



## Infection Prevention and Control

Antibiotic resistant organisms (AROs) are monitored closely by the IPAC department.

There are many AROs circulating with more emerging all the time. At this time hospitals are required to report hospital acquired MRSA/VRE and C.difficile rates monthly to the Ministry of Health for surveillance and benchmarking purposes. The IPAC department has a surveillance process that helps quickly identify patients with communicable diseases then places patients in appropriate isolation precautions to prevent the transmission to other patients and staff.

### Monthly Rates are calculated as follows:

$$\frac{\text{\# of new hospital associated infections}}{\text{\# of patient care days}} \times 1000 = \text{Rate}$$

### Methicillin-Resistant Staphylococcus Aureus

Month 2021	# of new cases	Rate
January	1	1.23
February	0	0
March	0	0
April	1	1.54
May	0	0
June	1	1.30
July	0	0
August	0	0
September	0	0
October	0	0
November	0	0
December	0	0

## Vancomycin-Resistant Enterococcus

Month 2021	# of new cases	Rate
January	0	0
February	0	0
March	0	0
April	0	0
May	0	0
June	0	0
July	0	0
August	0	0
September	0	0
October	0	0
November	0	0
December	0	0

## Clostridioides Difficile

Month 2021	# of new cases	Rate
January	2	2.47
February	0	0
March	1	1.01
April	0	0
May	0	0
June	0	0
July	1	1.17
August	0	0
September	2	2.37
October	0	0
November	0	0
December	0	0

In order to help prevent ARO's, judicious utilization of antibiotics is paramount. HWMH has implemented an Antimicrobial Stewardship program to help monitor the appropriate use of antibiotics at our facility.

**Effective Hand Hygiene** is the single most important intervention to prevent the transmission of ARO's within the facility, along with appropriate screening and implementation of precautions.

The IPAC department conducts regular hand hygiene audits and posts the rates monthly on all units. Hand Hygiene Rates are reported quarterly to the MOH.

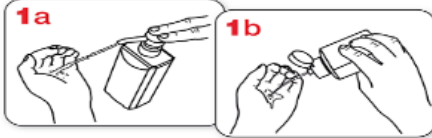
There are **4 moments of hand hygiene** opportunities that are audited. Two of which are reportable.

### 4 Moments For Hand Hygiene

1. Before initial patient/patient environment contact
2. Before aseptic procedure
3. After body fluid exposure risk
4. After patient/patient environment contact



## How to handrub? WITH ALCOHOL-BASED FORMULATION



Apply a palmful of the product in a cupped hand and cover all surfaces.



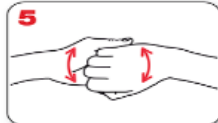
Rub hands palm to palm



right palm over left dorsum with interlaced fingers and vice versa



palm to palm with fingers interlaced



backs of fingers to opposing palms with fingers interlocked



rotational rubbing of left thumb clasped in right palm and vice versa



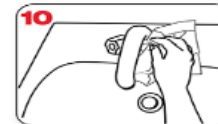
rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa



rinse hands with water



dry thoroughly with a single use towel



use towel to turn off faucet

## How to handwash? WITH SOAP AND WATER



Wet hands with water



apply enough soap to cover all hand surfaces.

Regular hand hygiene audits are conducted to ensure that all staff are following the 4 Moments for hand hygiene. Part of the auditing process also ensures that the hand hygiene is effective and that staff are adhering to the hand hygiene policy.

### Hand Hygiene Rates Per Quarter

Quarter	Moment #1	Moment #4
Q1 April,May,June	78%	83.2%
Q2 July,August,Sept	85%	90%
Q3 Oct,Nov,Dec	82%	85.4%
Q4 Jan,Feb,March		

### Public Health Ontario Just Wash Your Hands

<https://youtu.be/sDUJ4CAYhpA>

<https://youtu.be/o9hjmques72I>