



HEALTH QUALITY & SAFETY
COMMISSION NEW ZEALAND
Kupu Taurangi Hauora o Aotearoa

Hand Hygiene New Zealand National Hand Hygiene Performance Report 1 July 2015 to 31 October 2015

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Background

The Hand Hygiene New Zealand (HHNZ) programme is one of two infection prevention and control (IPC) improvement initiatives delivered in partnership with the Health Quality & Safety Commission (the Commission). HHNZ is joined in the IPC portfolio by the Surgical Site Infection Improvement Programme. These quality improvement initiatives aim to reduce the harm and cost of healthcare associated infections within the New Zealand health and disability sector.

Auckland District Health Board has delivered the HHNZ programme on behalf of the Commission for the past four years (2011 to 2015). The programme is a multi-modal quality improvement programme that uses the WHO '5 moments for hand hygiene' framework to drive culture change and establish best hand hygiene practice as the expectation for every patient, every time.

This report presents the results for district health board and national hand hygiene performance for 30 June 2015 to 31 Oct 2015.

Achievements in this audit period

- National hand hygiene performance is maintained at or above 80% for the second consecutive audit period.
- Performance among many of the healthcare worker categories has continued to improve. Particularly pleasing is the continued improvement among medical practitioners and allied health care workers.
- Hand hygiene performance and glove use is improving in all three situations: before gloves are put on, when they are taken off, and at the appropriate times during patient care.
- 20 DHBs once again submitted 100% or more of the required hand hygiene data (moments) in this period.
- 15 DHBs improved on their last audit and 10 DHBs recorded their highest ever performance
- For the second consecutive audit period, 19 DHBs achieved at or above 75%. Of the 19, 12 DHBs achieved at 80% or greater (Swedish rounding).
- In this report we have also included for the first time a breakdown of results by service type and the trends over time. This shows encouraging improvements across clinical settings ranging from neonatal intensive care through to emergency departments (Figure 5).

Continuing to drive improvement

Frontline ownership (FLO) is a quality improvement method that encourages frontline staff to devise their own solutions to improve hand hygiene performance for their unique work area, which can result in more successful and sustainable hand hygiene improvements.

Many DHBs have started to use the FLO method to improve their hand hygiene performance. DHBs can find further information about FLO from a presentation delivered by Dr Michael Gardam at the HHNZ Quality Improvement Workshop in June 2014 within the guidance documents on the HHNZ website (www.handhygiene.org.nz) or by going [here](#). In addition, Dr Gardam led a workshop in Napier in September 2015 on tips and techniques for engaging healthcare teams in hand hygiene improvement which can be found here: [Frontline Ownership workshop with Dr Michael Gardam \(videos\)](#)

An ongoing priority to address is glove use and hand hygiene. While the performance rates for hand hygiene before, during, and after glove use are improving, we recommend DHBs use FLO to find new solutions and increase awareness in this area.

Over the last two audit periods, as part of its approach to spread improvement efforts to all wards and departments, Auckland DHB has submitted all audit data collected throughout the organisation (Options B/C pp.16-17 of the [HHNZ Auditing Manual](#)). The data has been collected by appropriately trained auditors, and is expected to help drive and sustain improvements more broadly throughout the DHB. This shift was a strategic decision by the ADHB IP & C Committee and is made possible by the large number of trained auditors at ADHB. (This approach has been shared with the regional networks and is also being implemented in some other DHBs).

National hand hygiene performance data: 1 July 2015 to 31 October 2015

The nationally aggregated hand hygiene performance rate for this measurement period is 81%. The national average performance by district health board (DHB) is also 81%. The average rate gives equal weighting to each DHB's result regardless of size whereas the aggregate rate is more affected by the performance of large DHBs. The fact that the two rates are the same indicates that performance rates between large and small DHBs are similar.

