

Hand Hygiene Improvement Journey

Canterbury

District Health Board

Te Poari Hauora o Waitaha



IPC Workshop
Auckland, Sunday 15 October 2017

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Hand Hygiene Coordinator



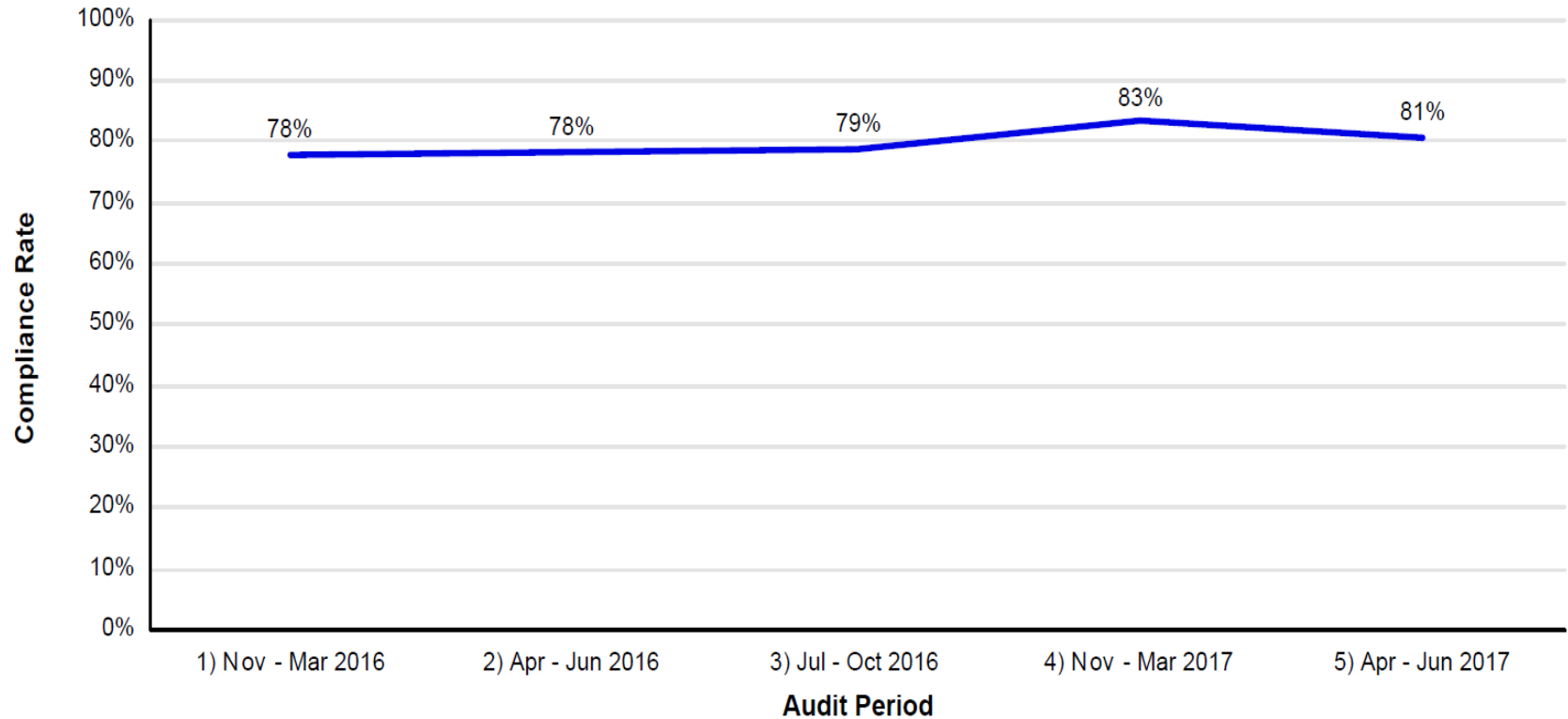
HEALTH QUALITY & SAFETY
COMMISSION NEW ZEALAND

Kupu Taurangi Hauora o Aotearoa

Where have we come from

March 2015 – 70% to June 2017 – 81%

Compliance Rate for last 5 Audit Periods



How did we get there

- CDHB multidisciplinary Hand Hygiene Governance Group
- Process for improvement
 - Driver diagram
 - Process and Outcome Measure
 - PDSA testing
- Campaigning/Gamification

