

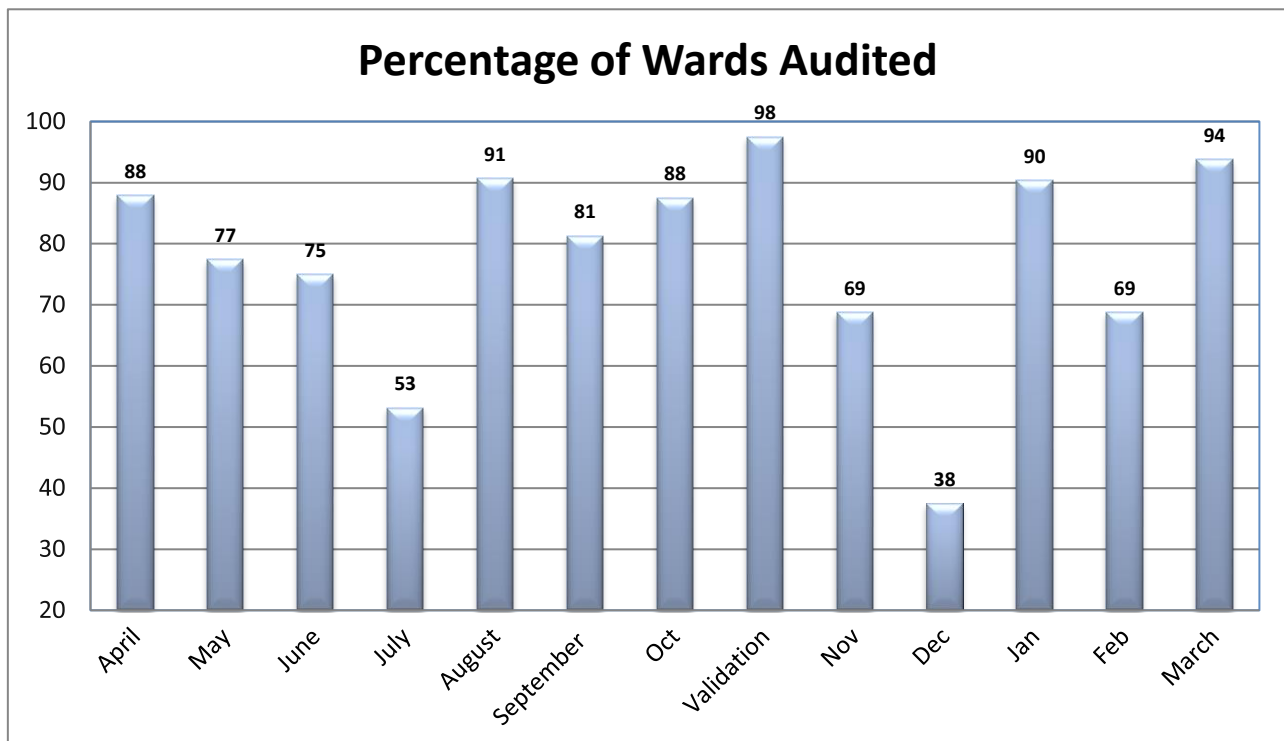


Hand Hygiene Report (March 2019)

- The Hand Hygiene Audit has now been updated to ensure that we are able to demonstrate measurement of compliance with the World Health Organisation derived “Five Moments for Hand Hygiene”. This is important as it evaluates the efficacy of hand decontamination at the point of care and at the 5 most significant opportunities to prevent transmission of health care infection.
- We have now revised the audit to concentrate fully on observation of practice, in addition to staff complying with the Bare Below the Elbows dress code.
- Non-receipt of an audit should not reflect on the individual area as the audits are allocated to Matrons based on a monthly schedule.
- The number of areas audited is 32
- A recent addition to the audit process is that any area not achieving a compliance rate of 97% or above will be required to complete a re-audit across the following seven days.

