WHO Clean Care is Safer Care Programme

10 YEARS OF CLEAN CARE IS SAFER CARE.
WHY YOU SHOULD BE A PART
OF THE SOCIAL PANDEMIC THAT IS
SAVE LIVES: CLEAN YOUR HANDS

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Infection Control Programme &
WHO Collaborating Centre on Patient Safety
University of Geneva Hospitals and
Faculty of Medicine, Geneva, Switzerland

Hosted by:
Dr. Benedetta Allegranzi, WHO SDS

Sponsored by
WHO Patient Safety Challenge
Clean Care is Safer Care
Hand Hygiene – a global life saving action

Launched October 2005
Clean Care is Safer Care, 2005-2015
Clean Care is Safer Care

Background to Clean Care is Safer Care

In previous years, WHO Global Patient Safety Challenges were born from calls from around the world on specific patient safety issues, and were also reflected in global campaigns, which have brought together expertise and evidence to raise awareness, and to catalyze political and professional commitment on these important topics. They have also generated knowledge, recommendations and actions to improve the safety of patients receiving care globally.

The focus and objectives of Clean Care is Safer Care

The first of these Challenges, Clean Care is Safer Care, which was launched in 2005, targeted the important aspect of reducing health care-associated infections (HCAIs). HCAI is the most frequent harmful event in health-care delivery and occurs
The reason for SafeHANDS

- Hundreds of millions of patients are affected by *health care-associated infections* (HAIs) worldwide each year, leading to significant mortality, financial losses for health systems, and patients’ and families’ suffering.
- Hand hygiene at the right times saves lives.
- Hand hygiene action provides assurance that a health system overall is a safer place to receive care.
- Health-care problems, like HAIs which are often invisible but nevertheless still occur, are still political and social challenges that we must address now through hand hygiene.

In 10 years, Clean Care is Safer Care has evolved to become the Infection Control Programme hosted by the new WHO HQ Service Delivery and Safety department.

Continuing to aim to reduce healthcare-associated infection worldwide.
WHO Service Delivery & Safety dept – Clean Care is Safer Care

Focus in 2014-2015 (1)

- Support for and consolidation of hand hygiene improvement through SAVE LIVES: Clean Your Hands campaign, CleanHandsNet, and POPS – 5 May 2015
- Infection prevention and control (IPC) for the Ebola outbreak
  - Response
  - Recovery
  - Resilience
- Country support for capacity building and strengthening the core components of IPC programmes
- Burden of HAI worldwide – SSI burden update
WHO Service Delivery & Safety dep – Clean Care is Safer Care
Focus in 2014-2015 (2)

- Prevention of surgical site infection
  - New Guidelines under development
  - Surgical Unit-based Safety Programme (SUSP) project in African hospitals
    - Manual on sterilization and safe processing of medical devices (launch in June 2015)

- Injection safety new global initiative
  - New Policy launched in February 2015
    - New Global Injection Safety campaign (to be launched)

- AMR prevention and control in health care
  - AMR IPC expertise provided in consultations
  - AMR hand hygiene resources produced for 5 May 2014
5 May 2015: hand hygiene is the entrance door to strengthening health-care systems and delivery

Safety Starts Here.
5 May 2015 – this year is different

- **Awareness raising** - a social marketing strategy #safeHANDS and country engagement
- **Mobilisation** - a year of activities
- **Building on the evidence base** - consolidating the WHO improvement toolkit
- The role of hand hygiene in the **Ebola** outbreak
- Commitment to **SAVE LIVES: Clean YOUR Hands** continues around the world!
SAVE LIVES

Clean Your Hands

#safeHANDS
Are you ready for 5 May 2015?

I promote clean care

#safeHANDS

Didier Pittet
Are you ready for 5 May 2015?

I provide clean care

#safeHANDS

FLAMINIA, ITALY
Are you ready for 5 May 2015?

I provide clean care

#safeHANDS

Lionel, HUG, Genève
Join us from 5 May 2015

#safeHANDS

JEAN-MARC
We provide clean care - #safeHANDS

Are you ready for 5 May 2015?
Are you ready for 5 May 2015?