How did we get there

- Process for improvement

- Driver diagram

- Process and Outcome Measure

- >80 %
- All inpatient areas part of the GA programme
- 100 % completion Self learning package at orientation

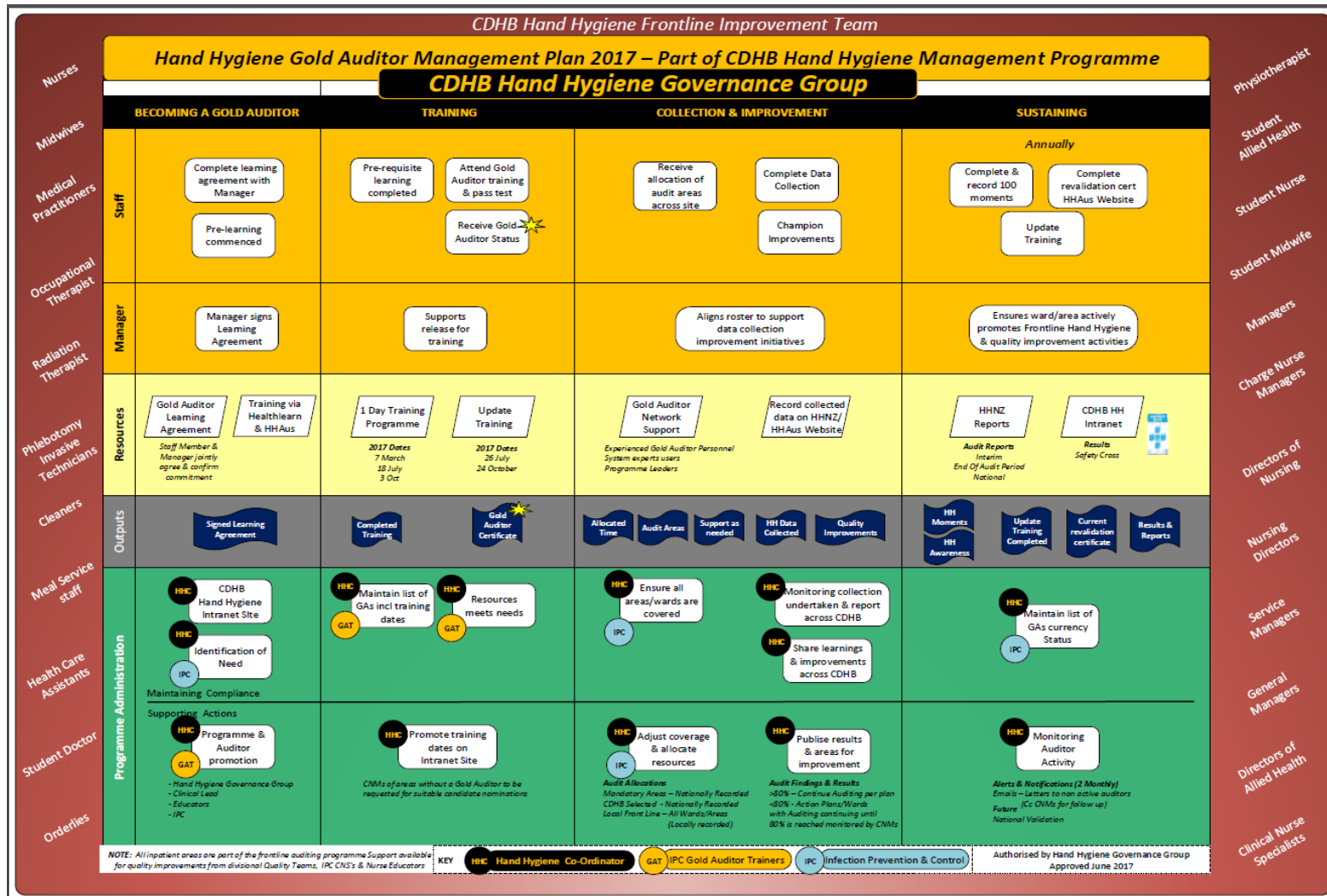
- PDSA testing

- Availability of ABHR
- Key Messages - communication
- Gold Auditor Programme

CDHB Hand Hygiene Improvement Driver Diagram

Aim	Drivers	Actions
>80% adherence in 5 moments of hand hygiene for each audit period	Local leadership improves hand hygiene practice	Leaders have hand hygiene on the improvement agenda Leaders focus removing barriers to hand hygiene Leaders act as role models Leaders support teams to monitor local hand hygiene practice and focus improvement efforts Hand hygiene results are posted in areas
	Hand hygiene 5 moments is the social norm	Leaders foster hand hygiene champions Staff mutually reinforce high hand hygiene standards Staff support each other to sustain hand hygiene Peer reviews include hand hygiene performance
	Staff are knowledgeable about how the 5 moments apply in their work area	The 5 moments are made relevant to the work environment Orientation and mentoring includes the 5 moments 5 Moments information is easily accessible All relevant education includes hand hygiene practice
	Work processes and the environment support hand hygiene	Work process/flow is 'lean' so hand hygiene can be sustained Appropriate hand hygiene product is available Restocking of product occurs as per plan and is monitored

Gold auditor programme



How did we get there


- Campaigning/Gamification

- It's Ok to ask me... to clean my hands
 - Badges
 - Patient Information Leaflets – *“What you can expect”*
- WHO Hand Hygiene Annual May Campaign
- Poster competition 5 moments to local environment



Hand Hygiene “What you can expect”

Hand Hygiene Canterbury
District Health Board
Te Poari Hauora o Waitaha



Hand Hygiene

What You Can Expect

Patient Information Leaflet

What to expect when you are receiving care

Hand hygiene is the single most important way to prevent the spread of harmful germs (bacteria and viruses) that can cause infection.

We expect our Healthcare workers to clean their hands:

- Before they touch you
- After they touch you
- Directly before and directly after they perform a procedure on you
- After they are exposed to body fluids
- Before and after wearing gloves
