

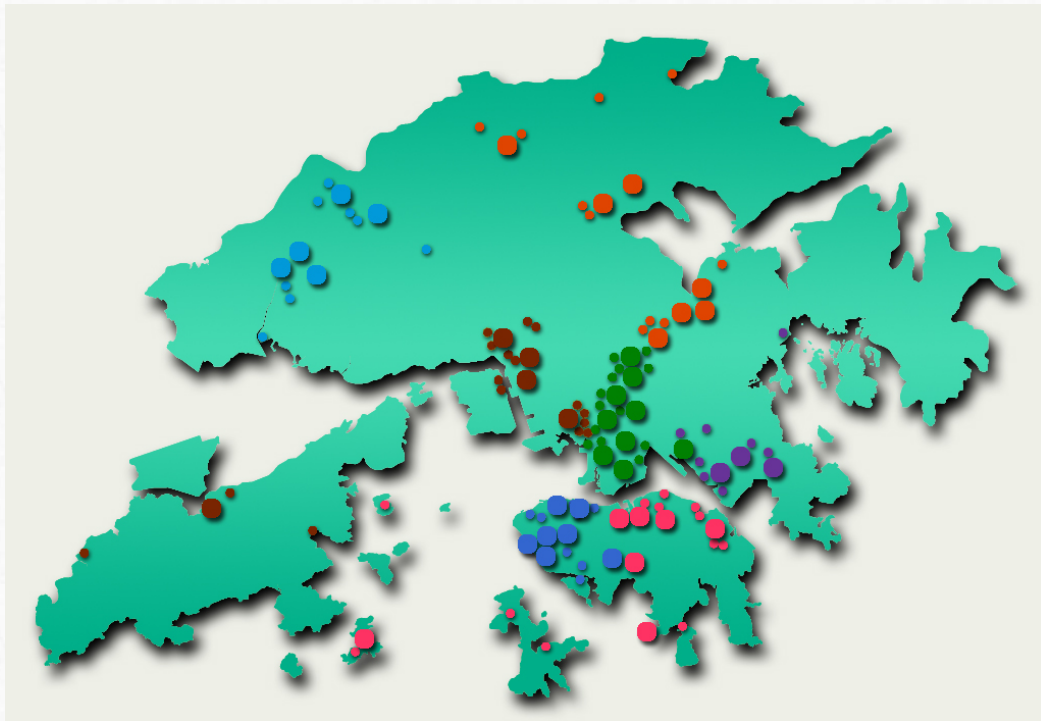
Initiatives of Hand Hygiene Promotion in HA Hospitals

Ms M Y KONG

CICO office

26 Oct 2018

Hospital Authority (HA)



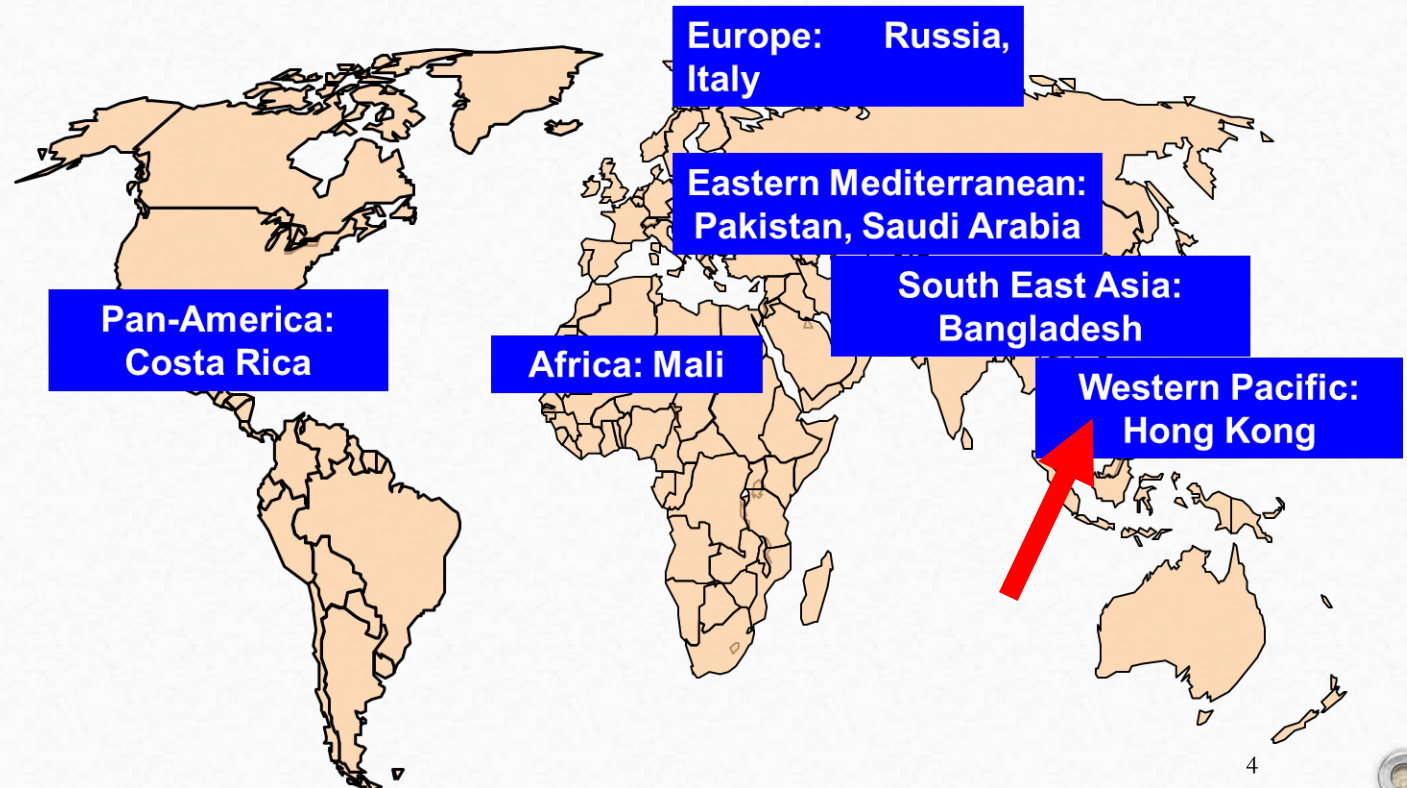
- 7 hospital clusters:
 - 43 public hospitals,
 - 48 specialist out-patient clinics, &
 - 73 general out-patient clinics.
- 28,126 beds (HA Annual Report 2016-2017)
- 77,534 staff (as at 31 July 2018)
- ICN to bed ratio: 1:250

Hand Hygiene Journey in HA

WHO launched the First Global Patient Safety Challenge: Clean Care is Safer Care on 13 October 2005



Hong Kong was one of the eight official WHO pilot sites



Hong Kong Joined Hand Hygiene Drive in 2005

- Hong Kong was committed to promoting hand hygiene.
- The pledge was delivered by Dr York Chow, ex-Secretary for Health, Welfare & Food.