Hand Hygiene Audit Results – March 2019

- Hand Hygiene Observational Audit: 93%
- Bare Below the Elbows Audit: 99%
- Percentage of Wards Audited: 94%





Hand Hygiene Results per Area

 Not received

	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
A&E	100%	100%	100%		100%	75%	100%	100%	100%	100%		100%
Acute Cardiology (Ward 5)	100%	100%	100%		100%	100%	100%	100%		100%	80%	
AMU	100%	100%	100%		88%	88%			83%	100%	100%	92%
AN Clinic	100%	100%			100%		100%		100%	100%		
CDS	100%		100%	100%	100%	80%	100%	100%		100%	100%	100%
Green Suite			50%		100%	100%				100%		100%
Critical Care	100%	100%	88%	100%	100%	100%	100%	86%		100%		89%
CU	100%	100%			100%		100%				100%	100%
DSU	100%	100%		100%		100%	100%			100%		100%
Emergency Orthopaedic Unit	78%		100%		100%	100%	100%	75%	100%	100%	88%	33%
Endoscopy Unit	100%	100%		100%		100%	100%			100%		100%
Heart Care Unit (Wd 30)	100%	100%	56%	100%	92%	75%	100%	57%		100%	44%	100%
IAU	100%	100%	100%		45%	80%					100%	100%
NICU		100%	100%	100%	100%	100%	100%	100%		100%		100%
OPD Yellow	100%											
OPD - Blue	100%			88%	100%		100%				100%	63%
Planned Ortho Unit	100%		100%		100%	100%	100%	80%	100%	100%		100%
Radiology/CT Scan			83%		100%	100%				100%	100%	100%
Integrated Surgical Unit	100%	100%	83%	89%	100%	50%	100%	86%		63%	100%	100%
Theatres	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Ward 27		100%	100%		100%	100%	100%	100%		100%	100%	100%
Ward 31	100%	100%	54%	100%	100%	89%	100%	86%		100%	100%	100%
Ward 40	100%	71%	100%		91%	100%	100%	100%		100%	80%	91%
Ward 41	100%	50%	90%		17%	100%	57%	88%	88%	71%	88%	91%
Ward 42	100%	80%		83%	70%	100%	100%	100%		88%		100%
Ward 44	100%	100%	100%	100%	100%	100%	100%	100%	50%	75%		100%
Ward 45	63%	100%		86%	100%		100%	50%		100%	44%	100%
Ward 46	57%	100%			60%		100%	33%		100%	100%	88%
Stamford Unit 1st Flr	100%	100%	80%	75%	90%	100%	80%	100%	100%	100%	100%	100%
Stamford Unit 2nd Flr	100%	100%	86%	75%	100%	83%	75%	100%	100%	91%	100%	90%
Stamford Unit GF			71%	100%	100%	89%	100%	100%	100%	100%	100%	67%
Ladysmith OPD	100%	100%					100%			Closed	100%	
WH Clinic	100%		100%	100%	100%	100%	100%	100%	60%	100%	75%	100%

