

Patient Self Hygiene Practices in the Hospital: A Quality Improvement Investigation

Eric Montgomery, Jaime Baker MD University of Colorado School of Medicine, Colorado Springs Branch



Background

- Hygiene is a critical component of the safety of hospitalized patients.
- According to the CDC, in 2015 there were 687,000 hospital associated infections (HAI) in acute care hospitals in the United States and 72,000 patients with HAIs died while in the hospital.
- There is increased focus on the hygiene practices of healthcare providers but little attention on the role of the patients
- In 2017 in the Journal of Antimicrobial Resistance and Infection Control published a list of nine recommendations for patients to participate in the prevention of surgical site infections.
 - Hand hygiene is number 4. Specifically before meals, after using the toilet, before/after touching IV line
- Furthermore, continued desired self care offers autonomy to patients and could improved a patient's experience during hospitalization.

Objective

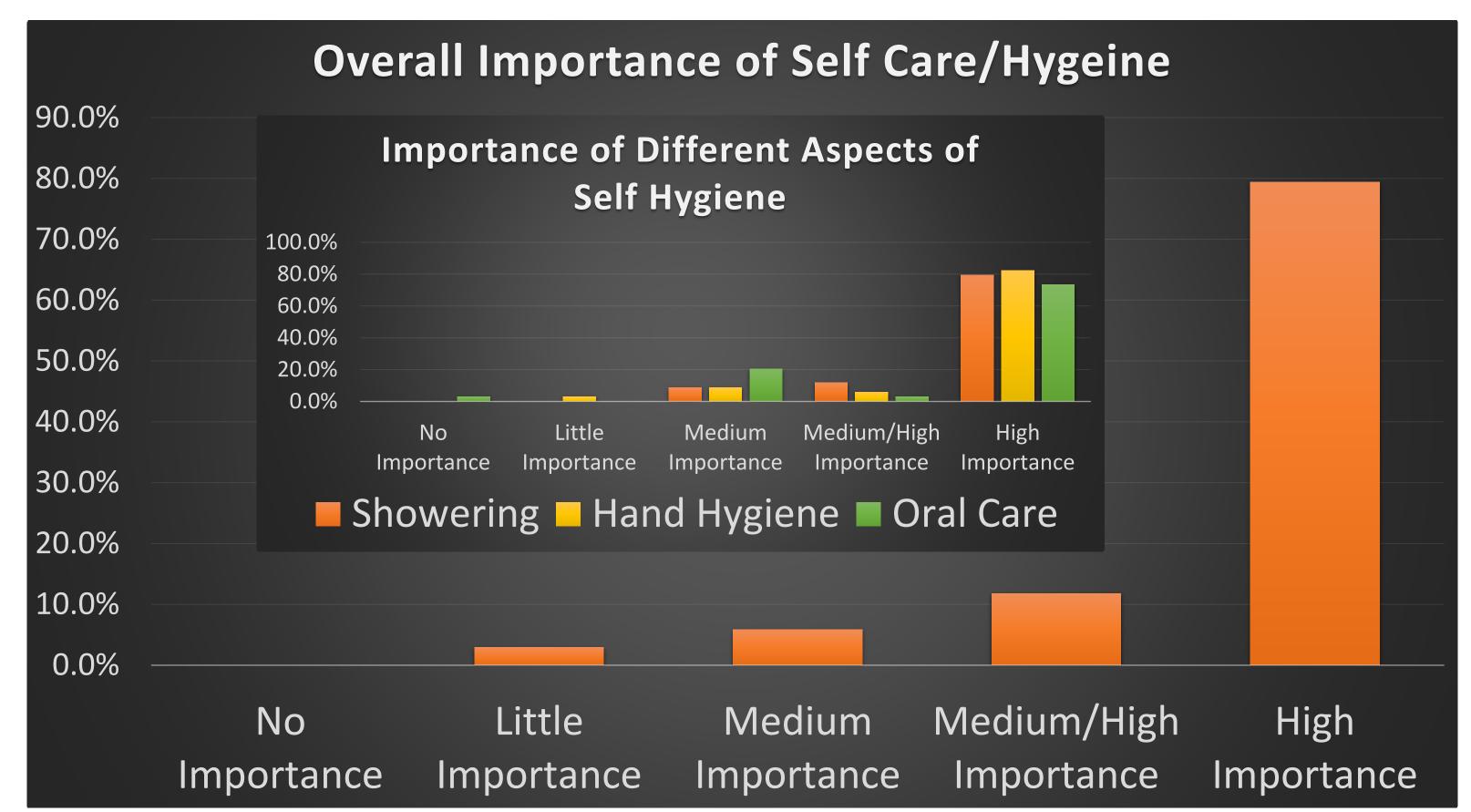
 The aim of this project was to evaluate differences between self hygiene performed by hospitalized patients compared to their normal home routine as well as investigating patient preferences regarding hygiene.

