practices** - It goes without saying that putting infection prevention skills to practice is critical for champions.
- **Conduct Investigations** - Investigate any infections that occur in the unit. When infections occur, champions use drill-down tools to evaluate potential causes or opportunities for improvement. The exercise is not punitive but rather a way to understand the factors involved to prevent future HAIs. Information from drill-down tools should be analyzed for trends and reviewed monthly by the team.
- **Celebrate Success** - Openly recognize successes and offer continued support to empower and encourage staff members.

WANT TO LEARN MORE ABOUT HOW JOINT COMMISSION RESOURCES IPC EXPERTS CAN WORK WITH YOUR ORGANIZATION TO HELP BUILD A CHAMPION PROGRAM OR TO ADDRESS OTHER CHALLENGES? VISIT THE [IPC ADVISORY SERVICES PAGE AT JCRINC.COM](https://www.jcrinc.com)



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