

A close-up photograph of a person's hands being washed under a stainless steel faucet. The person is wearing blue scrubs. The background is slightly blurred, showing a hospital or clinical setting with other faucets and a red soap dispenser. The text is overlaid on the image.

Hand Hygiene Perception Survey Results

Analysis as of August 17, 2012

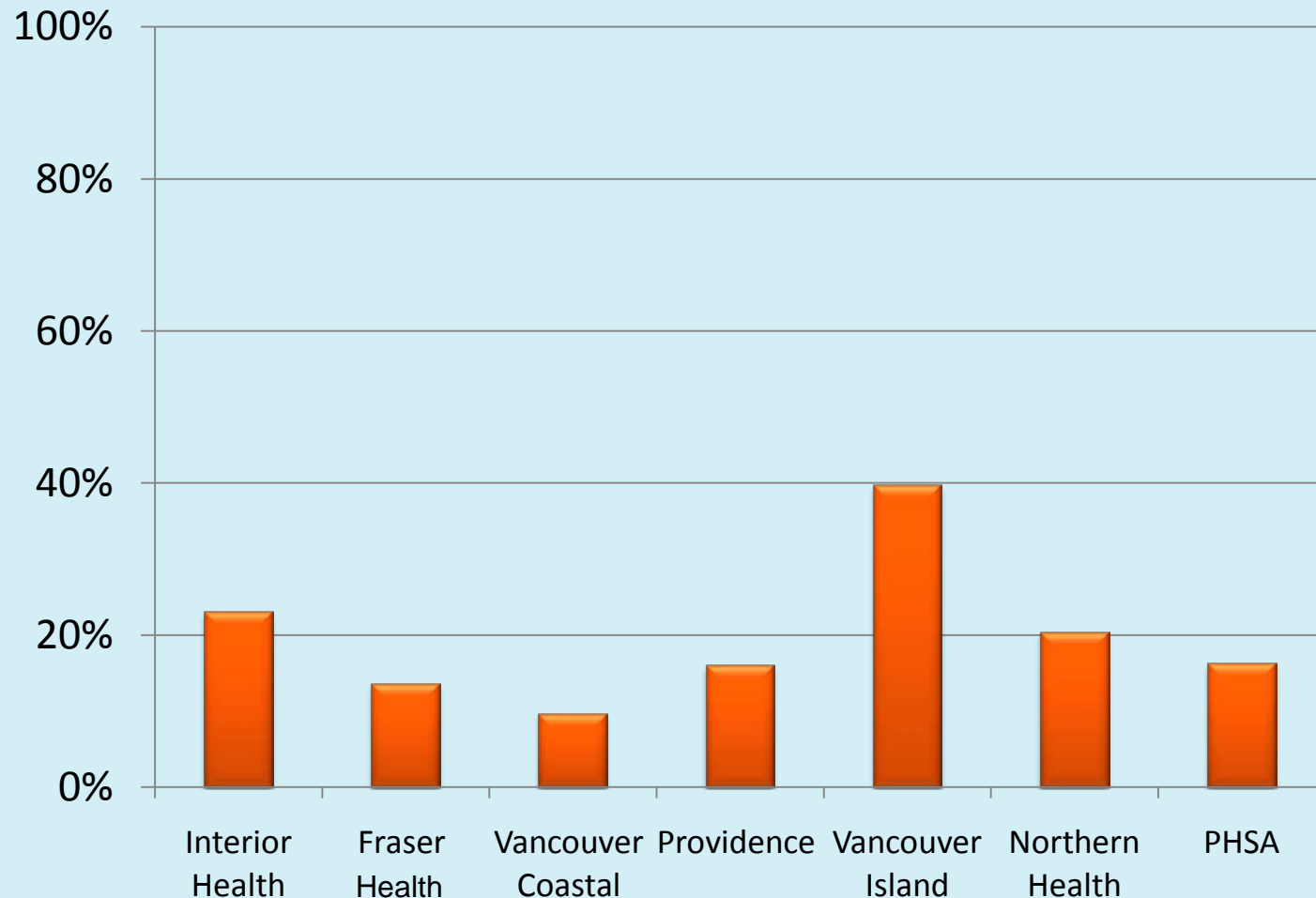
Provincial Hand Hygiene Research Project

