



Roll-Out Steps

Initiate

- Identify key wards (based on level of infection and location);
- Evaluate impact on AHR supply (prowipes and moisturisers);
- Recruit enthusiastic key staff figures (staff champions, NUM's); and
- Identify key staff figures to replace AHR bottles and brackets (i.e. PSA's job description may change to include HH product replacement).

Plan

- Identify strategic locations and migration throughout hospital (note: no AHR provided to area until appropriate education);
- Specialised areas such as aged care, paediatrics and psychiatry may need extra care and collaboration with suitability of product placement;
- Prepare Support Network (PSA's and NUM's);
- Prepare education sessions and posters;
- Prepare wards (countdown to AHR arrival and fix AHR brackets);
- Select Users for education (RN's, Dr's, AH, etc);
- Utilise key staff figures (to identify product placement on the ward);
- Schedule education for users with positive feedback (sentinel wards data);
- Prepare for AHR questions (i.e. allergies, splashes, product placement); and
- Provide timely follow-up to any negative reactions (attitude, side effects).

Configure

- Prepare a distribution list for AHR product roll-out (supply or pharmacy);
- Prepare a 'launch kit' (i.e. pamphlets, pens etc.);
- Prepare for adverse reactions (i.e. dermatological events algorithm); and
- Reassess risks, contingency and a rollback plan (i.e. staff issues, ward emergencies, AHR supply, brackets supply).

Roll out

- Brief key staff figures (staff champions);
- Orientation to wards (hand-over, payslip flyer- agency);
- Launch all products (i.e. AHR, prowipes, moisturisers);
- Provide education sessions (20-25 mins) with HH Research Nurses and Infection Control Nurses (plan to provide a follow-up/debrief sessions);
- Validate to users the change to AHR (use sentinel ward data);
- Facilitate behaviour change in HH practises by communicating to users;
- Develop HH policies and procedures;
- Introduce a Nursing Clinical Standard: VQC HH Training Manual (appendix P);
- Accreditation package (through websites, pamphlets, crossword- agency); and
- Distribute throughout hospital core and then satellite services (community providers may need small bottles for car travel- flammability).

Closure

- Conduct formal feedback on the AHR usage and infection rates; and
- Reaffirm overall scope, plan and rollout processes.