

PROMOTING

HAND HYGIENE BEFORE MEAL

IN TSEUNG KWAN O HOSPITAL

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Background

Hand hygiene (HH) is a fundamental barrier against the transmission of pathogens that cause clustering and outbreaks in acute-care settings. Baseline audits at TKOH Hospital revealed a 74 % compliance rate for HH before meals, indicating a gap in staff adherence and awareness. To strengthen infection-control practices, the TKOH Infection Control Team (ICT) launched a quality-improvement (QI) initiative in October 2025 aimed at embedding HH into the routine of all bedside personnel.

Objective

- To evaluate the impact of a multifaceted QI program on:
- The HH compliance before patient meals
 - The incidence of clustering and outbreaks in the hospital

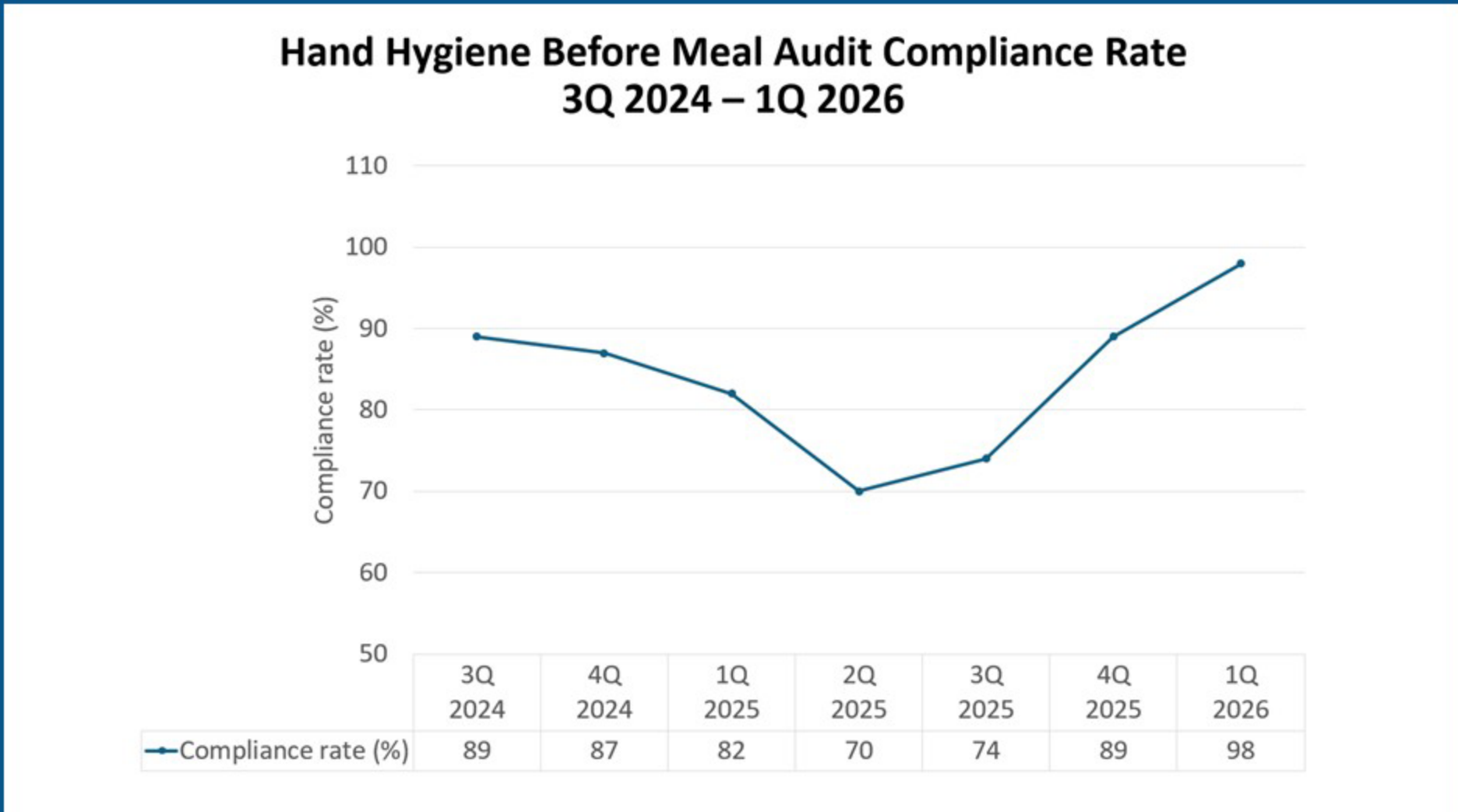
Methods

- The intervention comprised six interrelated components:
1. Education & Promotion: Involved interactive training sessions and scenario-based training. Further promotion during nursing and infection control link person meetings, that highlighted the risks of non-compliance.
 2. Audit Standardization: Involved the development and distribution of audit guide to ensure consistency across units
 3. Instant Feedback: Provided supervisors with real-time alerts for non-compliance, while infection-control nurses offered on-the-spot coaching
 4. Data Sharing: Consisted of presenting quarterly compliance data at the hospital infection-control committee meetings
 5. Training Resources: Including posters, audit guides, which available on the hospital intranet for on-demand access
 6. Delegated trained patient care assistants: Implement routine hand-hygiene before meal round.



Results

Hand-hygiene compliance before patient meals rose from 74% in the third quarter of 2025 to 98 % by the first quarter of 2026. During the same period, one outbreak and two clustering events were successfully controlled, underscoring the program’s effectiveness in preventing transmission.



Conclusion

The QI program that combines education, audit standardization, instant feedback, data sharing, and delegated checks substantially improved HH compliance before meals and eliminated clustering and outbreaks in an acute-care hospital. The model is scalable and sustainable, making it a practical framework for enhancing infection-control performance.

References

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