



**Service Priorities and Programmes**  
**Electronic Presentations**

**Convention ID:** 855

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**Clean Hand, Clean Environment, Clean Patient**

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**Keywords:**

infection control

**Introduction**

Healthcare Associated Infection (HAI) caused by Multiple Drug Resistant Organisms (MDRO) has placed quite a heavy burden on our health care system. It results in increased of patient mortality and morbidity, prolonged length of hospital stay and healthcare costs. In spite of these adverse events, most of the hospital infections are preventable by improving infection control measures; good hand hygiene and proper isolation precautions. Hand hygiene is a simple and effective way in preventing HAI. However it depends greatly on staffs accountability and change of behaviour, in their practice of nursing. Obviously we believe that on-going enhancement program to sustained low infection rate of multidrug resistant organisms (MDROs) in department of Surgery.

**Objectives**

1. To minimize the incidence of Methicillin-resistant Staphylococcus aureus (MRSA) 2. To decrease the Hospital Acquired MRSA Bacteremia rate 3. To improve hand hygiene compliance among health care workers(HCW) 3. To heighten staff's awareness on infection control measures

**Methodology**

A holistic plan with various strategic programs for controlling MRDO was started since year 2009. Hand Hygiene Ambassadors are nominated in each surgical ward to motivate the HCW on hand hygiene. Hand hygiene Observation Survey is conducted yearly to assess the degree of compliance of HCW on five moments for hand hygiene and the result is shared among the HCW in formal meetings. Assessments on hand hygiene technique, PPE gowning-up and de-gowning of staffs and audit on workplace inspection round on infection control precaution are carried out by infection control ward-link nurses. In addition, basic infection control training is also conducted regularly for staff to attend and a video was made to educate frontline staffs on how to perform environmental cleaning for MDRO patient. Meanwhile all MRSA incidences of our department are monitored, evaluated and reported on a monthly basis.

**Result**

The trend on MRSA Bacteremia rate in Department of Surgery (MRSA Bacteremia / 1000 acute patient days) was 0.0789 in 2011; 0.1203 in 2012 and 0.0227 in 2013. Trend on the nosocomial MRSA hospital acquired infection rate (per 1000 bed days)

was decreased by 0.38 in 2011; 0.22 in 2012 and 0.17 in 2013. The yearly hand hygiene compliance rate increased from 73.1% in 2011/12; 77.0% in 2012/13 and 82.0% in 2013/14.