

“Improving hand hygiene compliance among health workers”

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INTRODUCTION

According to WHO, health care-associated infections are a major cause of morbidity and mortality among thousands of people each year (11, 2).

Effective hand hygiene performance, using antimicrobial soap or hand rub (ABHR, 2), is regarded as the most effective preventive measure against spreading of infections between the patients in therapeutic environment (2, 10). Nevertheless, the degree of responsiveness to hand hygiene guidance is usually relatively poor (1, 5, 8).

OBJECTIVE

The main goal was to raise the compliance to correct and effective hand hygiene performance among nurses and nursing assistants, according to the 5 moments model.

Secondary goal was to empower dialysis patients by involving them in hand hygiene process.

METHODS

In order to evaluate the extent of importance to perform hand hygiene, the staff (N=16), filled in a 30 questions questionnaire.

To quantify the percentage of hand hygiene compliance, I've made approximately 150-200 direct observations using the international hand responsiveness blanket based on the 5 moments.

החיד	לחלוטין לא	מסוימת	מסוימת	מסוימת	מסוימת	מסוימת
1.	0	4	3	2	1	0
2.	0	4	3	2	1	0
3.	0	4	3	2	1	0
4.	0	4	3	2	1	0
5.	0	4	3	2	1	0
6.	0	4	3	2	1	0
7.	0	4	3	2	1	0

Health care workers questionnaire (section)

החיד	מסוימת	מסוימת	מסוימת	מסוימת	מסוימת	מסוימת
1.	0	4	3	2	1	0
2.	0	4	3	2	1	0
3.	0	4	3	2	1	0
4.	0	4	3	2	1	0
5.	0	4	3	2	1	0
6.	0	4	3	2	1	0
7.	0	4	3	2	1	0

Hand responsiveness according to 5 moments



INTERVENTION

1. Frontal guidance of all the staff (N=16) about the issue.
2. Construction of proper hand hygiene performance clusters and including them as part of staff's work instructions.
3. Guidance of all the patients about hand hygiene importance which will become a part of the Department's training program.
4. Direct online guidance of staff member during observations.
5. Ensure the availability and accessibility of ABHR on each dialysis machine.

A month after the intervention I implemented another data collection, including:

1. Questionnaire including 30 questions to the relevant staff.
2. Observations accordingly to "5 moments".

RESULTS – Hand Hygiene Observations:

	Nurses			Nursing Aid		
	Total observations number	Performing Hand hygiene	Hygiene Compliance	Total observations number	Performing Hand hygiene	Hygiene Compliance
Before Intervention	139	61	44%	56	1	17%
After Intervention	122	100	82%	38	19	50%

Total hand compliance before intervention was 30.5% and after intervention 66%.

The level of knowledge as measured in the first round of health care questioning was 90% among nurses and 87% among nursing aid.

CONCLUSIONS and RECOMENDATIONS

The overall percentage of Hand Hygiene compliance in our unit rose by 35.5%. As can be seen above, a higher increase was measured among nurses versus nursing assistants.

The intervention program had a central part in raising staff's compliance. There are still several staff members who need additional individual attention in order to elevate their willingness to follow the instructions, as a result of which will raise further the overall hand hygiene performance compliance.

I learned that although there is a high level of knowledge and understanding of the importance of performing correct hand hygiene there is a gap between understanding and application in the field. That's why I dismissed the second round of staffs questioning because the level of knowledge as measured in the first round was about 90% high. Furthermore involving the patients on the subject didn't show any significant effect.

Raising the knowledge and the awareness of the staff was only a little part of the puzzle. The most important part in my opinion were the direct online guidance of staff member during observations. Maintaining a high level of compliance is an ongoing process that should be promoted

Integration of Hand Hygiene compliance as part of the departmental policy will increase the compliance of the health workers . I recommend to construct a divisional patient safety convention which will point out the "hand hygiene performance" and hang it in a conspicuous area in the department.