Ex-Secretary for Health, Welfare & Food Dr York Chow signed up to support the hand hygiene campaign on 13 October 2005

Implementation Plan of HA-wide Hand Hygiene Campaign



WHO Multi-modal Hand Hygiene Improvement Strategy

- System change – alcohol-based hand rub at the point of care
- Training and education
- Observation and feedback
- Reminders in the workplace
- Creating a safety culture



First Implementation of WHO Hand Hygiene Campaign in 4 hospitals in 2006

Pilot program in 2006 – 2007

- 4 hospitals (QMH, CMC, TMH and YCH)
- 2 - 3 intervention wards and 2 - 3 control wards
- Evaluate hand hygiene compliance among healthcare workers before and after implementation of the program

Interventions

1. Adopt WHO-formulation alcohol hand rub
2. Alcohol-based handrub at the point of care, e.g. bed ends, procedures trolley, staff pocket
3. Provide plain liquid soap
4. Poster reminders in the workplace
5. Training and education on WHO five moments for hand hygiene and glove use
6. Hand hygiene compliance monitoring

Alcohol-based Hand Rub Everywhere



One Bottle in Pocket 一人一樽在口袋

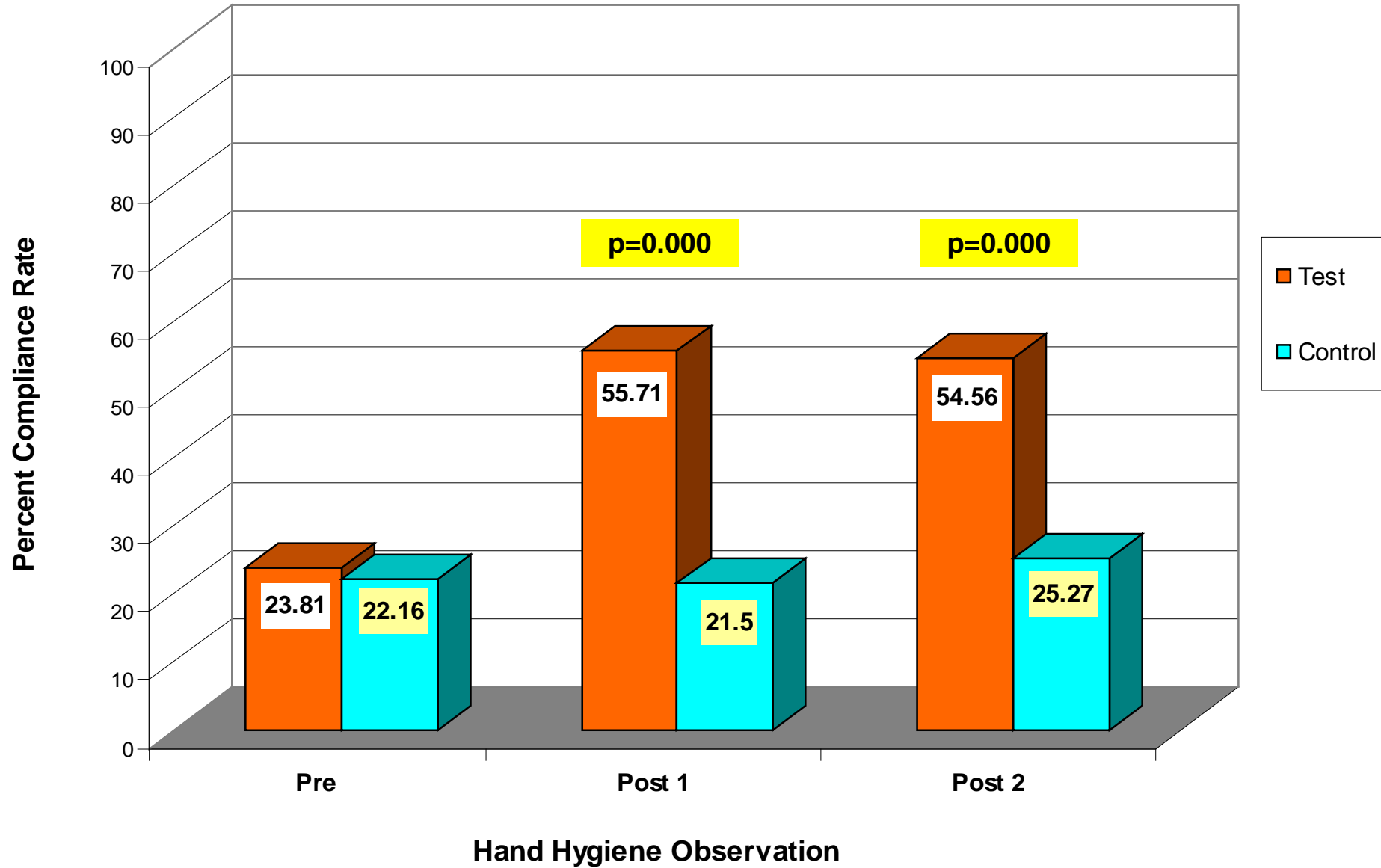


>> Details ...

>> 詳情 ...

- 行政總裁的話
CE's Column
- 接受防疫注射 截斷流感傳播
Taking Influenza Vaccinations to Stop Transmission
- 籌辦活動需要你
齊來報名做Helper
We Need You to be our Helper
- 藝術瑰寶善賞
《帝女花》籌款晚會
Cantonese Opera "Princess Changping"
- 偷拍行為 繩之於法
Sneak Film is Illegal
- 如何創造安穩的退休生活
How to Create a Secure Retirement
- 購屋貸款利息津貼計劃問與答
Home Loan Interest Subsidy Scheme Q&A
- 消除誤解與歧視
4,500名市民參觀青山醫院
Getting Rid of Misunderstanding and Discrimination
- 靜心 淨心
OASIS Tips

Overall Hand Hygiene Compliances of the 4 Pilot Hospitals in Hong Kong



Full Implementation of WHO Hand Hygiene Campaign in HA Hospitals in 2008



Kick-off Ceremony at HAHO

21 January 2008



Officiating guests included (left to right) ex-HA Chief Infection Control Officer, Dr Seto Wing-hong; ex-HA Chief Executive, Mr Shane Solomon; WHO representative, Prof Didier Pittet; ex-HA Chairman, Mr Anthony Wu, and ex-Director (Quality and Safety) Dr Leung Pak-yin.



Hand Hygiene Pocket Leaflet for Staff

HAND HYGIENE
When and How

清潔衛生更安全
Clean Care is Safer Care
潔手保障醫療安全

WORLD ALLIANCE
FOR PATIENT SAFETY

How to handrub?

Apply a small amount of the product to a cupped hand, covering all surfaces.

1. Rub hands palm to palm.
2. Right palm over left dorsum with interlocked fingers.
3. Palm to palm with fingers interlocked.
4. Back of fingers to opposing palm with fingers interlocked.
5. Rotate right wrist and repeat with left wrist and right palm.
6. Rotate left wrist and repeat with right wrist and left palm.
7. Rub hands side to side.
8. Rub hands side to side with fingers interlocked.
9. Rub hands side to side with fingers interlocked.
10. Rub hands side to side with fingers interlocked.
11. Rub hands side to side with fingers interlocked.
12. Rub hands side to side with fingers interlocked.

How to handwash?

Wet hands with water.

1. Rub hands palm to palm.
2. Right palm over left dorsum with interlocked fingers.
3. Palm to palm with fingers interlocked.
4. Back of fingers to opposing palm with fingers interlocked.
5. Rotate right wrist and repeat with left wrist and right palm.
6. Rotate left wrist and repeat with right wrist and left palm.
7. Rub hands side to side.
8. Rub hands side to side with fingers interlocked.
9. Rub hands side to side with fingers interlocked.
10. Rub hands side to side with fingers interlocked.
11. Rub hands side to side with fingers interlocked.
12. Rub hands side to side with fingers interlocked.

Clean hands
are safer hands.
Are yours clean?

清潔嘅手才安全, 你雙手清潔嗎?



