

Hand hygiene compliance update: Quarter 3 and 4, 2019/2020

Q3(September 20–December 12, 2019), Q4(December 13, 2019–March 31, 2020)

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 facilities.

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 long term 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 (Q3 & Q4) in acute care is consistent at 86% compliance and Long Term care is at 82% and 85% respectively, compliance before and after contact with a patient or the patient's immediate environment is at 80%, and 91% 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

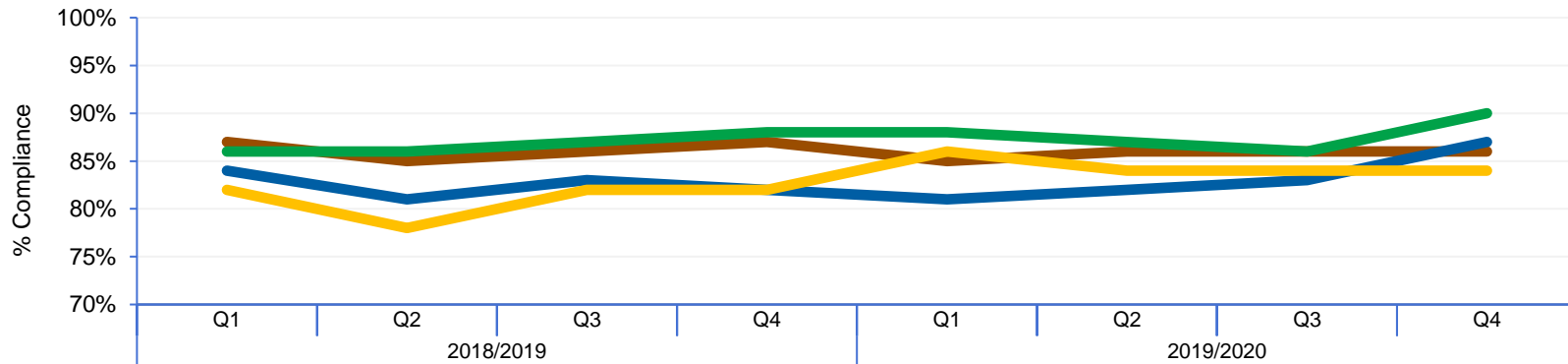
Northern Health Performance		Target	Expectation
Acute Care		85%	100%
Q3	86%		
Q4	86%		
Long Term Care			
Q3	82%		
Q4	85%		
	Of hand cleaning opportunities taken	Of hand cleaning opportunities taken	We will seek perfection while recognizing positive improvement

Hand Hygiene Compliance – Northern Health



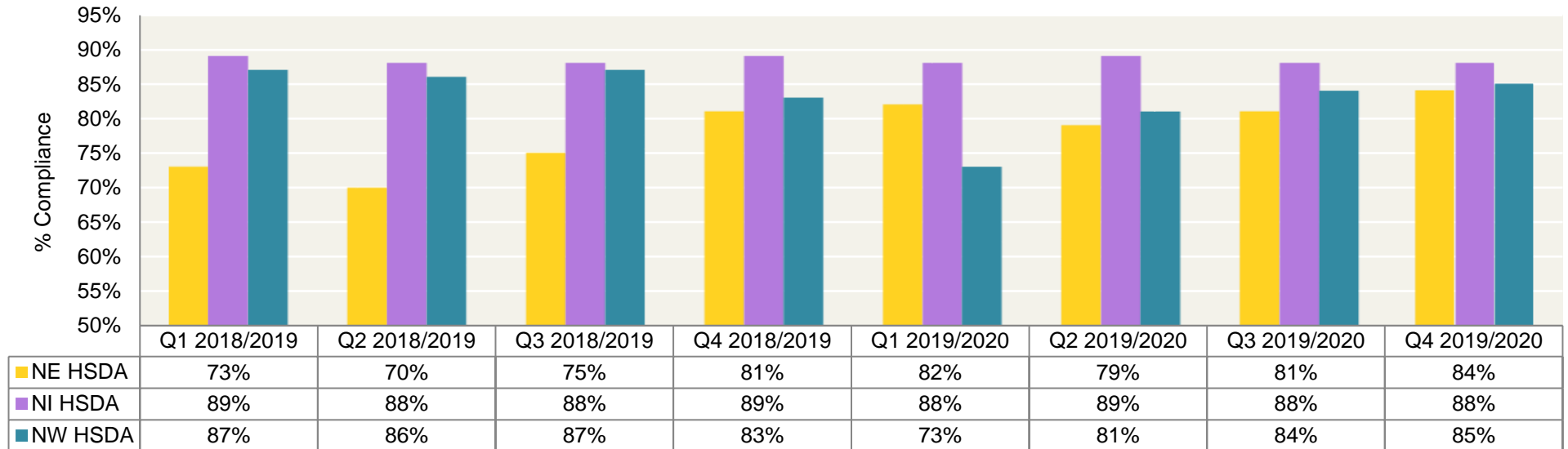
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	2018/2019 (Fiscal Year)				2019/2020 (Fiscal Year)			
---●--- Target Performance	85%	85%	85%	85%	85%	85%	85%	85%
—■— Percent Compliance ACF	87%	85%	86%	87%	85%	86%	86%	86%
—■— Percent Compliance LTCF	82%	78%	82%	82%	86%	84%	82%	85%
Total Opportunities ACF	5644	4505	5229	5995	4471	4306	4240	5382
Total Opportunities LTCF	1587	1434	1195	1400	1077	908	1033	1309