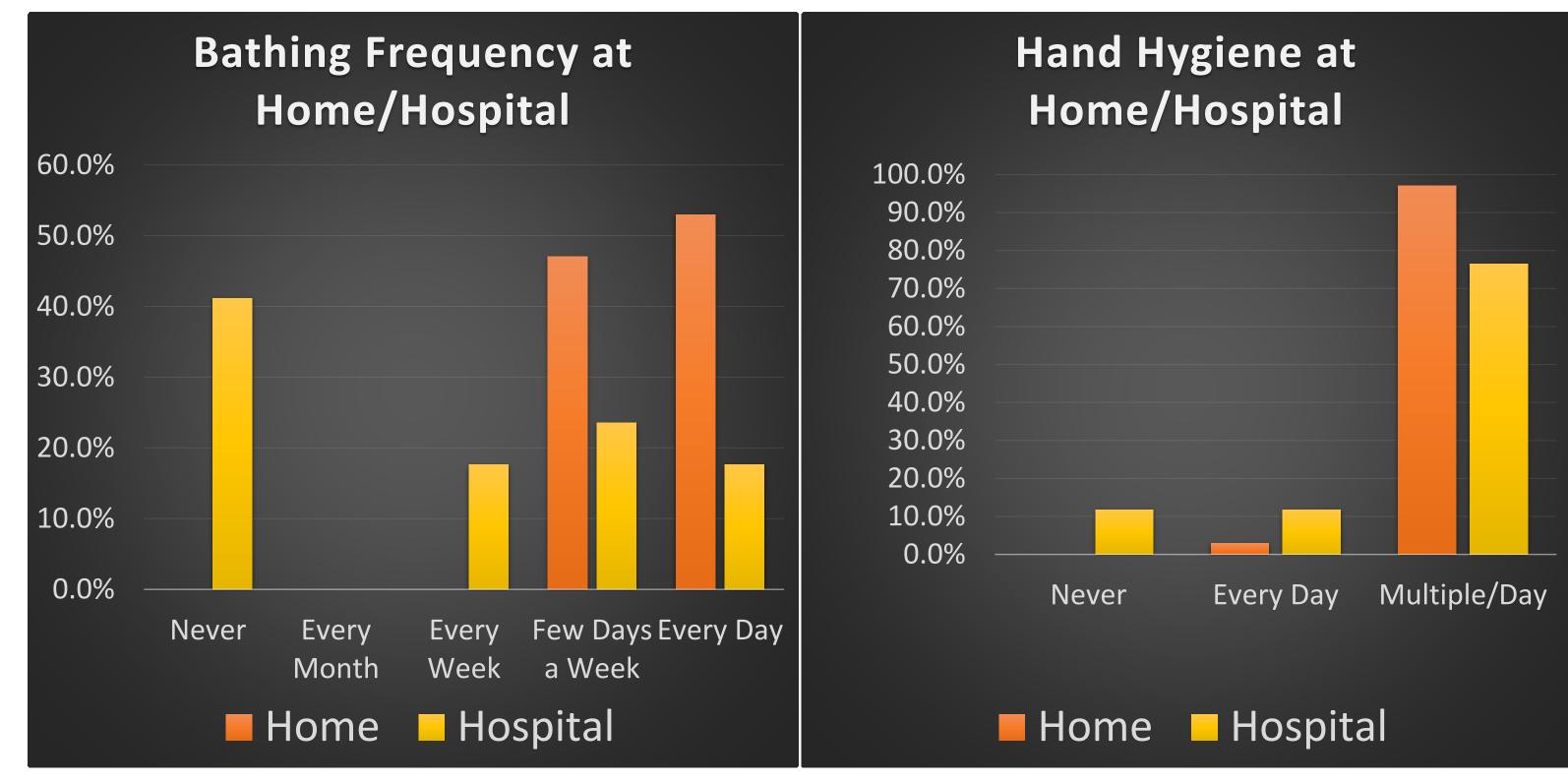
Methods

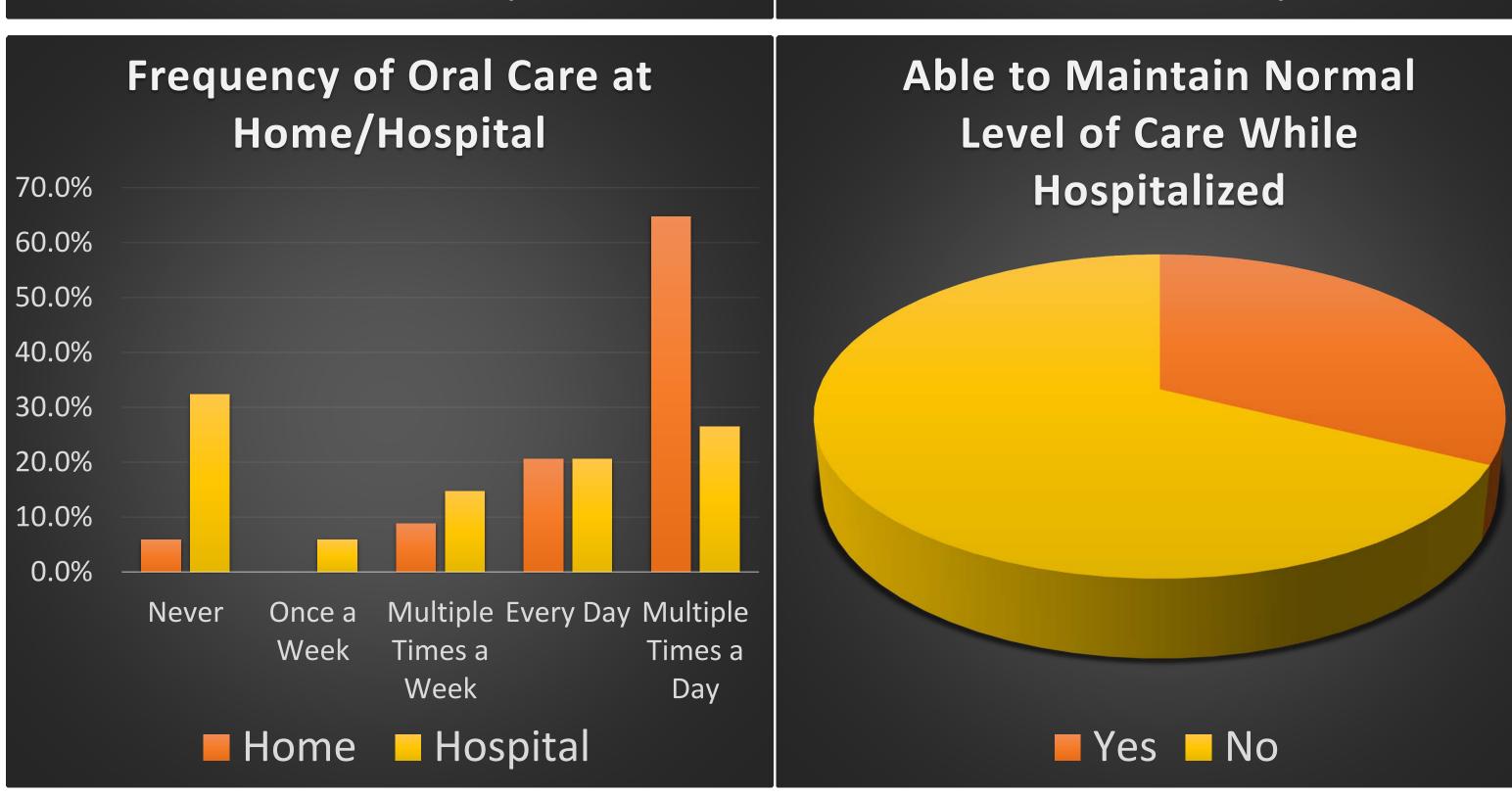
- We administered a patient survey to 34 patients at an academic affiliated community-based hospital on the medical and cardiovascular units.
- The 12 question survey focused on common aspects of self care practices:
 - Overall importance of self hygiene to the patient
 - The frequency and routine of three common self care practices: bathing/showering, oral hygiene, and hand hygiene
- We compared the frequency of the home or nonhospitalized routine with the hospitalized frequency

Results

N=34. Average length of stay: 3.6 days and average age: 61.3 y/o years/old. Patients surveyed from the medical/cardiovascular units







Discussion

- The majority of patients (79.4%) highly value self hygiene including bathing/showering, hand hygiene, and oral care.
- 67.6% of patients stated that they were unable to maintain their normal level of self hygiene while in the hospital.
- During survey interviews, patients spoke about practicing hand hygiene after using the restroom but most did not comment about practicing hand hygiene prior to and after meals. Observationally, the majority of patients did not have access to hand hygiene products close to their beds or chairs.
- Hand hygiene before meals and before and after touching their IV line is one of the 9 components to engage patients in the prevention of surgical site infections.