1 BEFORE TOUCHING THE PATIENT	WHEN? Clean your hands before touching a patient when approaching him/her EXAMPLES: shaking hands, helping a patient to move around, clinical examination
2 BEFORE CLEAN / ASEPTIC TASK	WHEN? Clean your hands immediately before any aseptic task EXAMPLES: oral/dental care, secretion aspiration, wound dressing, catheter insertion, preparation of food, medications
3 AFTER BODY FLUID EXPOSURE RISK	WHEN? Clean your hands immediately after an exposure risk to body fluids (and after glove removal) EXAMPLES: oral/dental care, secretion aspiration, drawing and manipulating blood, clearing up urine, faeces, handling waste
4 AFTER TOUCHING THE PATIENT	WHEN? Clean your hands after touching a patient and her/his immediate surroundings, when leaving the patient's side EXAMPLES: shaking hands, helping a patient to move around, clinical examination
5 AFTER CONTACT WITH PATIENT SURROUNDINGS	WHEN? Clean your hands after touching any object or furniture in the patient's immediate surroundings, when leaving - even if the patient has not been touched EXAMPLES: changing bed linen, perfusion speed adjustment

Rolled Out to 74 GOPC and 14 TCMs in 2009



- Kick-off ceremony on 15 April 2009
- Theme: Cleaner & Safer care

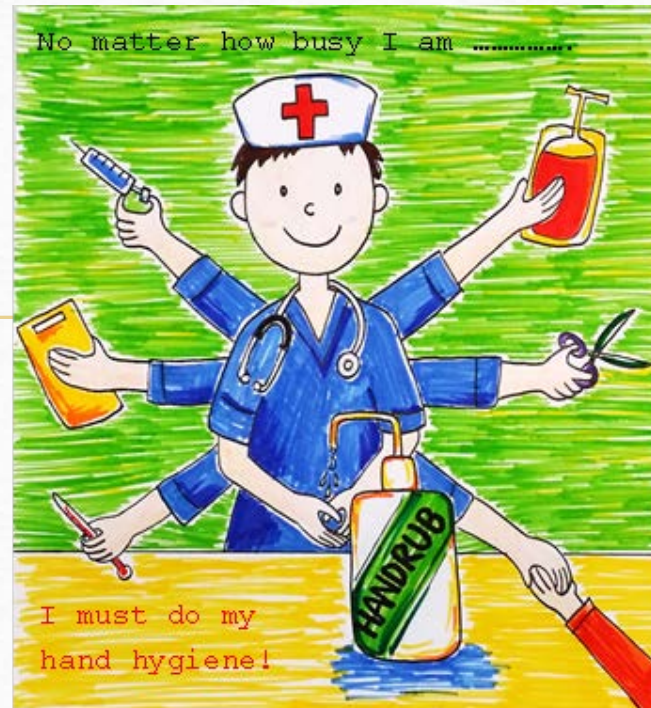


QMH as Foundational Global Hand Hygiene Expert in 2011



- QMH was awarded the “Hand Hygiene (HH) Excellence Award” by the WHO.
- The award recognized QMH’s outstanding commitment and dedication to improving HH standards in the Asia-Pacific region and the active participation as a pilot site for the testing of the “WHO Guidelines on HH in Health Care”.

Promotion Strategies



Challenges

- Keep hand hygiene a top priority for patient safety
- Keep staff accountable
- Keep staff awareness
- Overcome campaign fatigue
- Creative and innovative
- Limited budget for promotion and marketing

Lead Person in HA: Chief Infection Control Officer

Leading role in hand hygiene campaign in collaboration with the Centre for Health Protection and Hospital Infection Control Teams



Dr. SETO Wing Hong

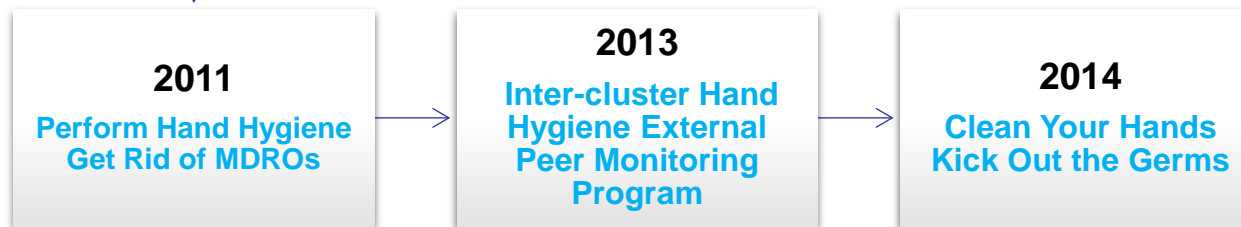


Dr. TSANG Ngai Chong, Dominic



Dr. LAI Wai Man, Raymond
(CICO at present)

Corporate Themes



Cluster/ Hospital Initiatives

- Hand hygiene awareness day
- Hand hygiene best performance awards (internal and external)
- Hand hygiene slogan competition
- Poster and videos
- Game booths



Hand Hygiene Awareness Day



TMH - Smartphone disinfection station
& a pop-up message "Time to wash
your hands"



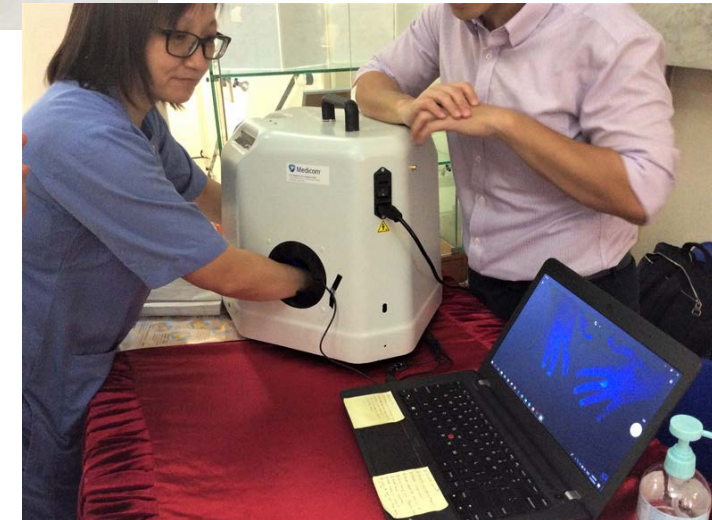
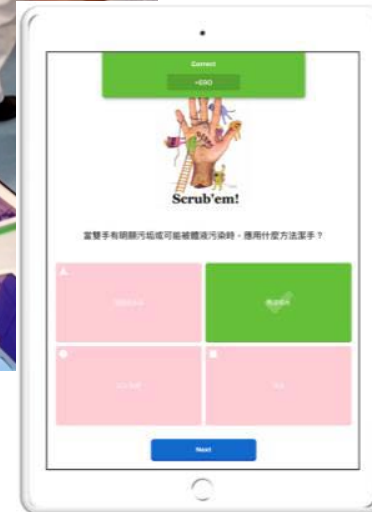
GH



HHH



KCH - Hand hygiene quiz game in
Kahoot



HKEC

Promotional Activities



HKEC – Funny videos



CMC – Training to nursing students



Souvenirs



QEH - Sanitizing wipes



CHP - Magnets



CHP - Retractable badge holder



CHP & HKEC - Name Tag Holders



CHP - Pen pocket



CHP - Nail clipper set



CHP - Highlighter



HA – ABHR limited edition



CHP - A4 folder



CHP – Note pad



CHP - Gel highlight pen

Visual Reminders



Stickers



Floor labels



Posters



Corporate Banners

2010



2017



2018



2014





NTEC - Desk calendars



HKEC - Poster



KCC - 3D Backdrop



CHP-HA Sticker



QEH - Floor stickers



KWC - Poster



CHP-HA Banner

QEH - Role Models



“Have you performed hand hygiene? We have!” - Dr K Y Lai, ex-COS of ICU



Multidisciplinary team (medical, allied health & supporting)

Recognition of Hand Hygiene Program

PWH – Asia Pacific Hand Hygiene Excellence Award (2013/14)

The award recognized and honour the hospital achievements and evaluate the program for creativity, innovation and local leadership against set criteria.