Background/Methods

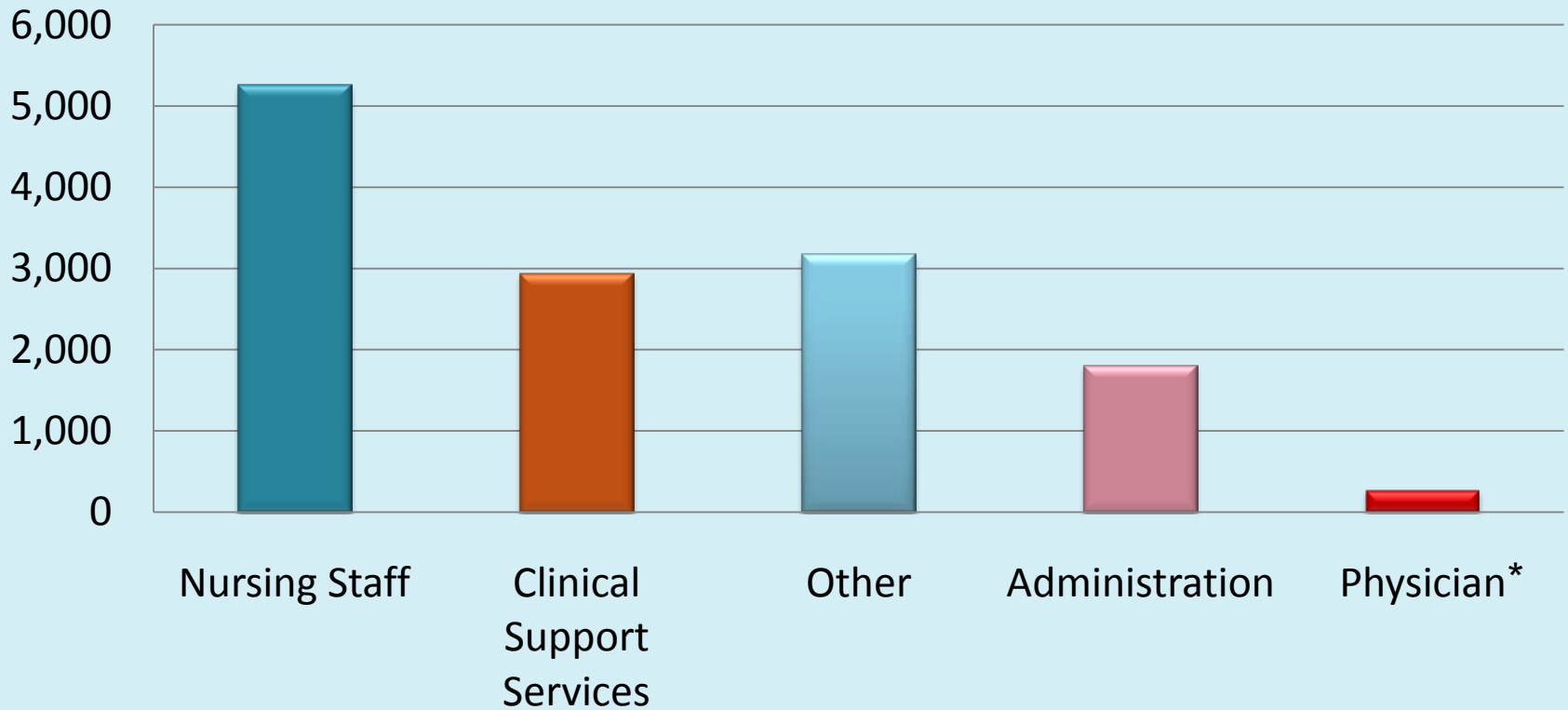
In response to the recommendation from the Auditor General, all Health Authorities were to survey health care workers to understand perceptions of hand hygiene.