Hand Hygiene Compliance - NHA & Province of BC

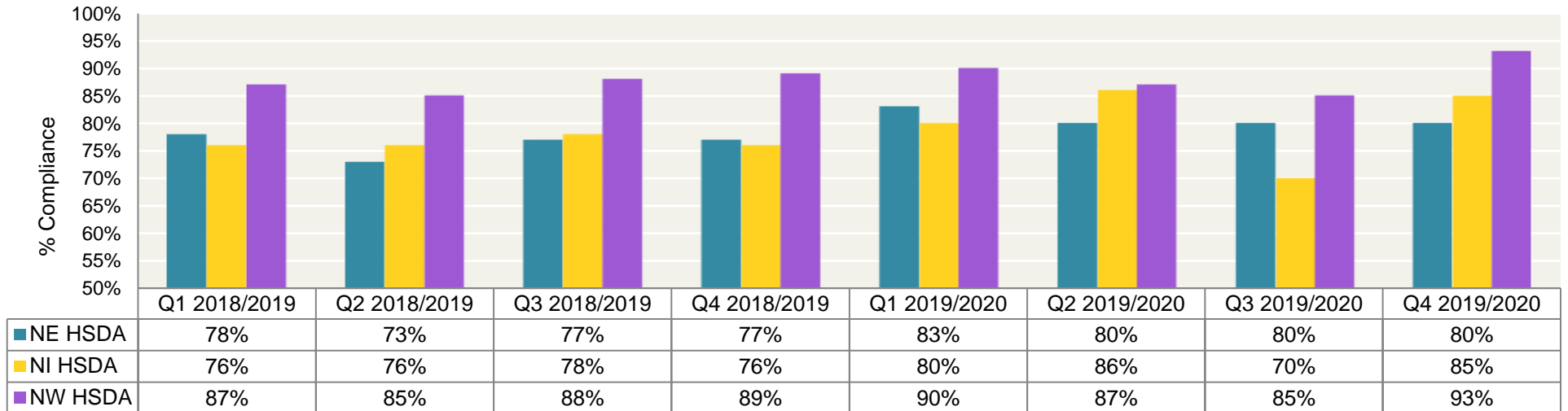


	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	2018/2019				2019/2020			
—■— NH Percent Compliance ACF	87%	85%	86%	87%	85%	86%	86%	86%
—■— Province of BC Percent Compliance ACF	84%	81%	83%	82%	81%	82%	83%	87%
—■— Province of BC Percent Compliant LTCF	86%	86%	87%	88%	88%	87%	86%	90%
—■— NH Percent Compliant LTCF	82%	78%	82%	82%	86%	84%	84%	84%
NH Opportunities ACF	5644	4505	5229	5995	4471	4306	4306	4306
Province of BC Opportunities ACF	45724	25669	32232	39939	32876	33019	32975	23157
Province of BC Opportunities LTCF	9770	4611	5698	5966	5940	5317	6645	5942
NH Opportunities LTCF	1587	1434	1195	1400	1077	908	908	908

