



Hand Hygiene

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Evidence



- Improved adherence to hand hygiene
 (i.e. hand washing or use of alcohol-based
 hand rubs) has been shown
 - to terminate outbreaks in health care facilities
 - to reduce transmission of antimicrobial resistant organisms
 - to reduce overall infection rates

http://www.cdc.gov/mmwr/PDF/rr/rr5116.pdf http://www.who.int/patientsafety/information_centre/guidelines_ hhad/en/index.html



Recent Results



 Results taken from Jan / Feb 2012
 National Audit

Nurse	Medical	AHP	Others
95%	84%	97%	97%

 Results taken from April 2007 National Audit

Nurse	Medical	AHP	Others
75%	50%	69%	50%



Did You Know?



- 50% Reduction of Staph. Aureus in NHSGGC
- C.Difficile cases 0.24 per 1000 days (Nationally 0.32, HEAT Target below 0.39)
- Surgical Site Infections below National Average 19 infections in 2476 operations
- 2601 Cleanliness Champions
- 86,000 additional MRSA screenings per annum
 - MRSA Colonisation = 15x more likely to develop an HAI
- Central Line infections in some ITUs reduced to one per year
- Hand Hygiene Compliance at 92%
- All areas scored green (>90%) in Cleaning Standards

26 January 2012

HPS REPORT ON NATIONAL HAND HYGIENE COMPLIANCE: 17th BI-MO 1THLY REPORT



Health Protection Scotland on 25 January 2012 published its latest bi-monthly report on hand hygiene compliance. Encouragingly, national compliance remains high at 95% and all Health Boards exceeded the required 90% target. Good hand hygiene is one of the most effective ways of preventing the spread of infections and I congratulate all Boards on the hard work that has delivered and maintained the generally high standards reported by HPS.

Alongside these very positive results, I was disappointed to see that this is the fourth report in a row in which compliance by doctors has remained below 90%. Despite previously excellent progress made in doctors' hand hygiene compliance since the campaign was introduced in 2007, it unfortunately continues to be significantly lower than that seen by other staff groups such as nurses. The zero tolerance policy to non compliance is a clear and unequivocal message to the public that all NHS staff will demonstrate continuing excellence in hand hygiene performance and I expect doctors to take a leading role in this area.

My officials have contacted Health Protection Scotland to consider further work at a national level to help improve hand hygiene compliance by doctors. I would encourag a you to look at what actions can be taken in your own Board to ensure that all staff, including doctors, continue to wash their hands at every appropriate opportunity.



Disa Sturgeon

Responsibility



"Make the care of your patient your first concern;
 Listen to your patients and respond to their concerns and preferences"

"Respond constructively to the outcome of audit, undertaking further training where necessary"

"Participate in regular reviews and audit of the standards and performance of the team, taking steps to remedy any deficiencies"

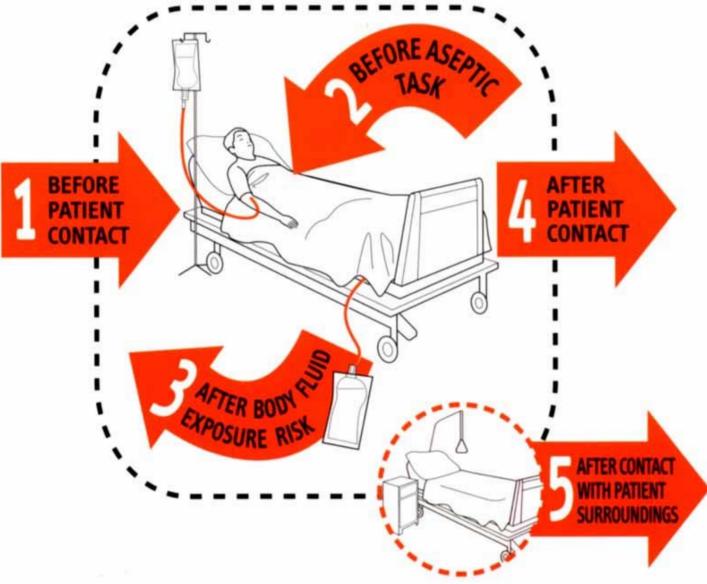
"You must protect patients from risk of harm.
The safety of patients must come first at all times"
Good Medical Practice, GMC

- "Patients must not be inhibited in asking staff if they have washed their hands"
 John Reid Sec. State for Health, DOH 2004
- The total cost of reminding a professional colleague to perform hand hygiene is almost zero, yet the savings in money, time and suffering may be immense.



WHEN? Your 5 moments for hand hygiene







How to Clean Your Hands



1



Palm to palm.



Right palm over left dorsum and left palm over right dorsum.



Palm to palm fingers interlaced.

4

Backs of fingers to opposing palms with fingers interlocked.





Rotational rubbing of right thumb clasped in left palm and vice versa.



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa.

www.nhsggc.org.uk



Combined Compliance



- National focus is on Combined Compliance
- Staff have to take the opportunity <u>and</u> carry out Hand Hygiene to set criteria

Handwashing	Handrubbing	
Bare below the elbows (i.e. jewellery and wristwatches should not be worn and sleeves should be at elbow level) Wet hands and apply liquid soap covering all surfaces of the	Bare below the elbows (i.e. jewellery and wristwatches should not be worn and sleeves should be at elbow level) Apply the alcohol based hand rub Rub hands together until	
hands (6 Steps) Rinse hands Dry hands using a paper towel Dispose of paper towel using a method that does not recontaminate hands	dry ensuring that the alcohol based hand rub covers all surfaces of the hands (6 Steps)	

Simply



- Before <u>AND</u> after glove use
- Before AND after all contacts
- 15-30 seconds for hand wash / gel
- Wet hands before applying soap
- Use paper towels to turn taps off
- No watches, jewellery, false or painted nails
- Alcohol gel for visibly clean hands
- Soap and water for visibly dirty hands and/or loose stools





http://www.nhsggc.org.uk/infectioncontrol

NHSGGC Infection Control

www.washyourhandsofthem.com

Campaign website

http://www.who.int/gpsc/en/

WHO website

http://www.show.scot.nhs.uk/

SHOW website

http://www.hps.scot.nhs.uk/haiic/ic/publicationsdetail.aspx?
 id=36570

Full Audit report

Delivering better health