



Healthcare Worker Education as Part of a Multi-modal Strategy

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Many assume that healthcare workers (HCW) know when and how to perform hand hygiene, but published evidence supports that this is not always true.¹ As the cornerstone of infection prevention, hand hygiene education is critical and continued investment in training must occur in order to build the capability of HCW to provide quality healthcare competently, safely, and efficiently. A major challenge with providing hand hygiene education to HCW is that they are busy, and pulling them away from patient care to receive education is not always realistic. Education often occurs 'curbside' within busy nursing units, which means that education may be incomplete, fragmentary, or not fully absorbed by the distracted learner. Further, infection preventionists who are best equipped to provide hand hygiene coaching are being directed toward other activities such as surveillance and public reporting activities. As a result, education may be limited to upon hire and annually, unless it is additionally administered by trained personnel outside of the infection prevention. Education is a critical element of a multi-modal strategy for building and sustaining hand hygiene improvement, and providing proper education despite difficult circumstances is possible. The use of multiple techniques that allow for interaction and

enable learners to process and apply information are most effective. In the busy clinical setting, self-paced computer learning modules and on-the-spot hands on training can help work around issues of insufficient time.

What do HCW need to know? The basics of hand hygiene can be distilled down into five key aspects:

- First, the **Right Product** must be used. Alcohol-based hand rubs should be used in the majority of situations, unless hands are visibly dirty or contaminated with blood or other bodily fluids, in which case soap and water is warranted.
- The **Right Amount** of product is also critically important. Just like taking half of the prescribed dose of a medication will not give you the full intended benefits, using only half of the necessary volume of alcohol-based hand rub (ABHR) will not adequately sanitize your hands and give you the right amount of germ kill.
- The **Right Time and Technique** are needed in order to ensure that the product has enough contact time with your hands, and that you are adequately covering all surfaces of your hands.
- The **Right Moments** extend beyond room entry and exit. Healthcare workers should perform

hand hygiene before patient contact, before an aseptic task, after a body fluid exposure risk, after patient contact, and after contact with the patient's surroundings.

- Lastly, the **Right People** need to perform hand hygiene. Much of the focus around hand hygiene compliance has centered on health-care workers, but patients, families and visitors should be encouraged to perform hand hygiene as well and also need education.

The movements of HCW and sequences of care are often complex. Reinforcing proper hand hygiene with just-in-time coaching and providing HCW with education that puts hand hygiene within the context of their daily work flow can help them process and apply the information most effectively.² Education, however, is not the end-all-be-all. Unless it is part of a multi-modal strategy, education alone will not improve hand hygiene compliance. A multi-modal strategy³ includes providing alcohol-based hand rub at the point of care (system change), training and education, observation and feedback, reminders in the workplace, and a culture of safety, all of which take commitment from the entire organization.

1. The Joint Commission. Measuring hand hygiene adherence: overcoming the challenges. 2009. Available from: http://www.jointcommission.org/assets/1/18/hh_monograph.pdf. Accessed December 11, 2015.
2. Bluestone J, Johnson P, Fullerton J, et al. Effective in-service training design and delivery: evidence from an integrative literature review. Human Resources for Health. 2013;11:51 doi:10.1186/1478-4491-11-51.
3. World Health Organization. A guide to the implementation of the WHO multimodal hand hygiene improvement strategy. Available from: http://www.who.int/gpsc/5may/Guide_to_Implementation.pdf. Accessed December 11, 2015.
4. Chassin MR, Mayer C, Nether K. Improving hand hygiene at eight hospitals in the United States by targeting specific causes of non-compliance. Jt Comm J Qual Patient Saf. 2015;41(1):4-12.



**THAT'S
a FACT!**

Many times we assume that healthcare workers (HCW) know their organization's policy on hand hygiene, but this is not always the case. Insufficient education and lack of knowledge around hand hygiene guidelines or protocols have been cited numerous times as factors influencing failure to adhere to hand hygiene protocols.^{1,4} Novice and seasoned HCW alike can benefit from a refresher on expected hand hygiene protocols.

Product Feature

THE 5 RIGHTS OF HAND HYGIENE™

To help Infection Preventionists implement, manage and drive hand hygiene compliance among healthcare workers (HCWs), GOJO has developed NEW educational building tools. These new tools will support your efforts to increase awareness and address common knowledge barriers amongst staff on how, when and why to perform hand hygiene and help keep their skin healthy.

5 RIGHTS OF HAND HYGIENE™

At GOJO Industries, Inc., we believe that clean hands make a difference, and so we have developed THE FIVE RIGHTS OF HAND HYGIENE as a tool to help healthcare workers remember the important aspects of hand hygiene. This is similar to what many nurses have learned about the 5 rights of medication administration, which are meant to promote patient safety during medication administration. The program includes videos and posters available on the GOJOCanada.ca/education website.

The five rights include:



1 | PRODUCT

1. **The Right Product** – Use ABHR unless hands are visibly soiled or contaminated to avoid potential skin damage caused by using soap and water.



2 | AMOUNT

2. **The Right Amount** – Use enough product to ensure proper efficacy. Manufacturers should specify the amount of product that is needed to provide optimal antimicrobial efficacy.



3 | TIME & TECHNIQUE

3. **The Right Time and Technique** – Use product for the right amount of time using the right technique to ensure all surfaces of the hands, fingers and wrists are clean.



4 | MOMENT

4. **The Right Moment** – Perform hand hygiene at key times during the 4 Moments of Hand Hygiene during patient care where transmission of microorganisms is most likely



5 | PEOPLE

5. **The Right People** - Include everyone who plays a role in the spread of germs: Healthcare workers, patients and visitors

Hand hygiene is very effective when performed correctly. The more informed healthcare workers are about how and when to perform hand hygiene, the better equipped they will be to engage patients and family members doing so as well.



ACCESS THESE TOOLS AND MORE ONLINE
AT HEALTHCARE.GOJO.COM/EDUCATION

Posters:



Stickers:



Videos:



Training Sheets:



This kit contains in-service materials that are ready-to-go so that an Infection Preventionist can train a nurse manager, clinical educator, or other healthcare professional to provide hand hygiene education to front-line caregivers.

To request a kit or supporting materials please contact your Healthcare Sales Director or email us at Healthcare.GOJO.com

A Look Ahead

next month's issue

The Importance of
Selecting the **RIGHT**
Soap Formulation

NEW GOJO
SOAP formulations