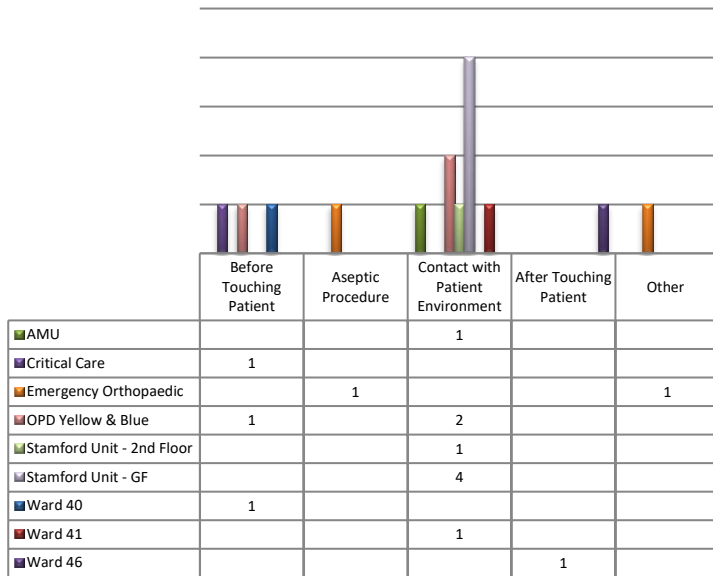


Staff Not Compliant with Hand Hygiene Policy

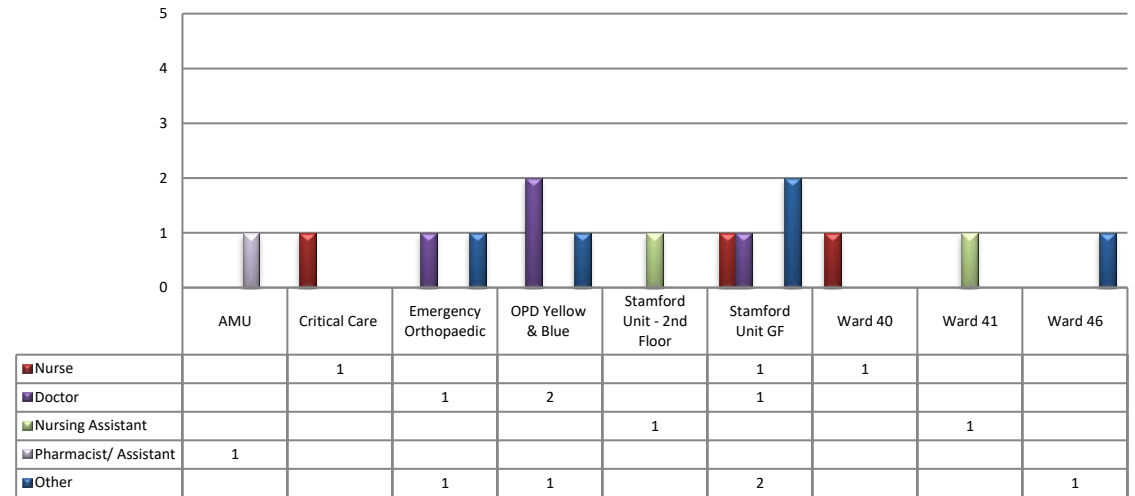
EXCEPTIONS		Hand Hygiene	
Area observed	Title	Exception	Indication
Ward 41	Nursing Assistant	Contact with Patient Environment	No methods of Hand Hygiene Observed
EOU	Doctor	Aseptic Procedure	No methods of Hand Hygiene Observed
EOU	Other	Other	No methods of Hand Hygiene Observed
CCU	Nurse	Before Touching Patient	No methods of Hand Hygiene Observed
OPD Yellow & Blue	Doctor	Before Touching Patient	No methods of Hand Hygiene Observed
OPD Yellow & Blue	Doctor	Contact with Patient Environment	No methods of Hand Hygiene Observed
OPD Yellow & Blue	Other	Contact with Patient Environment	No methods of Hand Hygiene Observed
Ward 40	Nurse	Before Touching Patient	No methods of Hand Hygiene Observed
Ward 46	Phlebotomist	After Touching Patient	No methods of Hand Hygiene Observed
AMU	Pharmacist	Contact with Patient Environment	No methods of Hand Hygiene Observed
Stamford Unit GF	Other	Contact with Patient Environment	No methods of Hand Hygiene Observed
Stamford Unit GF	Doctor	Contact with Patient Environment	No methods of Hand Hygiene Observed
Stamford Unit GF	Nurse	Contact with Patient Environment	No methods of Hand Hygiene Observed
Stamford Unit GF	Other	Contact with Patient Environment	No methods of Hand Hygiene Observed
Stamford Unit 2nd Floor	Nursing Assistant	Contact with Patient Environment	No methods of Hand Hygiene Observed
Area Observed	Title	Staff engaged in clinical activities are compliant with the Bare Below the Elbow dress code	No wrist watches/ stoned rings or other wrist jewellery are worn by staff carrying out patient care. Staff nails are short, clean and free from nail varnish, extensions etc.
Ward 44	Porter	No	Wearing a bracelet
Stamford Unit GF	Domestic	No	Wearing a stone ring



Occasions where no hand hygiene was observed



Breakdown of Staff Groups where staff not compliant with hand hygiene



Staff not compliant with Bare Below the Elbows