- WorkSafeBC provided grant funding for the research project
- In January and February 2012, all health care workers in BC were invited to participate in the survey through electronic Health Authority newsletters, emails from CEOs or with distributed paper copies
- 13,422 health care workers (19.6%) completed the survey

Health Authority Response Rates



Respondents' professional breakdown



* Although Physicians have a relatively low response rate and may not provide a representative sample, given the influence of Physicians within the health care system, they have been included in this analysis

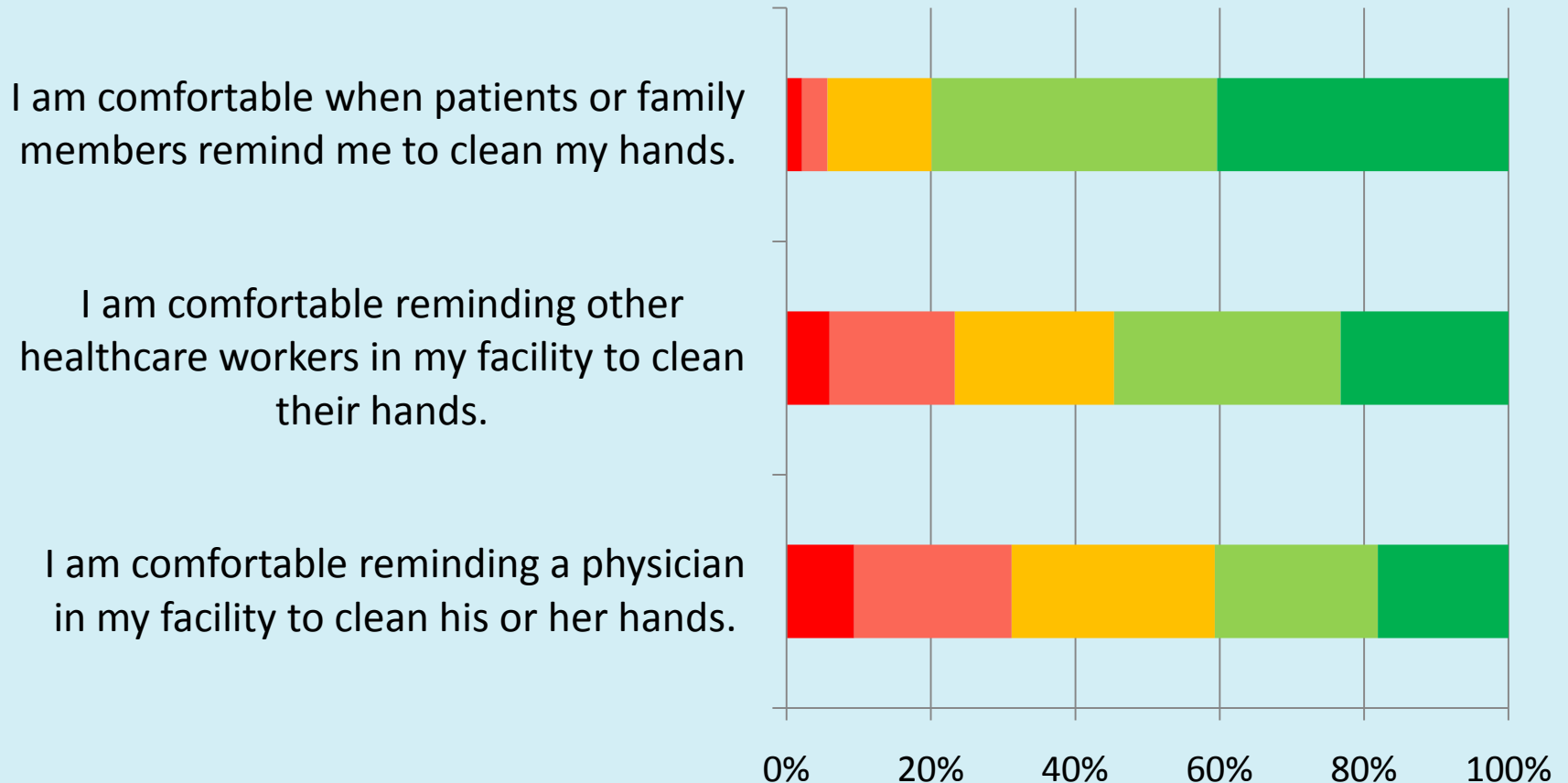
Scale



Individual Factors - Attitudes

- The vast majority of health care worker respondents feel that they know the hand hygiene policy and how to wash their hands.
- Respondents also identified that hand hygiene is important to their patients and themselves

Perceived hand hygiene culture among health care workers



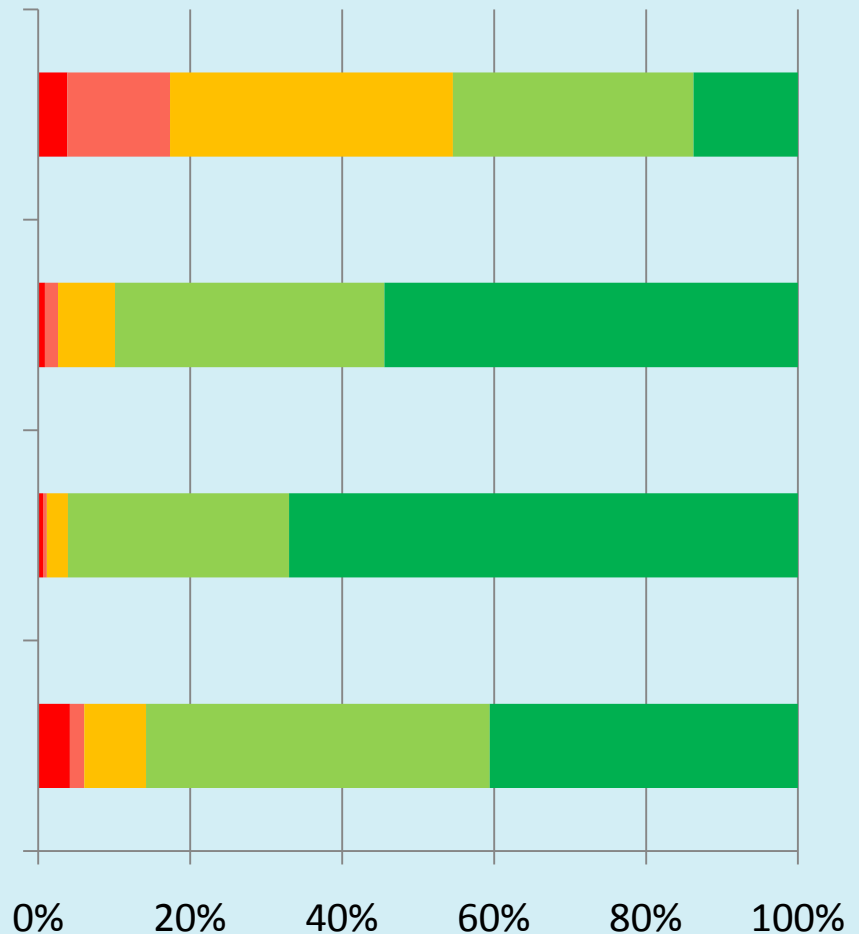
Organizational Factors - Safety

I am satisfied with my facility's current hand hygiene compliance.

