

## **Report on Hand Hygiene Compliance in HSE Acute Hospitals Frequently Asked Questions**

### **1. General information**

#### **What is hand hygiene?**

Hand hygiene is the action of cleaning hands. There are two ways to clean hands

1. Soap and water (Hand washing)
2. Alcohol hand rub or gel

#### **Why is hand hygiene important?**

Hand hygiene is one of the most important ways to prevent the spread of infections. Germs can be spread from one person to another by hand contact unless hand hygiene is performed. All staff working in the healthcare facility should clean their hands:

- Every time they enter your room or bed area before touching or administering care to patients
- Upon leaving the room, if they have touched you or any object in the room or bed area
- After removing gloves

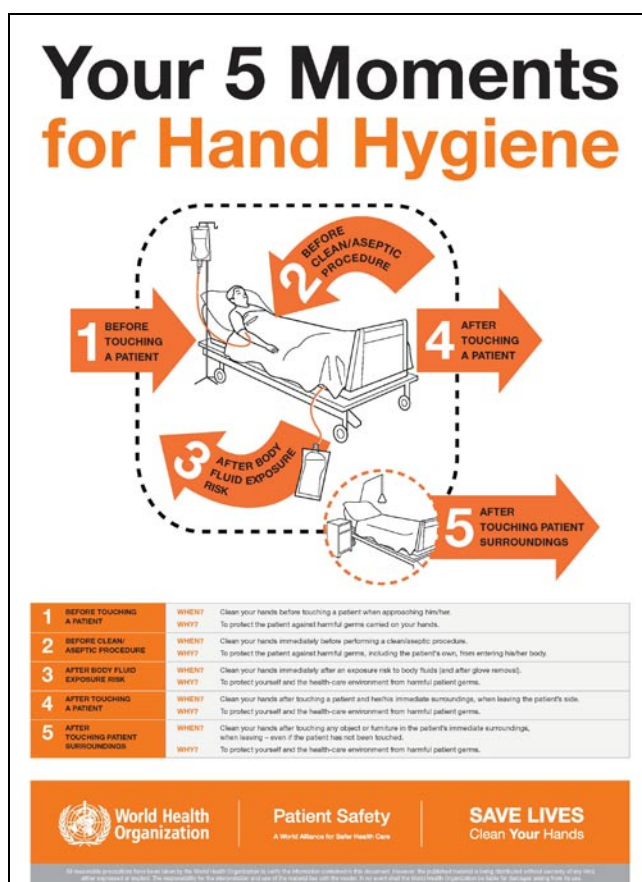
Hand hygiene prevents germs being transferred by hand contact during patient care. Improving healthcare workers hand hygiene compliance has been described by the World Health Organisation (WHO) as a key measure to reduce healthcare-associated infections. However, many studies have found that healthcare workers compliance with hand hygiene needs to be improved.

## Why don't healthcare workers clean their hands?

The World Health Organisation (WHO) has outlined the 5 occasions (or 'moments') when healthcare workers should clean their hands – this is called the 5 moments for hand hygiene. These are outlined in the figure below.

Many healthcare workers do clean their hands when they should, but there is room for improvement. There are a number of reasons why compliance is poor including:

- Poor infrastructure (e.g., not enough sinks or access to alcohol gel)
- Skin irritation
- Lack of education and training
- Lack of role models and peer pressure
- Staff shortages and overcrowding



## **What is being done to improve the situation?**

Improving hand hygiene has been a priority for WHO and many countries in the recent past.

- In Ireland, national guidelines on hand hygiene were published in 2005 which gave recommendations on numbers of hand hygiene sinks, education and training for healthcare workers and provision of alcohol gel/rub. Many healthcare facilities have upgraded their facilities and educational programmes to comply with the guidelines.
- In 2011 the HSE published a national protocol for measuring how good healthcare workers are at cleaning their hands for each of the WHO 5 moments of Hand Hygiene. This measurement is called a hand hygiene audit and the results are expressed as the percentage of times hands are cleaned when they should be. This ensures that hand hygiene is measured the same way in each hospital so that changes can be monitored over time.

## **Why is there a need to audit hand hygiene compliance?**

Measuring hand hygiene using the national protocol allows healthcare facilities to establish a baseline, target educational and promotional activities and measure progress over time provided the national protocol is used.

## **How is hand hygiene compliance measured?**

There are a number of ways that hand hygiene compliance can be measured.

1. The volume of alcohol gel/rub, soap or paper towels used in a facility

In Ireland, information on alcohol gel use in acute hospitals has been available since 2006. Data from 2010 revealed that the volume of alcohol gel used has increased by 94% between 2006 and 2010. Detailed breakdown of the figures can be found at <http://www.hpsc.ie/hpsc/A-Z/Gastroenteric/Handwashing/AlcoholHandRubConsumptionSurveillance/>

2. Hand hygiene audit

Trained auditors observing healthcare workers undertaking patient care and recording if they clean their hands at the appropriate times (e.g., before touching a patient)

There is no agreement internationally on how to measure hygiene compliance by observation even though it is recognised as the gold standard method. The national protocol for hand hygiene audits was developed in 2009 for use in Irish acute hospitals and following an evaluation was updated in 2011. This protocol uses the WHO methodology for undertaking hand hygiene audits.

## **2. Report on Hand Hygiene Compliance in HSE Acute Hospitals**

### **What information is included in this report?**

In June 2011, acute hospitals were requested to perform a hand hygiene audit using the national protocol. Hospitals audited 210 moments/opportunities when healthcare workers should have cleaned their hands in seven randomly selected wards. The observers (auditors) received specific training and were tested to ensure that they followed the national protocol and could measure how good healthcare workers were at cleaning their hands in a consistent manner. The results of this audit are included in this report.

### **What is healthcare worker compliance?**

In October 2011 the findings from an audit undertaken in 36 hospitals in May 2011 revealed that the average hand hygiene score for all healthcare workers was 74.7%. The 2<sup>nd</sup> report published in March 2012 analysed results from 42 hospitals and found that the average compliance had increased to 79.6%.

### **What actions are planned to improve compliance?**

The national protocol provides advice for hospitals on how to improve compliance. Hospitals are required to put in place an action plan on wards/departments that do not meet the target. The action plan includes additional education and training and re-auditing until the target is reached.

### **Why is the compliance rate lower in some hospitals compared to others?**

The method used for measuring hand hygiene is primarily designed to monitor hand hygiene over time in one hospital. Caution must be used when comparing these results between hospitals as small differences are not statistically significant. In addition, all auditors work in the facility that they audited, therefore an element of bias may be present. While all the auditors received training and were tested to verify that they understood how the audits were to be undertaken, the results presented in this report

have not been checked by external auditors. Therefore it is possible that hand hygiene auditing may not have been performed in exactly the same way in all hospitals.

### **Why are there no results from my local hospital?**

Some hospitals were unable to join or submit sufficient data for publication to the national reporting system in March 2012 for a number of reasons including lack of staffing resources.

### **Are more audits planned?**

Acute hospitals are required to undertake two audits yearly and submit results for publication on an ongoing basis.

### **Where can I get more information?**

Additional information on hand hygiene can be accessed on the Health Protection Surveillance Centre website at <http://www.hpsc.ie/hpsc/A-Z/Gastroenteric/Handwashing/> and HSE website at [http://www.hse.ie/eng/services/Publications/HealthProtection/Health\\_Care\\_Associated\\_Infection/](http://www.hse.ie/eng/services/Publications/HealthProtection/Health_Care_Associated_Infection/)