Hand Hygiene Heroes update

Tuesday, January 26\textsuperscript{th}
0800-0900
C-130
Agenda for today

- Hand Hygiene Task Force information
- HHH observation results
  - Updates on observations
- Educational efforts
  - Video from University of Miami
Hand Hygiene Task Force

- Interdisciplinary and growing!
  - Infection Control
  - Nursing
  - Medicine
  - Regulatory

- Will be asking RT, PT/OT, etc
HHH Observation results

- Sep-Dec 2009 results
  - Not all units were able to get 20 observations completed
  - Some units were able to get 100% compliance!

- Modified worker assistance
  - Baseline of 100 MD observations
UCSF Hand Hygiene Compliance Rates per Unit
(Sept - Dec 2009)
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<th>September</th>
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Updates on Audits

- Observations of 20 of RNs
- Enter all data by the 30\textsuperscript{th} of the month
- Form unchanged, except that the Fax number will be removed
- Observations to be entered online (after collecting on the paper)
  - In the future, the online site will change
Welcome to the UCSF Department of Hospital Epidemiology and Infection Control (HEIC). Within this website you will find resources for reducing the risk of infection and exposure to communicable diseases.

If you have an Infection Control concern, please call
Main Office: 415.353.4343
(Mon-Fri 8am-4pm)

On-call pager: 415.443.2644
Mon-Sun 8am-8pm

N95 Resuming Guidelines:

The new visitor policy posters and cards in the Service Excellence Intranet site concerning Flu (UCSF access only).

http://serviceexcellence.ucsfmedicalcenter.org/patient_focus/flu_information/

H1N1 Flu Information last updated 12/08/2009

SFDPH:
SFDPH is the highest authority in the event of a public health emergency for UCSF.

Case definitions and forms may change frequently. Please refer to the SFDPH site for all suspect cases.

SFDPH H1N1 (Swine) Influenza Guidance for Healthcare Professionals

SFDPH H1N1 Specimen Collection Form

Latest SF Department of Public Health Alerts and Advisories concerning H1N1 (Swine) Influenza

UCSF:
Stay Home Return to Work document from
Hand Hygiene observational tool
# HAND HYGIENE MONITORING SHEET

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<th>Date(s)</th>
<th>Monitor</th>
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<tr>
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<thead>
<tr>
<th>Location</th>
<th>RN</th>
<th>MD</th>
<th>RESP</th>
<th>Other</th>
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</table>

If compliance is observed, mark an X in the YES column.

If non-compliance is observed, please circle the NUMBER corresponding to the reason for non-compliance. The reasons are:

1. Did not clean hands before direct patient contact.
2. Did not clean hands after direct patient or environment contact.
3. Did not clean hands after removing gloves.
4. Incorrect technique
5. Other (specify).

Indications for correct hand hygiene (HH) include:

- Before having direct contact with patients.
- Before donning gloves and performing an invasive procedure (use an antimicrobial agent)
- After removing gloves or other personal protective equipment.
- After contact with body substances or articles/surfaces contaminated with body substances.
- After contact with patient's intact skin (e.g., taking a pulse, blood pressure or lifting a patient).
- Before preparing or eating food (do not use alcohol gel).
- After personal contact that may contaminate hands (e.g., covering sneeze, blowing nose, using bathroom do not use alcohol gel).
Link to the Hand Hygiene data entry page
Clean Hands Save Lives

HOME

HAND HYGIENE COMPLIANCE

Health-care associated infections are a major factor contributing to morbidity and mortality. Hand hygiene is considered the most important measure for preventing health-care associated infections and the spread of antimicrobial resistant pathogens. Historically, compliance with hand hygiene has been poor. In an effort to improve compliance and decrease hospital-associated infections, UCSF is embarking on a campaign, entitled CLEAN HANDS SAVE LIVES, to improve hand hygiene throughout the institution.

All members of the Medical Staff and employees who have direct patient care have a personal responsibility to prevent the development and transmission of infections in patients and staff of the Medical Center. Adherence to sound infection control practices is critical in preventing spread of infection. One such practice is Standard Precautions, which requires HAND HYGIENE UPON ENTERING OR EXITING THE PATIENT ENVIRONMENT IF YOU HAVE TOUCHED THE PATIENT OR TOUCHED ANYTHING IN THE ENVIRONMENT, EVEN IF GLOVES ARE WORN.

The following is an educational module on hand hygiene. All are required to review the module and verify by signing the document at the end. A copy of the signed document will be required for future re-credentialing.

The leadership at UCSF considers proper hand hygiene an integral part of the high quality of care provided by members of the institution. Failure to comply with the hand hygiene policy may result in corrective actions.
Educational efforts

- Educational Assessment Survey
- prior to Infection Control Annual Review module
1. How long should you rub your hands together when washing with soap and water?

5 seconds

15 seconds

One minute

Until they seem clean
1. How long should you rub your hands together when washing with soap and water?

- **5 seconds**
  - Number of Responses: 3
  - Percentage of Responses: 2%

- **15 seconds**
  - Number of Responses: 78
  - Percentage of Responses: 40%

- **One minute**
  - Number of Responses: 111
  - Percentage of Responses: 57%

- **Until they seem clean**
  - Number of Responses: 3
  - Percentage of Responses: 2%

Total: 195
2. How long should you rub your hands together when applying with alcohol-based hand rub (ABHR)?

5 seconds

15 seconds

One minute

Until they seem clean
2. How long should you rub your hands together when applying with alcohol-based hand rub (ABHR)?

<table>
<thead>
<tr>
<th>Duration</th>
<th>Number Of Responses</th>
<th>Percentage Of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 seconds</td>
<td>10</td>
<td>5%</td>
</tr>
<tr>
<td>15 seconds</td>
<td>151</td>
<td>78%</td>
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<tr>
<td>One minute</td>
<td>30</td>
<td>15%</td>
</tr>
<tr>
<td>Until they seem clean</td>
<td>3</td>
<td>2%</td>
</tr>
</tbody>
</table>

Total: 194
3. Which hand hygiene method is more effective at killing bacteria?

Soap and Water

Alcohol-based hand rub
3. Which hand hygiene method is more effective at killing bacteria?

**Soap and Water**
- Number Of Responses: 81
- Percentage Of Responses: (42%)

**Alcohol-based hand rub**
- Number Of Responses: 112
- Percentage Of Responses: (58%)

Total: 193
4. True or False? You need to use ABHR every time you leave a patient room.

True

False
4. True or False? You need to use ABHR every time you leave a patient room.

**True**
- Number Of Responses 173
- Percentage Of Responses (90%)

**False**
- Number Of Responses 20
- Percentage Of Responses (10%)

Total: 193
Educational efforts

- Current education
  - During your observations! Business cards
  - Door signs: Gel In~ Gel Out
  - Frequently asked questions
Video presentation

- Video from University of Miami
  - http://anesthesiology.med.miami.edu/x201.x
  - ml
Introducing
our future ‘educator’!

Gel In Gel Out
Clean Hands Save Lives
Educational efforts

- Future educational efforts
  - Glowbox ‘roadshows’
  - UCSF video
- MD education
Be sure to sign in and provide your desired T-Shirt size!