**2025 Healthcare Quality Week**

 **Oct. 20-24 Manager Key Messages**

**Monday, Oct. 20: Hand Hygiene**

1. Always clean your hands before and after every patient contact — even when wearing gloves. Keep sanitizer within reach.
2. Model good habits and remind others respectfully. Recognize teams that consistently practice great hand hygiene.
3. Encourage patients to speak up, review feedback, and use quick, visual reminders to keep hand hygiene top of mind.

**Tuesday, Oct. 21: Falls, HAPI**

1. **Screen and Access**
* Ask patients if they have fallen recently, feel unsteady, or worry about falling.
* Review and adjust medications that may increase fall risk, such as those affecting balance or blood pressure.
* Assess patient-specific risk factors and incorporate into the care plan.
1. **Personalized Prevention Plan**
* Create a personalized prevention plan based on fall risk assessment.
* Judiciously use tools such as bed and chair alarms.
* Ensure patient's environment is safe by keeping bed low and lights and personal items easily accessible.
1. **Implement and Educate**
* Check on patient regularly to address 4 Ps: pain, position, possessions, and need for the toilet.
* Teach patients how to use the call system and involve families in a prevention plan.
* Providing a sturdy surface and assisting with balance during transfers and ambulation; ensure team members are trained in safe patient handling techniques.

**Wednesday, Oct. 22: CAUTI/CLABSI**

1. Use aseptic technique for insertion:
* CLABSI: Prepare skin with an antiseptic such as chlorhexidine, allowing it to dry completely before insertion.
* CAUTI: Use proper sterile equipment and procedures during insertion to prevent bacteria from entering.
1. Promptly remove unnecessary catheters:
* CLABSI: Regularly assess need for central line and remove as soon as possible. Consider using single-lumen catheters or other devices for long-term access to reduce risk.
* CAUTI: Actively look for opportunities to discontinue urinary catheter, using evidence-based tools to assess continued need.

**Thursday, Oct. 23: TMI (team member injury)**

1. Use safe patient handling techniques and assistive devices:
* Train on proper patient handling to avoid awkward postures, twisting, and heavy lifting that may cause musculoskeletal injuries.
* Use assistive devices such as mechanical lifts and transfer aids during patient movement and repositioning.
* Ask for help when a task is physically demanding; understaffing and overexertion can be major risk factors.
1. Participate in and advocate for proper training:
* Engage in training on health and safety protocols.
* Stay up to date on new procedures, equipment, and safety guidelines.
* Participate in safety policy development to help create a proactive culture and ensure procedures are practical for frontline team members.
1. Promote open communication:
* Team members should feel comfortable reporting hazards, near misses, and injuries.
* Ensure everyone is on the same page — especially during high stress situations — and proactively identify and address potential risks.

**Friday, Oct. 24: Mortality**

1. Enhance early recognition and intervention:

* Use tools such as electronic health record (EHR) to identify early signs of decline and trigger alerts for conditions like sepsis.
* Identify patients at higher risk for mortality and implement specific protocols to manage care.
* Ensure severe health issues are treated in a timely manner.

2. Foster teamwork and communication:

* Train teams to work together effectively — especially in high-risk situations — to create common understanding of situation and coordinated response plan.
* Collaboration is key: encourage better communication and knowledge sharing among medical disciplines and departments.