

The institutional safety climate and hand hygiene Questions and Answers

World Hand Hygiene Day, 5 May



SAVE LIVES
CLEAN YOUR HANDS

Q. What is this year's WHO hand hygiene campaign, 5 May focused on?

A. It is focused on recognizing that we can add to a facility's climate or culture of safety and quality through cleaning our hands at the right time, with the right products, but also that a strong quality and safety culture will support people to clean hands.

Q. What does that mean?

A. It means that in order to prioritize clean hands in health facilities, people at all levels need to *believe* in the importance of hand hygiene and infection prevention and control (IPC). By acting as key players in achieving the appropriate behaviours and attitudes towards it, the organisational safety climate will be perceived as valuing quality and safety for all through clean hands.

Q. So, what is the slogan for this year's campaign?

A. "Unite for safety – clean your hands" is the slogan. By uniting, working together and talking about hand hygiene we can ensure high quality and safer care everywhere.

Q. Is there a relationship between an institution's safety climate/culture and infection prevention and control including hand hygiene action?

A. Systematic reviews have shown an inter-relation between safety culture, IPC processes and healthcare-associated infection reduction. Improving the organizational safety climate has been associated with enhanced hand hygiene compliance.

Q. What does the organizational culture mean for hand hygiene?

A. Organizational culture refers to the deeply embedded norms, values, beliefs, and assumptions shared by members within an organization. If people within a health care organisation do not value and believe in hand hygiene, the opportunity and motivation for changing behaviour and improving action at the right times and with the right products will likely be lacking.

Q. What elements of a safety culture can influence hand hygiene action?

A. As a safety culture comprises leadership and health worker attitudes and values related to the perception of risk and safety, these attributes need to both be evident and supported for hand hygiene improvement and sustainability to be realised.

Q. What role do health workers' perceptions play in the safety climate of an organisation and how does this influence hand hygiene?

A. Safety climate is a subset of overall organizational climate that refers to employees' perceptions about the extent to which the organization values safety (for patients, health workers and the environment). For example, if health workers do not feel supported to perform hand hygiene at the right times, with the right products,

they will likely perceive that their organisation does not value their own nor their patients' safety.

Q. How does WHO describe the institutional safety climate in relation to hand hygiene improvement?

A. The *Institutional Safety Climate* as part of the WHO multimodal improvement strategy refers to the environment and perceptions of patient safety issues in a health care facility in which hand hygiene improvement is given high priority and is valued at all levels of the organization. This includes the belief that resources will be provided and readily available to ensure hand hygiene, particularly at the point of care. In summary, when a health facility's quality and safety climate or culture values hand hygiene and IPC, this results in both patients and health workers feeling protected and cared for.

Q. What does a safety climate that values hand hygiene look like?

A. This can mean many different things, but generally can be outlined as efforts that prioritise high compliance with hand hygiene best practices.

At the *institutional level*, this should include the allocation of resources for hand hygiene programmes and for hand hygiene supplies and infrastructure, clear messages of support for hand hygiene from leaders within the institution, setting hand hygiene benchmarks or targets, and having hand hygiene champions.

At an *individual level*, the aim is to ensure that health workers identify hand hygiene as a priority that reflects their commitment to do no harm to patients. It can also be demonstrated by partnering with patients and patient organizations, through codevelopment of improvement initiatives and visible commitment from many, in other words role modelling.

Q. If a culture of quality of care includes openness, how does this relate to hand hygiene?

A. Monitoring and then sharing data on hand hygiene compliance with health workers, leaders, the public, for example through posters, internet posting, etc, demonstrates to the whole community that the service is accountable and committed to creating a clean, safe environment that provides quality care. Additionally, health workers should feel assured that they are free to speak out about hand hygiene standards without fear of recrimination and should also feel actively encouraged to contribute to solutions. A culture of sharing and learning is key to all of this.

Q. Who can take part in the campaign?

A. Anyone is welcome to get involved in the campaign. It is primarily aimed at health workers but embraces all those who can influence hand hygiene improvement through a culture of safety and quality, e.g., leaders, managers, senior clinical staff, patient organisations, etc. Quality and safety managers alongside IPC practitioners and focal points can play a key role in acting and promoting the campaign messages.

Q. What are some ideas that those working in health care can do now?

A. Facility managers can promote a culture of safety and quality to ensure clean hands, as outlined above. Health workers can lead by example and encourage others to clean their hands. Those in charge of quality and safety in health care can work with IPC focal points to support improvement efforts. IPC practitioners can engage health workers to be part of new initiatives. Policy makers can prioritise resources, training and programmes on hand hygiene as part of IPC. And all people who use health care can get involved in local hand hygiene campaigns and activities.

Q. Where can I find the WHO campaign materials?

A. https://www.who.int/campaigns/world-hand-hygiene-day/2022

Q. Finally, what can acting on hand hygiene achieve?

A. As hundreds of millions of patients are affected by health care-associated infections, leading to death in 1 in 10 infected patients every year, hand hygiene is one of the most critical and proven measures in reducing this avoidable harm. Having an active IPC programme in a hospital that includes a multimodal improvement strategy for hand hygiene, can reduce health care-associated infections by 30%. For example, did you know that by cleaning your hands after touching a patient, before going on to touch other things, you protect yourself and others from infection?

Suggested further reading:

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- Larson EL, Early E, Cloonan P, Sugrue S, Parides M. An organizational climate intervention associated with increased handwashing and decreased nosocomial infections. Behav Med 2000;26:14–22. https://doi.org/10.1080/08964280009595749.
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