An 'Immediate Feedback Program' to enhance hand hygiene compliance 'before clean/aseptic procedures'

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Keywords:
Hand hygiene compliance
Before clean/aseptic procedures
Moment two
Doctors
Immediate feedback
Education

Introduction
Although hand hygiene (HH) is paramount to prevent healthcare-associated infections, adherence to compliance is not always satisfactory. Audit results in early 2015 revealed low hand hygiene compliance (41.2%) to moment two (i.e. before clean/aseptic procedures). This low compliance might lead to increase patient morbidity and mortality (McLaws, M.L., 2015). An enhancement program was developed for improvement.

Objectives
1. To enhance the hand hygiene compliance to moment two by 40%.
2. To raise the hand hygiene compliance of doctors in moment two by 50%.
3. To increase the overall hand hygiene compliance.

Methodology
With the support from the management and the department heads, an immediate feedback program targeting on hand hygiene compliance 'before clean / aseptic procedure' was launched in 4Q 2015. This program involved all staff categories and the following procedures: aseptic procedures including tapping of sterile sites, intravenous (IV) access, care of respiratory tract and wound, e.g. tracheal/ endotracheal tube suction, and blood collection. There was a two week grace period where immediate feedback and education was given when non-compliance was observed. After the grace period, data of non-compliance were collected (including name and department of staff, time, place and procedure involved) and sent to the supervisors for further actions.

Result
1. The compliance to hand hygiene before clean/aseptic procedures increased sharply from 68% in 2015 to 98.6% in 2016. The high compliance was maintained in 2017 (99.1%).
2. Doctors’ compliance to moment two reached 96.4% in 2016 (49% in 2015) and attained 100% in 2017.
3. The overall hand hygiene compliance rate (all five moments) rose from 73.2% in 2015 to 84.9% in 2017.
   The 'immediate feedback program' was useful in improving and sustaining the hand hygiene compliance before clean or aseptic procedures.