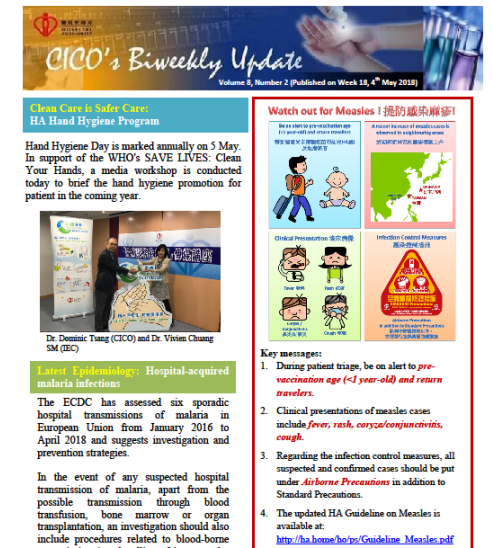
CICO's Biweekly Update

- Infection control newsletters for HA staff since 29 March 2011 (196 issues were released)
- Infection control platform for information update and good practice sharing



Photo 1: North Lantau Hospital

Photo 2: Princess Margaret Hospital



od product safety against Zika virus and precautionary measure of provision and blood and blood products for high-implanted since 12 July 2017, in nt deferral policy for blood donation.

lusion of World Health Organization virus infection during pregnancy is a

Summary on the trend of Multiple-drug Resistant Organisms (MDROs) in HA Hospitals

Clean Care is Safer Care: HA Hand Hygiene Program

Hand Hygiene Day is marked annually on 5 May. In support of the WHO's SAVE LIVES: Clean Your Hands, a media workshop is conducted today to brief the hand hygiene promotion for patient in the coming year.



Dr. Dominic Tsang (CICO) and Dr. Violet Cheung (IC)

Latest Epidemiology: Hospital-acquired malaria infections

The ECDC has assessed six sporadic hospital transmissions of malaria in European Union from January 2016 to April 2018 and suggests investigation and prevention strategies.

In the event of any suspected hospital transmission of malaria, apart from the possible transmission through blood transfusion, bone marrow or organ transplantation, an investigation should also include procedures related to blood-borne transmission (e.g. handling of intravascular catheters, capillary blood sampling, use of glucometers, use of multi-dose drug vials, saline and heparin flushes, and use of gloves).

Of note, Standard Precautions should be strictly implemented, including safe injection practices that prevent the sharing of patient care devices or equipment which may be contaminated by patient blood. For details, please visit the [ECDC](#).



Key messages:

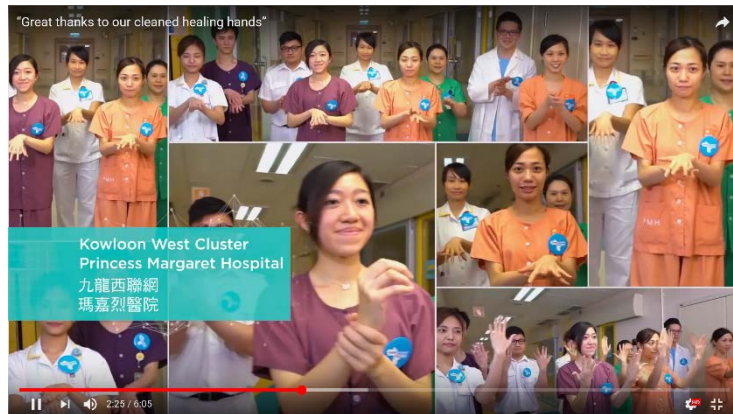
1. During patient triage, be on alert to **pre-vaccination age (<1 year-old)** and **return travelers**.
2. Clinical presentations of measles cases include **fever, rash, coryza/conjunctivitis, cough**.
3. Regarding the infection control measures, all suspected and confirmed cases should be put under **Airborne Precautions** in addition to Standard Precautions.
4. The updated HA Guideline on Measles is available at: http://ha.hk/hc/ha/ha/Guideline_Measles.pdf

ICT to Note

The HA-wide Prevalence Survey on Catheter associated Urinary Tract Infection (CA-UTI) will be conducted within 4th June to 15th June 2018. A briefing session will be arranged on 15th May 2018, 2-30pm at Lecture Theatre of Centre for Health Protection (CHP).

CHP-HA-Private Video Promotion in 2018

“Great thanks to our cleaned healing hands”



https://www.youtube.com/watch?v=L8TO_FIBTSk&feature=youtu.be

Hand Hygiene Compliance Monitoring



Challenges

- Direct observation – Hawthorne effect is unavoidable
- ABHR consumption – indirect, may not truly reflect staff performance, and stability of opened ABHR
- Observers – ? refresh training, and inter-rater reliability
- Extensiveness – cover all clinical areas including GOPCs, and healthcare staff groups e.g. do you know the performance of podiatrists?

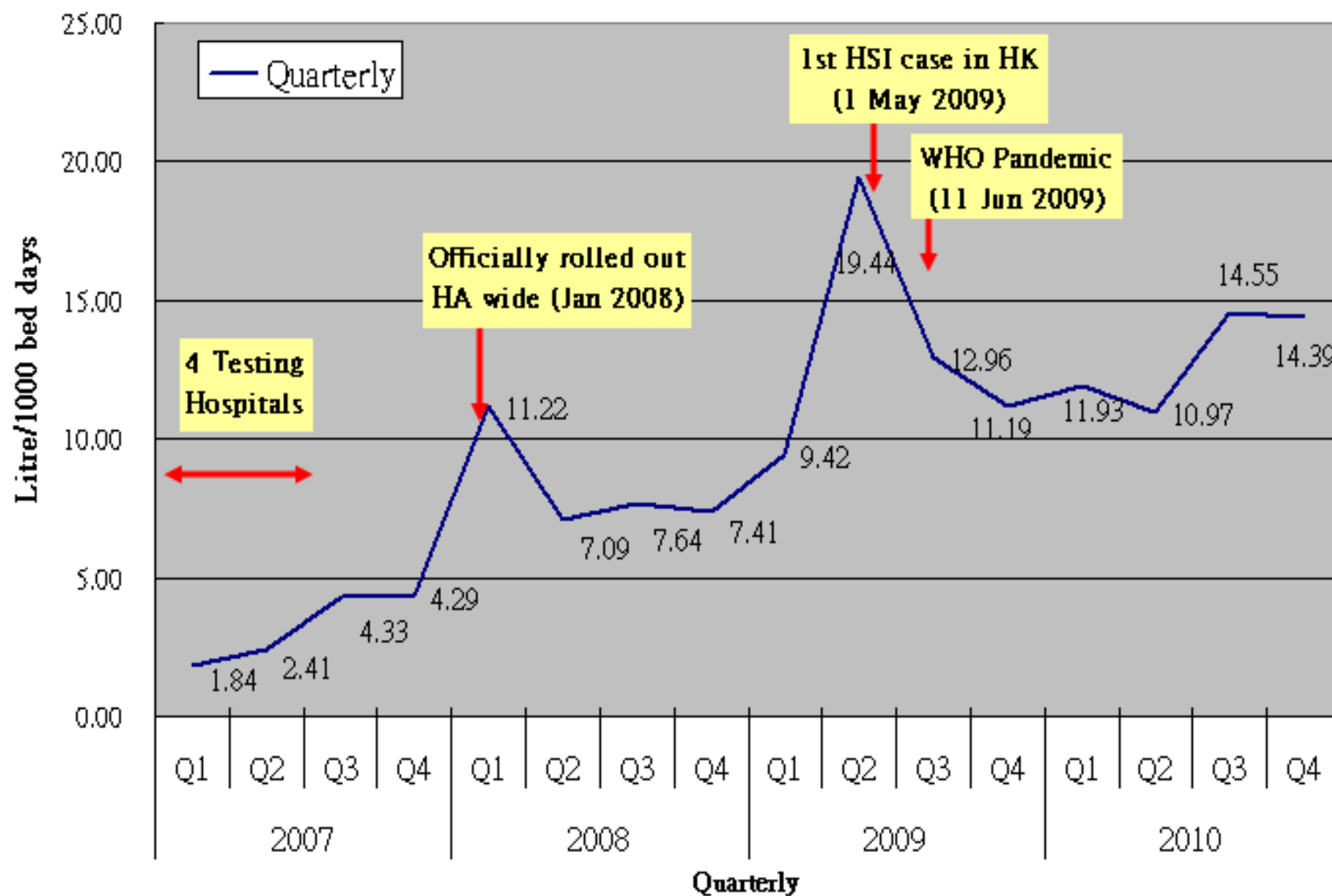
WHO's Global Survey Hand Hygiene Moment 1

