

Brief interview with Claudia Becker

“Theory is good – precise instructions are better”

Three questions to Claudia Becker, Specialist Nurse for Hospital Hygiene, St. Nikolaus-Stiftshospital GmbH, Andernach, Germany.

How do you experience the increasing antibiotic resistances in daily routine?

Claudia Becker: Patients with multidrug-resistant pathogens, especially Gram-negative bacteria, are not uncommon anymore and are present every day when treating and caring for patients. Our screening on admission shows that most patients bring these pathogens to the hospital. This causes uncertainty among employees and raises questions: What do I need to consider? How do I protect patients and myself against multidrug-resistant pathogens? This requires a high degree of advice and on-site support, because we know that hand hygiene is the most important measure to prevent transmission and infection – also in case of multidrug-resistant pathogens. The continuous training of the 5 Moments for Hand Hygiene and the implementation of the necessary isolation measures is the focus of the consultations. Theoretic knowledge alone is not enough; it requires concrete instructions for good hygiene directly at the patient.

So, you have established new standard processes in your clinic. What effect did they have on the patient safety?

Claudia Becker: Many of the everyday nursing measures are highly complex – standardised processes break these procedures down into steps that are easier to understand. The change of a wound or venous catheter dressing, for example, comprises around 14 individual steps – including four situations that involve the risk of infection for patients. The SOP highlights these moments to emphasise patient protection.

A method that achieved clear successes in our clinic: within a few months, we were able to increase the compliance from 75 per cent to 88 per cent during the aseptic dressing change. This in turn was of direct benefit to the patients as surgical site infections after the indicator surgery ‘colon’ decreased.

What are the next steps and what recommendations do you have for other clinics to increase compliance?

In a next step, we want to extend our good experience with the dressing change SOP: first, we will continue to provide support to the wards in our facility until the compliance is over 80 per cent in all areas. Afterwards, we will implement the SOP on placing a peripheral venous catheter.

I hope that we will inspire other clinics to increase compliance with our story of success. The hygiene staff’s intensive support to the employees may be time consuming, but it is worth it. The holistic approach not only is a major contribution to infection control, but also motivates the staff



and provides more security in daily routine and when treating patients with multidrug-resistant pathogens.

Source

“Like the domino effect – the impact of improved hygiene processes.” Speech by Claudia Becker, Specialist Nurse for Hospital Hygiene, St. Nikolaus-Stiftshospital GmbH, Andernach, Germany held at the Lunchtime Symposium “Pathogens resistant to antibiotics: new hygiene strategies along the patient journey”, 17 November 2016, Berlin, arranged by the BODE SCIENCE CENTER, Hamburg, scientific centre of excellence of PAUL HARTMANN AG, Heidenheim.