Correct Hand Hygiene Actions	Total Moments	Compliance Rate	Lower 95% Confidence Interval	Upper 95% Confidence Interval
37,280	46,081	80.9%	80.5%	81.3%

Table 1. National performance rates by DHB

District health board	1 July 2015 to 31 October 2015			Lower 95% confidence interval (%)	Upper 95% confidence interval (%)
	Correct moments	Total moments	% correct moments		
West Coast DHB	1828	2124	86%	85%	88%
Southern DHB	2192	2549	86%	85%	87%
Hawkes Bay DHB	1395	1627	86%	84%	87%
Waitemata DHB	3147	3701	85%	84%	86%
Whanganui DHB	692	816	85%	82%	87%
Northland DHB	1456	1751	83%	81%	85%
Bay of Plenty DHB	1758	2121	83%	81%	84%
Capital & Coast DHB	1987	2450	81%	80%	83%
Nelson-Marlborough DHB	678	837	81%	78%	84%
Wairarapa DHB	162	200	81%	75%	86%
Auckland DHB	10197	12626	81%	80%	81%
South Canterbury DHB	482	601	80%	77%	83%
Waikato DHB	1957	2490	79%	77%	80%
Hutt Valley DHB	1590	2045	78%	76%	80%
Canterbury DHB	2201	2831	78%	76%	79%
Counties Manukau DHB	2210	2866	77%	76%	79%
Taranaki DHB	311	404	77%	73%	81%
Lakes DHB	678	884	77%	74%	79%
Mid Central DHB	1729	2296	75%	74%	77%
Tairāwhiti DHB	630	862	73%	70%	76%

Table 2. Hand hygiene performance by geographic region

Name	Correct moments	Total moments	Compliance rate	Lower confidence interval	Upper confidence interval
Northern DHB network	17010	20944	81%	80.7%	81.7%
Midland DHB network	5334	6761	79%	77.9%	79.9%
Central DHB network	7555	9434	80%	79.2%	80.7%
South Island DHB network	7381	8942	83%	81.7%	83.3%

National performance rates by each of the World Health Organization (WHO) 5 moments for hand hygiene:

Table 3. Performance by moment: 30 Jun 2015 to 31 Oct 2015

Moment	Correct hand hygiene actions	Total moments	Performance rate	Lower 95% confidence interval	Upper 95% confidence interval
1 - Before Touching a Patient	10,927	14,074	77.6%	76.9%	78.3%
2 - Before Procedure	3,150	3,915	80.5%	79.2%	81.7%
3 - After a Procedure or Body Fluid Exposure Risk	4,490	5,281	85.0%	84.0%	86.0%
4 - After Touching a Patient	12,207	14,258	85.6%	85.0%	86.2%
5 - After Touching a Patient's Surroundings	6,506	8,553	76.1%	75.2%	77.0%

National performance rates by healthcare worker category

Table 4. Healthcare worker performance rates: 1 July 2015 to 31 October 2015

Name	Correct moments	Total moments	Performance rate	Lower 95% confidence interval	Upper 95% confidence interval
Phlebotomy Invasive Technician	1285	1515	85%	83%	87%
Nurse/Midwife	22249	26634	84%	83%	84%
Allied Health Care Worker	2028	2436	83%	82%	85%
Administrative and Clerical Staff	96	117	82%	74%	88%
Student Nurse/Midwife	1734	2169	80%	78%	82%
Student Allied Health	248	311	80%	75%	84%
Student Doctor	171	216	79%	73%	84%
Cleaner & Meal staff	545	702	78%	74%	81%
Health Care Assistant	2410	3141	77%	75%	78%
Medical Practitioner	5853	7664	76%	75%	77%
Other - Orderly & Not Categorized Elsewhere	393	630	62%	59%	66%
Anaesthetic tech	110	201	55%	48%	62%
Anaesthetist	123	249	49%	43%	56%
Surgeon in OR	35	96	37%	28%	46%

Glove use

Inappropriate use of non-sterile gloves remains a barrier to excellent hand hygiene practice.

However, it is good to see that during this measurement period the trend towards better glove use and hand hygiene performance has continued: before gloves are put on, when they are taken off, and at the appropriate times during patient care.

The latest glove statistics are:

- When gloves are taken OFF, the proportion of hand hygiene opportunities missed was 9.1% compared with 9.4% in the last audit.
- When gloves are put ON, the proportion of hand hygiene opportunities missed was 19.8% compared with 22.6% in the last audit. .
- Of all Moments where glove use is recorded, healthcare workers failed to complete hand hygiene 19.2% of the time, compared to 20.8% in the last audit.

