Hand hygiene

**Frontline ownership: The key to success**

In March 2014, Michael Gardam, MSc, MD, FRCP, director of Infection Prevention and Control at the University Health Network (UHN) in Toronto, Ontario, Canada, came to our facility and gave a refreshing and inspiring lecture on hand hygiene. Lectures on hand hygiene can be a bit dry, so we were pleasantly surprised that his talk (titled “Sick of trying to improve hand hygiene without success? Try something different”) was anything but boring.

Dr. Gardam emphasized that although sharing best practices makes sense, sustaining changes and achieving best practices require frontline staff to “own” the hand-hygiene program. The success of his UHN team, he explained, came from staff taking ownership of solutions implemented on their unit or in their facility. Team members found solutions are best identified and implemented by those most affected by the changes—those who “touch” the problem, not outside experts. He encouraged other departments and units to learn from these people and take ownership by tailoring their solutions to meet their own needs.

Dr. Gardam stated, “We don’t have one hand-hygiene program at UHN. We have about 20.” Although each unit customizes its own improvement initiative, simple rules bind everyone together and are followed by all. “We all use an alcohol-based gel located at point of care,” he explained, “and we audit the same way across the board. Other than that, we allow for a lot of local variation.”