

Hand hygiene compliance update: Quarter 4, 2017/2018

(Dec. 2, 2016–Mar. 31, 2017)

Mission: To create a comprehensive provincial program that will improve and sustain hand hygiene culture, in order to decrease the transmission of healthcare-associated infections in BC healthcare

What is hand cleaning?

Hand cleaning means using an alcohol-based hand rub or soap and water to kill or remove germs on hand surfaces.

Why is hand cleaning important?

Both patients in acute care facilities and residents in residential care facilities are vulnerable to healthcare-associated infections, a leading cause of death for people receiving care within our healthcare system. Germs can easily be transmitted through direct person-to-person contact, or by touching contaminated surfaces or equipment. Hand cleaning is a simple and effective way of reducing the spread of germs, and is the responsibility of all individuals involved, including patients/residents, visitors, and healthcare providers.

Why do we measure hand cleaning compliance?

Healthcare providers, including nursing staff, physicians, clinical support services, and others such as housekeeping staff, should lead by example in maintaining good hand hygiene. They move frequently between patients/residents, and from room to room, while providing care or working in the patient/resident's room. This movement provides many chances for germs to be spread by hands. Monitoring hand cleaning practice is vital to improve compliance and, in turn, reduce infections in healthcare settings.

How do we measure hand cleaning compliance?

Every quarter, trained auditors observe a sample of healthcare providers, and record whether they clean their hands at the appropriate times, i.e. before and after touching a patient or the patient's immediate environment (e.g., changing bed linen, holding a bed rail, clearing a bedside table, etc.). The percentage score reports how often healthcare providers clean their hands when required to do so during an audit. Wearing gloves is not a substitute for hand cleaning.

Why is the compliance being publicly reported?

Improving hand cleaning compliance is a key measure to reduce healthcare-associated infections. Reporting on performance provides transparency to the public, and assists healthcare facilities in care quality improvement.

How are we doing?

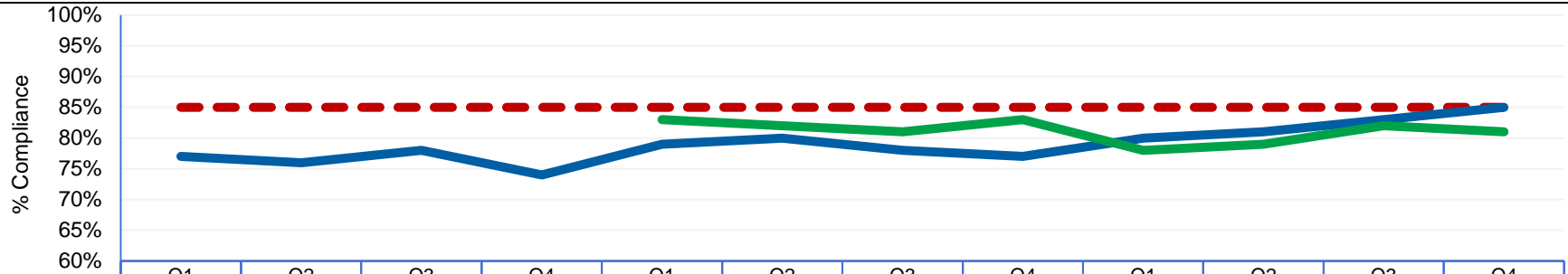
The overall NH hand hygiene in acute care has increased to 85% compliance this quarter. Hand hygiene compliance in Residential care is at 81%, slightly lower than last quarter. In acute care facilities, compliance before and after contact with a patient or the patient's immediate environment is at 78%, and 90% respectively. The compliance among physicians has remained lower than other healthcare providers.

What are we doing to improve compliance?