Figure 1. Trends in national aggregate and average hand hygiene performance: October 2012 to October 2015

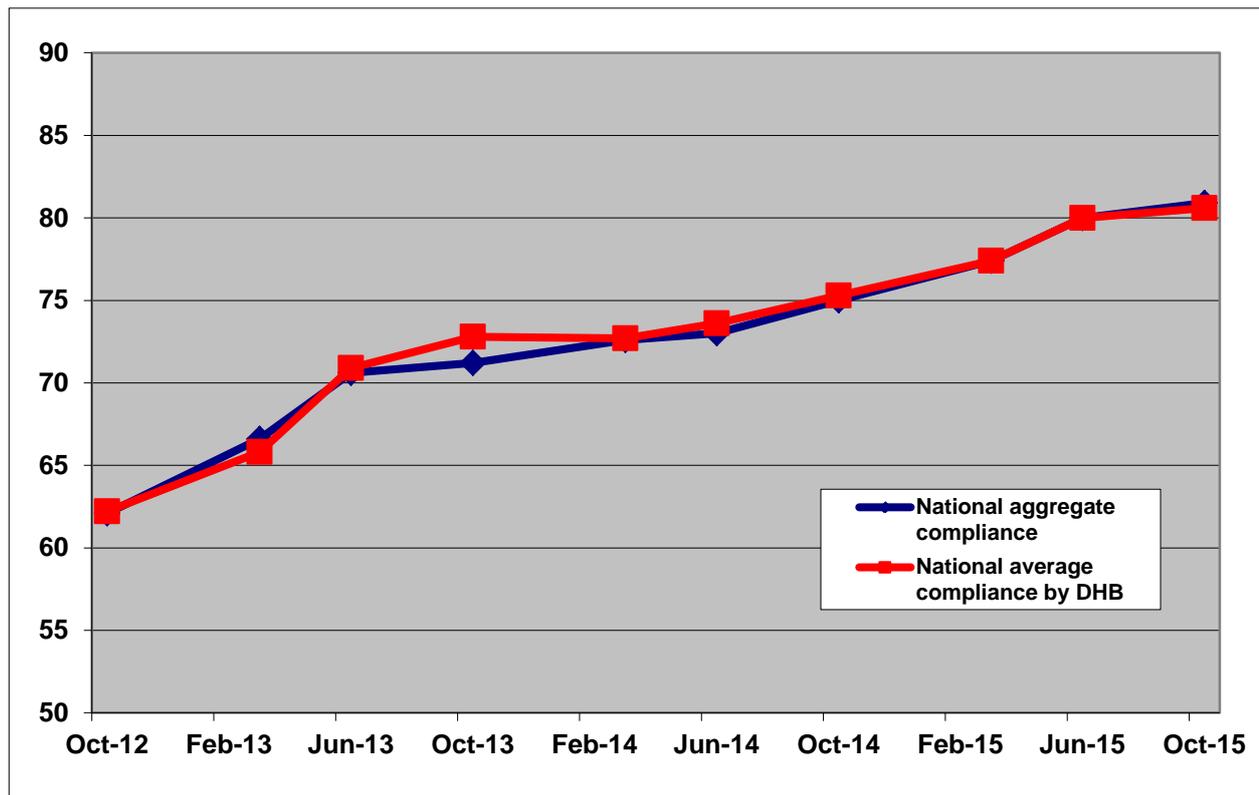


Figure 2. Trends over time by DHB: 30 June 2015 to 31 Oct 2015