- Notable are restrictions while in the hospital such as fall risk protocol, IV lines, and surgical limitations which may challenge patient hygiene practices.
- However, due to the high importance of self hygiene to patients and as part of the recommendations to prevent hospital infection, it is a potential target for further interventions with the overall goal of improving our patient experience

Future Directions

- Creating a bedside daily checklist for patients which may encourage patient advocacy and participation in self hygiene practices.
 - This document could also provide education to patient's on hand hygiene recommendations for infection prevention.
- Hospital implementation of patient hygiene campaigns as created for providers: "Have you washed your hands today?"

References

https://www.cdc.gov/hai/data/portal/index.html
Tartari E, Weterings V, Gastmeier P, Rodriguez Bano J, Widmer A, Kluytmans J, Voss A. Patient engagement with surgical site infection prevention: an expert panel perspective. Antimicrob Resist Infect Control. 2017 May 12;6:45. doi: 10.1186/s13756-017-0202-3. eCollection 2017
Gagne D, Bedard G, Maziade PJ. Systematic patients' hand disinfection: impact on meticillin-resistant Staphylococcus aureus infection rates in a community hospital. J Hosp Infect. 2010;75:269–272. doi: 10.1016/j.jhin.2010.02.028.
Ardizzone LL, Smolowitz J, Kline N, Thom B, Larson EL. Patient hand hygiene practices in surgical patients. Am J Infect Control. 2013;41:487–491. doi: 10.1016/j.ajic.2012.05.029.