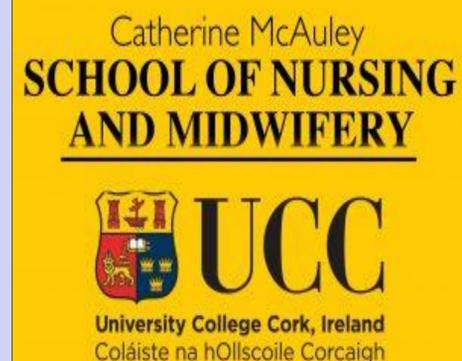


# A CORPORATE LEADERSHIP AND MANAGEMENT PERSPECTIVE ON THE IMPLEMENTATION OF GUIDELINES ON HEALTHCARE ASSOCIATED INFECTIONS

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## BACKGROUND

Clinical guidelines aim to improve the efficiency, quality and outcomes of patient care by ensuring that treatment recommendations are based on the best available evidence. A body of literature exists on healthcare workers' perspectives on implementing HCAs guidelines; however, there is a paucity of data on the corporate or managerial perspectives on implementation.

## OBJECTIVE

To explore the implementation of National Clinical Guidelines (NCGs) pertaining to MRSA and *C. difficile* in healthcare organizations from the perspectives of clinical and non-clinical managers.

## MATERIALS AND METHODS

Mixed methods approach comprising qualitative individual interviews (n=16) and quantitative surveys (n=51) underpinned by the Promoting Action on Research Implementation in Health Services (iPARIHS) framework.

## RESULTS

Successful implementation requires that clinical and non-clinical managers can access guidelines easily and are able to understand why they are important and relevant. Clinical environments vary and there is a need to study what the implementation of the guideline means in terms of workflow processes, resources, equipment, and cognitive load for staff members. Effective guideline implementation needs to be an organizational priority with overt support from leaders and managers.

## RESULTS

THEMES	LEADERS NARRATIVES
<b>Innovation- guidelines</b>	Category: Guidelines as large documents and difficult to locate "The bigger version [of the guideline] would be too cumbersome ... I wouldn't have the time personally to read it ... for day-to-day things I actually think there should be snappy one page, two page documents, quick referral guides" (P12).
<b>Recipients - health service leaders and staff</b>	Category: Guidelines as Holy Grail and time consuming "I think sometimes guidelines are over-arching and they are the Holy Grail but I just don't think that they are very feasible in practice... <i>C. difficile</i> brings about its own problems ... patient needs ... can be quite time consuming... time spent in a room or cordoning off a ward ... that adds to extra time... with the same amount of staff" (P5).
<b>Context – health service</b>	Category: Suboptimum infrastructure "... it is very frustrating knowing that we can't do better without that [single rooms] and they [Health Service Executive/hospital management] don't understand; there is no sign of any of that money coming in (P11)
<b>Facilitation- engagement strategies used for the implementation of Irish Clinical Guidelines</b>	Category: Role of infection prevention and control nurse as vital instrumental in ensuring the implementation of the HCAI guidelines "Their [infection prevention and control nurse] role is expanded, now they are required to feed in to the data nationally, ... other parts of their role have expanded ... they have all these other issues to deal with ( P12).

## CONCLUSION

Guidelines are complex interventions that require a systematic approach to all aspects of guideline implementation with the realization that the strategies required for initial implementation are different from the strategies required to ensure the continued sustainability of guideline application over time as staff change and systems alter.

## REFERENCES

- Harvey, G. & Kitson, A. (2015). *Implementing evidence-based practice in healthcare: a facilitation guide*. Routledge.
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