Hand Hygiene Compliance in Northern Health per HSDA - ACF

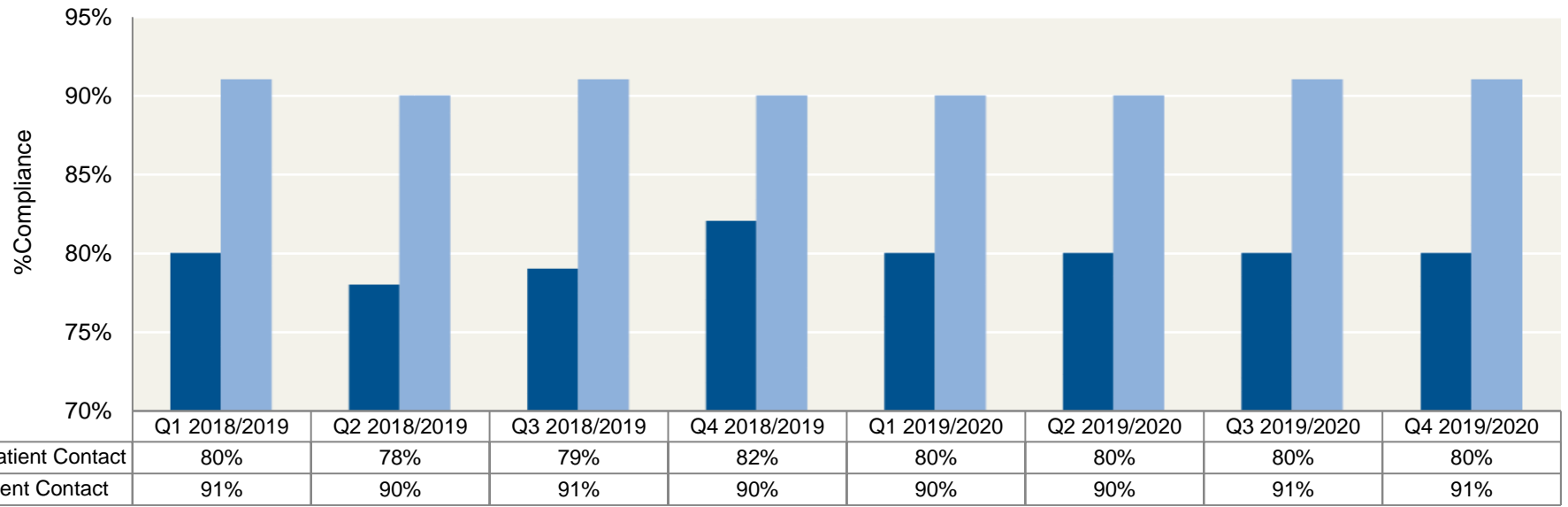


Hand Hygiene Compliance in Northern Health per HSDA - LTCF

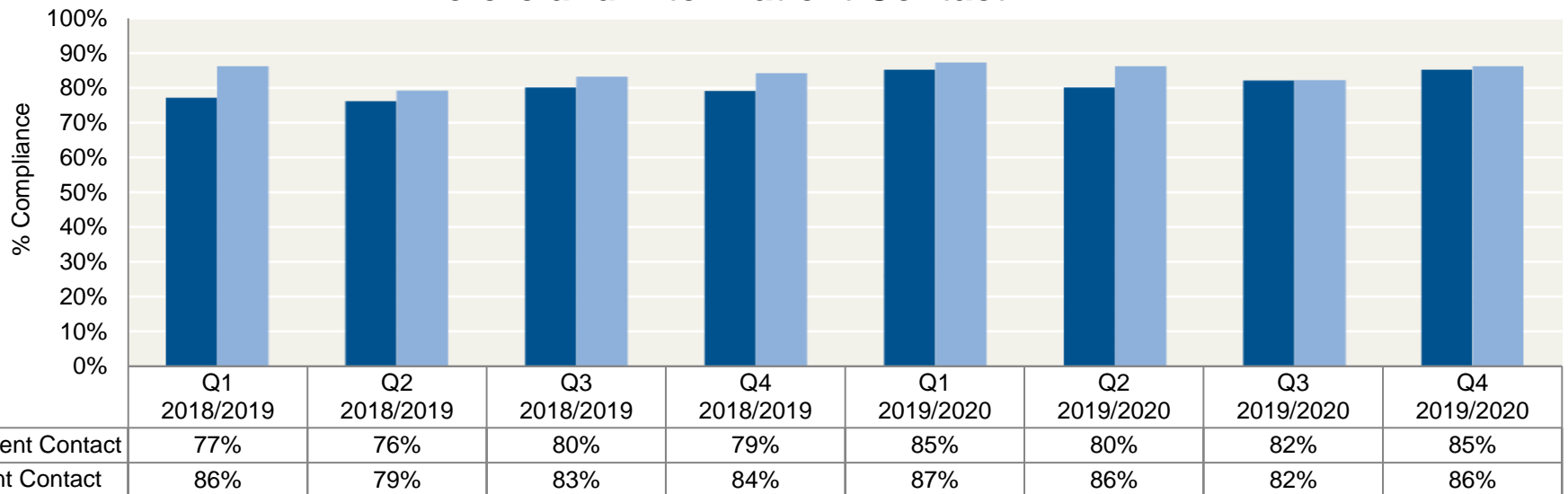


Legend: **ACF** – Acute Care Facility **LTCF** – Long Term Care Facility

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



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



Hand Hygiene Compliance in Northern Health per Healthcare Provider