I deserve clean care

#safeHANDS

Sonia Genève

Page 16
Join us from 5 May 2015

#safeHANDS
Join us from 5 May 2015

#safeHANDS
Use YOUR own language ....

I provide clean care
I deserve clean care
I promote clean care

Je prodigue des soins propres
Je mérite des soins propres
Je m’engage pour des soins propres

#safeHANDS

Yo proporciono una atención limpia
Yo merezco una atención limpia
Yo promuevo una atención limpia

我提供清洁医疗
我应得清洁医疗
我提倡清洁医疗

Я соблюдаю гигиену рук
Я требую соблюдения гигиены рук
Я способствую гигиене рук
Health-care facilities and individuals around the world

THE GLOBAL REACH!
Je mérite des soins propres

#safeHANDS

MALOU 94 ans
Families pledging for #safeHANDS for their parents
#safeHANDS
FOR PAPY & MAMY
Launch
1st Global Patient Safety Challenge
WHO headquarter, Geneva, Switzerland
13 October 2005
136 countries committed to address health care-associated infection

World population coverage: > 93%
On 5 May 2015, His Excellency the Sierra Leone Minister of Health and Sanitation pledges to fight against healthcare-associated infections in memory of the fallen heroes of Sierra Leone Health Sector due to Ebola Viral Disease.
137 countries committed to address health care-associated infection

World population coverage: > 93%

Sierra Leone, 137th country
Countries with health-care facilities registered for SAVE LIVES: Clean Your Hands global campaign

MAY 2015

2015 - LARGEST INCREASE IN AFRICAN REGION

Number of registered health-care facilities per 10,000,000 population *

- < 4
- 4 - 10
- 19 - 68
- > 69
- No registration
- Not applicable

* The number of health-care facilities registered for SAVE LIVES is adjusted by population per country. Fully adjusted estimates based on total number of health care facilities per country are not available and the estimates here may not fully represent the actual health-care facility coverage in each country.

The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

Equates to over 10 million staff dedicated to protecting over 4 million patients
Re-energising the world!

2005-2015 Clean Care is Safer Care

For 10 years member states and autonomous regions around the world have pledged their commitment to clean care. Now some of them are reminding the world just how important it still is to work towards clean hands at the point of patient care every day.

Here are some examples:

Professor Chris Baggoley AO, Chief Medical Officer, Department of Health, Australia:

"Australia is totally committed to good hand hygiene as a simple but crucial intervention to keep our patients safe. Over the last five years, Australia has implemented a successful national campaign based on the WHO strategy, with open public reporting of each hospital's hand hygiene performance. Participation in the Hand Hygiene Australia program is now a mandatory requirement for public and private hospital accreditation in Australia. Embedding and sustaining this important patient safety culture change is a key focus of health care policy."

Shona Robison, Cabinet Secretary for Health, Wellbeing and Sport, Scotland, UK:

"The Scottish Government fully supports World Hand Hygiene Day on 5th May, to raise awareness around hand-washing best practice."

Dr Chan Hon-yee Constance, Director of Health, Hong Kong, China:

"Promoting hand hygiene in both healthcare settings and in the community has been accorded a top priority in Hong Kong ever since Hong Kong pledged to support the WHO First Global Patient Safety Challenge in 2005. In the past 10 years, Hong Kong has adopted the WHO Hand Hygiene Strategy in implementing hand hygiene programmes in hospitals, clinics and long-term care facilities. Since 2010, the 5th of May has been marked as an important annual event - Hand Hygiene Awareness Day in Hong Kong. In collaboration with healthcare institutions and community organizations, promotional activities are carried out to encourage proper hand hygiene in healthcare workers, patients, visitors and the general public.

Patient safety is always our first concern. Hong Kong is fully committed to promoting hand hygiene as one of the most effective yet simple means for infection control."

