Inpatient Experience Survey

Cleanliness and hygiene

Environmental cleanliness and good hand hygiene practices matter to patients. One in five (21%) of CM Health patients consider this to be one of the dimensions of care that they consider makes the most difference to their care and treatment. And they expect hospitals to be clean.

Healthcare associated infections are one of the most common adverse events in healthcare world-wide. Around ten percent of patients admitted to modern hospitals in the developed world acquire a healthcare-associated infection.

Take a moment to think about this. One in every ten patients in the developed world will acquire an infection in our hospitals. These infections can have a profound impact on the lives of our patients. In addition to requiring additional medication or care, longer hospital stays, hospital readmissions, and the impact on our patients is at best unpleasant, and at worst fatal.

And these are largely preventable through a clean and hygienic environment and good hand hygiene.

Good hygiene practices quite literally save lives.

Hand hygiene

This report is a timely reminder to us that effective hand hygiene is the single more important thing we can do to prevent healthcare associated infections. It works.

Our patients are paying attention. They are commenting when we wash our hands - and they are noticing when we do not. Patients described staff examining them and undertaking procedures such as central line catheters, without cleansing their hands.

This is particularly worrying as we know central line associated infections (CLAB) can cost between $20,000 and $50,000 to treat, and can have a potentially devastating impact on our patients’ health and lives.

Patients are telling us they are deeply concerned if we follow poor hygiene procedures, and are reassured by good practice. They want to see staff wash their hands and are asking us to cleanse our hands in front of them.

Remember, there are five moments for hand hygiene which are critical to the prevention and control of infections.

These are:

1. Before touching a patient
2. Before a procedure
3. After a procedure or body fluid exposure risk
4. After touching a patient
5. After touching a patient’s surroundings

Clean environment

Patients are also concerned about the cleanliness of the floor, walls, bedside tables, bathrooms and toilets. Some provided examples of unsanitary areas in detail. In a hospital environment many of these incidents are inevitable. It is how we respond which is important.

We all need to be alert to the cleanliness of our hospital environment. Our patients and their families provide us with extra eyes.

Encourage patients to report areas that have been soiled, or are unclean and thank them when they do so. They are helping us to make sure our hospital is kept clean and hygienic. Make sure you contact the cleaning service outside scheduled times if areas are unsanitary.

Half our patients commented that they were impressed with our standards of cleanliness and hygiene. Let’s build on this good work as ensuring a sanitary environment will help us to reduce health acquired infections and help us save the lives of patients in our care.

David Hughes
Deputy Chief Medical Officer
PATIENT VOICES

Rated overall care excellent
“...[As] a nurse it is always hard being on the other side, but from the moment I arrived at the hospital till I left the next day, me and my family were amazed at the care I received....”

“After having bad experiences over the years with CMH I was very pleasantly surprised at how well [it went]. Having the nurse manager walk me to theatre and going off to sleep with her rubbing my shoulder and offering reassurances was very welcome... The whole service runs like a very well-oiled machine from the 1st apt letter to my outpatient appointments. My family were included in my care and welcomed by staff, thank you all very much [for] giving me back my life.”

Rated overall care very good:
“It was no nonsense with very effective treatment. All staff [on my ward] were very hard working. It was manic at times but they just carried on.”

“The nurses in my ward were amazing they were particularly attentive and very empathetic and caring without over stepping. I have been a patient in many hospitals over the years and this was my first admission to Middlemore and I have to say I’ve never had such great nurses and they made my stay a whole lot more bearable”

Rated overall care good
“The nurses and support staff do their best. I feel I’ve been let down by the professionals who haven’t communicated with me about my results or next steps since I left hospital despite saying they would when they had analysed the MRI scan. I don’t think they know what to do with me so they’ve done nothing.”

Rated overall care fair
“I found the night shift staff very nice. Nurses were unsure how to answer my questions and seemed to ignore me. Any treatment I got I had to ask what they were going to do when this should have been explained to me up front. On discharge I waited nearly an hour for a wheelchair to get me to the car, in the end my husband went and found one.”

Rated overall care poor
“The nurses [were] great and other doctors were amazing - the last doctor was an embarrassment and had no regard or respect for myself & my wife. I was in agony when I left the hospital early with a distraught wife and the wrong medication.”

Overall care and treatment
Over 1,800 patients to date have completed the survey (as of 21st May 2015.) Most patients rate the care and treatment at Counties Manukau Health positively, with an average of 81 per cent rating it very good or excellent. Eight per cent of patients, however, rate their care as poor or fair.