- After touching your surroundings (e.g. bed) if none of the above have occurred.
- After being in an isolation room.

It's OK to ask

Healthcare workers are trained and educated about correct hand hygiene. It is your right to expect healthcare workers to have clean hands before they care for you. The risk of infection being spread from a healthcare worker's hands to you is reduced when they perform correct hand hygiene.

Please feel free to remind your healthcare workers to clean their hands.


What you and your visitors can do

When you are sick you are more at risk of developing an infection from harmful bacteria or viruses.

While in hospital (and when you return home) clean your hands:

- Before you touch, eat or prepare food
- After using the toilet
- After coughing and sneezing
- After touching animals
- After changing a nappy
- At any time a healthcare worker has advised you or your visitors to do so (e.g. caring for your own catheter).

Visitors can use the alcohol based hand rub (ABHR) and hand washing facilities when visiting you in hospital.



Keep 'em clean

Ref 2716









Authorised by: Infection Prevention & Control Committee Chair

August 2016

There are two ways to clean your hands

<p>Soap and water</p> <p>If your hands look dirty or you have been to the toilet, please clean your hands with soap and water and dry them well for 10-20 seconds.</p>	<p>Alcohol-based hand rub (ABHR)</p> <p>ABHR is very effective at killing most germs. Even if your hands look clean they may still carry germs that can be harmful. A squirt of ABHR rubbed all over the hands dries naturally in about 30 seconds when following the pictures below.</p>
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For more information on Hand Hygiene, visit: www.handhygiene.org.nz

		
One pump of ABHR or liquid soap to the palm of cupped hand	Rub palm to palm	Rub nails against palm of each hand
		
Go between the fingers	Fingertips	Backs of your hands
		
Thumbs	Wrists	Clean Hands Save Lives

For more information about:

- your health and medication, go to www.healthinfo.org.nz
- hospital and specialist services, go to www.cdhb.health.nz

Ref 2716

Authorised by: Infection Prevention & Control Committee Chair

August 2016

1. **“It’s ok to ask me....” (staff & Clown Doctors)** (Duration: 6 minutes, 26 sec).

The Clown Doctors and CDHB staff have worked together to create this video for the “It’s ok to ask me ...” Campaign.