1. Encouraging all healthcare providers to incorporate hand cleaning into their practice routines
2. Ensuring that hand cleaning products are readily available for all staff, patients, and residents
3. Reporting performance back to unit staff, senior leaders, physicians, and the public
4. Targeting educational and promotional activities to increase hand cleaning knowledge and awareness
5. Identifying new initiatives and opportunities to improve the compliance before patient contact and to engage physicians more effectively

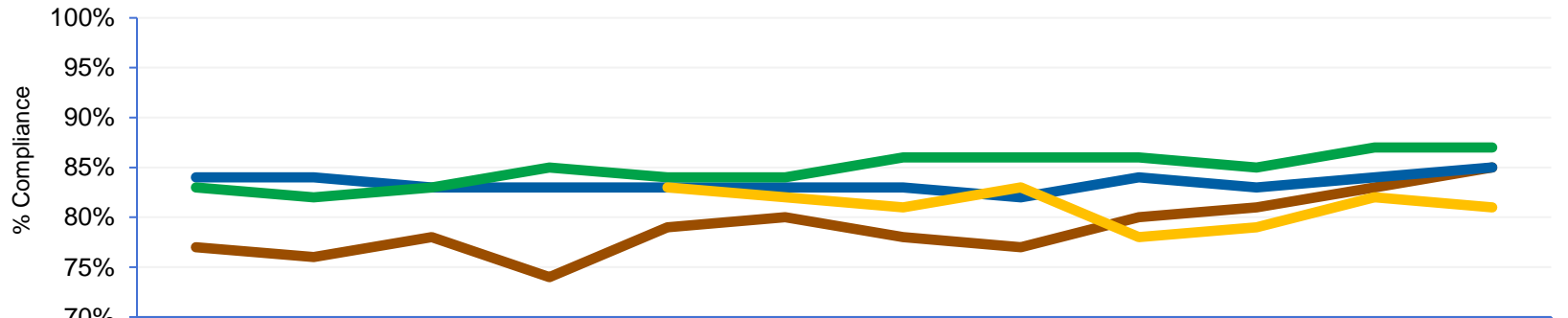
Northern Health Performance		Target	Expectation
Acute Care	85%	85%	100%
Residential Care	81%		
	Of hand cleaning opportunities taken	Of hand cleaning opportunities taken	We will seek perfection while recognizing positive improvement

Hand Hygiene Compliance – Northern Health



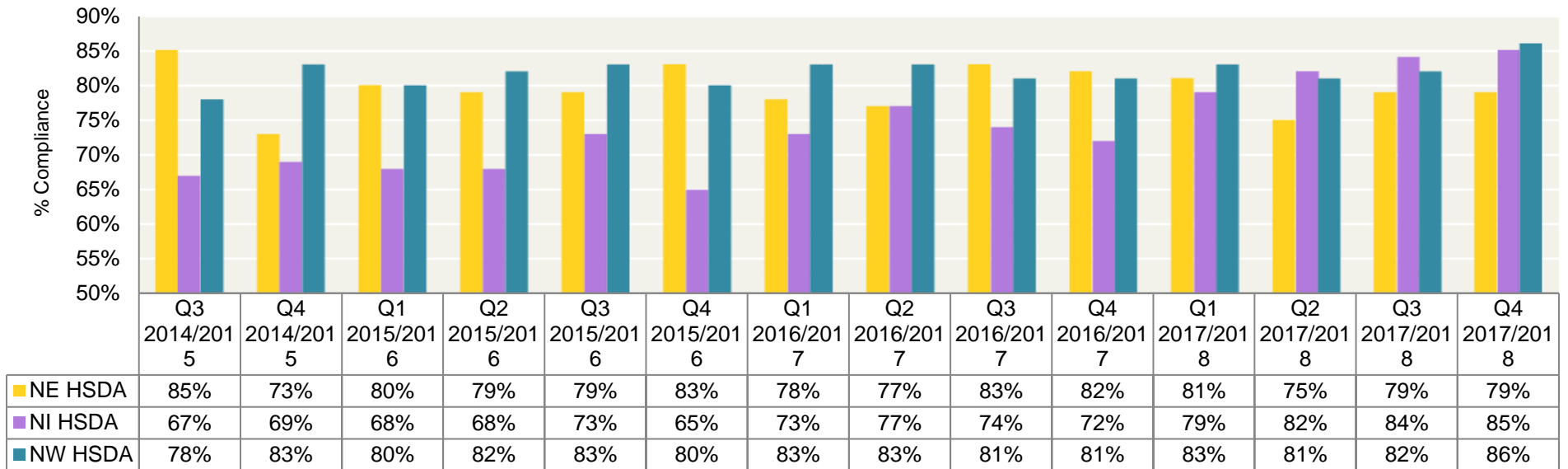
	2015/2016 (Fiscal Year)				2016/2017 (Fiscal Year)				2017/2018 (Fiscal Year)			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
●●● Target Performance	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%
— Percent Compliance ACF	77%	76%	78%	74%	79%	80%	78%	77%	80%	81%	83%	85%
— Percent Compliance RCF					83%	82%	81%	83%	78%	79%	82%	81%
Total Opportunities ACF	2845	3171	2911	5827	3360	3581	3632	5187	3653	4524	5122	6534
Total Opportunities RCF					1191	1645	1438	1902	1084	1330	1273	1726