Department of Health, Republic of South Africa (via Twitter)

"Hand hygiene exists as an important topic to prevent hospital acquired infection. Join the campaign! WHO SAVE LIVES: Clean Your Hands Campaign promotes hand hygiene action at the point of patient care. Infection prevention is at the heart of strengthening health care systems #safeHANDS."

Dr Elisabeth Helsborg, Directeur Adjoint f.t. de Directeur de la Santé, Luxembourg

Mg. Lic. Norma Peralta, Directora, Programa Nacional de Epidemiología y Control de Infecciones Hospitalarias de Argentina:

"El Programa Nacional de Epidemiología y Control de Infecciones Hospitalarias de Argentina, en el marco de la Campaña Nacional para la Mejora de Higiene de Manos que la Asociación Argentina de Enfermeros en Control de Infecciones lidera en Argentina, apoya la iniciativa y adhiere a la promoción de la higiene de manos como un alto estándar de calidad y seguridad de atención de los pacientes y prevención de enfermedades. Esta medida, simple y eficaz resulta en la disminución de las infecciones y salva cientos de vidas al año.

Desde el Argentina, el Programa Nacional de Epidemiología y Control de Infecciones Hospitalarias de Argentina, renueva, al cabo de sus primeros 10 años, su compromiso de continuar trabajando por la seguridad de los pacientes y la calidad de la atención médica.

The National Program of Epidemiology and Hospital Acquired Infections in Argentina, as part of the National Campaign for Hand Hygiene Improvement of the Argentina Association of Nurse in Infection Control leads in Argentina, supports the initiative and adheres to promote hand hygiene as a high standard of quality and safety in patient care. This measure is simple and effective in reducing infections and save hundreds of lives a year.

From Argentina, the National Program of Epidemiology and Control of Hospital Infections in Argentina, renewed, after its first 10 years, their commitment to

Thank you!
5 May 2015 – this year is different

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- The role of hand hygiene in the Ebola outbreak
- Commitment to SAVE LIVES: Clean YOUR Hands continues around the world!
A validated and systematic tool to obtain a situational analysis of hand hygiene infrastructure, promotional activities, performance monitoring and feedback, and institutional commitment.

http://www.who.int/gpsc/5may/hhsa_framework/en/
From April to December 2011, health-care facilities registered for the WHO SAVE LIVES: Clean Your Hands initiative and those participating in some national hand hygiene campaigns were invited to participate in a global survey based on the
WHO HHSAF Global Survey 2011

WHO Hand Hygiene Self-Assessment Framework Global Survey Summary Report

From April to December 2011, health-care facilities registered for the WHO SAVE LIVES: Clean Your Hands initiative and those participating in some national hand hygiene campaigns were invited to participate in a global survey based on the completion of the Hand Hygiene Self-Assessment Framework (HHSAF).

The survey objectives were three-fold:
- to assess the level of progress of health-care facilities in terms of hand hygiene infrastructure, promotional activities, performance monitoring and feedback, and institutional commitment, according to a range of indicators relevant to the WHO Multimodal Hand Hygiene Improvement Strategy summarized in a score;
- to identify gaps in hand hygiene infrastructures and activities according to the HHSAF indicators;
- to provide feedback through summary results.

Methods
The HHSAF is a tool providing a systematic situation analysis of hand hygiene structures, resources, promotion, and practices within a health-care facility. It resembles a questionnaire and is structured in five sections, based on the five components of the WHO Multimodal Hand Hygiene Improvement Strategy (namely system change, training and education, evaluation and performance feedback, reminders in the workplace, and institutional safety climate). The tool includes 27 indicators reflecting the key elements of each strategy component. These are assigned values totaling 100 points within each HHSAF section, adding up to a maximum overall score of 500 points. Based on its overall score, a facility is assigned to one of four levels of progress:
1. Inadequate (score of 0-125): hand hygiene practices and hand hygiene promotion are deficient. Significant improvement is required.