What matters to patients
A driver analysis of CM Health patient ratings shows that those who feel they get consistent and coordinated care whilst in hospital, who are confident about the quality of their care and treatment, have their cultural needs met and who are treated with compassion, dignity and respect are more likely to rate their overall care and treatment highly.

CM Health performs well on most of the measures described above, with between 60 to 80 per cent of patients rating our performance in these four areas as excellent.

The graph below ranks the dimensions of care in order of what matters most to patients and shows how we are doing on each of those dimensions. The percentages of patients who say that each dimension makes a difference are listed next to each.
Cleanliness and hygiene

Cleanliness and hygiene is one of the most important aspects of hospital safety. Poor cleanliness and hygiene can cause healthcare associated infections leading to longer hospital stays, unplanned readmissions, long term disabilities and in some cases, death. There is also a substantial cost associated with treating patients with infections picked up in hospitals, with the Health Quality and Safety Commission estimating the annual cost of treating patients to be around $140 million per year.

Cleanliness and hygiene is also important to our patients, with one in five patients identifying this as an aspect of our service that makes the most difference to their care and treatment.

In the past year (1st May 2014 to 31 April 2015) two-thirds of patients (66%) said their hospital room or ward was very clean. One in twenty patients, however (5%) say that their room or ward is not very clean or not at all clean.

Cleanliness of the hospital room or ward (%)

<table>
<thead>
<tr>
<th>Service Group</th>
<th>Not at all clean</th>
<th>Not very clean</th>
<th>Fairly clean</th>
<th>Very clean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall</td>
<td>1</td>
<td>30</td>
<td>66</td>
<td>47</td>
</tr>
<tr>
<td>Kidz First</td>
<td>9</td>
<td>44</td>
<td>47</td>
<td>47</td>
</tr>
<tr>
<td>Women's Health</td>
<td>3</td>
<td>31</td>
<td>66</td>
<td>47</td>
</tr>
<tr>
<td>Surgical and Ambulatory</td>
<td>3</td>
<td>27</td>
<td>69</td>
<td>58</td>
</tr>
<tr>
<td>Medical services</td>
<td>2</td>
<td>7</td>
<td>58</td>
<td>49</td>
</tr>
</tbody>
</table>

Medical services n=371; Surgical and Ambulatory n=911; Women’s Health n=341; Kidz First n=55. The differences between service groups are small but significant (p< .05). Note that the data from some divisions are too small to be included here (<50).

Over half of those who used the toilets and bathrooms (57%) rated them as very clean. There were, however significant differences between the health service groups, with less than half of patients in Kidz First and Medical Services rating the toilets and bathrooms as very clean.

Cleanliness of toilets and bathrooms (%)

<table>
<thead>
<tr>
<th>Service Group</th>
<th>Not at all clean</th>
<th>Not very clean</th>
<th>Fairly clean</th>
<th>Very clean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall</td>
<td>2</td>
<td>7</td>
<td>57</td>
<td>38</td>
</tr>
<tr>
<td>Kidz First</td>
<td>8</td>
<td>55</td>
<td>38</td>
<td>47</td>
</tr>
<tr>
<td>Women’s Health</td>
<td>8</td>
<td>33</td>
<td>59</td>
<td>42</td>
</tr>
<tr>
<td>Surgical and Ambulatory</td>
<td>6</td>
<td>32</td>
<td>61</td>
<td>49</td>
</tr>
<tr>
<td>Medical services</td>
<td>8</td>
<td>37</td>
<td>49</td>
<td>49</td>
</tr>
</tbody>
</table>

Medical services n=382; Surgical and Ambulatory n=918; Women’s Health n=352; Kidz First n=56. Note that the data from patients who did not need to use a toilet or bathroom have been excluded and the data recalculated.

Some patients did not notice whether staff members used a hand sanitiser or washed their hands before they were touched or examined. Of those who did notice, however, more than three-quarters said staff always washed their hands. A substantial minority, however, said that staff did not always wash their hands.

