

# [Changeing hand hygiene at the point of care](https://assignbuster.com/changeing-hand-hygiene-at-the-point-of-care/)

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Research Proposal Proposed Research Topic: “ Changing Hand Hygiene Behavior at the Point of Care” Background: Over the past several years, there has been a significant increase in the incidence of preventable Health Care Infections such as Clostridium Difficile. The World Alliance for Patient Safety launched by The WHO in 2004 advocates a “ clean care is safer care” program, in which health care leaders sign a pledge to take specific steps to reduce hospital associated infections in their facilities. Hand hygiene is the first focus in this worldwide initiative. Recognizing a worldwide need to improve hand hygiene in healthcare facilities, the WHO produced Advance Draft, launched its “ Guidelines on Hand Hygiene in Health Care” along with the “ Implementation Toolkit” that have been available since 5 May 2009 on the occasion of the launch of the “ Save Lives: Clean Your Hands” initiative. The WHO regards hand hygiene as an essential tool for the prevention of nosocomial infection, but compliance in clinical practice is often low  Clostridium Difficile infections Alcohol Hand Rubs verses Hand washing with soap and water (Clostridium Difficile requires soap and water). Rationale: Purpose: Since most nosocomial infections are transmitted via contaminated hands of health care workers, This study aims to improve the hand hygiene practice of various health care professionals such as RN’s, LPN/LVN, and NA (nursing assistants), through the use of CDC’s “ WHO model for improving Hand Hygiene”. Moreover, it also aims to provide a basic understanding of hand washing with soap and water verses alcohol based hand rubs.  Objectives: To assess the existing knowledge and practices of RN’s, LPN/LVN and NA’s regarding hand hygiene To provide education regarding the importance of hand hygiene, the role of health care professionals in the transmission of nosocomial infections and measures to overcome the transmission of such infections to RN’s, LPN/LVN and NA’s involved in the provision of patient care. To elucidate the impact of the aforementioned education sessions and the use of “ WHO model for improving Hand Hygiene” on the existing knowledge and practices of the RN’s, LPN/LVN and NA’s. Theoretical framework:  Hypothesis: After the education sessions and implementation of “ WHO model for improving Hand Hygiene,” there will be improved hand hygiene among RN’s, LPN/LVN’s and NA’s (nursing assistance) providing direct patient care on units 5A; 5C; 4A; 4C and CLC-B  Methodology: Operational Definition of variables: Health Care Infections: Who Model for Hand Hygiene:  Study design: This will be a Quantitative, Quasi-experimental study. Study subjects: All RN’s, LPN/LVN and NA’s who are involved in the provision of care to patients on units 5A; 5C; 4A; 4C and CLC-B will be enrolled in this study. Study site: Units 5A; 5C; 4A; 4C and CLC-B, Chatham University  Sample selection criteria: Cluster sampling technique will be used to select participants for this study whereby clusters which have been chosen subjectively will be considered to be the representative of the entire RN’s, LPN/LVN and NA population. Inclusion criteria will include: • Age above 18 years • Either gender • Consent to participate RN’s, LPN/LVN and NA’s working on units 5A; 5C; 4A; 4C and CLC-B  Exclusion criteria will include: Inability to participate for the entire 10 weeks of study duration (e. g.: those nurses who had scheduled leaves in between the study timeframe) Data Collection Procedure: Clinical Focus Sessions will be provided three times a day 3 times weekly (one session per-shift) to RN’s, LPN/LVN and NA’s during which they will be educated regarding the importance of hand hygiene, the various modes of transmission of communicable diseases and how they can be prevented. A pre-test questionnaire will be administered to each participant in order to evaluate their baseline knowledge regarding hand hygiene practices. This will be followed by Hand Hygiene Education sessions. There will be various different instructional methodologies employed to disseminate information amongst participants including PowerPoint presentations, Short Videos, Question and answer sessions, live demonstrations on the optimal hand washing techniques and participant re-demonstration. A special Ultraviolet light will be used to show participants the efficacy of their hand hygiene techniques (This will be provided by the Infection Control Department). After the completion of these sessions, a post-test questionnaire will be administered in order to evaluate the impact of these sessions on the existing knowledge and practices of the participants. Analysis Plan: Statistical analysis will be performed using SPSS version 17. 0. Descriptive statistics such as mean and standard deviation will be reported for continuous variables such as age. Proportions will be reported for categorical variables such as gender. Chi-square test will be used to compare categorical variables and t-test for continuous variables. Ethical Considerations: There are no known benefits or risks involved to the participants in this study. Written informed consent will be obtained from each participant which will contain a description of the study background, study objectives and procedures in layman terms. The right to refuse participation and withdraw at any time from the study will be stated. There will be no remuneration for participation in this study. No identifiable information such name, medical record number, etc of the participant will be recorded, except for Degree level, i. e. RN-LPN/LVN or NA and Unit worked, and therefore, all information will remain confidential. The Data Collection questionnaires shall be destroyed once the study is complete. No participants will be excluded from the study on the basis of race, religion or ethnicity. Limitations: This sample for this study will be collected in a single tertiary hospital-based setting and therefore, may not be representative of the general nursing population. Moreover, time constraints of the semester will only allow for RN’s, LPN/LVN’s and NA’s (nursing assistance) providing direct patient care on units 5A; 5C; 4A; 4C and CLC-B to be recruited in this study. Although the inclusion of all Health Care Workers (HCW) who provide direct patient care even outside of5A; 5C; 4A; 4C and CLC-B would provide valuable comparisons but due to time and logistic constraints, the study sample will be limited to the aforementioned nurses. Proposed Timeline: 10 weeks beginning May 9th, 2011, upon written permission from the IRB.