Find more at http://www.who.int/gpsc/5may/hhsa_framework/en/

Scientific publication:
WHO launches a new HHSASF Global Survey starting on 1 June 2015

HOW TO PARTICIPATE?
- All health-care facilities registered for
- SAVE LIVES: Clean Your Hands will be invited by WHO to participate and submit their Framework results online
- Download the Framework at http://www.who.int/gpsc/5may/hhsa_framework/en/
  and fill out the online form to give WHO your details
- Facilities’ identity and results will be kept strictly confidential
- Results will be issued on 13 October 2015, the 10th anniversary of the Clean Care is Safer Care programme
WHO Hand Hygiene Self-Assessment Framework Global Survey May – Sept 2015

Use the Framework to identify where your facility stands in terms of hand hygiene resources, practices and promotion!

AND

By submitting your results online, help WHO follow up the progress on hand hygiene worldwide and identify areas for further improvement!

To participate in the global survey your health-care facility must be registered for SAVE LIVES: Clean Your Hands

GET READY TO PARTICIPATE!!!

http://www.who.int/gpsc/5may_EN_PSP_GPSC1_5May_2015/en/
Facilities awarded with the Hand Hygiene Excellence Award in South-East Asia and Western Pacific, in Europe, and in Latin America

www.handhygieneexcellenceaward.com
Apply now –
http://www.handhygieneexcellenceaward.com

APSIC 2013
Shanghai
Asia-Pacific Hand Hygiene Excellence Awards
2012-2013
Country campaign fatigue?
A Hand Sanitizing Relay! (see the video: tinyurl.com/HHRelay)

- Try to break a world record – it is simple!
- Do pre and post intervention (relay) compliance monitoring
- Receive a certificate
- Be part of a global report

http://www.who.int/gpsc/5may/EN_PSP_GPSC1_5May_2015/en/
1st Hand Sanitizing Relay Guinness World Record on Compliance with Hand Hygiene
Hong Kong Baptist Hospital

Get ready & Participate from 5 May to 5 Sept 2015
Get ready & Participate from 5 May to Sept 5 2015
Get ready & Participate from 5 May to Sept 5 2015
Have staff practice in advance!

How to Handrub?

Rub hands for hand hygiene! Wash hands when visibly soiled.

Duration of the entire procedure: 20-30 seconds

1a) Apply a palmtop of the product in a cupped hand, covering all surfaces;

1b) Rub hands palm to palm;

2) Palm to palm with fingers interlaced;

3) Backs of fingers to opposing palms with fingers interlocked;

4) Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;

5) Rotational rubbing of left thumb clasped in right palm and vice versa;

6) Right palm over left dorsum with interlaced fingers and vice versa;

7) Once dry, your hands are safe.
1st Hand Sanitizing Relay Guinness World Record
Hong Kong Baptist Hospital, Hong Kong, 5 May 2014

Participate from 5 May to Sept 5 2015
JOIN US!
From 5 May to 5 Sept 2015

WHO Hand Hygiene Sanitizing Relay – New Guinness World Record
As of 5 May 2015, WHO world Hand Hygiene Day, Prof. Didier Pittet & staff at the WHO Collaborating Center on Patient Safety in Geneva propose to all hospital...

All info: who.int/5may/en/
Send your photos and videos to: CleanHandsSaveLives.org

See the explanatory video at: tinyurl.com/HHRelay
5 May 2015 – this year is different

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- Mobilisation - a year of activities
- **Building on the evidence** base - consolidating the WHO improvement toolkit
- The role of hand hygiene in the *Ebola* outbreak
- Commitment to *SAVE LIVES: Clean YOUR Hands* continues around the world!
Consolidating your use of the WHO improvement toolkit

Tools and resources

**Starter Kit:**

- HH Self-Assessment Framework
  - doc, 281kb
- Guide to HH Improvement
  - pdf, 476kb
- Guide to local ABHR production
  - doc, 737kb
- HH – why, how and when brochure
  - pdf, 476kb
- HH – why, how and when brochure
  - pdf, 407kb
- Your 5 Moments for Hand Hygiene
  - pdf, 407kb
- Sustaining improvement
  - doc, 274kb

Tools exist for you to adopt and adapt then to support local improvement. They are proven to achieve change in patient safety if used as part of a multi-modal strategy.