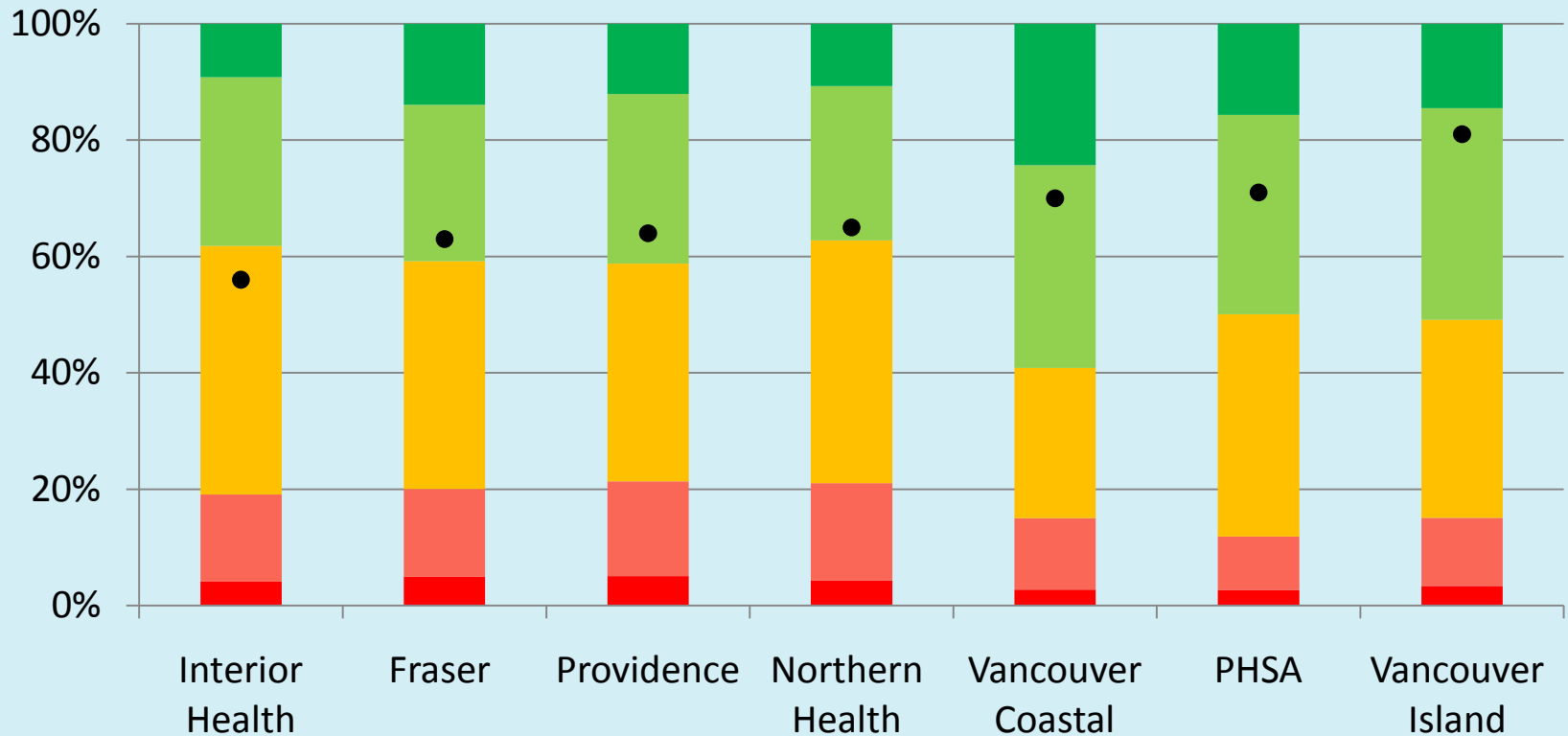
Among all the patient safety issues at my facility, hand hygiene compliance is very important

I believe hand hygiene compliance is an important way to improve safety at my facility.

I felt the education/training about hand hygiene was relevant to me.