Hand Hygiene Compliance - NHA & Province of BC

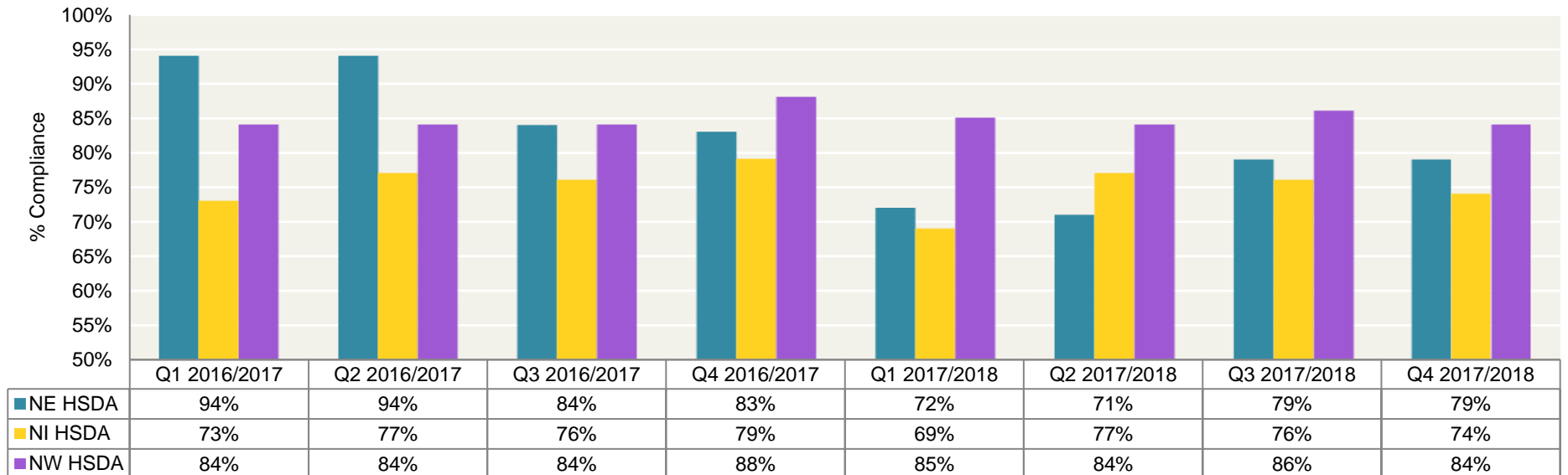


	2015/2016				2016/2017				2017/2018			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
— NH Percent Compliance ACF	77%	76%	78%	74%	79%	80%	78%	77%	80%	81%	83%	85%
— Province of BC Percent Compliance ACF	84%	84%	83%	83%	83%	83%	83%	82%	84%	83%	84%	85%
— Province of BC Percent Compliant RCF	83%	82%	83%	85%	84%	84%	86%	86%	86%	85%	87%	87%
— NH Percent Compliant RCF					83%	82%	81%	83%	78%	79%	82%	81%
NH Opportunities ACF	2845	3171	2911	5827	3360	3581	3632	5187	3653	4524	5122	6534
Province of BC Opportunities ACF	56411	53452	48393	61967	47640	47013	48981	63917	41694	38974	43269	53406
Province of BC Opportunities RCF	9775	10455	9631	12832	11688	12610	11944	13996	10220	10289	9883	11438
NH Opportunities RCF					1191	1645	1438	1902	1094	1330	1273	1746