- System Change
- Reminders in the workplace
- Training and education
- Institutional safety climate
- Evaluation and feedback

Page 59
My 5 Moments for Hand Hygiene
Focus on caring for a patient with a Urinary Catheter

1. BEFORE TOUCHING A PATIENT

2. DURING TOUCHING A PATIENT

3. AFTER TOUCHING A PATIENT

4. AFTER TOUCHING A URINARY CATHETER AND DRAINAGE SYSTEM

5. AFTER TOUCHING PATIENT SURROUNDINGS

CLEAN YOUR HANDS WHEN HANDLING A URINARY CATHETER AND DRAINAGE SYSTEM

Immediately before any manipulation of the urinary catheter or drainage system that could lead to contamination of the sterile site, such as:
- Inserting or applying an indwelling, intermittent catheter, or condom catheter, immediately before putting on sterile gloves
- Accessing the drainage system to collect a urine sample or to empty the drainage bag

To protect the patient against harmful germs, including the patient’s own, from entering their body

5 KEY ADDITIONAL CONSIDERATIONS FOR A PATIENT WITH A URINARY CATHETER

- Make sure there is an appropriate indication for the indwelling urinary catheter.
- Use a closed urinary drainage system, and keep it closed.
- Insert the catheter aseptically using sterile gloves.
- Assess the patient at least daily to determine whether the catheter is still necessary.
- Patients with indwelling urinary catheters do not need antibiotics (including for asymptomatic bacteriuria), unless they have a documented infection.
My 5 Moments for Hand Hygiene
Focus on caring for a patient with a central venous catheter

1. Before touch a patient
   - Indication: Ensure that a central intravenous catheter is indicated. Remove the catheter when no longer needed/necessarily indicated.
   - Key additional considerations: Ensure that a central intravenous catheter is indicated. Remove the catheter when no longer needed/necessarily indicated.

2. Before insertion/insertion attempt
   - Indication: Ensure that a central intravenous catheter is indicated. Remove the catheter when no longer needed/necessarily indicated.
   - Key additional considerations: Ensure that a central intravenous catheter is indicated. Remove the catheter when no longer needed/necessarily indicated.

3. After central line insertion/catheter manipulation
   - Indication: Ensure that a central intravenous catheter is indicated. Remove the catheter when no longer needed/necessarily indicated.
   - Key additional considerations: Ensure that a central intravenous catheter is indicated. Remove the catheter when no longer needed/necessarily indicated.

4. After patient transfer/when patient is moved
   - Indication: Ensure that a central intravenous catheter is indicated. Remove the catheter when no longer needed/necessarily indicated.
   - Key additional considerations: Ensure that a central intravenous catheter is indicated. Remove the catheter when no longer needed/necessarily indicated.

5. After central line removal
   - Indication: Ensure that a central intravenous catheter is indicated. Remove the catheter when no longer needed/necessarily indicated.
   - Key additional considerations: Ensure that a central intravenous catheter is indicated. Remove the catheter when no longer needed/necessarily indicated.

Key additional considerations for central intravenous catheters:

- Indication: Ensure that a central intravenous catheter is indicated. Remove the catheter when no longer needed/necessarily indicated.
- Change tubing used to administer blood, blood products, chemotherapy, and fat emulsions within 24 hours.
- Use aseptic technique (with non-touch technique) for all catheter manipulations.
- Scrub the hub with alcohol-based chlorhexidine gluconate for at least 10 seconds.
- Use full aseptic barrier precautions during insertion (cap, surgical mask, sterile gloves, sterile gown, sterile drapes).
- Replace using type dressings every 2 days and transparent dressings every 7 days; replace dressings whenever visibly soiled.

World Health Organization
SAVE LIVES
Clean Your Hands
Clean Care is Safer Care
2006-2015

My 5 Moments for Hand Hygiene
Focus on caring for a patient with a peripheral venous catheter

1. Before touch a patient
   - Indication: Ensure that a peripheral venous catheter is indicated. Remove the catheter when no longer necessary/clinically indicated.
   - Key additional considerations: Ensure that a peripheral venous catheter is indicated. Remove the catheter when no longer necessary/clinically indicated.