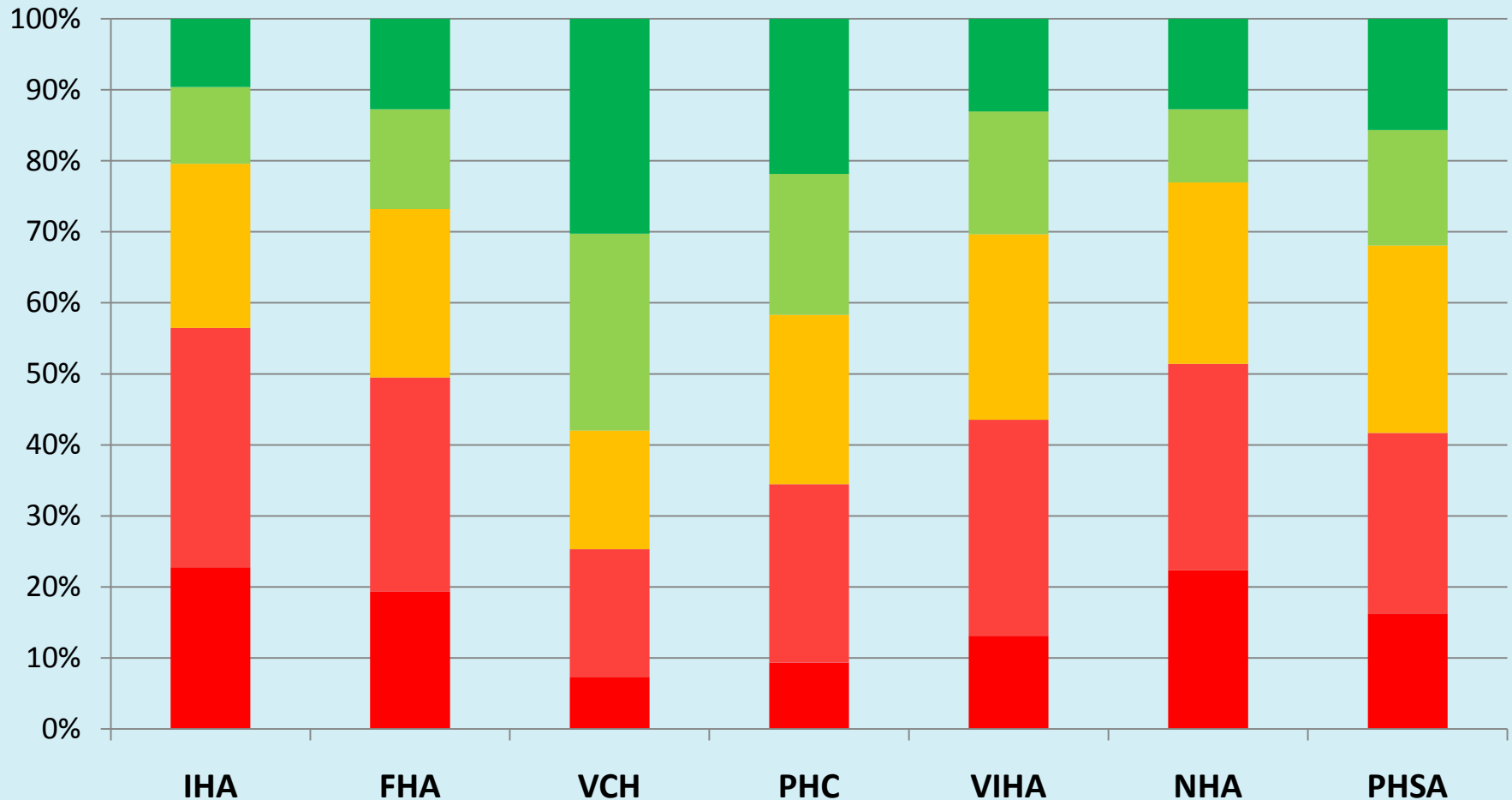
I am satisfied with my facility's hand hygiene rates



