

# Hand hygiene of clinical staff



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## Improving the hand hygiene of clinical staff on Surgical Assessment Unit

This assignment will demonstrate and focus on the relationship between audit and clinical governance. A brief introduction will be given to clinical audit. Clinical audit is the course of action that helps assure patients and service users receive the right treatment from the right person in the right way. It does this by gauging the care and services provided against evidence based standards and then tightening the gap between existing practice and what is known to be best practice. Clinical audit provides the structure to improve the quality of patient care in a planned and systematic way. Clinical governance is a system through which NHS organisations are obligated for continuously improving the quality of their services and preserve high standards of care by creating an environment in which excellence in clinical care will flourish. (Scully and Donaldson 1998, p. 61).

“ Winning Ways: Working together to reduce healthcare associated infection in England” (December 2003) states that to bring about an improvement in infection control practice, it is important that the measures known are very effective in minimising the risk of infection, therefore rigorous and constant monitoring is vital. All clinical staff must ensure that they are cleaning their hands at appropriate times as per World Health Organisation (WHO), National Patient Safety Agency (NPSA) “ Saving Lives” guidelines and NICE clinical guidelines (CG139). The National Patient Safety Agency has identified hand hygiene as an important factor in reducing infections in a hospital setting. To emphasize the importance of clean hands in minimising the frequency of healthcare acquired infection. Auditing is one of the most effective ways in which infections can be identified by the World Health

Organisation (WHO). The purpose of developing this audit tool is to identify the conformity to effective hand hygiene techniques and practices.

According to current policies and procedures which identify areas in which improvements need to be made in line with current legislation, guidance and the Patient Safety Alert “ Clean Hands Save Lives” issued to the NHS by the National Patient Safety Agency (NPSA).

The Healthcare Trust teaches the concepts of the 5 moments of hand hygiene plus bare below the elbow which make six moments. Many hospitals settings in the United Kingdom, for assessment and communication purposes, have compressed the number of hand hygiene opportunities to make auditing simple. The hand hygiene audit tool that is used in Surgical Assessment Department is too basic which makes it simpler for the audit assessor. But this can be detrimental to patient safety, because it only contained a limited number of questions and the time scale used to carry out the audit only lasted 10 minutes. Within this time only eight people were monitored. So, based on these findings a new audit tool was created to reduce the risk of cross contamination in the acute setting. The hand hygiene observation tool is designed to help staff in observing and recording hand hygiene behaviour. The audit tool allows for recording of hand hygiene from the various members of multidisciplinary team. This will allow the further information to be collected which will have a positive influence on patient and visitors safety in regards to infection. The tool which was designed is more detailed and is more complicated to carry out for the assessor. The observer has to carry out the audit over a 30 minutes period once a week for a month. The audit tool has 12 points in which staff, patients

and visitors need to be assessed on. In this period of time a minimum of 25 opportunities must be observed. This can be difficult for just one person (assessor) to collect the data on their own, because the Surgical Assessment Department is a short stay ward and has limited staff on the shift. It can be difficult to find a member of the team who may have time to carry out the audit, this is why sometimes compliance may not be met. In the first audit the results were collated but unfortunately compliance was poor and this showed in the results as 46%. This audit tool is time consuming which makes it more complicated, but more accurate data can be recorded and therefore more information is identified, making the results more reliable. The audit tool was designed in accordance to the National Patients Safety standards.

Auditing in the healthcare settings is a process that is used by health professionals to assess, evaluate and improve the care of patients. Auditing forms part of a clinical governance which provides high quality of clinical care for patients. Stage one of clinical audit cycle is to choose a topic which is high priority for the organization this is why hand hygiene was selected. The audit tool that has been designed is to protect patients and staff within the acute environment. Hands are the route by which infection can spread quickly. Adherence to hand hygiene is the single most important way in reducing the spread of infection in hospital. It is also known to reduce patient mortality and morbidity in the hospital. In the Surgical Assessment Department the manager is taking responsibility to delegate any member of staff to complete the hand hygiene audit at least once a week over a month period, compliance is very important when auditing in order to get an accurate result. Data analysis is the process of collecting data. Once the data

has been collated it gives an indication into areas of which the standards are not being met. If a standard is not being met, reasons need to be identified why and how practices can be improved to ensure that the standard is met in the future. If there were other, acceptable reasons for the standard not being met, i. e. if the soap dispensers were empty or if objects were blocking the sinks, these will be the issues which will need to be fed back to the clinical staff in order for changes to be implemented. It is very important that the healthcare professionals, patients and visitors are unaware that they are being assessed, therefore the observer need to remain unknown. This helps the data, which is collected by the observer to be more accurate.

The analysis of data and using the results of the clinical audit to develop and implement action plans to improve patient care and service delivery. The analysis may be needed in order to support service planning, measure trends and performance in service delivery. The trust has to be regularly reviewing how well it serves the patients. All clinical staff know where to access all resources relevant to infection and prevention control. This can be through systematic monitoring of activity data into specific areas of concern and policy requirements.

It is necessary to repeat the audit (re-audit) in three months' time. This is to ensure that the relevant changes have been made by the ward manager, that all staff aware of the changes that have been implemented and that practice has improved. After appropriate educational training the repeat hand hygiene audit showed substantial improvements and the results this time had risen up to 91% in accordance to the national average. Changes in practice can fail at any one of the stages. It is well known, that people

struggle with change and usually this is because there can be a lack of resources, a lack of motivation, inadequate management of the process and poor communication with in the team.

Clinical audit, when it is used in the correct way, can provide an objective tool to review the quality of clinical care, within a framework of improvement and support. It is a powerful tool for the implementation of positive change. Which results in changes in clinical practice. If it becomes common practice in the modern healthcare profession, it will be a mechanism to express improvements of the quality of clinical services for our patients. The multidisciplinary healthcare professionals defines clinical effectiveness as “ the application of the best available knowledge – derived from research, clinical experience and patient preferences to achieve most optimal processes and outcomes of care for the patients. Common themes run through the definitions of governance, effectiveness and clinical audit, which focuses on identifying, implementing and monitoring quality of care.

To achieve the best possible patient experience, the care that is provided will need to be safe and effective. Using the hand hygiene audit tool it will be used in a way that will help optimise clinical effectiveness for the patient. Using this tool will focus on the hand hygiene methods used on the Surgical Assessment Department is important for the safety of patients and their experience in hospital. The trust must recruit and retain the best staff, ensure their development and training needs are met and that we develop leaders at all levels to help ensure that each department has all the characteristics that help achieve the best outcomes.

The healthcare professionals use hand hygiene audit tool to improve patient experience. It is very important that clinical staff, patients and visitors wash their hands with soap and water before and after contact with someone who is ill in hospital to prevent the spread of infection and cross contamination. It is essential that everyone, who is not well, especially with gastrointestinal symptoms, with vomiting and diarrhoea, should not visit hospitals as this increases the risk of spreading the infection to patients and staff. There is a zero tolerance approach to poor hand hygiene for all clinical staff who work in the hospital. The infection control staff actively and regularly monitor clinical teams to make sure that compliance with the policy is being met and based on regular auditing sessions. Encouraging members of the public to maintain good hand hygiene when visiting Surgical Assessment Department is very important to ensure the rates of infection continue to drop. The hand hygiene clinical audit is successful in promoting quality improvement at a local level. Healthcare professionals can compare their data that has been collected in practice, with national standards that are published in the public domain. This will show if the standards are being met.

Clinical audit is used to measure conformity with standards and clinical practice. The hand hygiene tool is simple, inexpensive and effective in providing safe care for patients in hospital. Repeating audits at regular intervals and adhering to the correct training policies online and face to face ensure that standards remain high. The role of the Assistant Practitioner may now include completing hand hygiene audit for the manager of the Surgical Assessment Department. Staff must have an acquired level of knowledge and skill beyond that of the traditional healthcare assistant or support

worker. Audits previously and presently are usually carried out by registered nurses or managers and matrons. In the future the Assistant Practitioner may need to attend an infection control conferences and teach other healthcare professionals and student nurses including health promotion talks to patients and visitors on hand hygiene compliance. The Assistant Practitioners are accountable to themselves and their employer, and more important to the people they care for in the hospital.