#### Hand Hygiene: Not only a campaign

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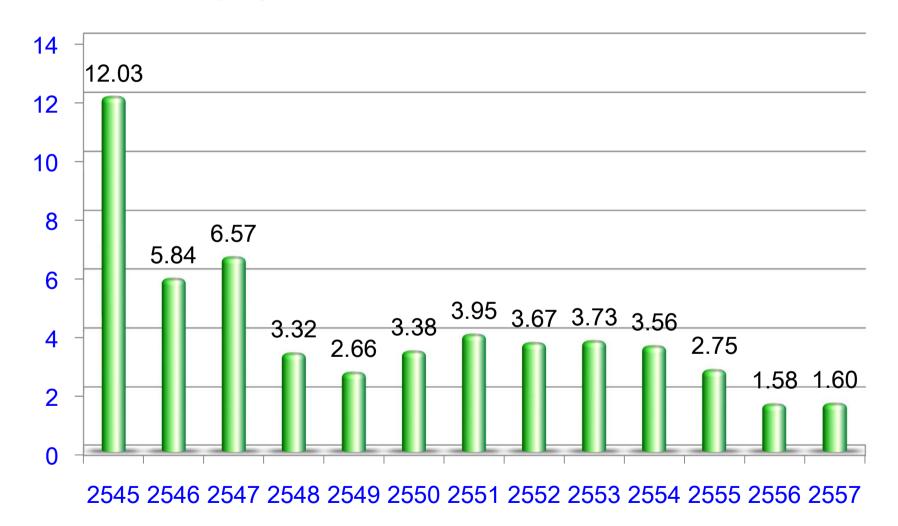




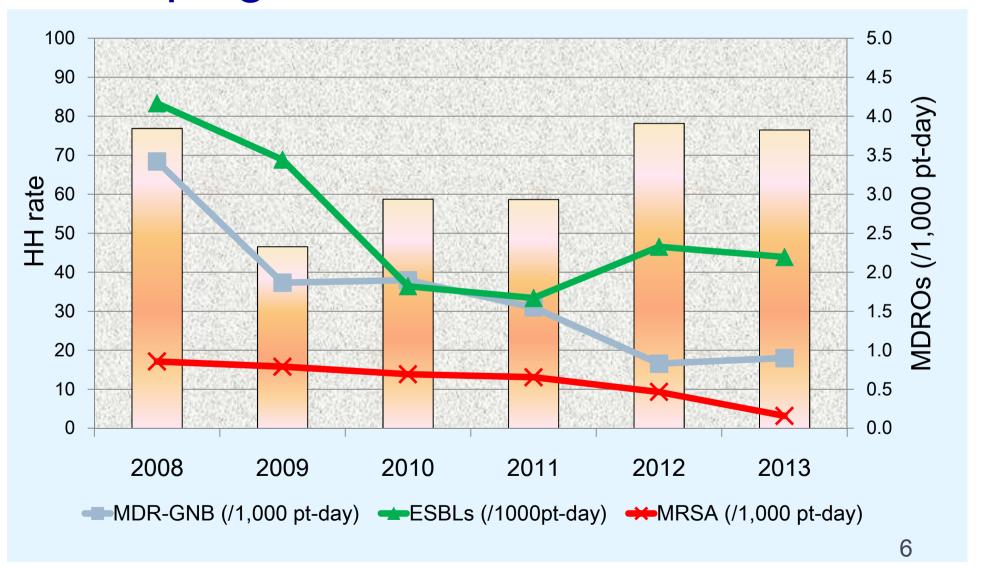




# CLABSI rate in all ICU (episodes/1000 device-days)



# The essence of hand hygiene campaign



# The essence of hand hygiene campaign

TABLE 1. Infection Prevention Control (IPC) Interventions Associated with Reduction in Multidrug-Resistant (MDR) Acinetobacter baumannii and Methicillin-Resistant Staphylococcus aureus (MRSA) Incidence as Reported by Representatives from 204 Thai Hospitals

Pathogen, compliance, %	aOR (95% CI), by intervention				
MDR A. baumannii					
40-60	***				
60-80	IPC bundle A: 1.55 (1.05-3.45); IPC bundle B: 1.69 (1.19-4.96)				
80–100	Hand hygiene: 1.59 (1.12-5.46); antimicrobial stewardship program: 1.24 (1.09-6.45) IPC bundle A: 2.45 (1.41-6.93); IPC bundle B: 2.93 (1.56-5.69)				
MRSA					
40-60					
60-80	IPC bundle D: 1.45 (1.08-5.45)				
80–100	Hand hygiene: 1.55 (1.06-4.93); contact isolation: 1.05 (1.01-5.46); IPC bundle D: 3.36 (2.12-5.69)				

NOTE. IPC bundle A consisted of contact isolation, patient cohorting, a hand hygiene campaign, environmental cleaning, and existence of an antimicrobial stewardship program; IPC bundle B consisted of IPC bundle A plus active surveillance for A. baumannii; IPC bundle D consisted of chlorhexidine gluconate bathing, contact isolation, patient cohorting, a hand hygiene campaign, active surveillance for MRSA, and existence of an antimicrobial stewardship program. aOR, adjusted odds ratio; CI, confidence interval.

