

Health hand hygiene



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The compliance of health care workers (HCWs) with hand hygiene and disinfection quality practices is considered one of HHUMC principle objectives because of its direct impact on healthcare provision . Hand washing is the single most effective measure of preventing healthcare associated infections.

The Infection Control committee runs an ongoing hand hygiene campaign to raise compliance rates. The main elements of which are:

- Promotion of alcohol hand disinfectants which have been shown to significantly improve compliance.: Alcohol-based hand disinfection dispensers were installed in all hospital departments
- Staff training : the infection control committee conducts routine and scheduled training on hand hygiene and the importance of alcohol disinfectant use for all hospital staff
- Hand washing Message: the infection control team encouraged the placement of hand hygiene posters in all hospital hallways and departments. The graphic reminders are an effective measure in reaching a large number of the hospital population which includes staff and hospital visitors and promoting the message about the importance of good hand hygiene practices and techniques.
- Observational Audit: The Infection Control team carried an observational audit of targeted staff that have direct patient contact in all hospital departments during the period January 2007 to November 2007. The IC/OH&S committee provided an annual schedule for the departments to be visited and audited. The audit entails monitoring the

practice of all Health-care workers (HCWs) against the requirement that hands must be decontaminated before and after every contact with patients or invasive devices, prior to any aseptic procedure and after handling body fluids or contaminated materials. These contacts are described as hand hygiene opportunities.

“ Compliance can be defined as either washing hands with liquid soap and water or rubbing with an alcohol disinfectant, in accordance with a hand hygiene opportunity”.

Compliance = Hand hygiene carried out x 100

Opportunity for hand hygiene (O)

In quarter I of 2007 the compliance rate was 73%. During the quarter II, compliance decreased to 71% and in the quarter III and IV the compliance rate were 72.2 % & 70 % respectively. The hospital-wide annual compliance average rate was 71.5 % which is an improvement from the 69% compliance rate of 2006 and a continued improvement since compliance was measured in 2005. It is also above the hospital goal for the first time.

The annual score for each department is shown in the figure below. The HHUMC Infection Control Department set a QI score of 70% or more to be achieved in 2007 in order to continuously improve compliance. The pie chart below represents the hospital department scores divided into the percentage of hospital departments that have achieved the score.

The departments that received the lowest scores are the departments that will be closely monitored and already received extra attention in order to improve their compliance with the hand washing policy.

Most of the hospital departments reached their goal. Interventions such as staff training, promotion of alcohol hand disinfectants, putting posters and monitoring staff performance played a significant step in improving hand washing compliance in the hospital.

During the observations, barriers to hand hygiene were identified, e. g. no paper towels, alcohol disinfectants in dispensers. Some of the observations also gave concern about staff not decontaminating their hands following removal of gloves. Findings were identified and transmitted to the nursing director, department managers, and staff on duty after the audits.

Future plans for hand hygiene campaign

The infection control department plans to continue its activities to further promote and train the the hospital staff in the use of alcohol hand disinfectants.

The observational audits will be repeated at least twice each year. Additional engagement with the nursing departments that have scored the lowest in the recent audit has already begun and the root causes for the lack of compliance with the hand hygiene recommendations will be analysed. The causes that are associated with lower compliance are related to the infrastructure and ease of available sites for hand disinfection as well as the promotion of the “ hand hygiene culture”.