



ADHERENCE TO HOSPITAL-BASED HAND HYGIENE

**University of Virginia Renal Services
Charlottesville, VA**

Contact Information

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Category:	Hand Hygiene
Type of Facility:	Hospital-Based Dialysis Units (including satellite facilities)
Number of Patients:	800
Number of Physicians:	46
Number of Nurse Practitioners:	3
Number of Physician Assistants:	0

Background

University of Virginia (UVA) Renal Services is a network of eight outpatient dialysis facilities, two peritoneal dialysis units, and a home dialysis program. UVA Renal Services is the largest hospital-based program in the country. All units, including satellite facilities that may not bear UVA's name but are managed as part of the system, must meet all hospital accreditation requirements of The Joint Commission (formerly Joint Commission on Accreditation of Healthcare Organizations or JCAHO). These requirements include patient safety policies such as infection control (including hand hygiene) and related annual staff education.

Policies Implemented

The Joint Commission's infection control policies for hand hygiene are based on implementation of the *CDC Guideline for Hand Hygiene in Healthcare Settings* (<http://www.cdc.gov/handhygiene>). The guideline details specific indications for hand washing, hand antisepsis and hand hygiene techniques. Indications, for example, include (but are not limited to):

- When hands are visibly dirty or contaminated with proteinaceous material or are visibly soiled with blood or other body fluids, wash hands with either a non-antimicrobial soap and water or an antimicrobial soap and water.
- If hands are not visibly soiled, use an alcohol-based hand rub for routinely decontaminating hands in all other clinical situations.
- Decontaminate hands before having direct contact with patients.
- Decontaminate hands before inserting indwelling urinary catheters, peripheral vascular catheters, or other invasive devices that do not require a surgical procedure.
- Decontaminate hands after contact with a patient's intact skin (e.g., when taking a pulse or blood pressure, and lifting a patient).
- Decontaminate hands after contact with body fluids or excretions, mucous membranes, non-intact skin, and wound dressings if hands are not visibly soiled.
- Decontaminate hands if moving from a contaminated-body site to a clean-body site during patient care.
- Decontaminate hands after contact with inanimate objects (including medical equipment) in the immediate vicinity of the patient.
- Decontaminate hands after removing gloves.

One staff person in each unit is responsible for anonymous spot checks to assess adherence to the policy. Each unit must complete 15 anonymous random observations per month, document each event, and submit incident reports to the hospital's infection control department.

If the hospital finds low adherence to the hand hygiene requirements, a corrective action plan is implemented. Follow up includes:

- Ongoing observations/audits
- Discussion at staff meetings of low adherence and the need to improve adherence, and attention to the fact that audits are ongoing
- Nurse managers talk with staff immediately if they fail to wash and/or use hand rub as appropriate
- Review trend data each month to track adherence

To increase adherence, bottles of alcohol-based hand rub rest on carts used when staff round in the dialysis unit. Hospital-required new employee training and continuing education of staff also impact implementation of hand hygiene policies. Hand hygiene training is a mandatory in-service for all new employees within the first week of their orientation that are involved with direct patient care. All staff involved in patient care must complete hospital-required training annually; courses are online and include self-tests. The hospital's continuing education department tracks participation and alerts nurse managers several weeks before the annual deadline if there are department staff who have not completed their mandatory training courses.

In addition to meeting hospital-required infection control policies of The Joint Commission, UVA Renal Services also is participating in the 5 Diamond Program of the Mid-Atlantic Renal Coalition (MARC), ESRD Network 5, including a hand hygiene education module. This interactive patient safety education program is designed so that each dialysis facility that completes up to five educational modules and submits documentation to MARC, will receive one "diamond" for each.

Recommendations

- Rigorous infection control policies, as required for the hospital's accreditation by The Joint Commission, can further inform patient safety protocol in free-standing dialysis units.
- The requirement for annual re-training with on-line courses and use of hand hygiene facility audits on a monthly basis aids in facility compliance.