2. Before insertion/insertion attempt
   - Indication: Ensure that a peripheral venous catheter is indicated. Remove the catheter when no longer necessary/clinically indicated.
   - Key additional considerations: Ensure that a peripheral venous catheter is indicated. Remove the catheter when no longer necessary/clinically indicated.

3. After peripheral line insertion/catheter manipulation
   - Indication: Ensure that a peripheral venous catheter is indicated. Remove the catheter when no longer necessary/clinically indicated.
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- Indication: Ensure that a peripheral venous catheter is indicated. Remove the catheter when no longer necessary/clinically indicated.
- Change tubing used to administer blood, blood products, chemotherapy, and fat emulsions within 24 hours.
- Use full aseptic barrier precautions during insertion (cap, surgical mask, sterile gloves, sterile gown, sterile drapes).
- Replace using type dressings every 2 days and transparent dressings every 7 days; replace dressings whenever visibly soiled.
- Place aseptic procedure (with non-touch technique) for catheter insertion, removal, and blood sampling.
- Wear clean, non-touch gloves and apply an aseptic procedure (with non-touch technique) for catheter insertion, removal, and blood sampling.

World Health Organization
SAVE LIVES
Clean Your Hands
Clean Care is Safer Care
2006-2015
5 May 2015 – this year is different

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On the ground

Redemption Hospital, Monrovia, May 2014
(Courtesy Dr Olivier Hagon)
On the ground 4 months later

Redemption Hospital, Monrovia, September 2014
(Courtesy Dr Olivier Hagon)
Key lessons learned for infection prevention and control (IPC) from the Ebola outbreak

Absence of IPC basic measures and infrastructures both in the community and in healthcare settings led to the unprecedented situation of this outbreak.
Ebola Recovery Assessment
Water, sanitation, and hygiene

- Lack of access to water, sanitation, and poor hygiene practices were problems pre-Ebola, exacerbated the outbreak, and will remain problems post-Ebola

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Guinea</th>
<th>Liberia</th>
<th>Sierra Leone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Water supply coverage</td>
<td>92% (urban areas; very poor reliability)</td>
<td>65% (rural areas; 50% fully functioning year-round)</td>
<td>60%</td>
</tr>
<tr>
<td>Access to improved sanitation</td>
<td>18.9%</td>
<td>16.8%</td>
<td>13%</td>
</tr>
</tbody>
</table>
The PPE obsession!
New WHO Guidelines on Hand Hygiene in Health Care in the Context of Filovirus Disease Outbreak Response

Guideline development process
- Development of key research questions
- Systematic literature reviews
- Evidence-to-recommendations approach using the GRADE framework
- Expert consultation
- WHO Guideline Review Committee

Issued in December 2014

1. Are chlorine solutions effective for hand hygiene in health care?
3. Are chlorine solutions effective for disinfection of gloves?
5. Does the use of chlorine solutions for hand hygiene cause health workers’ skin irritation or lesions, respiratory side effects or any other adverse reactions?
6. Does glove disinfection with chlorine solutions cause damage to glove permeability or increased perforations?
Recommendation 1

• We recommend performing hand hygiene, by using either an alcohol-based handrub or soap and running water applying the correct technique recommended by WHO.

• Alcohol-based handrubs should be made available at every point of care (at the entrance and within the isolation rooms/areas) and are the standard of care.

• If alcohol-based handrubs are unavailable, hand hygiene should be performed with soap and running water whenever necessary. When hands are visibly soiled, hand hygiene should be performed with soap and running water.

