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For immediate release

Hand Hygiene Compliance Industry Group Formed to Lead Change for Patient Safety

Stamford, CT - January 20, 2015 – To create meaningful awareness of the patient safety risks and the economic burden to the US healthcare system of outdated hand hygiene compliance measurement, eight US-based hand-hygiene compliance solution providers have formed an alliance. EHCOTM, the Electronic Hand-hygiene Compliance Organization, aims to lead and influence changes in hand-hygiene measurement policy and guidelines at accreditation organizations, government agencies, health insurers, and hospitals. EHCOTM's focus is to improve hand hygiene compliance and, in turn, increase safety and reduce avoidable harm to patients and hospital staff.

Every year in the US, more than 700,000 hospital patients contract an avoidable infection known as an HAI, or healthcare-associated infection. Of those patients, approximately 75,000 will die¹. While proper hand hygiene is critical to preventing the transmission of many infections, compliance with hand hygiene guidelines is less than 50% globally². Until recently, the only way to measure how well healthcare workers performed hand hygiene was manual direct observation. With direct observation, individuals know they are being observed and adjust their behavior, a phenomenon known as the Hawthorne Effect, inflating a hospital's true compliance rate. A hospital may think its hand hygiene compliance rate is 90%; but direct observation only accounts for 1.2% to 3.5% of all hand-hygiene events³, leaving more than 96% of hand hygiene events undocumented and compliance rates highly overstated.

"Patient health and lives are being put at risk by outdated compliance measurement methods which often inflate actual hand hygiene rates by up to 300%⁴," said Paul Alper, Chairman of EHCOTM and VP of Patient Safety Strategy, DebMed. "Patients are subjected to extended lengths of stay and unnecessary suffering as a result of HAIs, many of which could be prevented with proper hand hygiene. That is why the members of EHCOTM are uniting to drive change in US healthcare policy." Alper continued.

Only within the past few years has evidence-based electronic measurement of hand hygiene become widely available to accurately and continuously measure hand hygiene compliance in real-time and enable meaningful feedback to healthcare workers. While capturing 100% of

hand hygiene behavior electronically gives hospital leaders in quality, patient safety, and infection control visibility to accurate and reliable rates, no policy guidelines or mandates exist. EHCO™ member companies believe that it is their responsibility to lead the change in the acceptable standard of care to improve public health and patient safety.

Connie Steed, Director of Infection Prevention at the Greenville Health System in Greenville, SC has been working with one electronic hand hygiene company for the past six years to help them develop and perfect their system.

“We are excited to have electronic hand hygiene compliance measurement throughout our seven hospitals,” said Steed. “We now have a better understanding of the compliance rate for all of our hand hygiene behavior 24/7. We switched away from direct observation, the most common monitoring methodology, because it only gave us data for a small snapshot in time and healthcare workers behave differently when being observed. Thus our rates with direct observation were much higher than our 24/7 reality.”

“We have seen consistent double digit increases in hand hygiene compliance and reductions in healthcare-associated infections,” continued Steed. “These benefits have come with cost savings that can justify the cost of the system.”

The companies engaged in EHCO™ include Airista, BioVigil, CenTrak®, Clean Hands-Safe Hands, DebMed, Hill-Rom, Inc., SwipeSense, and Versus Technology.

“We have come together with a common goal, to lead the change in how hospitals measure this key performance indicator of patient safety and quality,” said Alper. “Just as every other area of healthcare is adopting advanced technologies for improved efficiencies and care, there is now innovative technology to help drive true improvement in hand hygiene compliance that is linked to the reduction of avoidable infections and their associated costs.” continued Alper.

For more information, visit <http://ehcohealth.org>.

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2. McGuckin M. Waterman R. Govednik J. “Hand hygiene compliance rates in the United States — a one-year multicenter collaboration using product/volume usage measurement and feedback.” School of Population Health Faculty Papers. March 2009 24(3): 205-213.
3. Fries SL, Tolentino G, Thomas T, et al. Monitoring hand hygiene via human observers: how should we be sampling? Presented at 21st Annual Scientific Meeting of the Society for Healthcare Epidemiology of America; Dallas, TX: 2011. Abstract 50. Available at <https://compepi.cs.uiowa.edu/index.php/Publications/Shea11c>.

4. Srigley JA, *et al.* (2014). Quantification of the Hawthorne effect in hand hygiene compliance monitoring using an electronic monitoring system: A retrospective cohort study. *BMJ Qual Saf*, 974-80. doi:10.1136/bmjqs-2014-003080. Available at <http://www.ncbi.nlm.nih.gov/pubmed/?term=srigley+quantification>.

ABOUT EHCO™

EHCO™ is a consortium of healthcare technology companies that provide SMART (Systems that Measure Accurately and in Real-Time) hand-hygiene compliance solutions. EHCO's member companies are committed to lead and influence changes in policy and guidelines at accreditation organizations, government agencies, health insurers, and hospitals along with educating consumers on this important public health issue. The intended outcome of their work is the reduction of avoidable harm.