Hand hygiene (%)

<table>
<thead>
<tr>
<th>Professional Group</th>
<th>No</th>
<th>Sometimes</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doctors</td>
<td>5</td>
<td>13</td>
<td>82</td>
</tr>
<tr>
<td>Nurses and midwives</td>
<td>3</td>
<td>17</td>
<td>80</td>
</tr>
<tr>
<td>Other staff</td>
<td>4</td>
<td>10</td>
<td>79</td>
</tr>
</tbody>
</table>

Doctors n=1338; Nurses and midwives n=1271; Other staff n=603. Note that don’t know/can’t remember answers have been excluded and the data recalculated.

Patient comments

“The bathroom was dirty; a bin was near my bed where fluid/vomit from another patient was emptied.” (Rated 5 – moderate)

“Rubbish on floor for days, had bloody sheets for three days, no one changes the bed linen.” (Rated 2 – poor)

“Everything I saw was clean and the doctor took all precautions with cleanliness.” (Rated 10 – excellent)
A closer look at cleanliness and hygiene
A total of 225 patients commented on cleanliness and hygiene. Note that some patients make more than one comment; therefore percentages may exceed 100%

### Positive comments

**Generally clean and tidy**

Nearly one third of patients (32%) commented that the facilities look and are kept clean and tidy. A further 1 per cent felt the facilities smelt fresh and clean.

“ICU was spotless and I felt safe. “

“Everything was kept clean. Nurses would check the bathroom make sure it was clean before use etc.”

**Staff hygiene practices**

One in six patients who commented noticed when staff wore gloves (5%), washed hands regularly (4%), used hand sanitiser (5%) or gowns (1%).

“Staff used gloves each time they saw a patient, and I never once saw anyone not use sanitizer before and after seeing me.”

**Cleaned regularly**

Patients appreciated it when facilities were regularly cleaned, which included bathrooms, toilets and wards, and regularly changing beds.

“While I was there - there was constant cleaning of everything and if someone left to go home it wasn’t long before the bed and surrounding items area were cleaned.”

**Helpfulness and thoroughness of cleaning staff**

Patients appreciated it when cleaning staff were thorough, helpful, friendly and efficient.

“I put cleanliness right up there as one of the most important factors in a hospital. I was delighted to see the same lady each day cleaning our ward to a very high standard.”

### Areas to improve

**More regular cleaning required**

Patients felt that floors needed to be cleaned more regularly (10%), beds were not changed regularly (10%), hard to reach places - under beds, corners etc were not cleaned (8%), bins should be emptied more often 2% and there was an obvious difference between weekdays and weekend cleaning (1%).

**Bathrooms, toilets and showers**

Patients commented that bathrooms, toilets, and showers were dirty and need to be cleaned more regularly.

“The sink, toilet bowl and mirror had the same dirty marks on all week that I was there. And there was dropped toilet paper on the floor for three days.”

**Staff hygiene practices**

Some staff did not use hand sanitiser, wash their hands or wear gloves before touching patients.

“I have had some nurses try to handle my PICC line without washing their hands I respectively asked them to wash up before touching the line because from what I understand the line sits close to my heart.”

**Other**

Patients also commented that they were bitten by insects, caught infections, that food trays were not clean and that soiled areas that needed cleaning were not attended to. Some felt that cleaners were not using hygienic practices, e.g. they used the same cloths on toilet areas and other surfaces.

### ACTIONS

**HOW TO IMPROVE
CLEANLINESS AND HYGIENE**

Cleanliness and hygiene is an important safety issue. Patients expect hospitals to have extremely high standards of hygiene as they are aware of the risk of infection. They feel unsafe when they see a dirty environment or unhygienic practices.

**Cleanliness**

Patients are asking us to:

- Thoroughly clean bathrooms and toilets regularly and properly
- Use different cloths for toilets, basins, floors and ward rooms

They are also asking staff to:

- notice when toilet and bathroom areas are soiled and need cleaning outside of scheduled times, and report this
- check that rooms are clean, bins are emptied, and used or soiled linen is cleared away, and
- contact cleaning staff promptly to ensure areas are kept clean and hygienic.

**Hand hygiene**

Hand hygiene is important to patients. They are noticing when staff don’t wash their hands or use gloves. They are asking us to:

- wash and cleanse our hands in front of them,
- wash and cleanse our hands both before and after touching them

**Supporting the survey**

Please remember that the survey relies on staff collecting email addresses from patients. Please do not assume that patients do not have email addresses – check first, as many do. Also, please check that the email address provided is correct.

**CONTACT**

For more information on the Patient Experience Survey, please contact Consumer Experience Coordinator, Lyndee Allan at Lyndee.Allan@middlemore.co.nz