• Strong recommendation, high-quality evidence for the effectiveness of alcohol-based handrub or soap and water.
Ebola Lessons Learned: main messages

1. IPC/WASH in healthcare settings is a cornerstone of the Ebola response
2. Patient safety and healthcare workers safety are equally important during EVD care
3. Need for adequate preparedness, i.e. meeting minimum requirements for IPC/WASH both in the community and in healthcare
4. MOH leadership, partners coordination, and consistent reference to and implementation of correct IPC standards are paramount
5. Need for including social mobilization and taking culture into account in IPC messages
6. Need for building upon the current situation of increased attention on IPC to improve basic structures and standards
WHO web page feature

Hand hygiene in the control of Ebola and health system strengthening

Introduction
For any infection that can be spread through touch, including those carried in bodily fluids, hand hygiene is vital. It is the key action that protects every individual. That is why WHO highlights a number of key messages on hand hygiene in the prevention of Ebola Virus Disease, and how improving hand hygiene action can positively affect whole communities, a whole country, if the right systems and culture can be embedded.

Many of the WHO hand hygiene improvement tools have been relevant in the situation of the Ebola outbreak but the local production of alcohol-based handrub (ABHR) instructions have been promoted most in an attempt to address the system change in the first instance as per the WHO recommendation for a multimodal improvement strategy.

Key documents
- Hand hygiene in health care in the context of Filovirus disease outbreak response
- WHO guidelines on hand hygiene in health care

Ebola and hand hygiene presentation
- WHO Guideline and systematic review on hand hygiene and the use of chlorine in the context of Ebola

Guides to local Production: WHO-recommended Handrub Formulations
- pdf, 312kb

Acknowledging work in the field:
• An image of Guinea, more than a year after the Ebola outbreak started – thanks to Dr Joyce Hightower
• Hand hygiene and infection prevention and control in Mali 2014-2015 – stopping the Ebola Virus Disease Outbreak – thanks to Dr JP Ngandu-Mbanga
Guide to the local production of the license-free WHO alcohol-based handrub formulation

From sugar can byproducts, at low costs – Mali, Africa, 2007
Local production of alcohol-based WHO formulation, Monrovia, Liberia, November 2014  (Courtesy Dr Olivier Hagon)

Support: CleanHandsSaveLives.org and Swiss National Aid
WHO leadership commitment – hand hygiene and Ebola in 2015

Dr A. Nordstrom, WR, Sierra Leone

Drs B. Aylward, A. Gasgasira, J.M. Dangou WHO Ebola West Africa

Dr E. Kelley, Director, WHO HQ SDS

#safeHANDS

#safeHANDS

Ed Kelley, CH
Save the Date:

3rd ICPIC, 16-19 June 2015, Geneva, Switzerland

Ebola: Hands-On Pre-ICPIC workshop
16 June 2015: 10AM to 5PM

See: www.ICPIC.com
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POPS is...

- A unique model that allows for a sense of 'community' with sharing of intelligence, expertise and most importantly ownership of the challenge that is avoidable patient and health worker harm – together working for the same outcome
- It provides an enhanced global presence and image for all involved, translating into a greater global reach
- An approach based on the principles of corporate social responsibility, the work is focused on benefit to member states, particularly those in low and middle-income countries
Examples of POPS Commitment

Hand Hygiene: Your Entrance Door to Safer, More Effective Interdisciplinary Care Across the Continuum

Posted by DebMed on Apr 30, 2015 9:30:00 AM

Tweet

May 5 is the World Health Organization’s (WHO’s) annual Save Lives: Clean Your Hands Day. It’s a time for healthcare professionals to reflect on the impact of hand hygiene compliance on care quality and outcomes. This year’s theme as designated by the WHO is: Strengthening healthcare systems and delivery – hand hygiene is your entrance door.
Country campaigns committed to WHO call to action

Clean Care is Safer Care

WHO CleanHandsNet - a network of campaigning countries

What is WHO CleanHandsNet?

Embedding hand hygiene promotional activities as a national priority is key for sustainability. Efforts have therefore been made to support countries or areas with large scale activities to promote hand hygiene in healthcare.