April 2010

- 37 hospitals
- 1-2 departments
- 50 opportunities for each department

Staff category	Total number		% Compliance
	Complied	Observed	
Nurse	959	1427	67.2%
Doctor	229	433	52.9%
HCA & supporting	571	836	68.3%
Others	265	432	61.3%
Total	2024	3128	64.7%

Quarterly AHR Consumption in 2007-2010



QMH - Introduction of an Electronic Monitoring System for Monitoring Hand Hygiene Compliance in 2010

- A pilot study was conducted in a 6-bed neurosurgical intensive care unit.
- A continuous and automated monitoring system, MedSense (figure 1), was used collect the hand hygiene performance of individual staff at any given time without interruption of staff workflows.
- Healthcare workers were required to wear an identity badge which detected hand hygiene opportunities and compliances with Moments 1 and 4.

Reference: Cheng VC, Tai JW, Ho SK, et al. Introduction of an electronic monitoring system for monitoring compliance with Moments 1 and 4 of the WHO “My 5 Moments for Hand Hygiene” methodology. BMC Infect Dis 2011; 11 :151.

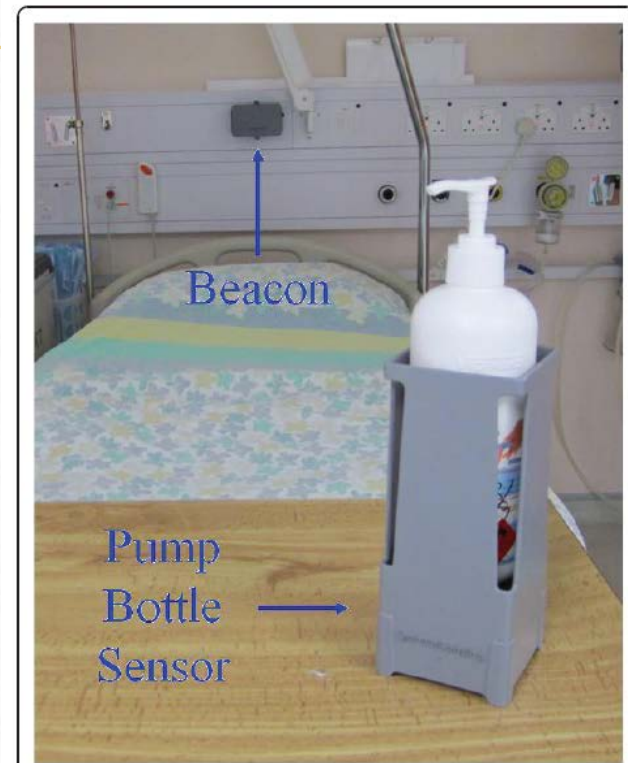
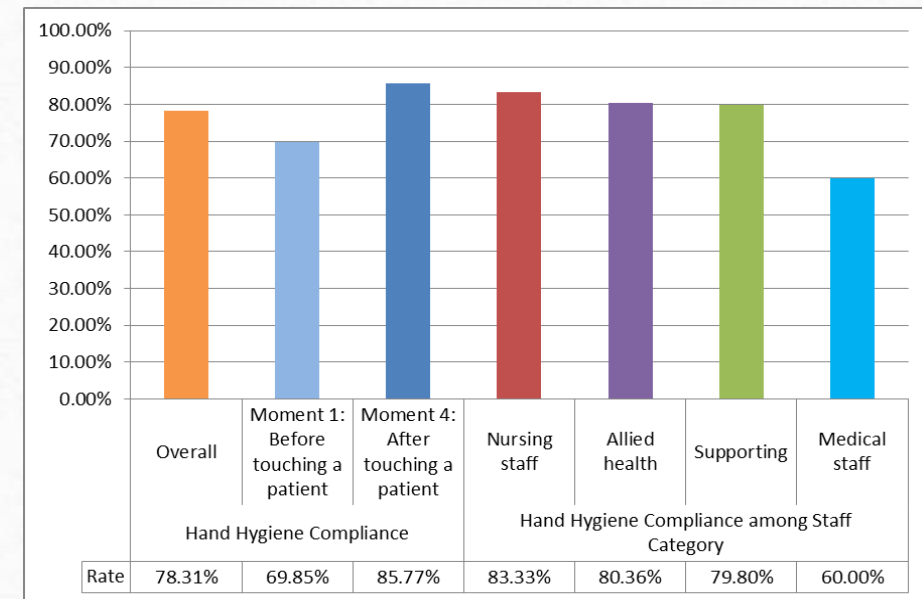


Figure 1 MedSense devices including beacon and pump bottle sensor at the bedside.

Inter-cluster Hand Hygiene External Peer Monitoring Program in 2013 & 2014

- Hand hygiene observations across 33 hospitals
- Involved MED, SUR & ORT
- Focused on Moment 1 (before touching a patient) and Moment 4 (after touching a patient)
- Each participating ward was directly observed for 30 minutes
- Overall compliance: **77.1%** (5469/7089)