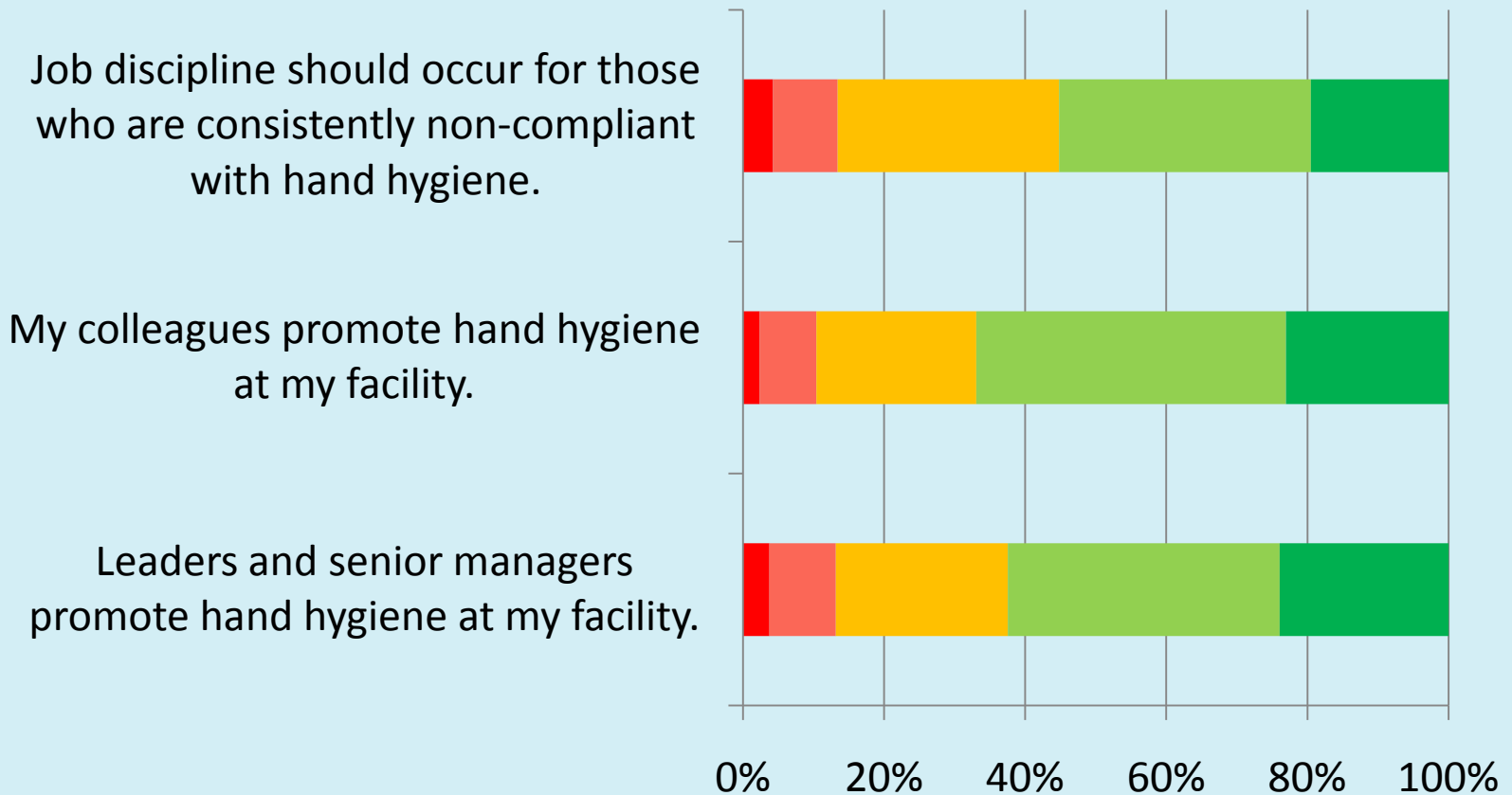
| | | | | | | | |
|--------------------|-----|-----|-----|-----|-----|-----|-----|
| Q2 audit Results ● | 56% | 63% | 64% | 65% | 70% | 71% | 81% |
|--------------------|-----|-----|-----|-----|-----|-----|-----|

Organizational Factors - Reporting

I see the reports on hand hygiene compliance for my whole facility.



