



Service Priorities and Programmes Electronic Presentations

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Submitting author: Ms W F HO

Post title: Ward Manager, Princess Margaret Hospital, KWC

The Next Step In Hand Hygiene Program - Patient Engagement

Ho WF(1), Mak CO(1), Tang MK(1)

Department of Medicine & Geriatrics, Princess Margaret Hospital

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Introduction

Worldwide statistics has provided clear evidence that the cost and length of hospitalization are more than double at 10.0 days for MRSA infections versus 4.6 days for all other stays. Hand hygiene has been well recognized as the single most important measure in preventing the transmission of MRSA infection. We have been focusing on the hand hygiene of health-care workers, however hand hygiene practices by patients as a potential mode of transmission has been overlooked. Inaccessibility of hand washing facilities to patients may be accounted for this reason.

Objectives

This program aimed at initiating the importance of patient hand hygiene in clinical settings through their active engagement during meal time. The practice of patient's hand hygiene by using soap and water was changed to using 2% CHG solution or alcoholic hand-rub.

Methodology

This program was implemented in Department of Medicine and Geriatrics including 361 acute in-patient beds since June 2015. The program consisted of a systematic waterless washing and gel rinse disinfection of all patients' hands in prior to each meal time (three times/ day). 2% CHG solution or alcoholic hand-rub were provided to patients as disinfectant with instruction and assistance by nurses and health care assistants. The patients were continuously monitored and were supervised by ward base infection control link nurses. Structured department audit was conducted to assess the compliance and efficacy of the program.

Result

Statistic showed that the hospital acquired MRSA rate (per 1000 patient-bed days) was significantly reduced by 9.7% from 1.35 (Jan-May 2015) to 1.23 (Jun-Dec 2015). The decrease of MRSA rate saved 102 bed days accounting to over \$ 400,000, not calculating the related complications and expensive antibiotics cost. Patient experience survey showed that almost all patients agreed that it was worth to promote hand hygiene for them during hospitalization especially during the activation of

Serious Response Level (S2). 99% of patients agreed that it was useful in preventing transmission of infectious diseases. 98 % of them agreed that the frequency and time of providing hand hygiene was appropriate. Staff satisfaction survey showed that over 90% nurses agreed that engaging patients in their own hand hygiene was worth to be implemented despite increasing workload. Hand hygiene practice by patients seems to be an inexpensive and effective measure against nosocomial infection. Implementation before meal time is most persuasive to get patients' engagement.