Hand Washing Practice among Intern House Officers (IHOs) during Working Hours at Colombo North Teaching Hospital (CNTH), Ragama

Achini Kendawala¹, Asha Kodithuwakku², Nishani Kondasinghe², Erandi Kaumadie², Shiran Karunathilaka², Lakmini Inoka Wijesooriya³

Introduction: Contaminated hands of healthcare workers (HCWs) are known to crosstransmit microorganisms causing hospital-acquired infections (HAIs). Hence, hand hygiene (HH) is the simplest and the most effective method to prevent HAIs. Therefore, all HCWs needs to adhere to recommended hand washing (HW) practices provided adequate HW facilities. Amongst HCWs, IHOs would have direct contact with patients mostly.

Objective: To describe HW practice in IHOs and facilities available for effective HH in CNTH, Ragama.

Methodology: Descriptive cross sectional study was conducted from 01.06.2017–31.09.2017 involving 2168 HW opportunities of 50 IHOs in 22 wards of CNTH. HH practices were assessed against WHO defined criteria; five opportunities for HH and six-steps in HW technique. HH facilities were assessed by evaluating availability of water supply, washing agent (soap), disposable hand towels and alcohol hand rub. Sink: bed ratio and display of poster with HW steps near sinks were noted.

Results: Of 2168 HW opportunities, analysis of WHO defined five moments for hand hygiene were; before touching the patient-35.1%(761/2168), before aseptic procedure-5.95%(129/2168), after body fluid exposure risk-8.71%(189/2168), after touching the patient-28.96%(628/2168) and after touching patient's surrounding-21.26%(461/2168). Compliance with HW in same order was 2.23%(17/761), 90.69%(117/129), 80.42%(152/189), 13.05%(82/628) and 3.47%(16/461). All six-steps in HW were followed by 13.8%(53/384). Of HW steps, step 1,2,3,4,5 & 6 were followed by 100%(384/384), 64.32%(247/384), 81.77%(314/384), 42.18%(162/384), 40.62%(156/384) and 26.56%(102/384) respectively. HH facilities (water supply and washing agent) were observed in all 22 wards. Only 18 wards had disposable hand towels and display of HW steps. Sink: bed ratio ranged 1:18-1:46. Number of alcohol hand rubs / ward was ≤ 6 .

Conclusion

The most common HW opportunity observed in this study was 'before touching the patient' but with the least compliance. The best HH compliance was for before aseptic procedures'. Of those comply with HH, only minority adhered to correct HW technique. Step-1 was compiled best while step-6 was neglected mostly. Though water supply and washing agents were available in all wards, zero satisfaction was noted in sink: bed ratio. Though one alcohol hand rub per one bed is the standard, it was well below the standard in all wards

¹Faculty of Medicine, University of Kelaniya, Sri Lanka madukaachini@gmail.com

²Faculty of Medicine, University of Kelaniya, Sri Lanka

³Department of Medical Microbiology, Faculty of Medicine, University of Kelaniya, Sri Lanka