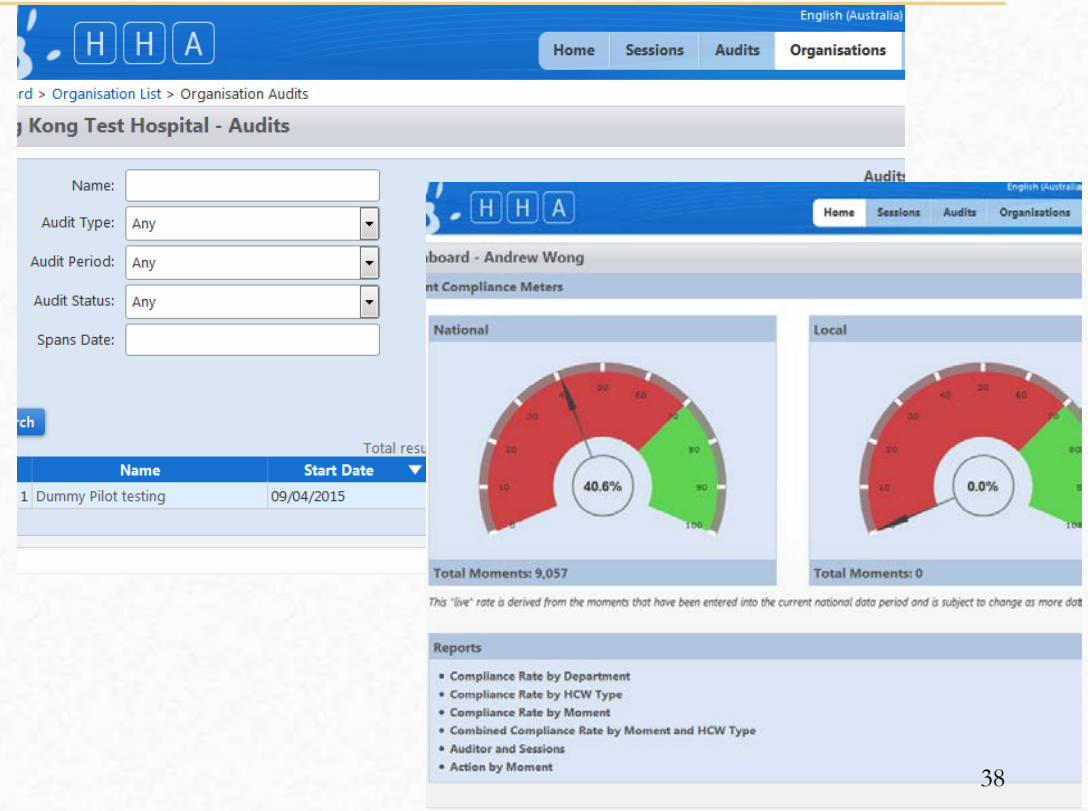


Results of HA inter-cluster hospital hand hygiene audit
- Group 1 Hospital in 2013

Pilot Use of the Hand Hygiene Compliance Application (HHCApp) in 2016 **Paperless**

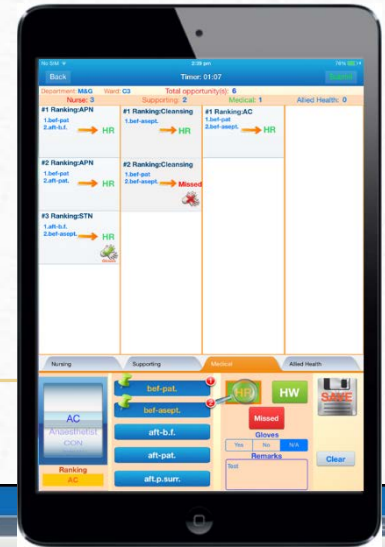
- In 2015, HA collaborated with CHP in launching a HH pilot program using the HHCApp software as an auditing tool to facilitate data input and analysis.
- The pilot program started in 2006 and last for one year.
- 3 hospitals participated in the pilot program (PYNEH, QEH & TMH)
- Use iPad and HHCApp for hand hygiene monitoring

<http://hhcapp.hha.org.au/mobile/>

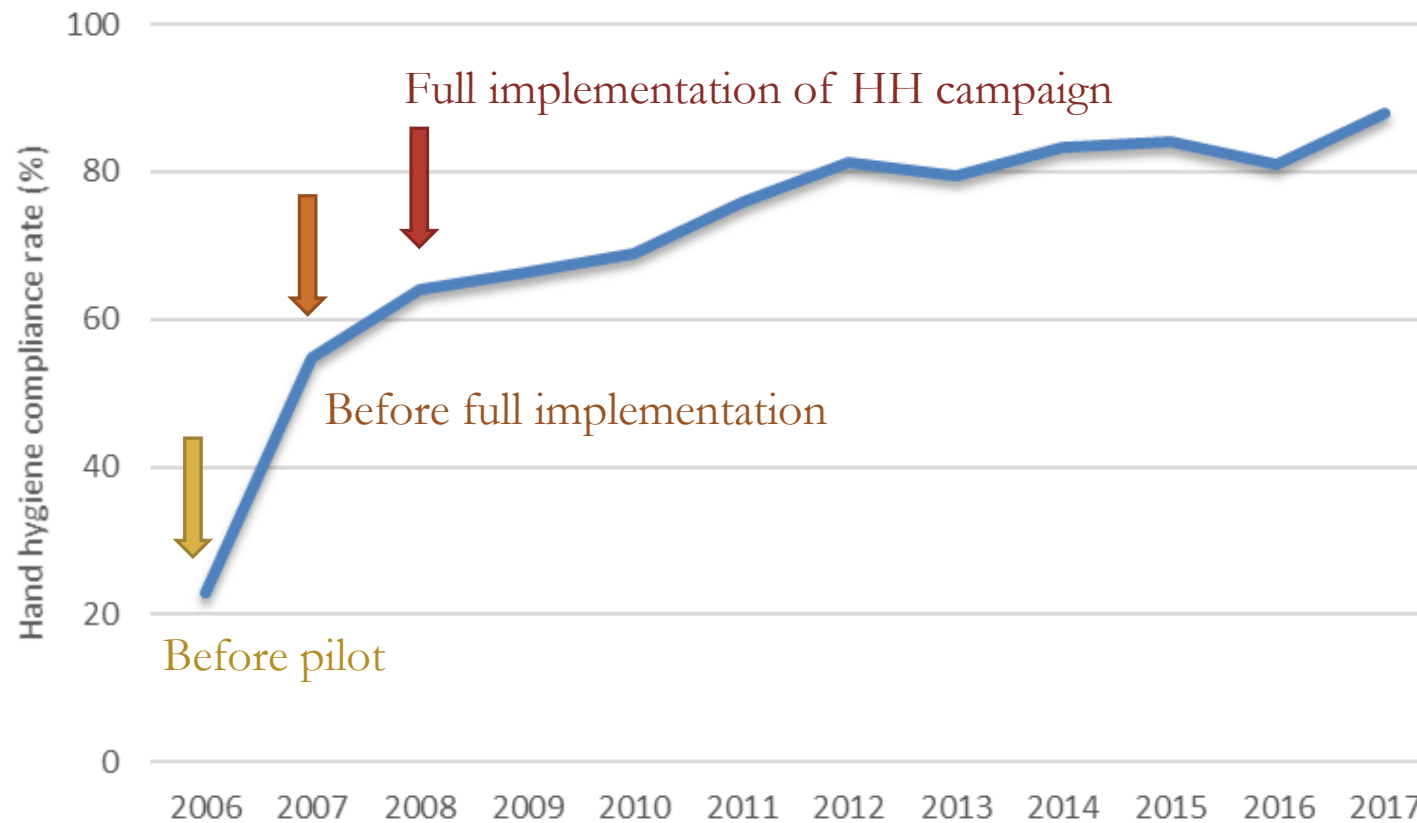


Roll out Electronic Infection Control (eIC) in HA hospitals by 2018

- System was designed by KWC IT team
- Roll out to all hospitals in HA
- Mobile device to improve audit efficiency
- Dashboard to facilitate concurrent feedback
- Reduce transcription errors
- Standard audit forms for corporate wide reporting
- 1st phase: hand hygiene observation
- Future plans:
 - Isolation precautions audit
 - Peripheral catheter care audit
 - Environmental cleanliness assessment



Overall Hand Hygiene Compliance Rates in HA



Patient Participation in Hand Hygiene

HA - Engage Patients in Hand Hygiene in 2013

- The role of patient hand hygiene in controlling VRE outbreak was evident.
- Due to the upsurge of VRE
- Efforts to facilitate patients performing hand hygiene to prevent oral-fecal route transmission e.g. **directly observed hand rub round before meals**



QEH - Patients as Hand Hygiene “Partners in Care”

- A pilot program was conducted in two ORT wards in 2017.
- Bedside education and pamphlets of hand hygiene were provided to 132 patients.
- 95% of patients participated the post-discharge patient perception and satisfaction survey.
- 80% of them reported increased frequency of hand hygiene after education.
- Among 40 healthcare workers being surveyed, 95% of them supported the promotion of patient engagement in hand hygiene.



