

To survey or not to survey:

Evaluating the quality of patient experience feedback for
Aseptic Technique compliance assessment.

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Disclosure

- I have no actual or potential conflict of interest in relation to this presentation.

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The Alfred Hospital



AlfredHealth The Aseptic Technique Project at Alfred Health

Components:

- Online learning package
- Standardised competency assessment criteria checklist (once off)
- Standardised auditing tool +/- follow up
- Trained AT Competency Assessors
- Trained AT Auditors
- Ward/Department education with focused themes



- Patient Satisfaction Surveys (PSS) are increasingly being used to engage consumers of healthcare services.
- Could PSS be used to accurately evaluate AT compliance?
- Outpatient setting
- A plan to commence a multi-strategic improvement plan
- Collaboration with new leadership team of Haematology Oncology (HOC) Day Procedural unit

AlfredHealth The multi-strategy approach

- Leadership team role modelling and immediate feedback
- Addressing the culture
- Upcoming PSS discussed with staff and Handover/Huddle.
- All nursing staff to be refreshed on the AT using the online learning package.
- All staff to be re-competency assessed for AT.



AlfredHealth What does the literature say?



- Pilot study ran from the 14th – 23rd of May 2019
- Total of 26 participants
- Aimed to recruit patients with Central Lines, however included patients with Peripheral Cannulas
- Clocks available in clinical areas for patient to time HCWs.

AlfredHealth Aseptic Technique Audit Tool

- Online auditing tool
- Application available for use on tablets or personal devices.

Aseptic Technique Audit

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Aseptic technique protects patients from infection and must be practised when undertaking any invasive procedure.

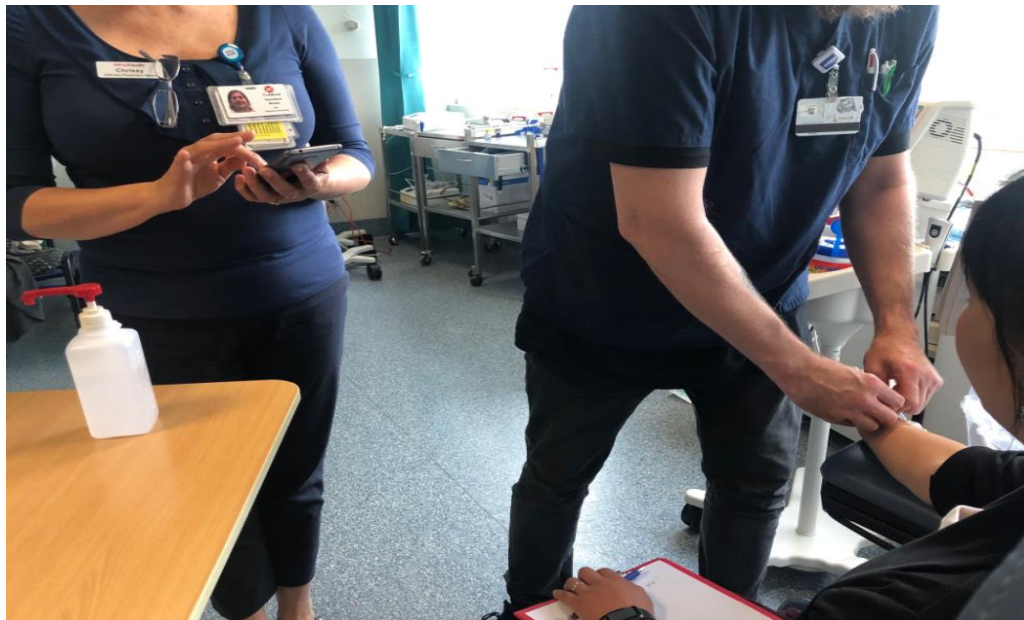
Data from this audit is used to assess knowledge & compliance with aseptic technique principles and to provide safest care to our patients.

Thank you for doing this audit!

Date of Audit <small>* must provide value</small>	<input type="text"/> <small>first name, last name eg. john, smith</small>
Auditor Name <small>* must provide value</small>	<input type="text"/> <small>first name, last name eg. john, smith</small>
Candidate Name <small>* must provide value</small>	<input type="text"/> <small>first name, last name eg. john, smith</small>
Candidate designation <small>* must provide value</small>	<p><input type="radio"/> Nurse <input type="radio"/> Nursing student <input type="radio"/> Doctor <input type="radio"/> Medical student <input type="radio"/> Allied Health <input type="radio"/> Allied Health Student <input type="radio"/> Other <input type="radio"/> Phlebotomist</p> <p>reset</p>
Service Location	
On which campus is this audit being performed? <small>* must provide value</small>	<p><input type="radio"/> The Alfred <input type="radio"/> Caulfield Hospital <input type="radio"/> Sandringham Hospital</p> <p>reset</p>
Procedure details	
What is the procedure being audited? <small>* must provide value</small>	<p><input type="radio"/> Arterial line insertion or access <input type="radio"/> Burns dressing <input type="radio"/> CVAD insertion <input type="radio"/> CMA</p>



