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Hand Hygiene Compliance

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HAND HYGIENE COMPLIANCE

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BACKGROUND / INTRODUCTION

According to the CDC, approximately 99,000 people die each year from infections acquired in the hospital (Cohen, 2008). Hospital infections are preventable and can be easily be prevented with the simple act of washing your hands. Hand hygiene (HH) can prevent the spread of many infections Including C-difficile and Adenovirus. Studies show that as little as 30% of health care workers wash their hands when they interact with patients (Hartocollis, 2013). In another study where 231 nurses were asked how often they follow precautions to prevent the spread of infection, only 63 nurses said "they always wash their hands after they remove their gloves" (Miller, 2016). Based on the LVHN Infection Control and Prevention Plan, the goal is to have above 85% hand hygiene compliance (HHC) each fiscal year. There is evidence that suggests that visual and verbal cues can increase hand hygiene compliance amongst hospital staff.

PROCESS/ IMPLEMENTATION

- •Initial survey in December demonstrated only 60% HHC on PCU. Older reports revealed similar low compliance percentages. This indicated a need for improvement and change in current HHC protocol.
- •The baseline data of 60% was based off the current protocol of keeping 1 sign as a reminder for HHC requirements on patient doors.
- •The design for the new pilot study included additional signage posted on the physical pumps outside of patient rooms.
- •The signs were placed on all pump dispensers outside of patient rooms on both IPCU and PCU floors in the first week of January.

PURPOSE

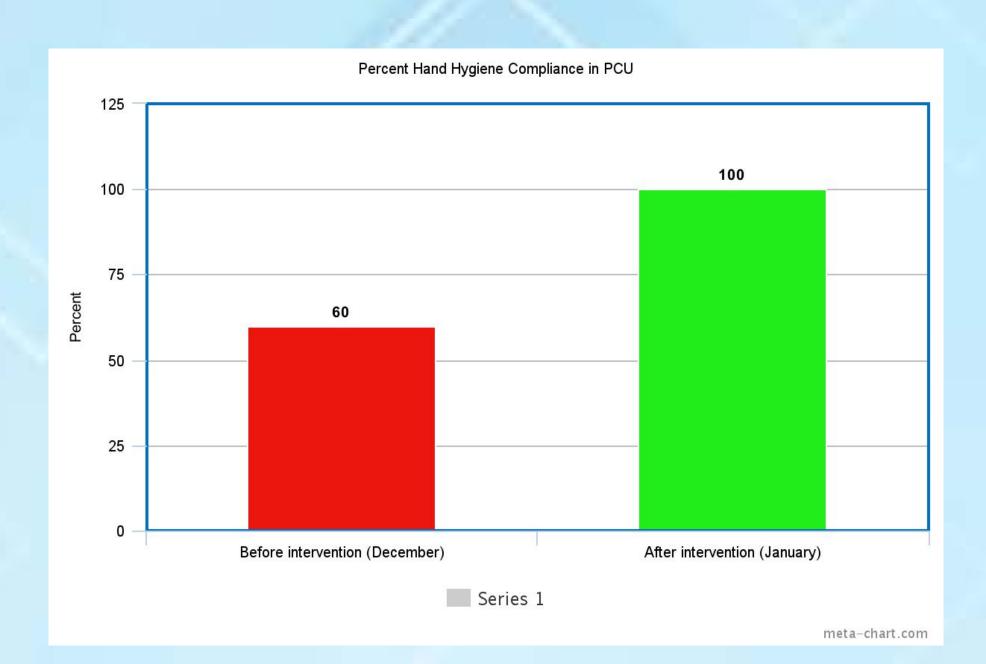
The purpose of this research project is to determine if a visual reminder will increase hand hygiene compliance.

For unit staff, does a visual reminder increase hand hygiene (HH) in comparison with current practice?

- P: RNs and TPs on IPCU and PCU
- I: sign attached to hand dispensers
- C: hand hygiene compliance (HHC)
- O: increased HHC

OUTCOME/ RESULTS

Results from the secret shoppers revealed a **100% compliance** in PCU for the month of January after implementation of pilot study (M.Kermalli, personal communication, February 1, 2016).





EVIDENCE

- Increase in HHC is observed with implementation of written educational material, reminders (visual, verbal and via written messages), statistical feedback for management and active involvement in promotion of HHC. There is added value in social influence/leadership in compliance (Huis et. al, 2013).
- Researchers have found that among women, there is a significant increase in HHC when exposed to a hand washing reminder sign (Ford et al., 2014).
- Creating environments with visual cues and minimal barriers has increased hand hygiene compliance because the perception of convenience has been associated with increased HHC (Ford et al., 2014).
- An increase in HHC can be accomplished with verbal reminders, visual posters, reinforced education and availability of implementation (Maithai et al., 2011).
- Visual cues serve as conspicuous signals and capture the attention of individuals in hand washing environments and raise awareness that hand hygiene products are available (Ford et al., 2014).

NEXT STEPS

- It should be communicated that this invention increased compliance and scores, resulting in increase of infection control.
- As demonstrated in collection data, the intervention of moving HH reminder signs to HH pumps proved to be successful. Implementing this intervention network wide may be indicated for successful HHC.
- 100% compliance of HH results in increased patient satisfaction, decreased rate of infection and decreased morbidity/mortality.
- While HH is considered a very basic principal, staff are seemingly forgetful or negligent of washing their hands
- Through the simple act of relocating a HH reminder sign less than three feet, HHC reached 100%. This pilot study further confirmed that signs posted on pump dispensers, in line of sight, results in safer practice.

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