WHO Patient Safety website
Find out who has signed up to the campaign
Latest WHO campaign and Hand Hygiene news
Hand hygiene in the control of Ebola and health system strengthening

Private Organizations for Patient Safety (POPS) for Hand Hygiene

#safeHANDS promotional video

WHO SAVE LIVES: Clean Your Hands
Examples of country work 2015 (1)

Celebremos 10 años!!!
Juntos por la Seguridad de los Pacientes a través del Primer Desafío Mundial de la Organización Mundial de la Salud
VI Jornada Nacional para la Mejora de la Higiene de Manos en Argentina

El camino transitado en Argentina y en el Mundo

Hand Hygiene Promotion Activities
HK, China
From 2005 to 2015

Mission Mains Propres
Le concours « affiche & video »

#safeHANDS

Republic of Turkey Ministry of Health,
Hacettepe University and World Health Organization Country Office in Turkey and Turkish Society of Hospital Infections and Control
request the honour of your company at the celebration of
Save Lives: Clean Your Hands Initiative
on Tuesday, 5th May 2015, at 11:00 hours.

Welcome to
Infection Control Directorate

#GetABCD
Examples of country work 2015 (2)

Department of Health @HealthZA · 12h
Infection prevention is at the heart of strengthening health care system
@WHO @SouthAfricanASP @GCISMedia handhygiene safeHANDS

Claire Kippatrick retweeted
Department of Health @HealthZA · 11h
SAVE LIVES: Clean Your Hands Campaign promotes handhygiene action at the point of patient care safeHANDS @SouthAfricanASP @WHO

PAHO/WHO @pahowho · May 1
MAY5 SAVE LIVES: Clean Your Hands World Day+10 years of the "Clean care is Safer Care" program SafeHANDS

Hand Hygiene - we aim for continuous improvement and to celebrate and share success .. Bring on May 5th safeHANDS
Examples of country work 2015 (3)

Infection Control Africa Network

ICAN. Tygerberg Hospital Staff and Stellenbosch University supporting this initiative

Help Us Turn Africa Orange

Why a campaign for making Africa Orange?

Join us!
5th May 2015. World Hand Hygiene day

Swachh Harth, now listed by WHO as “Clean Hands Save India”
African Region - SAVE LIVES: clean your hands

Help Us Turn Africa Orange

Feb 2014: 669 hospitals
April 2015: 801 hospitals

Countries with health care facilities registered for SAVE LIVES: Clean Your Hands global campaign

Register your health facility at:
http://www.who.int/goi/https/themainstation_updates/en/

I promote clean care
#safeHANDS
Commitment in Sierra Leone: Country pledge, campaign activities, hospital registrations

Dr Alaa Gad, IPC Team

Miranda Deeves, IPC Team
Too many people to mention WHO website acknowledgments – those featuring 5 May 2015

Clean Hands Saves Lives
Clean Hands Save India
Health in Your Hands - The Global Public-Private Partnership for Handwashing
Health Quality and Safety Commission New Zealand
Hospital Nacional de Niños (Costa Rica)
Infection Prevention and Control Canada (IPAC)
Infection Prevention Society (UK and Ireland)
Institute for Healthcare Improvement (IHI)
International Federation for Infection Control (IFIC)
International Society of Chemotherapy for Infection and Cancer
Le réseau C Clin - Arlin, France
Mission Mains Propres, France
MRSA Survivors Network
National Hand Hygiene Campaign Australia
National Hand Hygiene Campaign Argentina
National Hand Hygiene Campaign Hong Kong Special Administrative Region
National Hand Hygiene Campaign Portugal
STOP! Clean Your Hands campaign (Canada)
Stop sepsis save lives

Thank you!
Clean Care is Safer Care 2005-2015
Ten years, number 10 - more to come in 2015!
JOIN US!

Info&Tools – 5 May – SAVE LIVES: Clean Your Hands
http://www.who.int/gpsc/5may/en/

POST YOUR PHOTOS/SELFIES at:
http://cleanhandssavelives.org
Follow, like and spread
@didierpittet
@GLOBAL_POPS
@WHO
who.int/5may/en/
CleanHandsSaveLives.org
#safeHANDS