Poster to illustrate Patient's 5 Moments for Hand Hygiene



Video broadcast to demonstrate the hand hygiene technique

Patient Empowerment in Hand Hygiene



WHO - Patient Empowerment & Healthcare

- WHO defines patient empowerment as a process in which patients understand their role, are given the knowledge and skills by their health-care provider to perform a task in an environment that recognizes community and cultural differences and encourages patient participation.

<https://www.ncbi.nlm.nih.gov/books/NBK144022/>

- The process of patient empowerment:
 1. Understanding by the patient of his/her role;
 2. Acquisition by patients of sufficient knowledge to be able to engage with their healthcare provider;
 3. Patient skills;
 4. The presence of a facilitating environment.

Challenges

- Patients' knowledge in hand hygiene
- Embarrassment
- Trust relationship between HCWs and patients
- Accept or support
- Hospital safety climate

TWH & GH – “Have you cleaned your hands?” in 2016

A 4-inch printed visual aid with “Did You Clean Your Hands?” for patients who were too shy to ask verbally.

- Patient empowerment programs in hand hygiene were implemented in 2 extended-care hospitals (3 MED and 1 SUR wards).
- Of the 223 patients approached by the ICNs, 167 patients (74.9%) participated in the program.
- 111 (66.5%) patients claimed they were comfortable with asking HCWs to clean their hands.
- 75 out of 167 (44.9%) actually reminded HCWs to perform hand hygiene.
- 22.7% verbally reminded HCWs clean their hands before touching them, whereas 78.7% used the cardboard hand to remind HCWs.
- A significant increase in volume of ABHR consumption was observed during the intervention period compared with baseline.



PWH – Patient Empowerment Program in 2016

Roll out from a pilot to 7 hospitals in NTEC

Implementation of a pilot program in two wards (SUR & ORT)

- Engaged patient group representatives;
- Conducted staff and patient surveys;
- Endorsed and supported by the hospital management;
- Promotional materials: easy roll stands, posters, patient admission information sheets, e-display system;
- Kick-off ceremony
- After implementation, 71% of staff agreed that the program did not increase conflict between patients and HCWs, compared with 56% before implementation. While, 97% of patients supported the reminding of HCWs to perform hand hygiene, compared with 93% before implementation.



Participation from patient groups



Next move.....



- From “engagement” to “**empowerment**”
- Empowerment of patients in hand hygiene will be advocated in the form of **mutual reminding**.
- Promoting hand hygiene as one of HK strategic interventions under the Antimicrobial Resistance (AMR) program 2017-2022.
 - eIC platform for hand hygiene audit by 2018/19 and half-year report



Key Components

1. Conducting Patient & Staff Survey

- To evaluate patients and staff's perceptions of hand hygiene and mutual reminding

2. Promoting Patient Hand Hygiene

- To promote patients' moments for HH through Educational Video at HA Channel

3. Advocating Mutual Reminding

- To encourage partnerships between staff and patients to proactively remind each other in the pursuit of improving HH compliance

Implementation Plan



Phase I
Kick-off
2Q 2018

- Patient education (poster)
- Media briefing



Phase II
Pre-survey
4Q 2018

- Patient & staff survey (Pre)

Phase III
Intervention
2Q 2019

Patient education video
Mutual reminding

Phase IV
Post-survey
2Q 2020

Patient & staff survey (post)



病人手衛生 時刻要潔手

Patient's Moments for Hand Hygiene



潔手小貼士 Tips for Hand Hygiene



Patient Hand Hygiene

Patient empowerment to remind healthcare workers to perform hand hygiene is an ultimate goal to be built based on our local culture and needs, and which will be developed successfully when the patients have adequate knowledge, attitude and practices about hand hygiene.

Patient's Moment for Hand Hygiene

- Before drinking, eating or taking medicines
- After using the toilet
- After coughing, sneezing, or touching nose or mouth
- When entering or leaving the ward / hospital

Promoting Patient Hand Hygiene



Media Briefing

健康解碼 逢周六見報
醫院管理局總感染控制辦公室

記住洗手洗手洗手

日常生活中，無聲無色的細菌佈滿環境和物件表面。若觸摸後，雙手沒有妥善清潔，除了有機會成為傳染病「幕後黑手」，還有機會導致自身感染。在醫院的環境中，接觸到病菌或抗藥性細菌的風險較社區為高，因此注意手部衛生是最基本預防感染及減少抗藥性細菌傳播的最佳方法。

全港公立醫院正在推行「手」護健康運動，鼓勵病人注意手部衛生，時刻潔手。潔手是預防交叉感染的重要一環，能有效切斷感染鏈，大大減低手上病菌的數量和傳播機會。

對付病菌不容鬆懈，要避免「病從口入」，在飲食或服藥前要先潔手。當咳嗽、打噴嚏或觸摸口鼻後，須要潔手，而如廁之後，建議使用視液清洗雙手，避免將病菌傳播。

至於病人或其家屬，若前往醫院探病，進入或離開病房或醫院時都需要潔手。現時公立醫院已設置潔手設施方便市民使用。

(「手」護健康系列之一)

Sharing in newspaper

HA Study on Perception of Patient Empowerment in Improving Hand Hygiene among Healthcare Workers and In-patients

Objectives:

- To evaluate the perception of patients and HCWs' in public hospitals on patient empowerment;
- To evaluate the current HH practice of HCWs in public hospitals;
- To evaluate patients' and HCWs' acceptance of patient reminder in any form;
- To identify the main reasons for not supporting patient empowerment in HH among patients and HCWs.

Methodology:

- Study design: a cross-sectional pre- and post-implementation survey
- Sampling: convenience sampling
- Method: two questionnaires for HCWs and in-patients
- No. of participating hospitals: 12 (NTEC was excluded)

Sample Size

Cluster	Hospital	Sample size required for staff survey ¹					Sample size required for patient survey ²		
		Doctor	Nurse	Allied Health	Supporting staff	Total	Medical stream	Surgical stream	Total
NTWC	POH	5	19	6	13	43	34	25	59
	TMH	19	65	20	41	145	92	56	148
KCC	KWH	11	34	10	16	71	43	40	83
	QEH	21	68	22	41	152	65	61	126
KEC	UCH	16	54	15	29	114	56	42	98
	TKO	7	23	7	13	50	35	23	58
KWC	PMH	15	50	16	26	107	77	36	113
	YCH	8	23	7	12	50	31	30	61
	CMC	8	28	8	16	60	47	30	77
HKEC	PYNEH	16	56	16	25	113	59	40	99
	RH	3	16	5	8	32	34	12	46
HKWC	QMH	19	65	21	28	133	42	69	111
Total		148	501	153	268	1070	615	464	1079

¹The sample size required for HCWs in each hospital was calculated based on GVP data.

²The sample size required for inpatients in each hospital was calculated based on the hospital beds by specialty from the HA Statistical Report (2016-2017).

Staff survey



- Questionnaire: 6 main questions to evaluate the HCWs' HH practice, perceptions, acceptance and feelings towards of patient empowerment in HH.
- Google form (QR code)
- Target group: doctors, nurses, allied health professional and supporting staff.