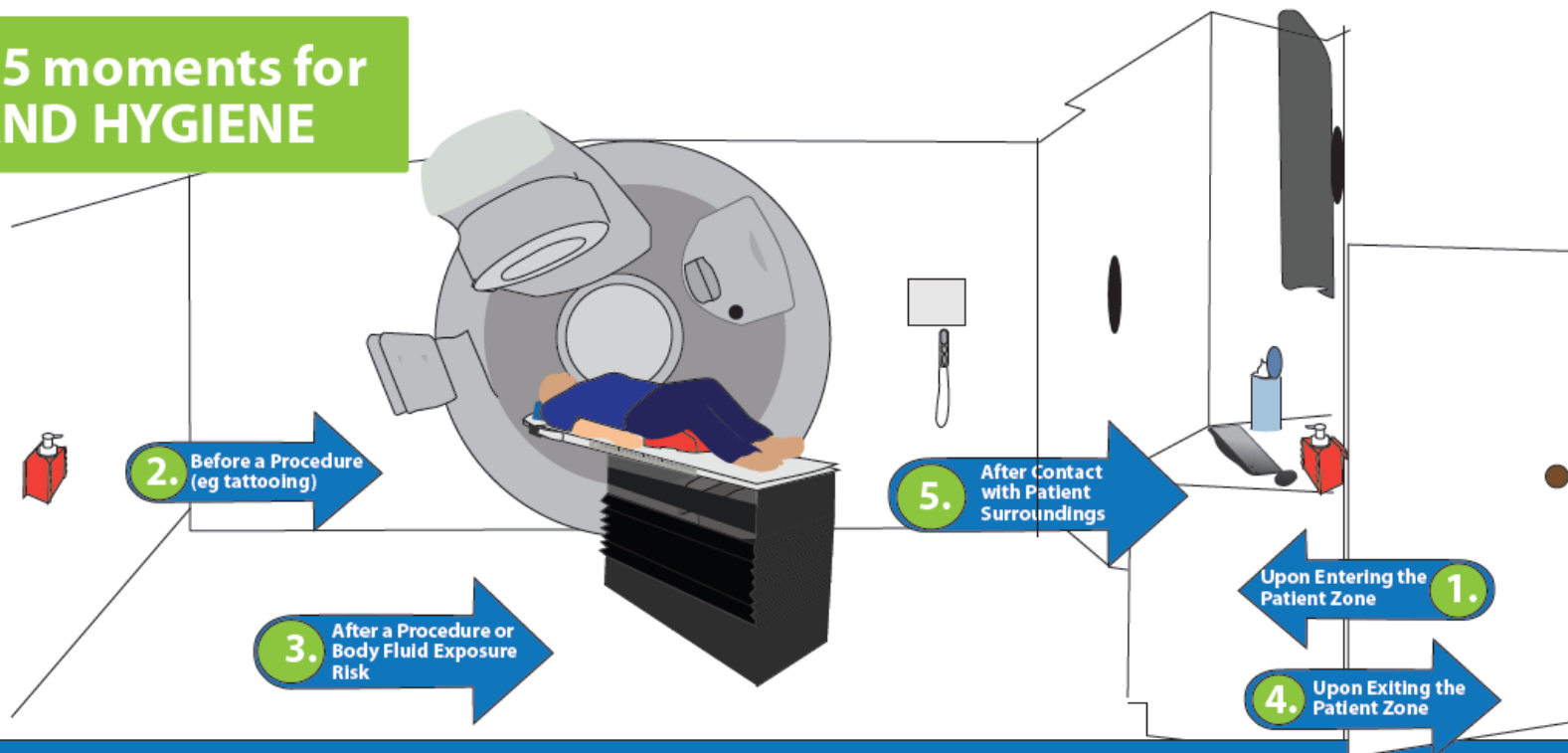
<https://vimeo.com/166941545>

2. **Cantabrians Talk Hand Hygiene (Consumers)** (Duration: 4 minutes 17 sec)



<https://vimeo.com/166938473>

Your 5 moments for HAND HYGIENE



WHAT IS THE PATIENT ZONE?