AlfredHealth Auditing Aseptic Technique on mobile device

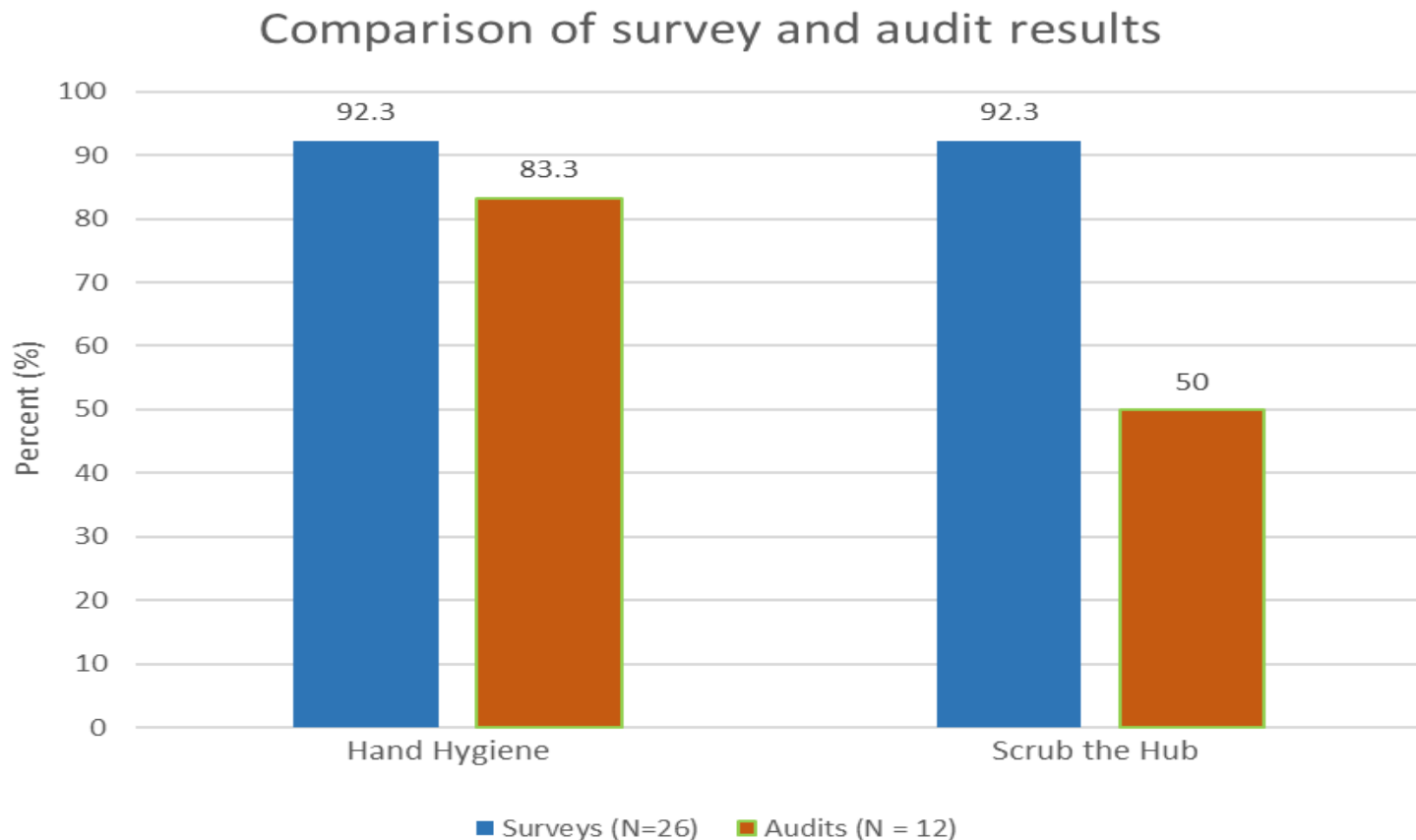


When accessing your central line today, have the nurses and doctors taken the time to do the above to do the below three points:

- Hand Hygiene moment 2
- Scrub the Hub – 15 second scrub
- Scrub the Hub – 30 second dry

- ☐ Yes, always
- ☐ Yes, most of the time
- ☐ Some of the time
- ☐ Hardly, not at all



