

Guide to Implementing Patient Safety Alert: Clean Hands Save Lives

This toolkit is a guide to assist staff in all healthcare settings with implementation of key aspects of the Patient Safety Alert 'Clean Hands Save Lives' issued to the NHS by the National Patient Safety Agency (NPSA) on 2 September 2008. The Alert is an updated version of Alert 04 which was first issued in September 2004.

Introduction

As set out in the Alert, hand hygiene by healthcare staff plays a key role in preventing the spread of infection. Healthcare staff need to have access to the correct hand cleaning products at the point of patient care as this represents the time and place at which there is the highest likelihood of transmission of infection between healthcare staff and the patient.

Hands can be cleaned with soap and water or alcohol handrub, depending on the situation, however, hand basins are not always conveniently located and are often not close to where patient care is provided. Alcohol handrub can be positioned right at the point of care, enabling healthcare staff to clean their hands the right way at the right time.

This guide provides you with seven steps to help you implement the NPSA's Alert and to maintain best practice in hand hygiene.

Action for the NHS by 31 March 2009

All providers of NHS care in England and Wales will:

- Undertake an audit to review current risk management strategies including:
 - The placement, accessibility and suitability of all hand hygiene products, including handrub dispensers and hand basins, to ensure healthcare staff are able to undertake hand hygiene at the point of care
 - All hand hygiene policies, processes and programmes to ensure they prioritise hand hygiene at the point of care
- Develop and implement an action plan to address the issues identified in the audit

Sources of further information and reference

- WHO Guidelines on Hand Hygiene in Health Care (Advanced Draft)
www.who.int/gpsc/tools/en/
- NPSA Patient Safety Alert: Clean hands save lives (available at www.npsa.nhs.uk)
- NHS Estates Alert NHSE (2005) 07 (available from the Department of Health website)
- WHO Five Moments for Hand Hygiene diagrams (available at www.npsa.nhs.uk/cleanyourhands)

7 Steps for Implementation

The following steps are a general guide – based on activities to be achieved by 31 March 2009 in line with the guidance given in the Alert. You may decide to undertake activities in different phases, condense the recommended actions into a shorter timeframe or undertake steps in parallel.

Step 1: September 2008

The following tasks will ensure a systematic approach to addressing all actions within the Alert:

- i. **Identify a lead who will take responsibility for assuring your organisation that all necessary actions have been taken**
- ii. **Set up a working group or convene a meeting of an existing infection control/hand hygiene improvement group**
- iii. **Compile an inventory of hand hygiene dispensers and handwash basins and their locations in your organisation. (NB: these may be located on site, in a vehicle, carried individually etc.)**
- iv. **Form a point of care assessment team to undertake the audit:** The team should include representatives from the following areas in your organisation:
 - Infection prevention and control (including link practitioners where available)
 - Occupational health and safety
 - Risk management
 - Housekeeping
 - Facilities and estates
 - Procurement
 - Frontline staffThe team should consider the following:
 - Safety
 - Ergonomics
 - Common workflow patterns
 - Common injuries
 - Fire hazard and ignition concerns
 - Storage
 - Potential injury or ingestion
 - Product leakage/spillage
 - Maintenance including monitoring, replenishing and cleaning of dispensers
 - Procurement
 - Installation
 - Product interactions with personal protective equipment
- v. **Consider the involvement of communications staff, where available, in spreading/highlighting the content of the Alert and sensitising healthcare workers to the actions being addressed.**

vi. Use relevant information to guide the audit:

- NHS Estates Alert NHSE (2005) 07
- WHO Five Moments for Hand Hygiene

vii. Conduct a local risk assessment related to placement of alcohol handrub in patient care areas:

Use of personal dispensers is best practice when caring for children, mental health patients or other patients/clients for whom permanently-sited dispensers may pose a risk. Consider:

- Patient population
- Dispensers protruding in a way that could cause injuries
- Product leaking on surfaces causing falls or other injuries

Notes:

Step 2: October 2008

It is important for your working group to review how hand hygiene products are purchased within your organisation.

i. Review how hand hygiene products are purchased by considering the following questions:

- Is your trust part of a joint purchasing hub within your SHA region? Do you have a central purchasing unit within your trust? Is alcohol handrub purchased by the unit/department?
- Is your infection control lead involved in the purchasing?
- Do you operate on a just-in-time approach to purchasing? If not, what is the usual lag time between order placement, delivery of products and use?
- How regularly are orders for alcohol handrub placed?
- How is use of handrub monitored in your organisation?
- What processes and procedures do you have in place for refilling dispensers at the point of care?
- Who is responsible for refilling dispensers at the point of care?
- If you use personal dispensers, who takes responsibility for monitoring use and ensuring adequacy of supply?

ii. Develop an action plan that enables you and your working group to conduct observations in relation to:

- Common workflow patterns of nurses, physicians, allied health professionals, porters and others providing direct patient care or working within patient care areas over a specific period of time.