Questionnaire on healthcare workers' (HCWs) perception of patient empowerment in improving hand hygiene 2018

病人參與手部衛生計劃: 職員意見調查 2018

Patient empowerment in hand hygiene refers to the involvement of patients in fostering of hand hygiene best practices by both patients and healthcare workers in healthcare settings. For this particular survey, we mainly focus on patient reminding HCWs to perform hand hygiene before touching them. 病人參與手部衛生計劃是指病人的參與能促進病人及醫護人員在醫療環境中保持手部衛生最佳實務。本調查旨在了解病人提示醫護人員在接觸他們之前進行手部衛生的意見。

Hospital 醫院: _____ Dept. 部門: _____ Date 日期: _____
Gender 性別: ☐ Male 男 ☐ Female 女
Age 年齡: ☐ <30 ☐ 30-39 ☐ 40-49 ☐ 50-59 ☐ ≥ 60
Profession ☐ Doctor 醫生 ☐ Nurse 護士 ☐ Allied Health 專職醫療
職系: ☐ Healthcare assistant / Supporting staff (e.g. phlebotomist) 病人助理/支援職系 (如抽血員)
Year(s) of practice in healthcare settings 醫護工作經驗(年):
☐ 0-3 ☐ 4-6 ☐ 7-9 ☐ 10-12 ☐ 13-15 ☐ ≥ 16

- 1 Do you have any patient contact in your daily work?
日常工作中, 你是否要接觸病人?
☐ Yes 是 ☐ No 否 → End of Questionnaire 全卷完
- 2 How do you rate your hand hygiene compliance in accordance to "My 5 moments" recommended by World Health Organization (WHO)?
你認為自己有多少時候能依從世界衛生組織提倡的「潔手 5 時刻」潔手?
0% 20% 40% 60% 80% 100%
☐ ☐ ☐ ☐ ☐ ☐
- 3 Have you ever been reminded by patient(s) to clean your hand before patient care?
過往有沒有病人在接受醫護程序前提示你要潔手?
☐ Yes 有 ☐ No 沒有
- 4 Do you think that patients reminding HCWs can improve hand hygiene compliance of HCWs?
你認為病人提示潔手會否提高醫護人員手部衛生依從率?
☐ Yes 會 ☐ No 不會
- 5 Do you think that patients reminding HCWs to perform HH can reduce hospital-acquired infections?
你認為病人提示潔手會否減少院內感染?
☐ Yes 會 ☐ No 不會
- 6 Do you accept if a patient reminds you to perform hand hygiene before touching him/her?
你是否接受病人提示你在接觸他/她之前潔手?
☐ Yes 接受 → Continue 續:
Will you encourage your patient to give reminder? 你會否鼓勵你的病人作出提示?
☐ Yes 會 ☐ No, please specify 不會, 請註明原因: _____
☐ No, reason (Can choose more than one) 不接受, 原因 (可選多於一項)
☐ Not part of patient's role 這不是病人責任範圍
☐ Time consuming to respond 不想花費時間回應病人此類提問
☐ Embarrassing 感到尷尬
☐ Worsening relationship with patients 導致與病人關係變差
☐ Professional image being questioned 專業形象受到質疑
☐ Others, please specify 其他, 請註明: _____
- 7 If patients are invited to remind the HCWs to perform hand hygiene, which method(s) would you prefer?
(Can choose more than one)
如果邀請病人提示醫護人員潔手, 你認為哪種方式比較好? (可選多於一項)

Patient survey

- Questionnaire: 8 main questions to evaluate the patients' HH practice, knowledge, perceptions, **acceptance and feelings towards of patient empowerment in HH.**
- Face-to-face interview** by IDCTC colleagues
- Target group: patients who are admitted to the selected medical and surgical departments during the time of survey



Souvenir – pill box

Questionnaire on patients' perception of patient empowerment in improving hand hygiene 2018

病人參與手部衛生計劃: 病人意見調查 2018

Patient empowerment in hand hygiene refers to the involvement of patients in fostering of hand hygiene best practices by both patients and healthcare workers in healthcare settings. For this particular survey, we mainly focus on patient reminding HCWs to perform hand hygiene before touching them. 病人參與手部衛生計劃是讓病人的參與能促進病人及醫護人員在醫療環境中所持手部衛生最佳實務。本調查旨在了解病人提示醫護人員在接觸他們之前進行手部衛生的意見。

Hospital 醫院: _____ Dept. 部門: _____ Date 日期: _____ Date of Admission 入院日期: _____

Gender 性別: ☐ Male 男 ☐ Female 女

Age 年齡: ☐ <30 ☐ 30 – 39 ☐ 40 – 49 ☐ 50 – 59 ☐ ≥ 60

Education level 教育程度: ☐ Primary or below 小學或以下
☐ Secondary 中學
☐ Tertiary or above 大專或以上

1 Do you think the hand hygiene facilities are enough in your ward?
 你認為病房內的潔手設施足夠嗎?
☐ Enough 足夠 ☐ Not enough (Please give your feedback)
 不足夠 (請提供意見) _____

2 Do you know when should perform hand hygiene?
 你知道甚麼時候需要潔手嗎?

i. Before drinking, eating or taking medication 飲食或服藥前	<input type="checkbox"/> Yes 需要	<input type="checkbox"/> No 不需要
ii. After using the toilet 如廁後	<input type="checkbox"/> Yes 需要	<input type="checkbox"/> No 不需要
iii. After coughing, sneezing or touching nose or mouth 咳嗽、打噴嚏或觸摸口鼻後	<input type="checkbox"/> Yes 需要	<input type="checkbox"/> No 不需要
iv. When entering or leaving the ward / hospital 進入或離開病房/醫院時	<input type="checkbox"/> Yes 需要	<input type="checkbox"/> No 不需要

3 Did you perform hand hygiene in the following situations?
 以下情況你會否潔手嗎?

	Always 經常	Occasionally 間中	Rare 極少	Never 從不	N/A 不適用
i. Before drinking, eating or taking medication 飲食或服藥前	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. After using the toilet 如廁後	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. After coughing, sneezing, or touching nose or mouth 咳嗽、打噴嚏後或觸摸口鼻後	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Version 1 Date: 25 Jul 2018

Initiatives of Hand Hygiene Promotion in HA



Hand Hygiene Kick-off Ceremony in 2008



Alcohol handrub at point of care and entrance in 2008



Patient's hand hygiene to prevent oral-fecal route transmission in 2013



2018

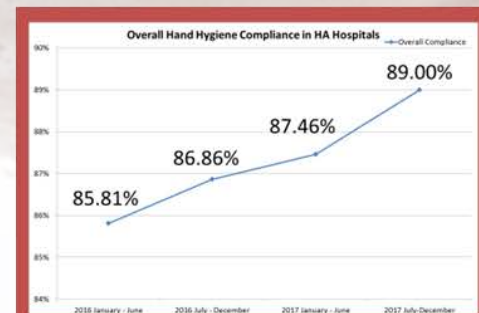
Patient Empowerment Program on Hand Hygiene

Healthcare workers

2008

 A form titled 'World Health Organization Observation Form' with fields for Facility, Service, Ward, Department, Country, Period Number, Date, Session Number, Observer, Page No., Session duration, and City. It also includes a table for recording observations.

HH audit piloted in QMH, CMC, YCH, TMH in 2006



HH audit roll-out in all hospitals in 2008



External Peer Audit to drive performance improvement in 2013 & 2014

Summary

- The WHO “Five Moments for Hand Hygiene” campaign has been fully implemented in HA hospitals since 2008.
- The overall HH rate improved from 55% in 2007 (pilot) to 89% in 2017 Q3Q4.
- Patient empowerment in hand hygiene has been studied in PWH, TWH & RH with positive feedback among patients and healthcare workers.
- Empowerment of patients in hand hygiene will be advocated in the form of mutual reminding.

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