

# HFI-U Recommends Systems Thinking for Quality, Patient-Centric Care, and Reducing HAIs

*Systems thinking can improve quality, service to patients, and help prevent HAIs.*

NAMPA, ID, US, January 2, 2020 /EINPresswire.com/ -- HFI-U (fna, Healthy Facilities Institute University) is advising Environmental Services (EVS) departments to adopt systems thinking to improve quality, service to patients, and help prevent HAIs costing from US \$28 to \$45 billion yearly (National Library of Medicine, 2009).

Dr. W. Edwards Deming taught every system must have an aim, and a clear aim of health care is to provide optimal care of patients and, if possible, do so profitably.

Environmental services departments are a vital, sometimes neglected component of this system as they are responsible for cleaning and disinfecting throughout a healthcare facility, and notably in near-patient areas which sometimes carry the greatest threat to transmitting HAIs:

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Ask the question: When should a healthcare EVS department operate at a higher cost? Answer: When doing so enables the system aim, improves quality, and reduces HAIs”

*Allen Rathey, HFI-U*

- Studies confirm that only 40% of near-patient surfaces are cleaned in accordance with hospital policy.
- Eight studies confirm that patients in rooms previously occupied by patients with vancomycin-resistant Enterococcus (VRE), Clostridium difficile, and Acinetobacter baumannii infection have a 73% increased risk of acquiring the same pathogen than patients not in those rooms.
- Five studies show improved cleaning practice and routine disinfection leads to an average 40% decrease in transmission of VRE, MRSA, and A baumannii.
- 11 studies show thoroughness of disinfection can be

improved by 82% and that such improvement has been associated with a 68% decrease in environmental contamination of high-touch objects.

Reference: Evaluating Hygienic Cleaning in Healthcare Settings: What You Don't Know Can Harm Your Patients by P.C. Carling and J.M. Bartley in the June, 2010 supplement to the American Journal of Infection Control.

System Steps



Integrated healthcare systems improve quality and patient-centric care, while reducing HAIs.

A key aspect of improving systems is the use of Dr. Deming's, Plan-Do-Study-Act cycle, which the US Veterans Administration's (VA's) Quality Enhancement Research Initiative (QUERI), describes as a vital component to improving quality, patient-centric care, and reducing HAIs:

"PDSA cycles consist of planning the change (Plan), carrying out the change (Do), observing and analyzing the results of the change (Study) and then deciding what additional changes should be made (Act). This is a cycle, done repeatedly until the results meet the objectives."

Donald M. Berwick, MD, MPP, President Emeritus and Senior Fellow, Institute for Healthcare Improvement, in the foreword to The Improvement Guide, a practical approach to enhancing organizational performance, said: "The 'Plan-Do-Study-Act' cycle ... is probably the most useful single framework I have encountered in twenty years of my own work on quality improvement. It can guide teams, support reflection, and provide an outline for oversight and review."

For more information, see [IEHA's Continual Stepped Improvement \(CSI\) video](#) on the application of PDSA to EVS.

### Asking the Right Questions


The Improvement Guide also provides three key questions to ask as a Model for Improvement:

1. "What are we trying to accomplish?"
2. "How will we know that a change is an improvement?"
3. "What change can we make that will result in improvement?"

Per Allen Rathey, principal of HFI-U - "Also, ask the question: When should a healthcare EVS department operate at a higher cost? Answer: When doing so enables the system aim, improves quality, and reduces HAIs."


This means:

1. Spending more money on EVS functions if they help improve quality, patient outcomes, and reduce HAIs.



# bacterial infection

Studies show thoroughness of disinfection can be greatly improved in health care and that such improvement is associated with fewer infections.



# PDSA

Dr. Deming's Plan-Do-Study-Act cycle enables step-by-step improvement for better quality and fewer infections.

2. Looking at what the entire system is doing, not solely at the parts, and managing interrelated processes as a whole.

HFI-U, as part of its ongoing advice, is pointing EVS departments to system-development resources including [IEHA's partnership with the W. Edwards Deming Institute®](#) and to IEHA's Perioperative Credential as a training tool to achieve system aims in EVS.

HFI-U also provides helpful infographics from The Deming Institute to help EVS departments on their systems journey. See [PDSA chart](#).

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