- Identifying the places where 'hands-on' care is provided (for example, patient bedside, clinic areas, assessment and treatment rooms, diagnostic imagery, ambulances, patient's home).
- Glove dispenser placement
- Glove waste disposal
- The side of the bed (where relevant) where most hands on care is provided
- Access to product when the privacy curtain is pulled (in hospitals)
- The placement of alcohol handrub at or adjacent to hand wash basins (this should not be necessary if alcohol is available at the point of care)
- The likelihood of aesthetic damage to surfaces surrounding the dispenser

Notes:

Step 3: November 2008

i. Locations other than the point of care need to be identified:

- Decide what hand hygiene sites may be appropriate in addition to the point of care.
- All sites where hand hygiene products are located should take into account any risks (refer to point 6 in Alert)
- The overwhelming evidence on the transmission of healthcare associated infection (HCAI) is that healthcare workers hands are the main vehicle of transmission. However, promotion of wider public health messages in relation to hand hygiene in general and its role in stopping the spread of infection is an important consideration and should be part of an agreed plan within your local organisation. Communications teams should consider what messages are being conveyed if there is a strong focus on hand hygiene by visitors. It is important not to confuse issues and detract from a necessary strong focus on hand hygiene compliance by healthcare workers
- Work with your working group to identify locations other than the point of care
- Check that all non point of care locations are in line with your risk management policies and procedures and can be justified (see below)

ii. Risk Management: Managing risk is an important component of implementing the Alert.

You need to:

- Develop a risk register (your organisation will already have one in place)
- Agree on the monitoring processes for the Alert so that they are aligned with existing procedures and your organisation's risk management
- Ensure the specific risks highlighted in the Alert are included

Notes:

Step 4: December 2008

- i. **Verify placement recommendations of all hand care products (alcohol handrub, lotions and soap) will meet the Occupational Health and Safety recommendations of your organisation:**
- This should include:
 - Dispensers are easily visible
 - Within easy access with unobstructed use
 - Placed at optimal height
 - Easy to activate
 - Clearly labeled
 - A floor plan/diagram and supporting notes may be useful

Notes:

Step 5: January 2009

- i. **Work with your working group to identify responsibilities for:**
- Procurement
 - Where necessary:
 - Installation of new dispensers
 - Removal of dispensers
 - Repositioning of dispensers
 - Repositioning of hand basins
 - Ongoing functional maintenance of dispensers and hand basins
 - Ongoing cleaning of dispensers and hand basins and replacing empty products in a timely manner. It is critical that dispensers for both alcohol handrub and soap are maintained so that they are functional and have product in them (for example, could consider a system to indicate (flag) when the product requires replacement or a label identifying where to call for more product)

- Check that you have appropriate signage in place to highlight the locations of dispensers and hand basins (use the clean~~y~~**our**hands prompts and the WHO five moments)

Notes:

Step 6: February 2009

- i. **You need to test the suitability of all locations for both alcohol handrub and hand basins:**
 - Undertake a four-week trial period to test all sites
 - Work with your working group to put in place the most appropriate observation process for your organisation
 - Secure the dispensers once your frontline staff confirm the placement is correct for workflow patterns
 - Analyse and evaluate your findings and prepare a brief report for your working group identifying strengths and weaknesses. Include any recommendations
- ii. **Develop an ongoing verification system:**
 - Your organisation needs to have a system in place that is effective and can be easily maintained
 - Consider a method such as Occupational Health and Safety Audits to verify that the hand hygiene system is maintained and can support healthy hands while improving compliance

Notes:

Step 7: March 2009

- i. **Work with your working group to develop and write a formal report for your Chief Executive. The report should include:**
 - A summary of the 7 steps that you have undertaken to implement the Alert

- The commitment to best practice by your organisation taking into consideration all relevant existing policies and procedures
- A message that strengthens the point of care for staff
- A note to go on your organisation's website formally announcing your organisation's implementation of the Alert within the requisite timeframe

Notes:

And finally – good luck!

The clean**your**hands team are available to advise on any aspect of this implementation. If you have any questions about the Alert or this guide, please contact us at handhygiene@npsa.nhs.uk.