# Patient safety is our culture



### WHO's multimodal strategies

- System change
- Training / Education
- Evaluation and feedback
- Reminders in the workplace
- Institutional safety climate



## System change

- Ensuring that the necessary infrastructure is in place to allow health-care workers to practice hand hygiene
  - Access to a safe, continuous water supply as well as to soap and towels
  - Readily accessible alcohol-based handrub at the point of care

# Sink, soap, water, and paper towel



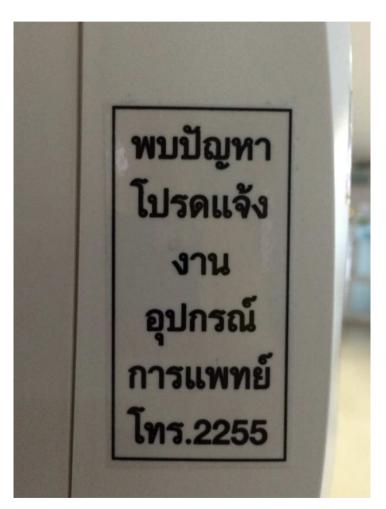


# Alcohol handrub dispenser



# Maintenance System





# Alcohol handrub at point of care





# Alcohol handrub at point of care



Alcohol hand rub holder for all stretchers

## Training / Education

Providing regular training on the importance of hand hygiene, based on the "My 5 Moments for Hand Hygiene" approach, and the correct procedures for handrubbing and handwashing, to all health-care workers

# On site training



#### More educational activities

- ▶ Training of HCWs:
  - All major wards incl. general med., ped., and surg., and all ICUs
  - All new comers: students and HCWs
- Content
  - Control of MDR
  - Prevention of major HAI: VAP, CLABSI, CA-UTI
  - Safe work practice

#### Evaluation and feedback

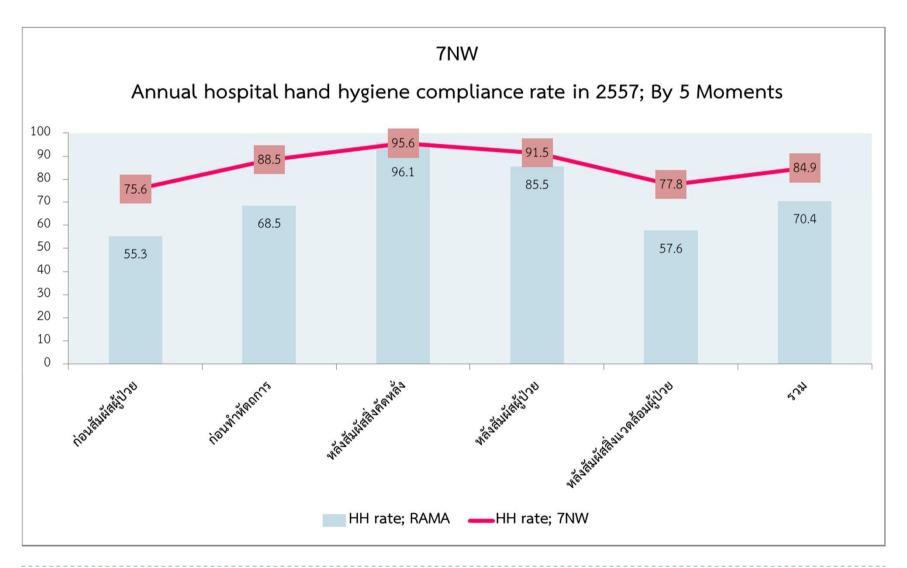
Monitoring hand hygiene practices and infrastructure, along with related perceptions and knowledge among healthcare workers, while providing performance and results feedback to staff

#### **Evaluation and feedback**



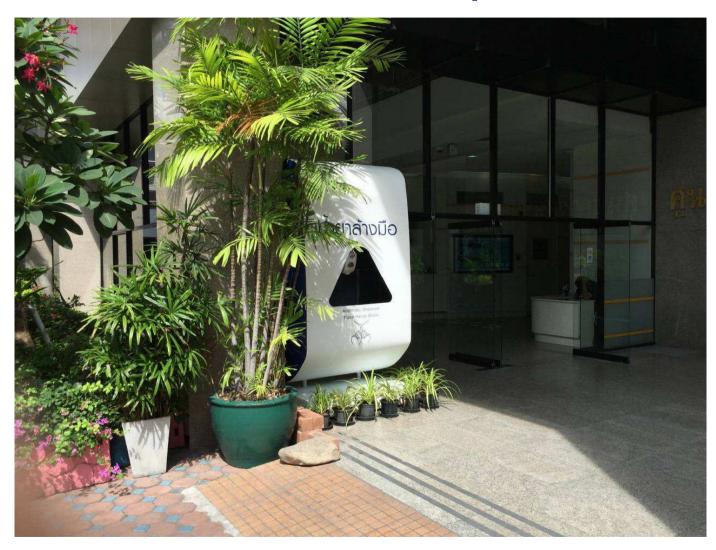


#### **Evaluation and feedback**



Prompting and reminding health-care workers about the importance of hand hygiene and about the appropriate indications and procedures for performing it