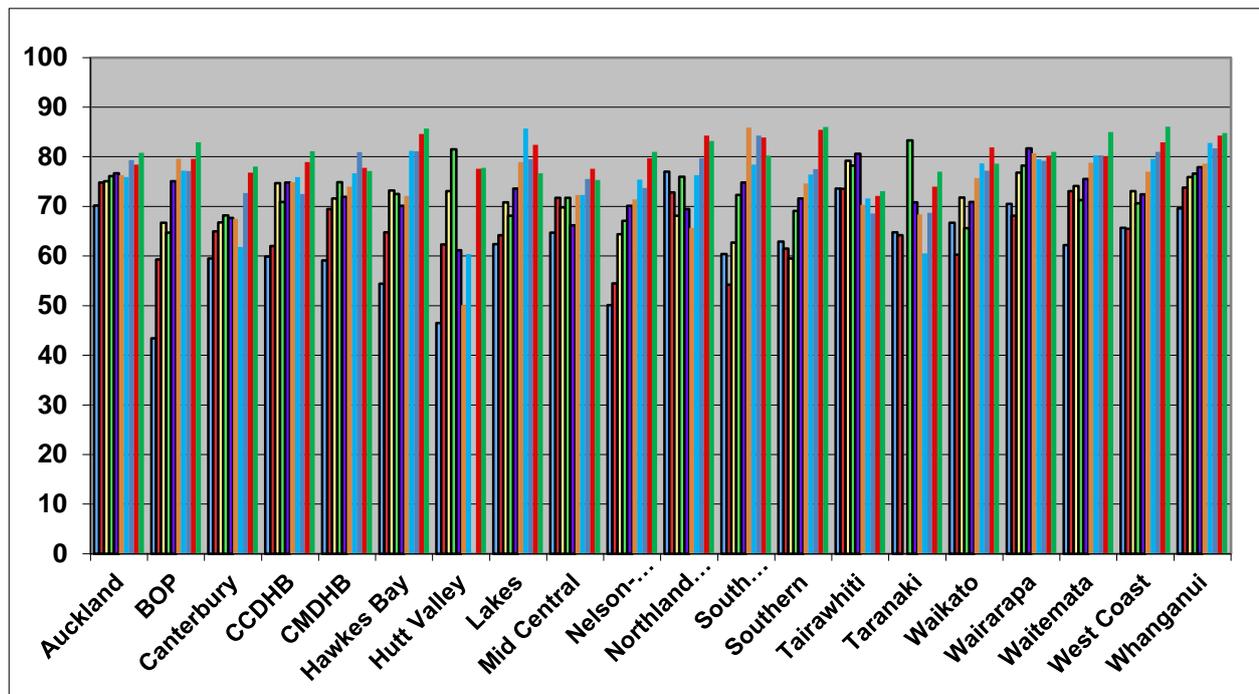


Figure 3. Change over time by moment: October 2012 to Oct 2015

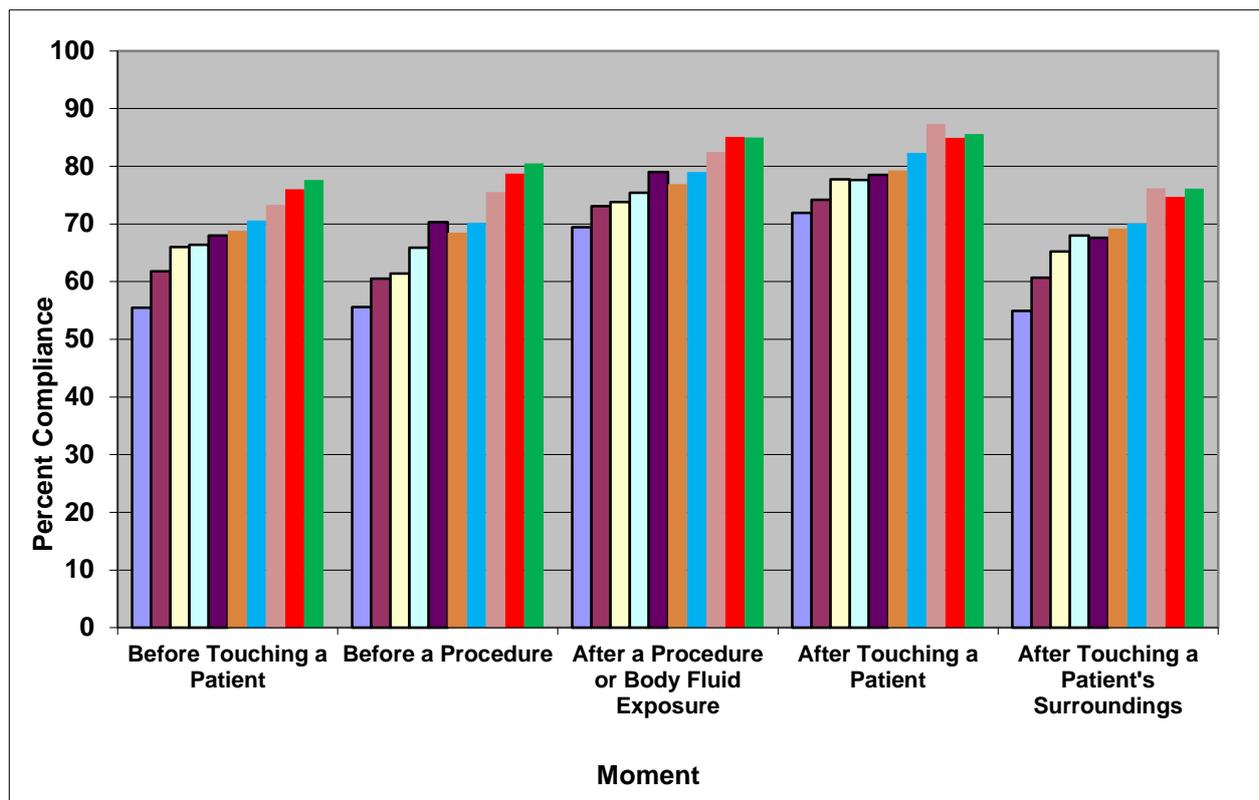