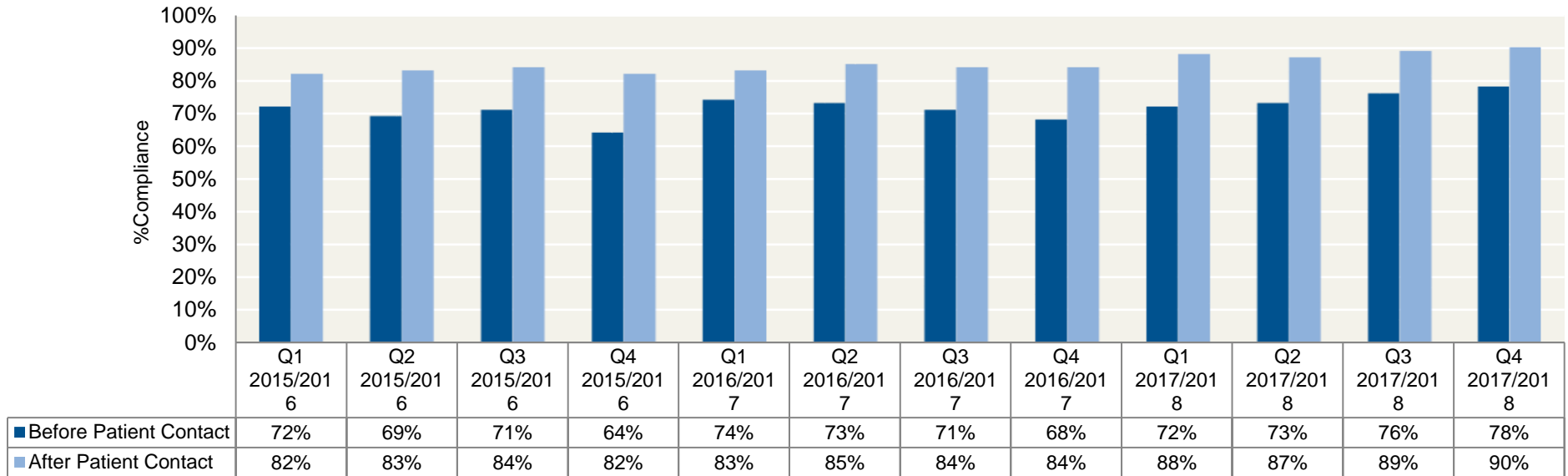
Hand Hygiene Compliance in Northern Health per HSDA - ACF



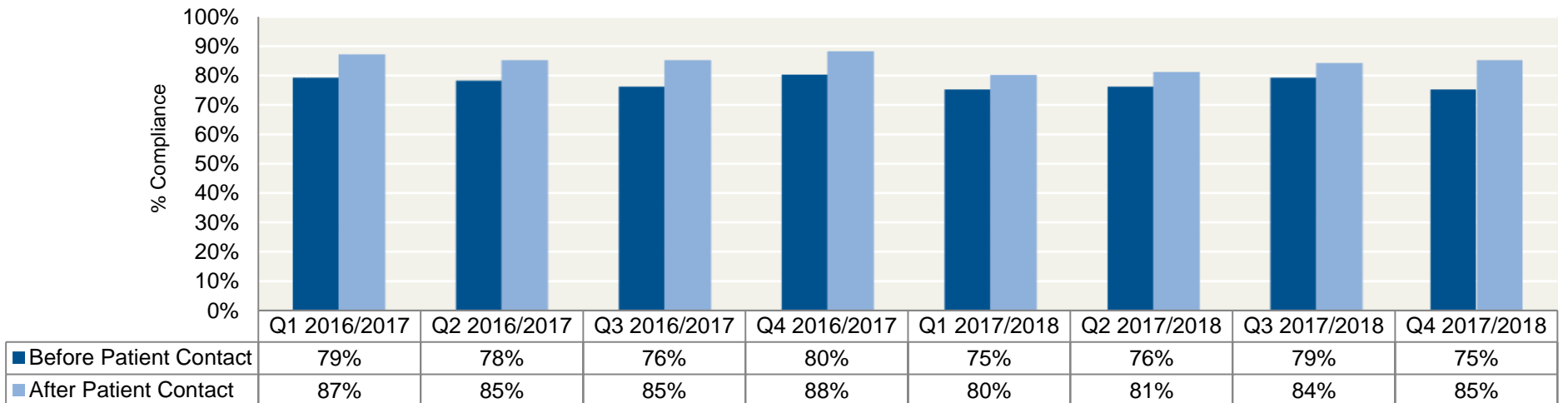
Hand Hygiene Compliance in Northern Health per HSDA - RCF