## Institutional safety climate

- Creating an environment and the perceptions that facilitate awarenessraising about patient safety issues while guaranteeing consideration of hand hygiene improvement as a high priority at all levels.
- Role model



#### Outcome

- Compliance rate
- Infection rate
- Prevalence of MDRO

# Alcohol used (ml/1000 patient-day)

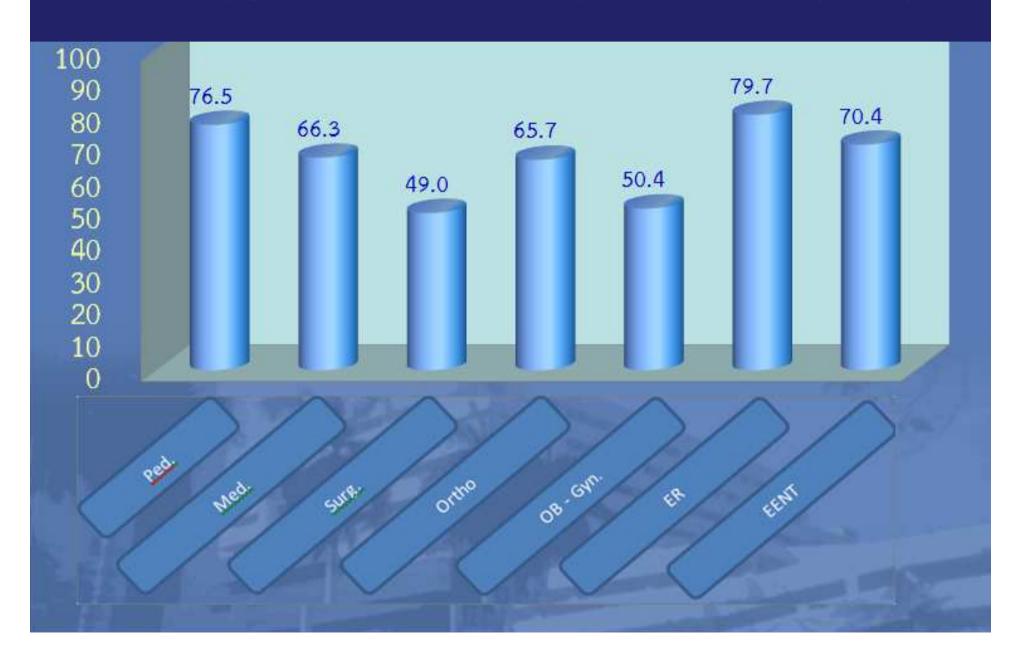




# Hand hygiene compliance



#### Hand Hygiene Compliance by Department (2013)



# Percent compliance by moment



Before Patient Contract

After Dody fluid exposure risk

After Patient Contract

After Contract

After Contract

After Contract

After Dody fluid exposure risk

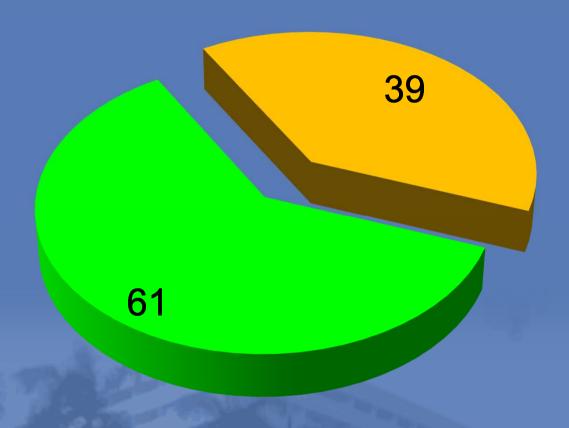
After Datient Contract

After Contract

After



# Hand hygiene method



Soap and water Alcohol-based handrub

# Hand hygiene compliance and nosocomial infection

ปี	Compliance	ESBLs*	MDR*	MRSA*	CABSI**	VAP**
2009					3.67	3.42
2010	39.4	2	2.6		3.73	3.22
2011	48.5	2	2.5	0.9	3.56	3.07
2012	66.3	2.2	2.3	0.8	2.75	3.06
2013	63.6	2.4	2.1	0.6	1.96	3.05

<sup>\*</sup> Prevalence: isolates per 1000 patient-days

<sup>\*\*</sup> Incidence: episode of infection/1000 device-day, CLABSI = Central line associated bloodstream infections, VAP=ventilator-associated pneumonia



# Team





# Team





# Thank you for your attention