Figure 4. Change over time for healthcare workers: Oct 2012 to Oct 2015

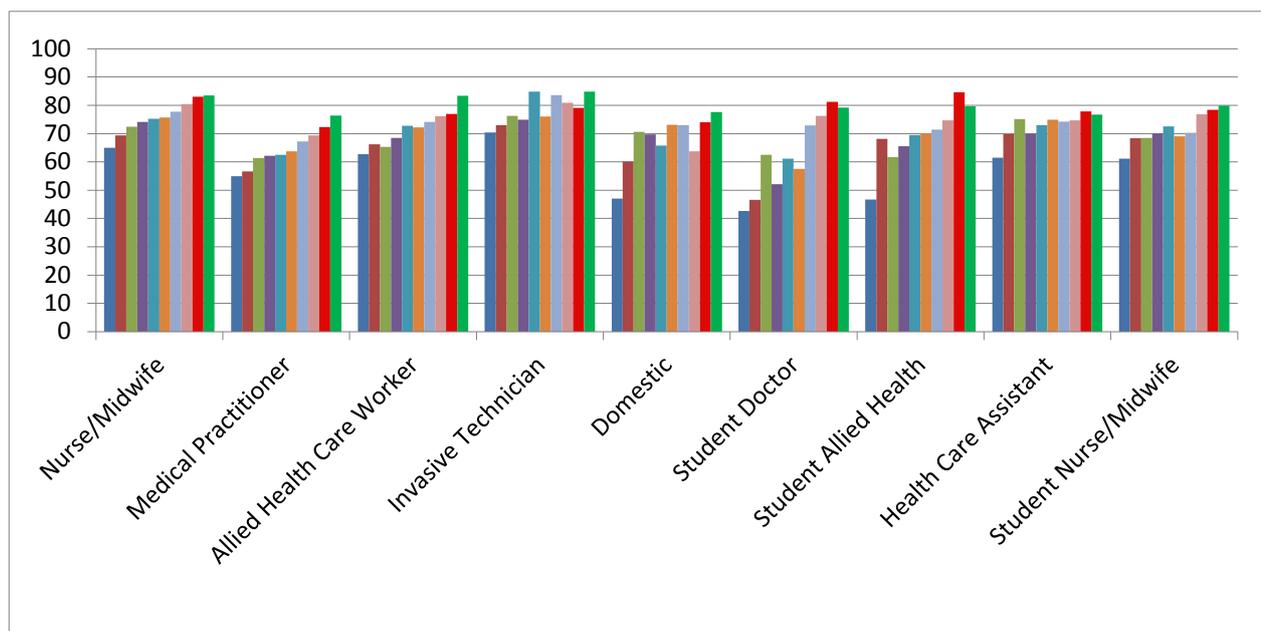


Figure 5. Changes in national hand hygiene performance by ward type Oct 2012- Oct 2015