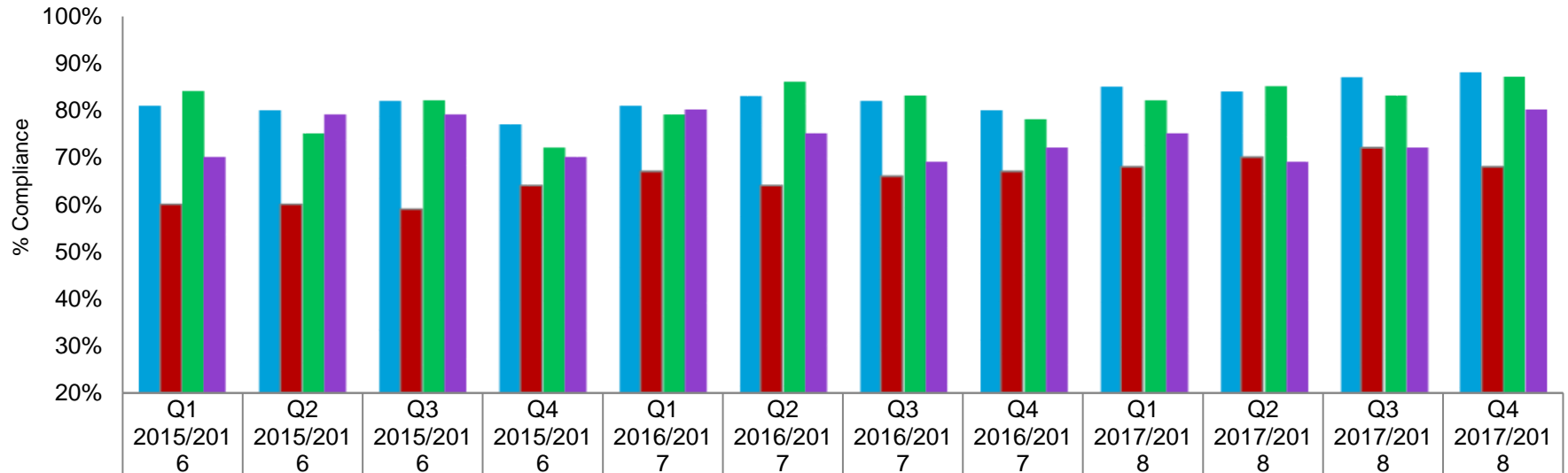
Hand Hygiene Compliance in Northern Health – Acute Care Before and After Patient Contact



Hand Hygiene Compliance in Northern Health – LTC Before and After Patient Contact



Hand Hygiene Compliance in Northern Health per Healthcare Provider



■ Nursing Staff	81%	80%	82%	77%	81%	83%	82%	80%	85%	84%	87%	88%
■ Physicians	60%	60%	59%	64%	67%	64%	66%	67%	68%	70%	72%	68%
■ Clinical Support Services	84%	75%	82%	72%	79%	86%	83%	78%	82%	85%	83%	87%
■ Other	70%	79%	79%	70%	80%	75%	69%	72%	75%	69%	72%	80%