The Patient Zone includes the patient as well as everything that the patient or the RTs come in contact with during the patient setup and treatment including bed and controls, pendants, kV tube, patient positioning devices, rulers, keyboard and mouse etc. At the end of the procedure when the patient leaves the room, this zone needs to be cleaned to protect the next patient from the previous patient's harmful germs.

1 UPON ENTERING THE PATIENT ZONE

WHY? To protect the patient against harmful germs carried on your hands

2 BEFORE A PROCEDURE (EG TATTOOING)

WHY? To protect the patient against harmful germs, including the patient's own germs, entering his or her body

3 AFTER A PROCEDURE OR BODY FLUID EXPOSURE RISK

WHY? To protect yourself and the health-care environment from harmful patient germs

4 UPON EXITING THE PATIENT ZONE

WHY? To protect yourself and the health-care environment from harmful patient germs

5 AFTER CONTACT WITH PATIENT SURROUNDINGS

WHY? To protect yourself and the health-care environment from harmful patient germs

Hand Hygiene

Gold Auditors



Giving Gold Auditors a Face

CDHB Hand Hygiene Governance Group - June 2017

Are you giving bugs a **HAND?**



CLINICAL AREA KEYBOARDS

COLIFORMS (faecal contamination) e.g. Klebsiella, E.coli, Proteus etc.

- These are pathogens that cause significant infections such as gram negative sepsis, urine infections and intra-abdominal infections.
- Not normally found on the skin.
- Colonisation on surfaces indicates faecal contamination. These can be multi-drug resistant organisms (e.g. CRE, ESBL's, AmpC).

OPPORTUNISTIC BUGS

- Risk of infection with/around procedures especially immunosuppressed patients.

Poster series no 3 of 4

Date: March, 2017
Ref: 238461

Endorsed by: Clinical Director (P&C) Service
Authorised by: CDHB Hand Hygiene Governance Group



Canterbury
District Health Board
Te Puāri Hauora o Ōtago

PROCESS FOR IMPROVEMENT

OUR VISION: AN INTEGRATED HEALTH SYSTEM THAT KEEPS PEOPLE WELL AND HEALTHY IN THEIR OWN HOMES

STRATEGIC GOALS

The development of services that support people/whānau to stay well and take increased responsibility for their own health and wellbeing.

The development of primary care and community services to support people/whānau in a community based setting and provide a point of ongoing continuity, which for most people will be general practice.

The freeing-up of hospital based specialist resources to be responsive to episodic events and the provision of complex care and support and specialist advice to primary care.

HAND HYGIENE
WHAT IMPROVEMENTS ARE TO BE EMBEDDED AND SUSTAINED?

HAND HYGIENE
WHAT DO WE NEED TO MAKE BETTER?

MODEL FOR IMPROVEMENT

What are we trying to accomplish?

How will we know that a change is an improvement?

What change can we make that will result in improvement?



Sustaining, embedding and spreading

Canterbury

District Health Board

Te Poari Hauora o Waitaha

- Policy and standardising
- Intranet
- Data distribution at different levels of organisation
 - 2 weekly updates
 - Action plans required for areas below <80%
- Education
- Gold Auditor programme
- Local leadership

