

# Contact Precautions as a Barrier to Hand Hygiene: PDSA to Improve Compliance with Gloved Hand Hygiene

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## INTRODUCTION

- Contact precautions are used for infection prevention
- Prevent horizontal transmission of organisms
- Full compliance is difficult
- Medical/Respiratory ICU (MRICU) nurses noted issues with complying with precautions
- PDSA quality improvement project to evaluate for improvement

## METHODS



Figure 1. PDSA (adapted from AHRQ):

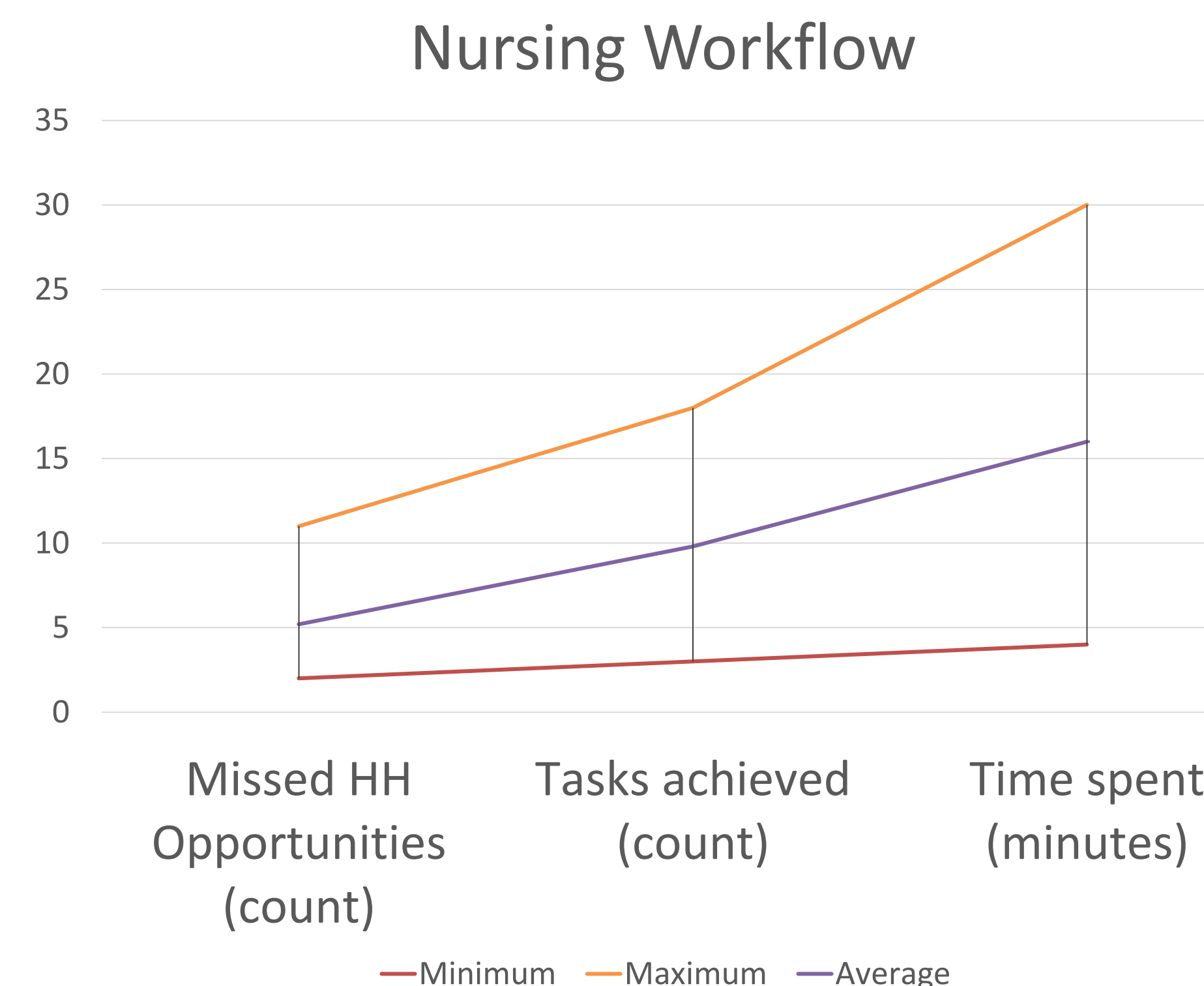
- 865-bed tertiary care academic medical center in Richmond, VA with 34 bed unit MRICU

- Plan: observe nursing workflow while in contact precaution rooms in the MRICU
- Do: establish a baseline of practice
  - Performing their morning tasks
- Study: 2 nurses per morning, performed observations over ~ 1 month.
  - 6 observations
  - Analyzed the findings
- Act: Recommendations were made to MRICU leadership regarding the findings of the observations, completing the first PDSA cycle.

## RESULTS

- 6 nurses
- All performed hand hygiene at entry/exit
- Variable but low compliance with any additional hand hygiene opportunities
- Average missed opportunities per encounter was 5.2 (range: 2-11).
- An average of 9.8 tasks were achieved in each room (range: 3-18)
- On average, each visit was 16 (range: 4-30 minutes) minutes long.

Figure 2. Results from Observations



## DISCUSSION

- There is significant opportunity for improved hand hygiene while in contact precautions.
- Wearing gloves appears to eliminate the trigger for hand hygiene.
- Recommend an education campaign to:
  - improve hand sanitizer usage with gloves
  - reminder that the gloves should not remove the 'normal' triggers for hand hygiene.
- Recommend more prominent placement of gloves inside the room.
- A second PDSA cycle could be embarked upon once these changes are made, or after one of the changes.

Reference: PDSA (adapted from AHRQ):

<https://www.ahrq.gov/health-literacy/quality-resources/tools/literacy-toolkit/healthlitoolkit2-tool2b.html>