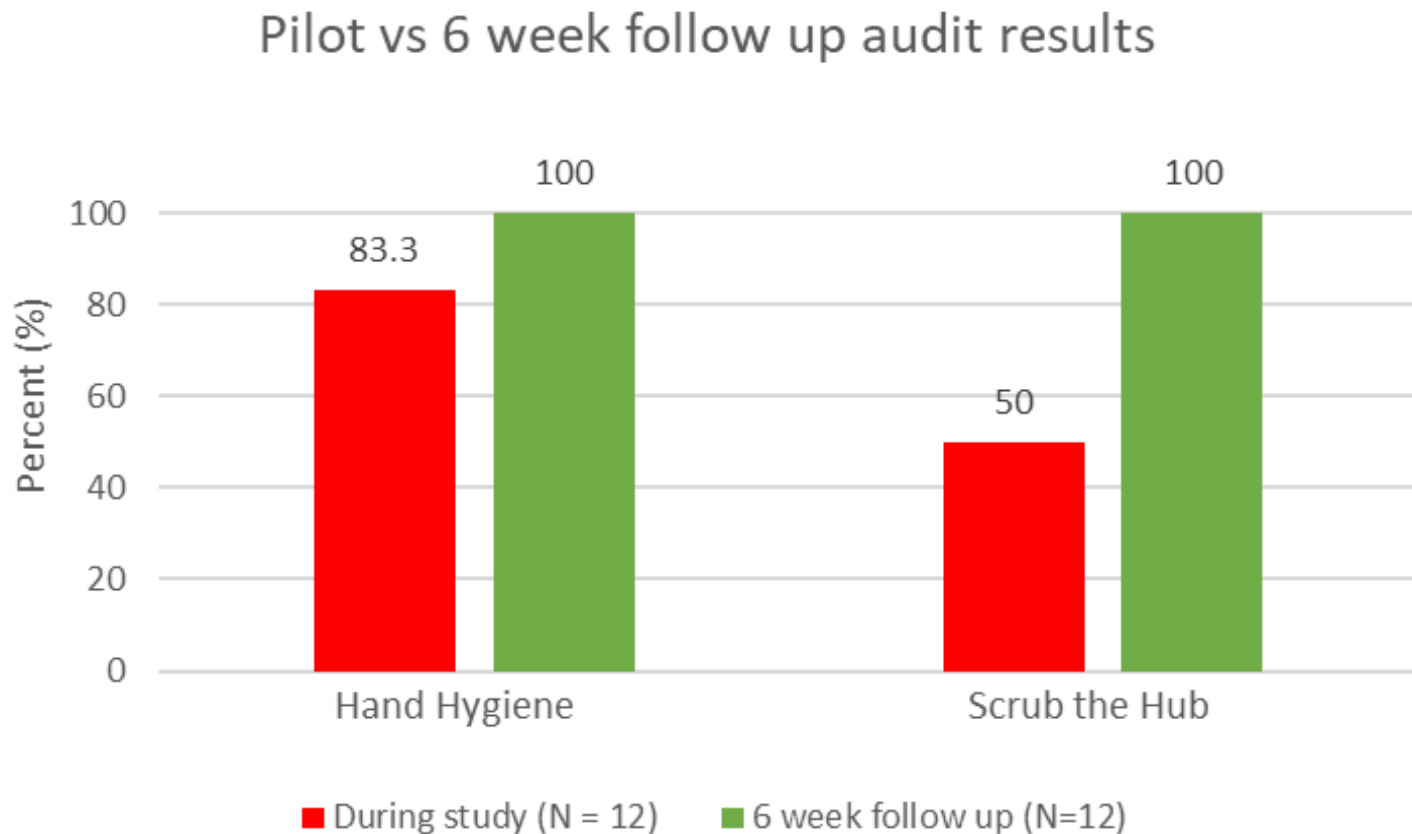


- Volunteer bias
- Healthcare worker/patient power imbalance
- Health literacy
- Trust relationship with their nurse/HMO
- Recall bias
- Unable to separate Scrub the Hub and Hand Hygiene
- Random staff allocation

The remaining components of the multi-strategy approach were implemented including:

- Reviewing online AT learning package
- Re-competency assessed for AT
- Targeted education and staff feedback
- Results discussed with patients, as requested
- Reauditing

Follow up results



- **PSS = Caution**
- **Key stakeholder engagement, role modelling, and education aid in improving Aseptic Technique practices**

Future plans:

- **Consumer engagement/awareness in AT practice**
- **Enablers and barriers of AT**
- **AT competency assessment via teleconference**
- **Alternate routes to give feedback to patients**

Thank you!

Eugenija Johnson
The HOC team
A-Prof Leon Worth
&

The Alfred Health Infection Prevention team

