Editorial

Better Hand Hygiene Means Safer Care

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The 1st World Health Organization (WHO) Global Patient Safety Challenge, “Clean Care is Safer Care”, was launched in October 2005. Since then, Prof Didier Pittet, the External Programme Lead reported that 131 WHO Member States and autonomous areas have pledged their support. As of May 2013, over 15,700 healthcare facilities with more than 9 million healthcare workers (HCWs), and more than 3.9 million patient-beds in 168 countries have registered their commitment to good hand hygiene as a routine practice.1

This has been a significant landmark in the history of Infection Prevention and Control as compliance to proper hand hygiene has been a real challenge since Ignaz Philipp Semmelweis first highlighted its effectiveness in reducing healthcare associated infections in 1847. He demonstrated that the incidence of puerperal fever could be significantly reduced by the use of hand disinfection (chlorinated lime) in obstetrical clinics at the Vienna General Hospital.2 Unfortunately, he failed to convince his fellow colleagues and died in an asylum in 1865. The hand hygiene campaign is timely in this era of emerging multidrug resistant organisms where the Gram-negative bacilli, viz. the carbapenem resistant Enterobacteriaceae have taken over the Gram-positive bacteria as the current organism to be feared.3 Most healthcare organisations’ hand hygiene policies have the WHO 5 Moments as the key practices to be embraced by all healthcare workers—before touching a patient; before cleaning and antiseptic procedures (inserting devices such as catheters); after contact with body fluids; after touching a patient; and after touching patient’s surroundings.4,5

Since 2009, WHO declared 5 May as World Hand Hygiene Day to be celebrated worldwide to further champion the practice of hand hygiene. This year, WHO’s call to action is 2-fold:6

1. To continue to focus on hand hygiene monitoring and feedback.
2. To identify the best ways to gather patient participation in hand hygiene promotion and improvement, according to the local culture and facility’s current hand hygiene strategy.

The annual Hand Hygiene Day is a great boost to the Infection Control programmes worldwide. Many Infection Control professionals find encouragement in joining hands with its peers in promoting the practice of hand hygiene. The WHO website generously publishes activities held in various countries, and this platform of sharing best practices further fueled encouragement, interest and enthusiasm to do even more. These activities include innovative means of spreading the hand hygiene message e.g. through skits, songs, dance, poster competition, etc.

Those who meticulously implemented the WHO multimodal strategy (system change, training and education, evaluation and feedback, reminders in the workplace, institutional safety climate) achieved significant improvement in their hand hygiene compliance and associated reduction in healthcare associated infections.7,8 The first sub-part of this year’s call to action for continual effort in hand hygiene monitoring and feedback is necessary for continuous improvement. This echoes Lord Kelvin’s famous quote “If you can not measure it, you can not improve it.”

The second sub-part of call to action for engaging patient participation is a challenge because most patients hesitate to point out failures in hand hygiene compliance amongst healthcare providers. Pittet et al9 showed that 57% of the public were unlikely to question doctors on the cleanliness of their hands as they assumed that they had already cleaned them, whilst 43% considered that HCWs should know to clean their hands and trusted them to do so, and 20% (42/210) would not want HCWs to think that they were questioning their professional ability to do their job correctly. The rationale in the paradigm shift from patient education to patient engagement was the belief that patients playing a more active role in their health care could improve quality, efficiency, and health outcomes.10 Though challenging, it is not impossible as more and more of our patients are informed of expected healthcare standards including the practice of hand hygiene to prevent healthcare associated infections.

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Patients are encouraged to:11

1. Ask if an initiative involving patients or a patient participation programme exists. If yes, ask whether there is a leaflet or information sheet about it and express their interest in participating.

2. Not to be afraid to ask about hand hygiene practices in the facility. While healthcare workers make every possible effort to provide them with the best care, they have the right to ask for information and to check if best practices are in place. This can significantly help improve healthcare delivery.

3. Observe if alcohol-based handrub dispensers, as well as sinks, soap and towels are available in your room or if healthcare workers carry pocket bottles. If not, gently ask why hand hygiene products are not available, and possibly ask for a small bottle of alcohol-based handrub product to keep by the bed.

4. If hand hygiene products are available, start by thanking their doctor, nurse, or other healthcare worker when they see them cleaning their hands before touching them or any critical site (e.g. catheter, wound dressing, drainage tube).

**Conclusion**

Preventing and reducing healthcare associated infections is part of patient care. Cleaning our hands according to WHO 5 Moments is our responsible act towards ensuring patient safety in our healthcare delivery system. Patients are now challenged to be more informed and take a greater role in their care, through greater involvement in decision making, and better management of their medicines and lifestyles. We can and should engage our patients in the hand hygiene programme and perhaps, that will help make the practice of appropriate hand hygiene more sustainable instead of it having a life span that equals that of a campaign.

**REFERENCES**