hand hygiene; therefore, a more robust strategic approach is needed. One such strategy is customized audit with real-time feedback. A literature review highlighted the effectiveness of audit coupled with specific feedback. This approach was also supported by several guidelines and regulatory bodies that recognized the importance of audit and feedback in hand hygiene improvement efforts. For example, the World Health Organization (WHO) has emphasized 5 core components of improving hand hygiene. One of these components is evaluation and feedback. We sought to provide feedback to healthcare personnel when they do not show compliance with the Five Moments of Hand Hygiene. We aimed to achieve >95% hand hygiene compliance among healthcare staff. **Methods:** Information on the use of the hand hygiene feedback card was provided to the auditors. The hand hygiene feedback card procedure began in all the wards in May 2020. This process first started with orientation of the auditors regarding the hand hygiene feedback card, followed by auditing hand hygiene practice. Staff who did not comply with hand hygiene procedures were given real-time feedback via a card that specified the missed hand hygiene movement. **Results:** Overall hand hygiene compliance among healthcare staff increased by 6% after the hand hygiene feedback card procedure was implemented. **Conclusions:** Overall, the hand hygiene feedback card was effective in improving hand hygiene. Through this quality improvement project, significant and sustained gains in hand hygiene compliance rates of >95% can be achieved.

**Conflict of Interest:** None

**Authors:** Shariqa Binti Jezlan, National University Hospital, Singapore; Wei Hong Lai, National University Hospital, Singapore; Jack Yew Ting, Hospital Director’s Office, Sarawak General Hospital, Kuching, Malaysia; Tun Ng Wang, Sarawak General Hospital, Kuching, Malaysia; Dato Dr. Mohd Ariffin bin Wadi, Sarawak General Hospital, Kuching, Malaysia

**Antimicrobial Stewardship & Healthcare Epidemiology 2023;3(Suppl. S1):s16–s19
doi:10.1017/ash.2023.47**

**Subject Category:** Hand Hygiene

**Abstract Number:** SG-APSC1171

A new approach of hand hygiene observation with focus on healthcare worker (HCW) category

**Wee Ling Tee,** National University Hospital, Singapore; **Dale Fisher,** Singapore National University Hospital, Singapore; **Catherine Teo,** Singapore National University Hospital, Singapore; **Razali Bin Mahdi,** Singapore National University Hospital, Singapore; **Yvonne Lum,** Singapore National University Hospital, Singapore

**Objectives:** The past hand hygiene (HH) compliance rate has indicated the low number of opportunities for some healthcare workers (HCWs) because the infection control liaison officer (ICLO) tended to capture opportunities from nurses who were available, despite the proportional allocation of opportunities per HCW type based on the World Health Organization (WHO) HH methodology. Therefore, HH compliance rates may not have accurately represented the specific HCW type, which may have affected the overall HH compliance rate. We sought to determine an accurate baseline of HH compliance rate with consistent number of opportunities across all HCW categories. **Methods:** HH auditors were ICLOs trained in HH observation by the infection control nurse (ICN) according to the WHO “My Five Moments of Hand Hygiene.” HH observations were conducted bimonthly with assigned areas focusing only on 1 HCW category for each session: nursing, medical, clinical support services, or environmental services. A briefing session was given on the day of the observation, with the goal of collecting 20 opportunities per area with HCW focus during their peak activities. Direct feedback and positive reinforcement were given to HCWs after observations were completed. **Results:** A survey of 96 ICLOs indicated that observations based on HCW focus allowed them to capture more HH opportunities and concentrate on their observations. The new approach showed a significant increase in number of opportunities across all HCW categories that was more representative. We also successfully determined a new baseline for all HCW categories, with further breakdown of HH type. **Conclusions:** A new methodology of HH observation with a focus on HCW category has resulted in more HH opportunities across all HCW categories and improved representation of the HH compliance rate.

**Conflict of Interest:** None

**Authors:** Wee Ling Tee, National University Hospital, Singapore; Dale Fisher, Singapore National University Hospital, Singapore; Carol Vincent, Unilever, Trumbull, Connecticut, United States; Rimpa Ghosh, Unilever, Mumbai, India; Chandraprabha Doraiswamy, Unilever, Bangalore, India; Amitabha Majumdar, Unilever, Bangalore, India

**Antimicrobial Stewardship & Healthcare Epidemiology 2023;3(Suppl. S1):s16–s19
doi:10.1017/ash.2023.49**

**Subject Category:** Hand Hygiene

**Abstract Number:** SG-APSC1137

12-hydroxystearic acid upregulates skin antimicrobial peptides in skin models and provides long-lasting protection from bacterial challenge from a handwash formulation

Morris Waskar, Unilever, India; Xuelan Gu, Unilever, Shanghai, China; Tingyan Mi, Unilever, Shanghai, China; Meenakshi Swaminathan, Unilever, Mumbai, India; Carol Vincent, Unilever, Trumbull, Connecticut, United States; Rimpa Ghosh, Unilever, Mumbai, India; Chandraprabha Doraiswamy, Unilever, Bangalore, India; Amitabha Majumdar, Unilever, Bangalore, India

**Objectives:** We evaluated the role of 12-hydroxystearic acid (12HSA) in upregulating skin antimicrobial peptides (AMPs) in vitro and ex vivo