The aim of this study was to improve hand hygiene compliance by implementing gloved hand disinfection as a resource-neutral process optimization strategy” Fehlinga et al (2019).

Summary:

Background: Hand hygiene compliance even before infection prone procedures (indication 2, “before aseptic tasks”, according to WHO) remains disappointing. The aim of this study was to improve hand hygiene compliance by implementing gloved hand disinfection as a resource-neutral process optimization strategy.

Methods: We performed a three-phase intervention study on a stem cell transplant ward. After baseline evaluation of hand hygiene compliance (phase 1) gloved hand disinfection was allowed (phase 2) and restricted (phase 3) to evaluate and differentiate intervention-derived from learning and time effects. The incidence of severe infections as well as hospital-acquired multi drug-resistant bacteria (MDRO) was recorded by active surveillance.

Findings: Hand hygiene compliance significantly improved from 50% to 76% (p<0.001) when gloved hand disinfection was allowed. The biggest increase was for infection-prone procedures (WHO 2) from 31% to 65%; p<0.001. Severe infections decreased by trend (6.0 to 2.5 per 1000 patient day) whereas transmission of multi drug-resistant organisms was not affected, respectively. Taken together, gloved hand disinfection significantly improved compliance with the hand hygiene, especially in activities relevant to infections and infection prevention. Thus, this process optimization may be an additional easy implementable, resource-neutral tool for a highly vulnerable patient cohort.

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Reference:

prone procedures on a stem cell ward. The Journal of Hospital Infection. June 18th. DOI: https://doi.org/10.1016/j.jhin.2019.06.004.