SPREAD - Dashboard

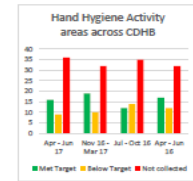
Division	Ward	STATUS			Apr - Jun 17			Nov 16 - Mar 17			Jul - Oct 16			Apr - Jun 16		
		Jan 17	Mar 17	Apr 16	Compliance Rate	Total Moments	Local - National	Compliance Rate	Total Moments	Local - National	Compliance Rate	Total Moments	Local - National	Compliance Rate	Total Moments	Local - National
Ashburton	AAU				89%	300	National	80%	369	National				87.0%	229	National
	Ward I													89.0%	139	National
	Ward S										82.0%	215	National			
	Rural Hospitals							87%	155	Local						
Barnwood	District Nursing															
	Ward C1													84.0%	304	National
	Ward C2															
	Ward B1				73%	203	National	87%	200	National	84.0%	143	National			
	Ward B2				20%	8	Local									
	Ward DG				80%	201	National	76%	200	National	58.0%	84	National			
	Ward GG				89%	201	National	87%	204	National	80.0%	157	National	81.0%	89	National
	Ward HG				81%	201	National	87%	200	National	89.0%	200	National	87.0%	200	National
	BOFU															
	OOFO															
Christchurch	WARD AG (K2)															
	WARD BG (K1)															
	WARD CU (BWS)							89%	109	Local						
	WARD CI (SCL) (Orthopaedic Rehab)							79%	121	Local						
Christchurch	Community Dental				87%	23	Local	88%	16	Local						
	AMAU				73%	314	National	82%	149	National	77.0%	114	National	87.0%	6	Local
	Acute Dialysis							89%	60	National	86.0%	53	National	89.0%	56	National
	SMU				69%	129	National	90%	108	National	89.0%	128	National	91.0%	104	National
	Cardiac Day Unit (Cardiac Cath Lab)							80%	20	Local				90.0%	21	Local
	Coronary Care Unit							80.0%	50	National				81.0%	100	National
	ED							75%	36	Local				81.0%	87	National
	Endocrine Test Centre (ed2)															
	Gastro Intestinal Inv Unit															
	Hagley Outpatients													71.0%	52	Local
	ICU				80%	276	National	73%	315	National	75.0%	310	National	68.0%	352	National
	Medical Day Unit							89%	60	Local				88.0%	67	Local
	Oncology Day Unit													89.0%	64	Local
	Oral Health Centre															
	Plastic Outp Dept															
	Radiation Oncology							89%	43	National						
	Radiology							83%	53	National				92.0%	13	Local
	Urology Unit				80%	90	National									
	Ward 10				61%	127	National	77%	115	National						
	Ward 11				61%	127	National	99%	297	National	72.0%	105	National			
	Ward 12				76%	105	National	79%	103	National	78.0%	105	National	88.0%	84	National
	Ward 15										68.0%	105	National	63.0%	164	National
	Ward 16				83%	117	National									
	Ward 18													78.0%	199	National
	Ward 19													80.0%	54	Local
	Ward 20															
	Ward 23										76.0%	38	National			
	Ward 24				71%	113	National	78%	102	National	58.0%	107	National	65.0%	104	National
	Ward 25				72%	85	National				71.0%	126	Local	83.0%	36	Local
	Ward 26													43.0%	7	Local
Ward 27							72%	17	Local				74.0%	107	National	
Ward 28				51%	35	Local										
CWH Birthing Suite										88.0%	50	National				
CWH Radiology																
Birthing suite peroperative										89.0%	58	Local				
Child Acute Assessment Unit				90%	362	National	80%	30	National	81.0%	54	National	93.0%	44	National	
Childrens Haematology Oncology Centre				90%	58	National	82%	60	National	78.0%	53	National	88.0%	84	National	
Gynaecology				70%	53	Local							85.0%	114	National	
Maternity				61%	100	National	90%	88	National	88.0%	57	National				
New Neonatal Intensive Care Unit				90%	294	National	88%	252	National	87.0%	305	National	89.0%	232	National	
Ward 21				90%	30	National	90%	40	National	79.0%	29	National	82.0%	17	National	
Ward 22				92%	45	National	68%	47	National	68.0%	28	National	79.0%	56	National	
Rangiora Hospital				85%	20	Local	82%	28	Local							

> 80% or
< 80%
No colle

Hand Hygiene Dashboard

Period	16 areas 80% or above	9 areas < 80%	36 areas no collection
58 areas/wards Apr - Jun 17	16	9	36
Nov 16 - Mar 17	19	10	31
Jul - Oct 16	12	14	35
Apr - Jun 16	17	12	32

Period	Hand Hygiene Activity across CDHB			Met Target		Below Target		Not collected	
	Total Wards	Active	Active %	Target > 80% Met	% Target Met	Target < 80% Met	% Target Met	Not collected	% Not collected
Apr - Jun 17	61	25	41%	16	64%	19	46%	16	26%
Nov 16 - Mar 17	61	29	48%	19	66%	10	33%	32	52%
Jul - Oct 16	61	28	46%	14	50%	14	33%	35	57%
Apr - Jun 16	61	30	49%	19	63%	12	20%	32	52%



Thank-You

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Clean Hands Save Lives

