

Compliance to Hand Hygiene World Health Organization Guidelines in Hospital Care

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DEAR EDITOR,

With the emergence of antibiotic-resistant organisms, the importance of hand hygiene (HH) has re-emerged as a priority for the 21st century hospital administrators.^[1-3] It is proven fact that, organisms that cause hospital acquired infections (HAI) are most commonly transmitted by health care workers^[4] and it is a proven fact that HAI rates are significantly reduced when health care workers act in accordance with recommended guidelines.^[4-6] Despite this fact, physicians' adherence to HH practices remains consistently poor.^[6,7]

Various tools and methodologies have been developed over the years for HH compliance measurement. In 2005, World Health Organization (WHO) launched Global Patient Safety Challenge under the slogan of "clean care is safer care" and in 2010, WHO under patient safety a world alliance developed a systematic tool, HH Self-Assessment Framework (HHSAF) to obtain a situation analysis of HH promotion and practices within an individual health care facility?^[8]

The present study was carried out to assess the HH compliance rate, assess the gaps and plan HH improvement measures in the facility's intensive care units and points out major obstacles in health care setting. Such sort of studies are lacking in India. The tool is divided into 5 components

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and 27 indicators. These five components reflect the five elements of the WHO Multimodal HH Improvement Strategy.

After completing each component, scores were added up to calculate the overall score to identify the HH level, health care facility has achieved. The score were assessed as intermediate level of HH with scores of 0-125, basic with 126-250, intermediate (or consolidation) with 251-375 and advanced (or embedding) with scores of 376-500.

The scores of each component was added and a total score of 225 was obtained and on WHO HHSAF scoring level, it was found that facility only fits into the 'Basic' level of HH level [Table 1].

The study provides that HH compliance among staff is low and there is a need to design

Table 1: Scores as per hand hygiene self-assessment framework level

Component	Score	Subtotal
System change		85
Education and training		5
Evaluation and feedback		50
Reminders in the workplace		50
Institutional safety climate		25
Total		215

HH promotion intervention programs. Health care organizations must have a dynamic infection control team, robust surveillance system, adequate staff to disseminate evidence-based knowledge; the hallmark of improving the patient care services.

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