Organizational Factors - Promotion

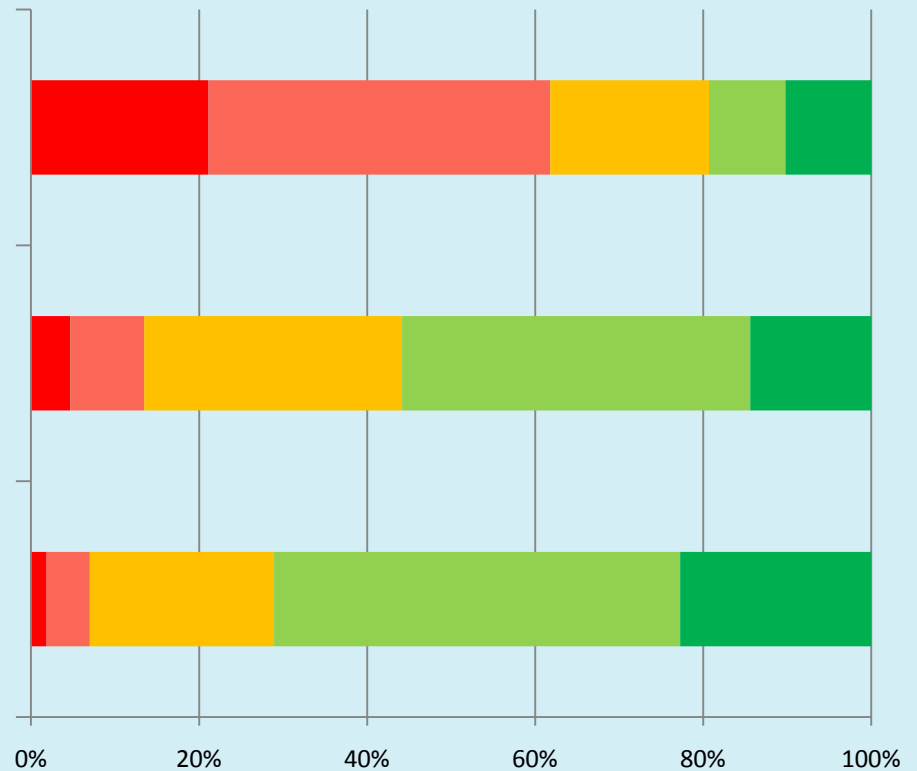


Environmental Factors – Empty and Broken Dispensers

How often are alcohol-based hand rub dispensers broken or missing in your facility?

How often are paper towel dispensers empty in your facility?

How often are soap dispensers empty in your facility?



Always Never

Environmental Factors - Accessible



Comments Section

Common themes arising from the 'obstacles to hand hygiene' question:

- Myths and misconceptions
- Products are poorly placed and/or maintained in my facility
- My skin is dry, cracked and sore
- Time and workload
- My colleagues do not perform hand hygiene, why should I?
- The environment is dirty, so what's the point of me cleaning my hands?
- Frustration with MDs: they do not routinely clean hands nor are they held accountable

Actions to Date

- Regular Truth/Fact newsletter articles to come out from each health authority
- Health authorities have reviewed individual policies for ABHR refills
- Health authorities have begun using consistent messaging for hand hygiene education
 - i.e. No longer using 4 or 5 moments; instead hands should be cleaned *before and after contact with the patient or patient environment*

Respondent Suggestions for Improvement

- Auditor feedback during hand hygiene audits
- Review ABHR (alcohol-based hand rub) refill policy or procedure
- Find out what healthcare workers think is an acceptable rate for hand hygiene
- Have a number of ABHR, soap, and lotion products available to staff