UTMB Emergency Services Hand Hygiene Quality Improvement Initiative
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Background:
Hand hygiene is the single most important intervention by hospital employees to prevent nosocomial infection. The very low adherence rates to hand hygiene protocols among HCWs can contribute to poor hand hygiene compliance.

Problem:
Hand hygiene in the emergency room was 60% for RNs and was 40% or less for techs and Physicians. We had the opportunity to increase the percentage of ED nursing staff and physician compliance to 95% by September 30th.

Evidence:
The CDC has specific recommendations regarding when hands should be washed before and after caring for a patient. The need to turn hand hygiene into a habit essential with the growing problem of antibiotic resistance worldwide.

Strategy:
Barriers to hand hygiene described by staff fell into three categories, product, people and knowledge. Proper hand washing technique was tested by using a black light. Compliance with hand hygiene guidelines was reinforced by implementing a Hand Patrol Game.

Practice Change:
Washing or jelling hands just before entering and just after leaving the patient’s room.

Evaluation:
Epidemiology, Quality, and Administration performed monthly audits of all health care workers. The results were reported to each unit and broken out by each discipline, RN, Physician and techs.

Results:
By September 2012 the RN compliance was 87%, the physician compliance was 100% and the tech compliance was 82%. Our best performance was November when each discipline had a score of 100%.

Recommendations:
We plan to create a healthy competition between staff so the team with the best compliance will receive the Spirit stick. The winning team will have the Sprit Stick until the next Hand Hygiene results are reported. The plan is to have results every two weeks.
Lessons Learned:
Once our games stopped, we were not able to hold the gain. It could take a year of effort to bring hand hygiene to staff’s conscious awareness until old habits are broken.

Bibliography:


