



UNIVERSITÉ  
DE GENÈVE  
FACULTÉ DE MÉDECINE

1<sup>st</sup> GPSC  
May 2015, Madrid

HUG  
Hôpitaux Universitaires de Genève  
University of Geneva Hospitals  
and Faculty of Medicine, Geneva, Switzerland



WHO Collaborating Centre  
on Patient Safety  
Infection Control & Improving Practices

# Hand hygiene promotion: a worldwide priority

World Health Organization Clean Care is Safer Care programme

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**Professor Didier Pittet**, MD, MS,

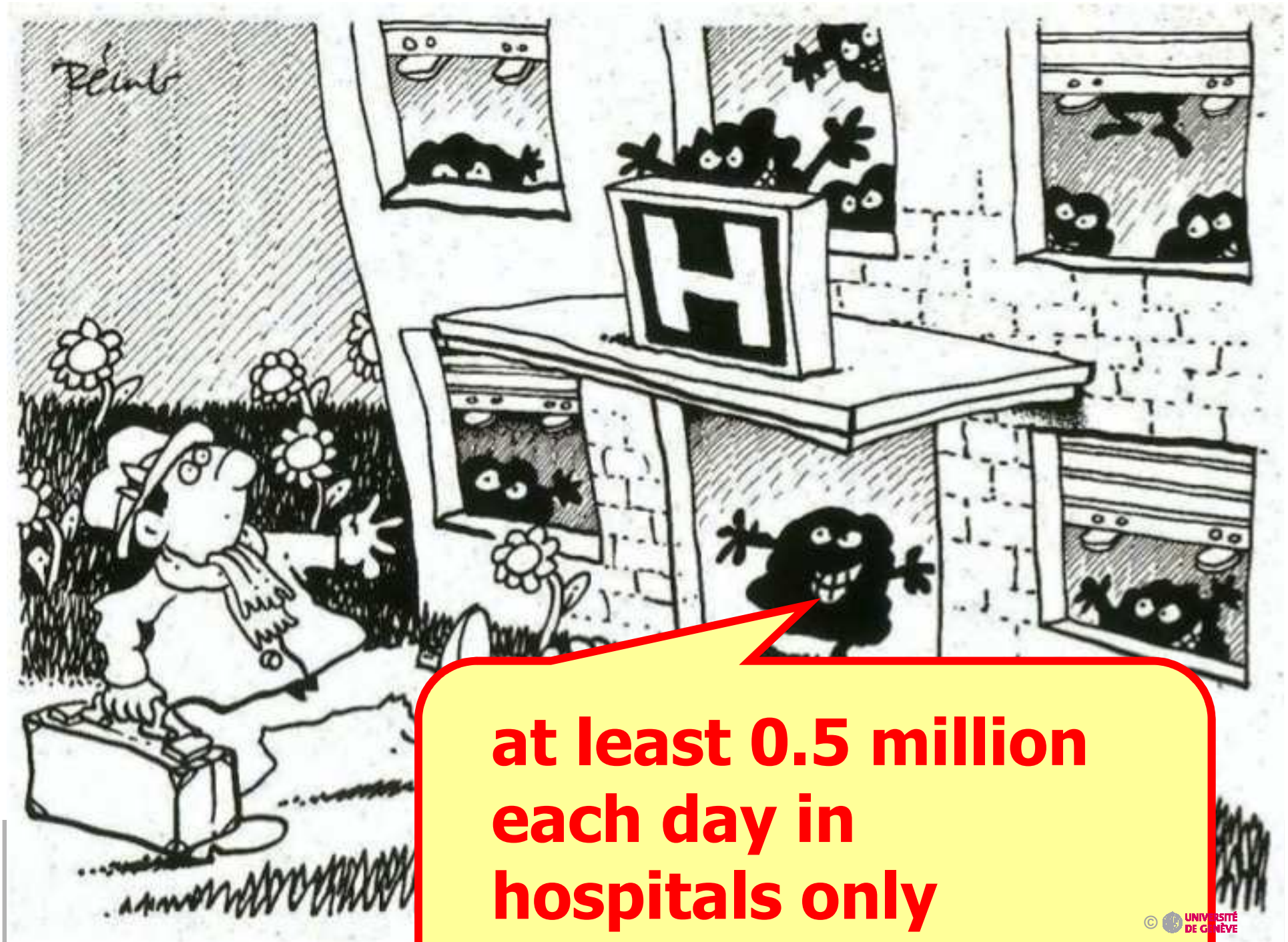
Infection Control Programme

WHO Collaborating Centre on Patient Safety

University of Geneva Hospitals, Switzerland



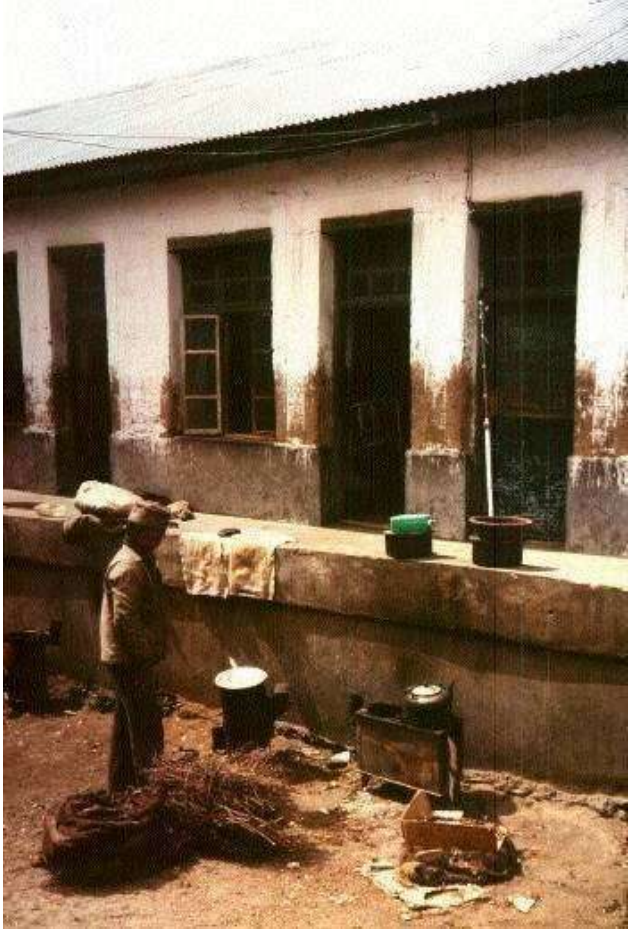
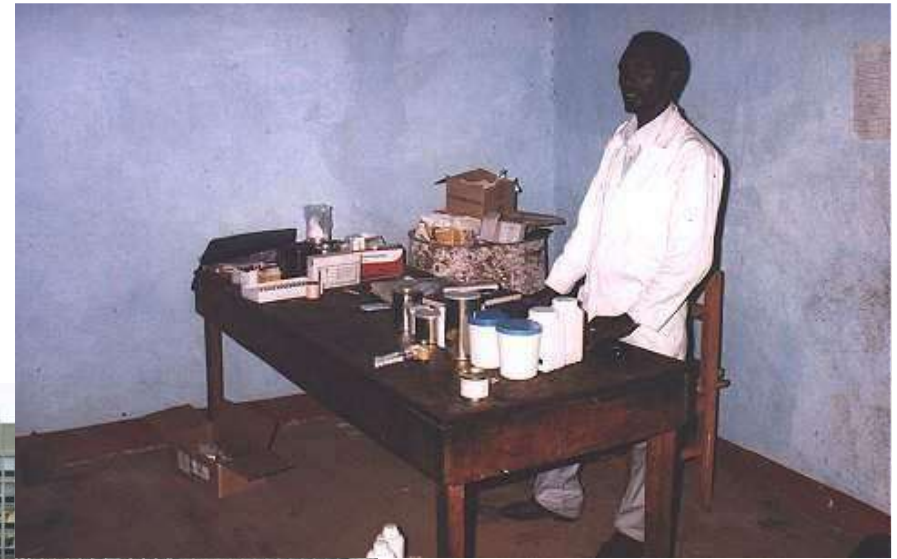
Lead Adviser, 1st Global Patient Safety Challenge,  
& African Partnerships for Patient Safety,  
World Health Organization (WHO) Patient Safety

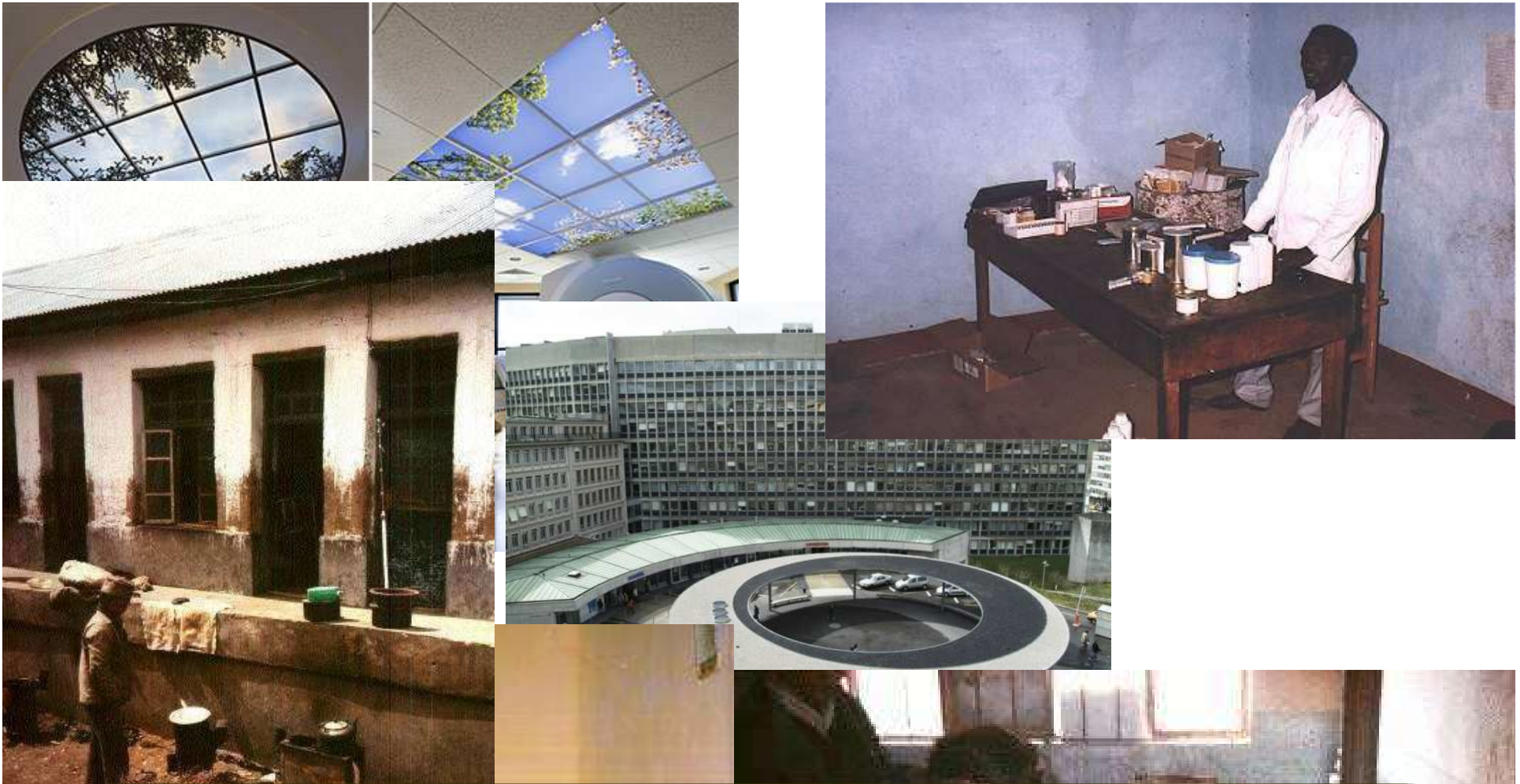


**at least 0.5 million  
each day in  
hospitals only**









**No hospital, no country, no health-care system in the world can claim to have solved the problem**



***Compliance < 40%***





**Hôpitaux Universitaires de Genève**

University of Geneva Hospitals, 1994



World Health  
Organization

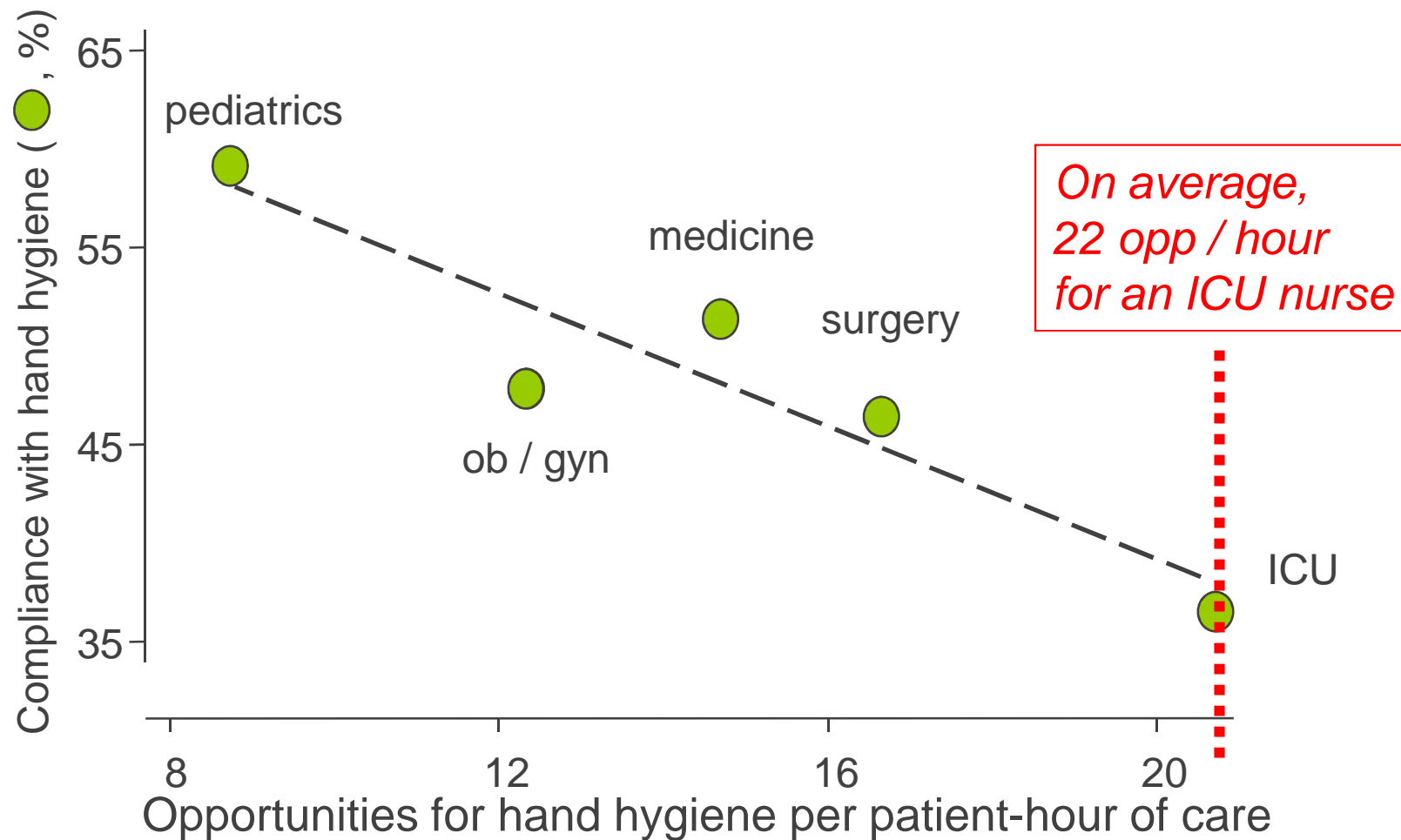
Patient Safety

A World Alliance for Better Health Care

**SAVE LIVES**

Clean Your Hands

## Relation between opportunities for hand hygiene for nurses and compliance across hospital wards



*adapted from Pittet D et al. Annals Intern Med 1999; 130:126*

Time constraint = major obstacle  
for hand hygiene



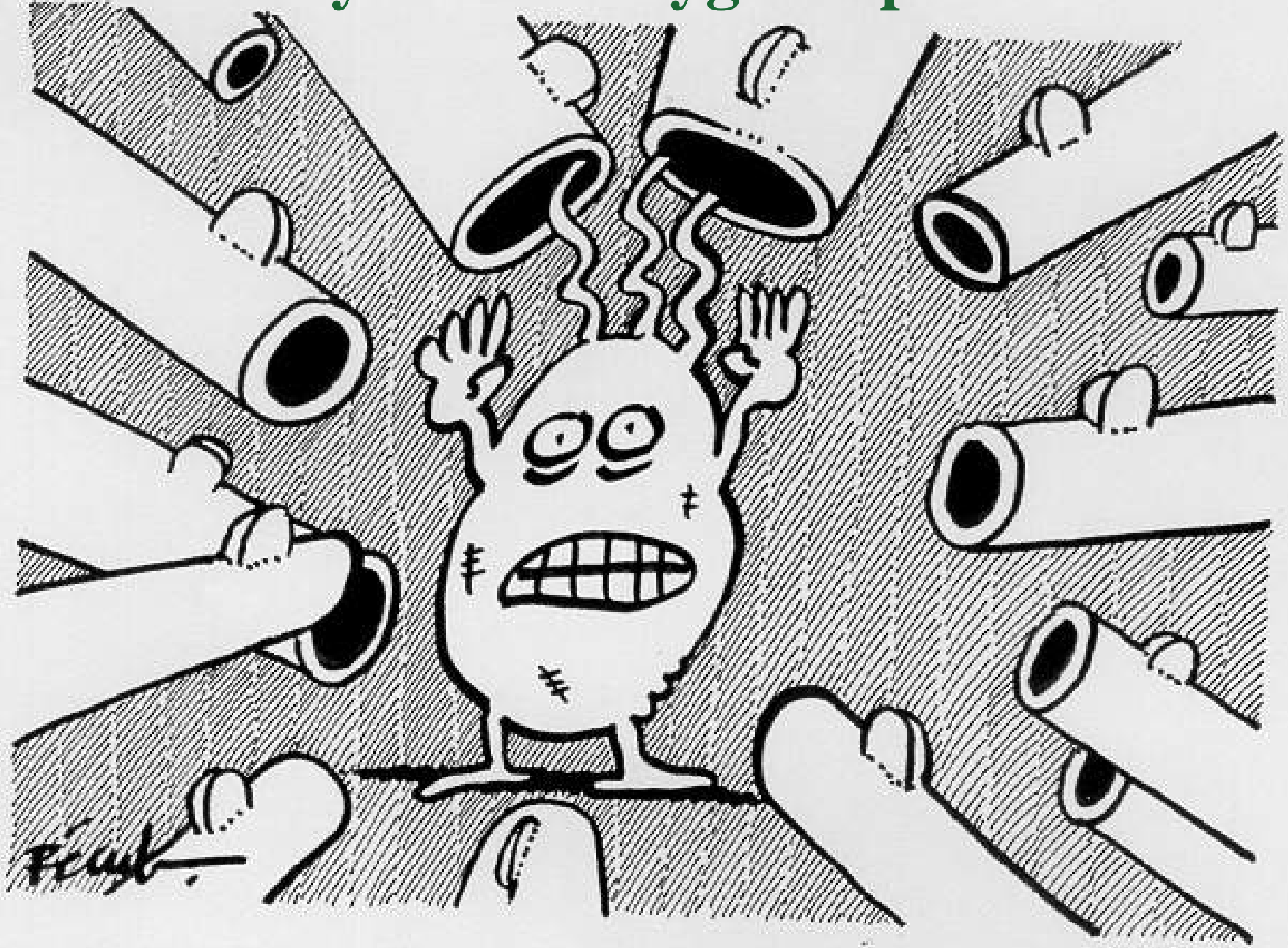
handwashing  
soap + water

*1 to 1.5 min*

alcohol-based  
hand rub

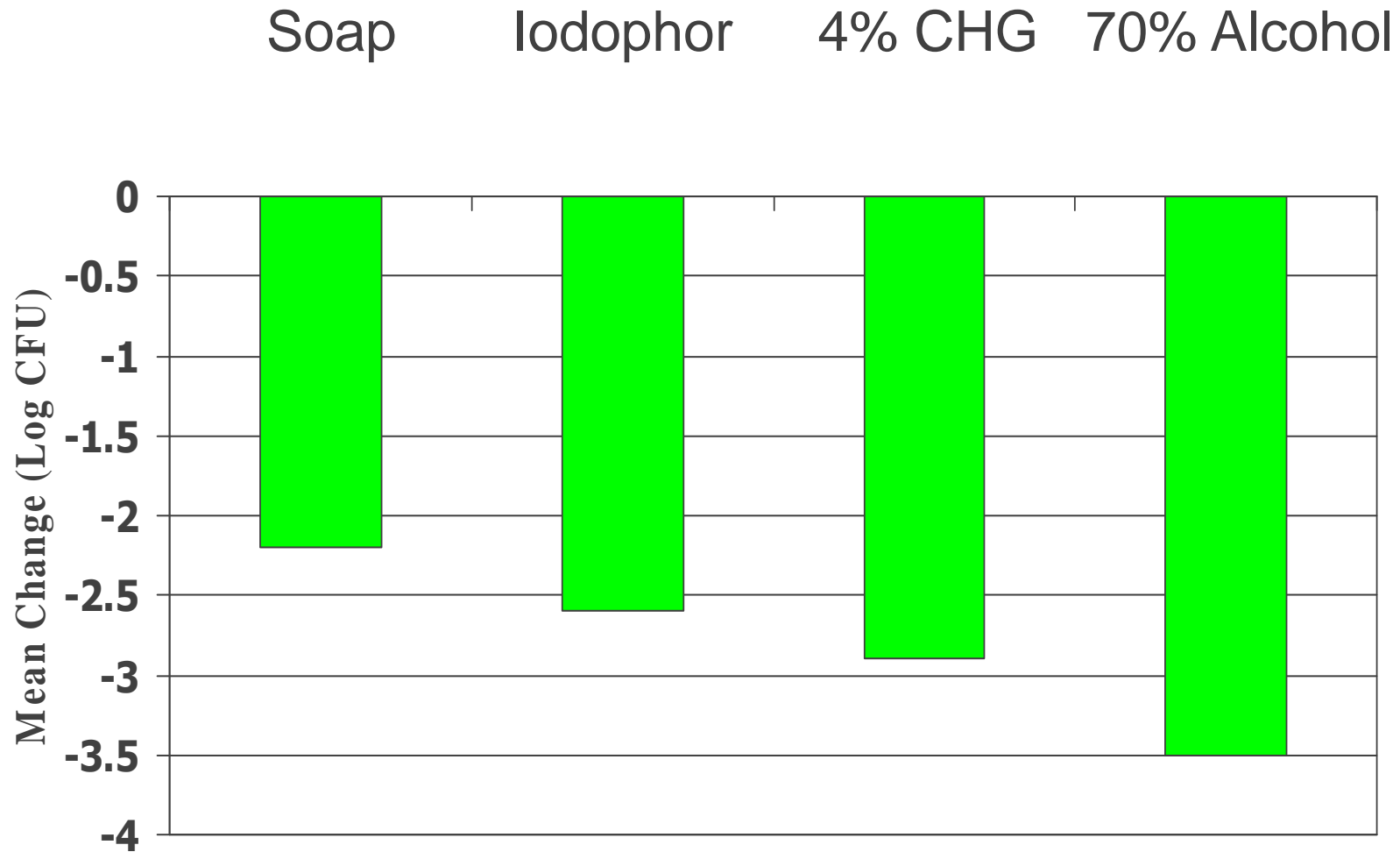
*15 to 20 sec*

# Efficacy of hand hygiene products



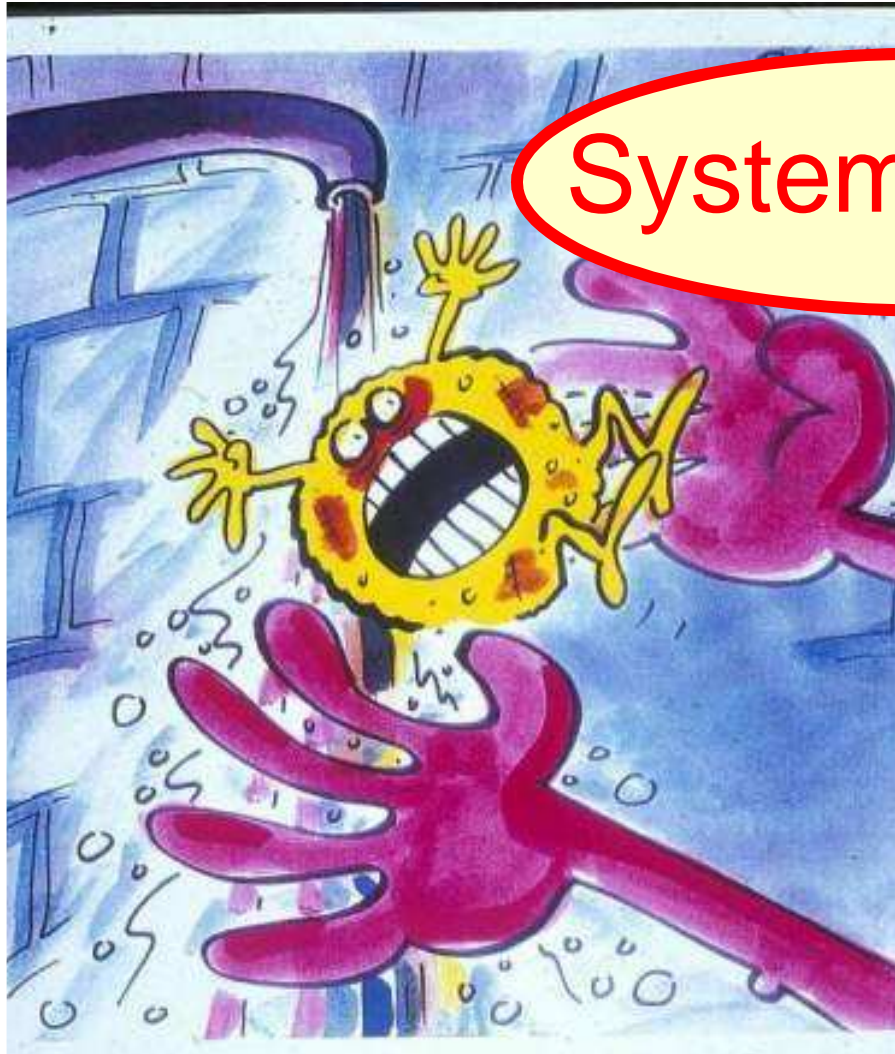
# Efficacy of hand hygiene products

Log reduction in bacterial counts after 30 sec

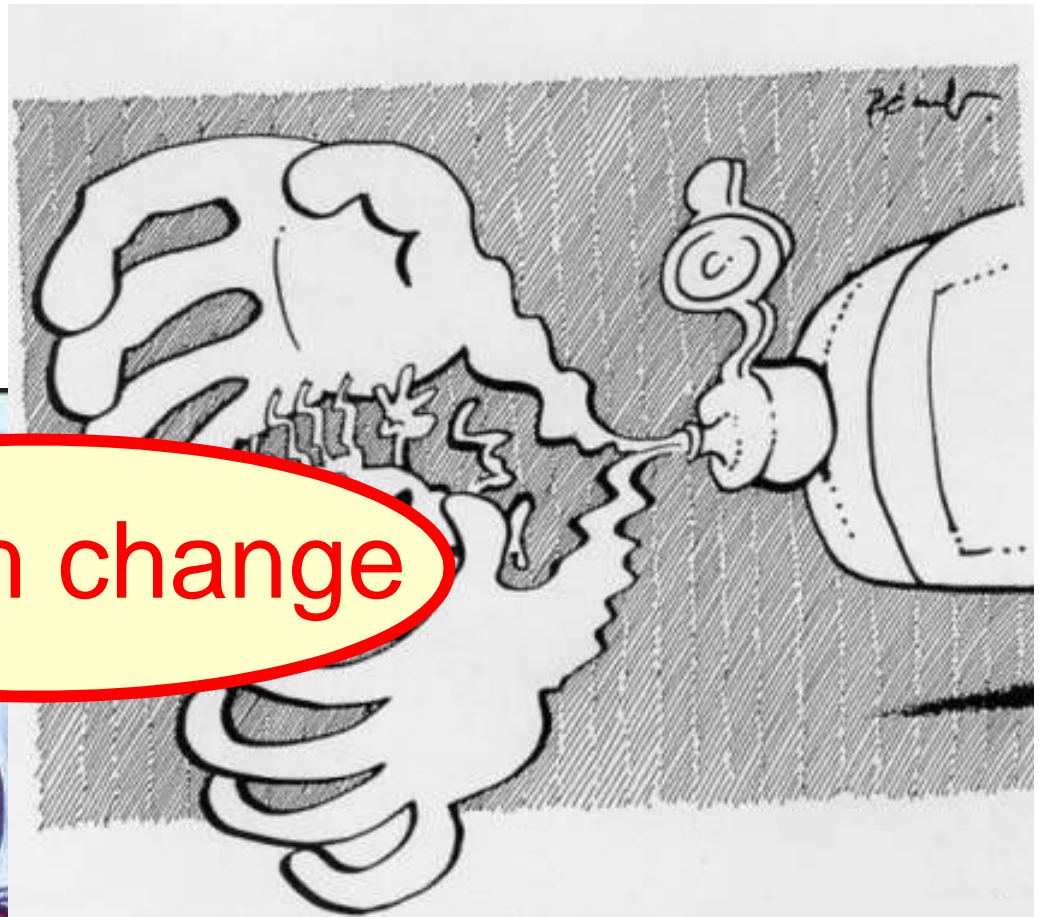


*Ayliffe GAJ et al. J Hosp Infection 1988;11:226*

*Handwashing ...  
an action of the past  
(except when hands are visibly soiled)*



**System change**

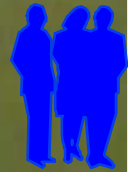


**Alcohol-based  
hand rub  
is standard of care**

Alcohol-based  
hand rub at  
the point of  
care



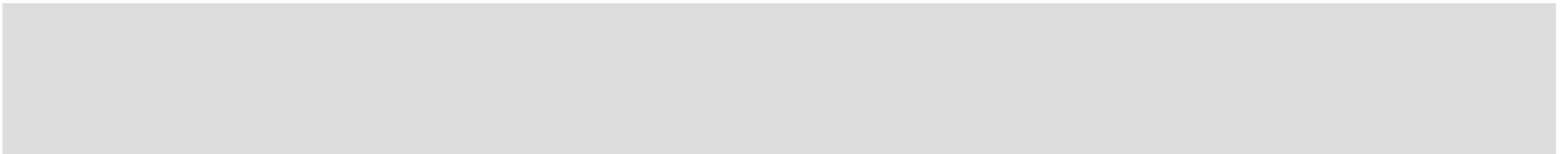
HUG



*The University  
of Geneva  
Hospitals, 1995*

Before and after any patient contact  
After glove use  
In between different body site care

**Would it make a difference ?**

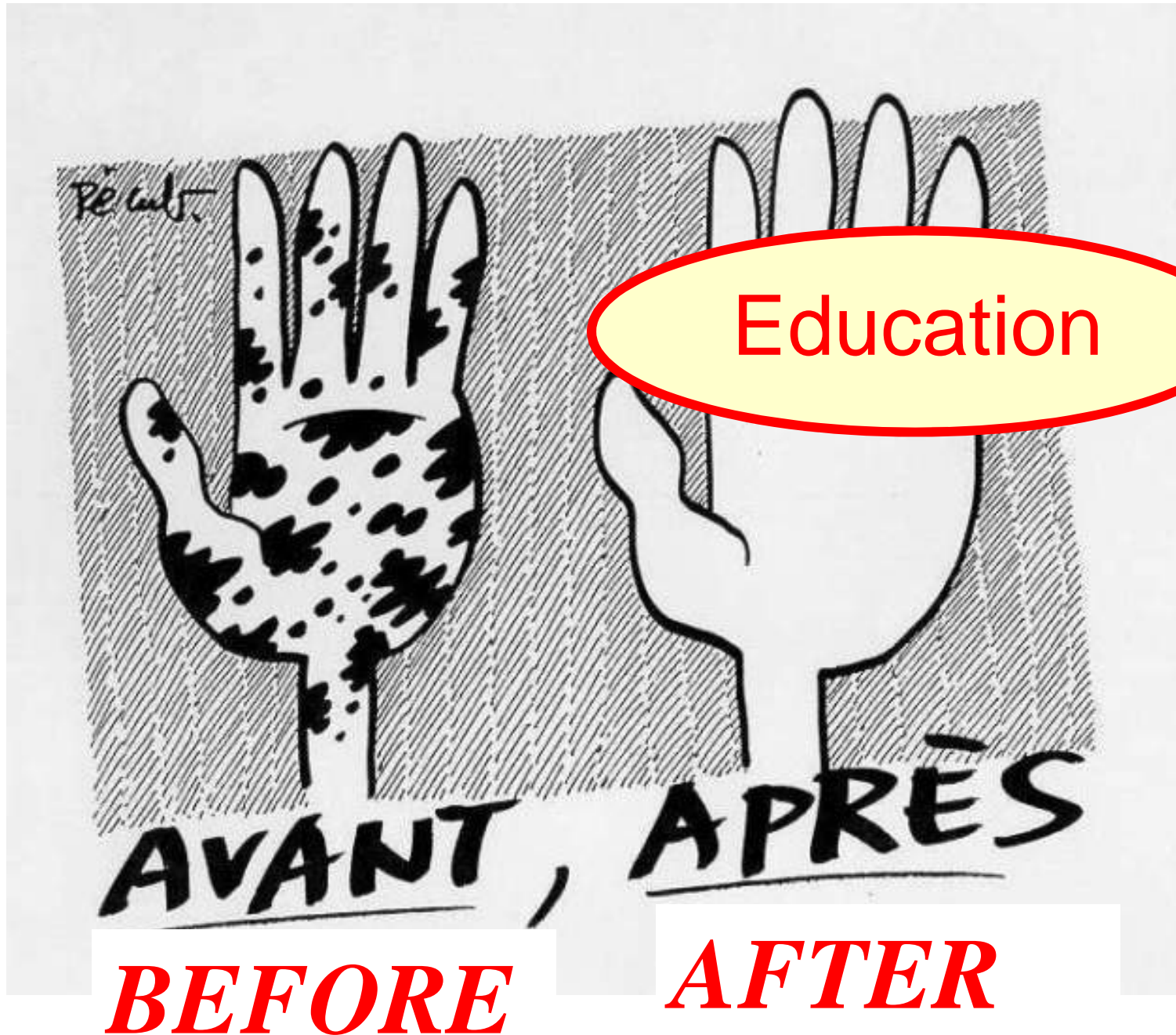


# Changing behavior .... a universal challenge



Mashhad, Iran  
April 2015





*The University of Geneva Hospitals (HUG), 1995 - 1998*

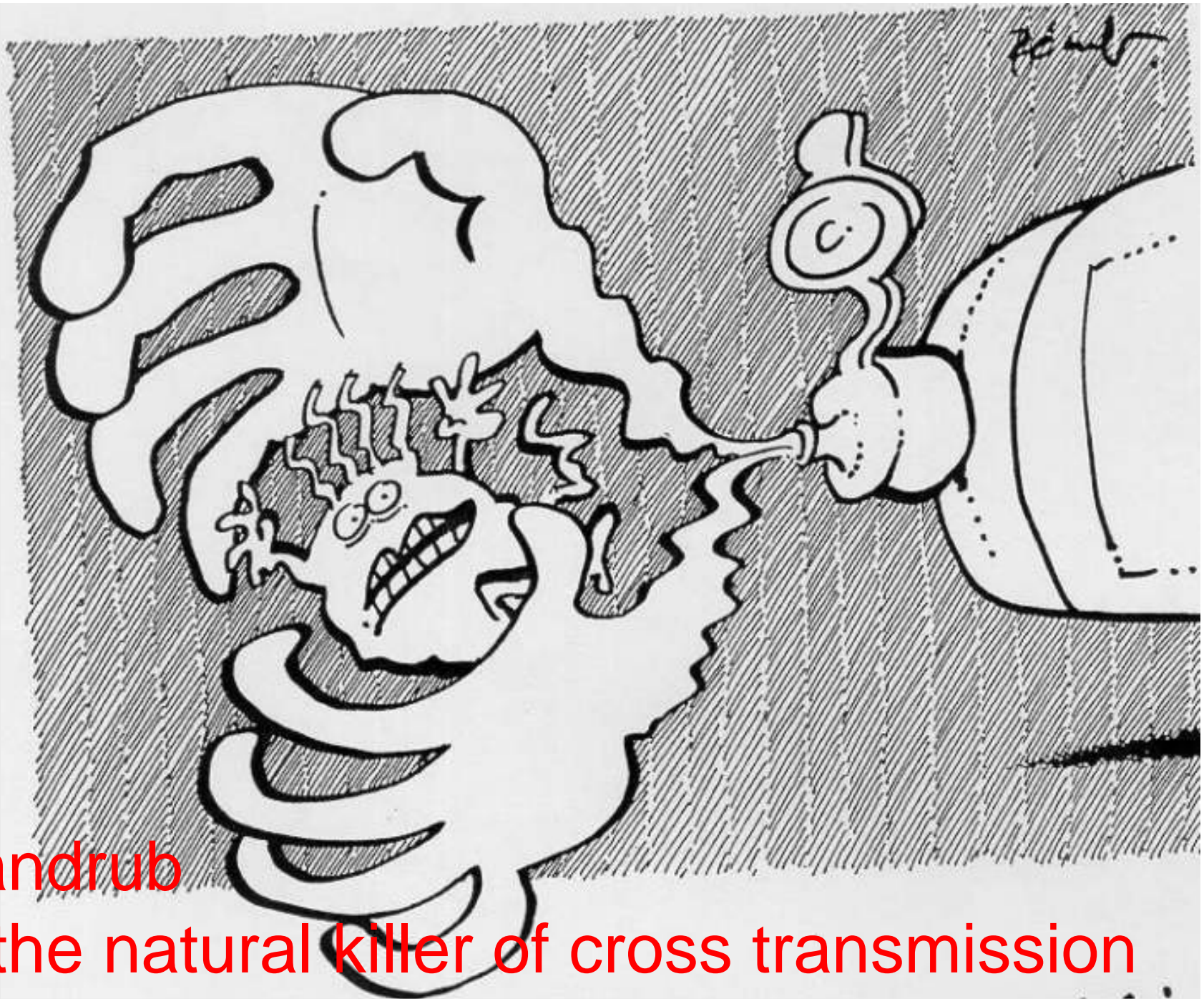
## « Talking walls »





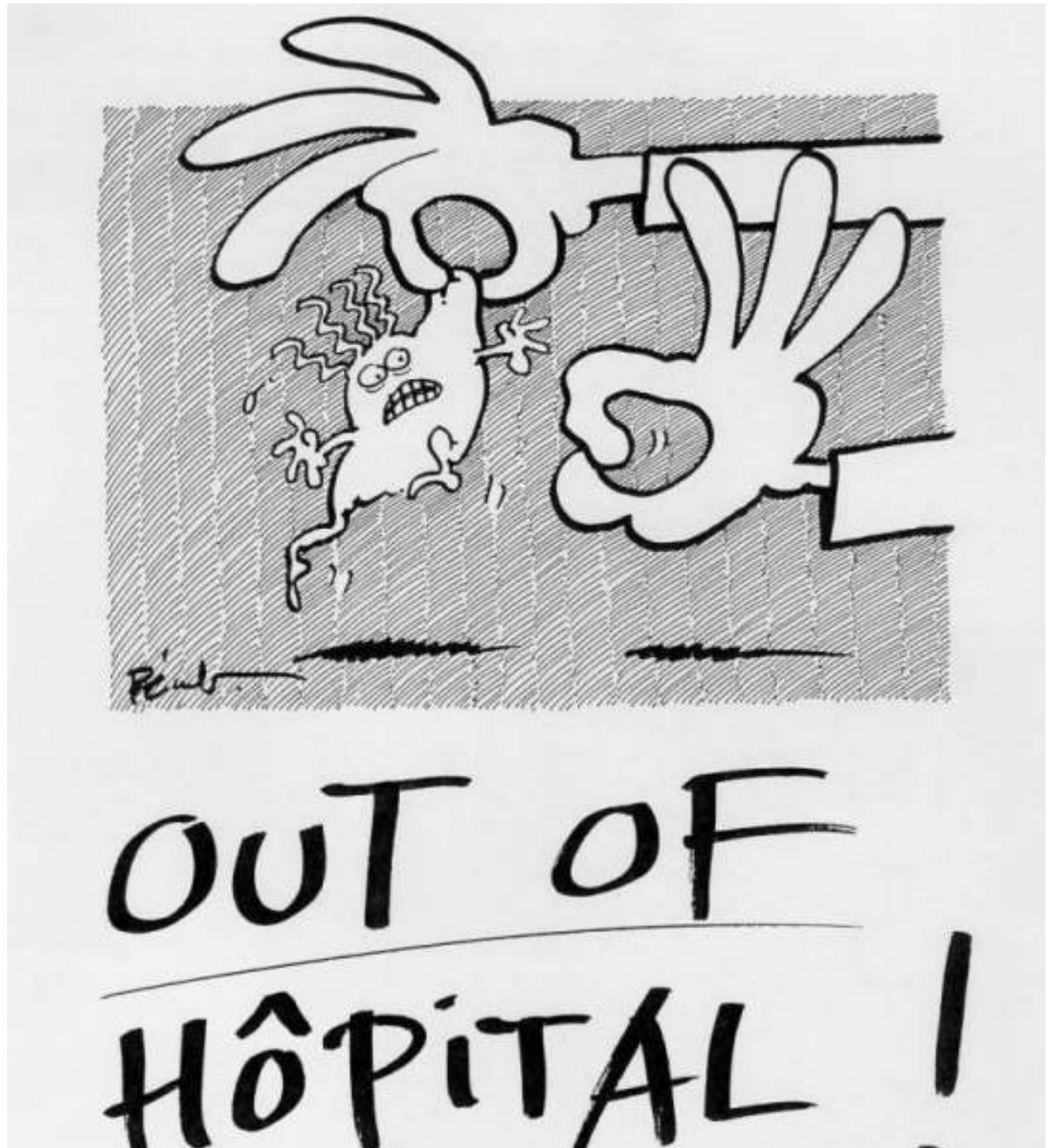


My son,  
if they don't get me,  
you will become  
multiresistant



Handrub  
is the natural killer of cross transmission

*Dirty Staph*  
*...out*  
*of*  
*hospital*





Workplace  
reminders

*The University of Geneva Hospitals (HUG), 1995 - 1998*



HUG  
1995 - 1998



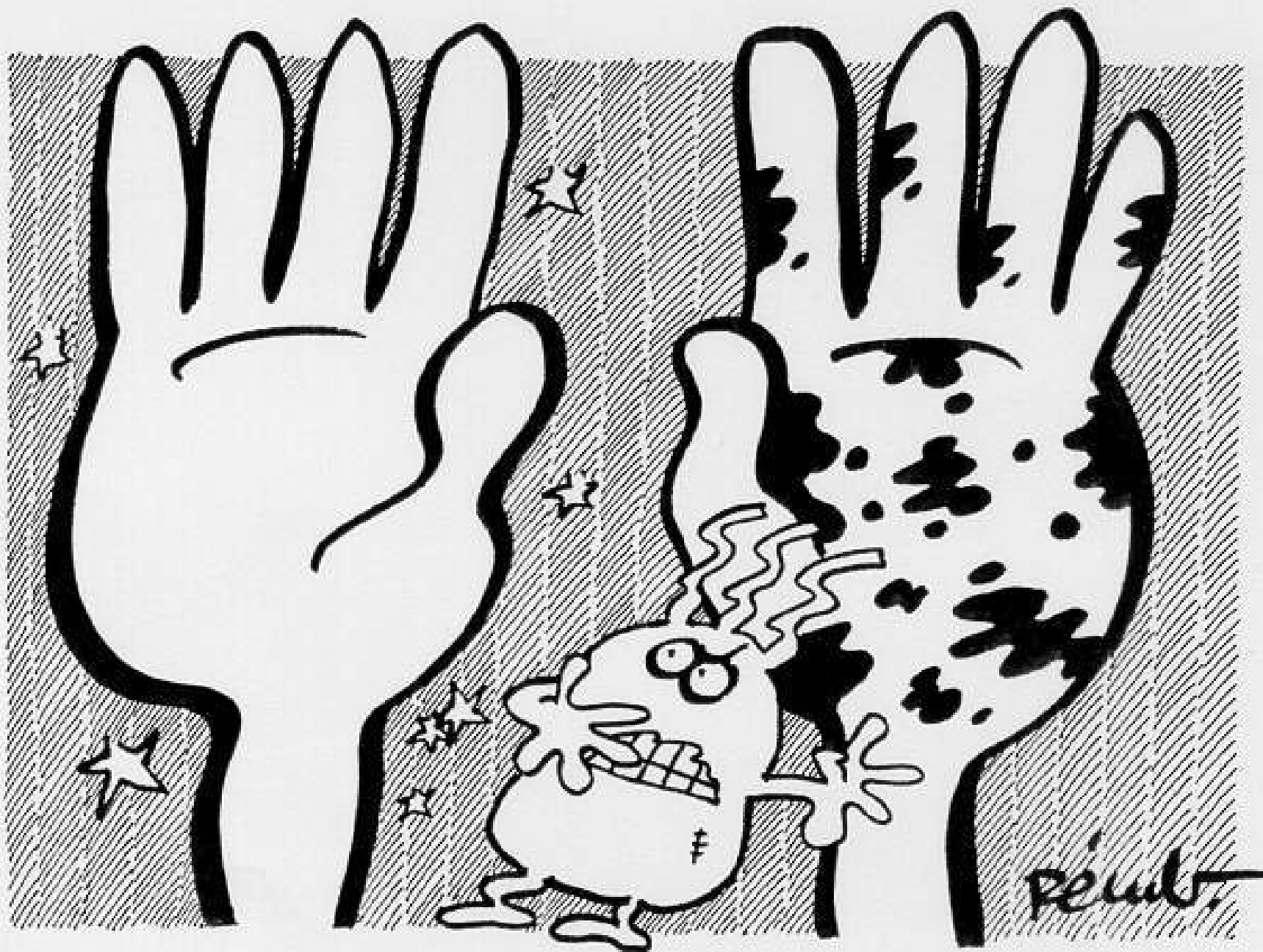
HUG  
1995 - 1998



HUG  
1995 - 1998



HUG  
1995 - 1998



*The University of Geneva Hospitals (HUG), 1995 - 1998*

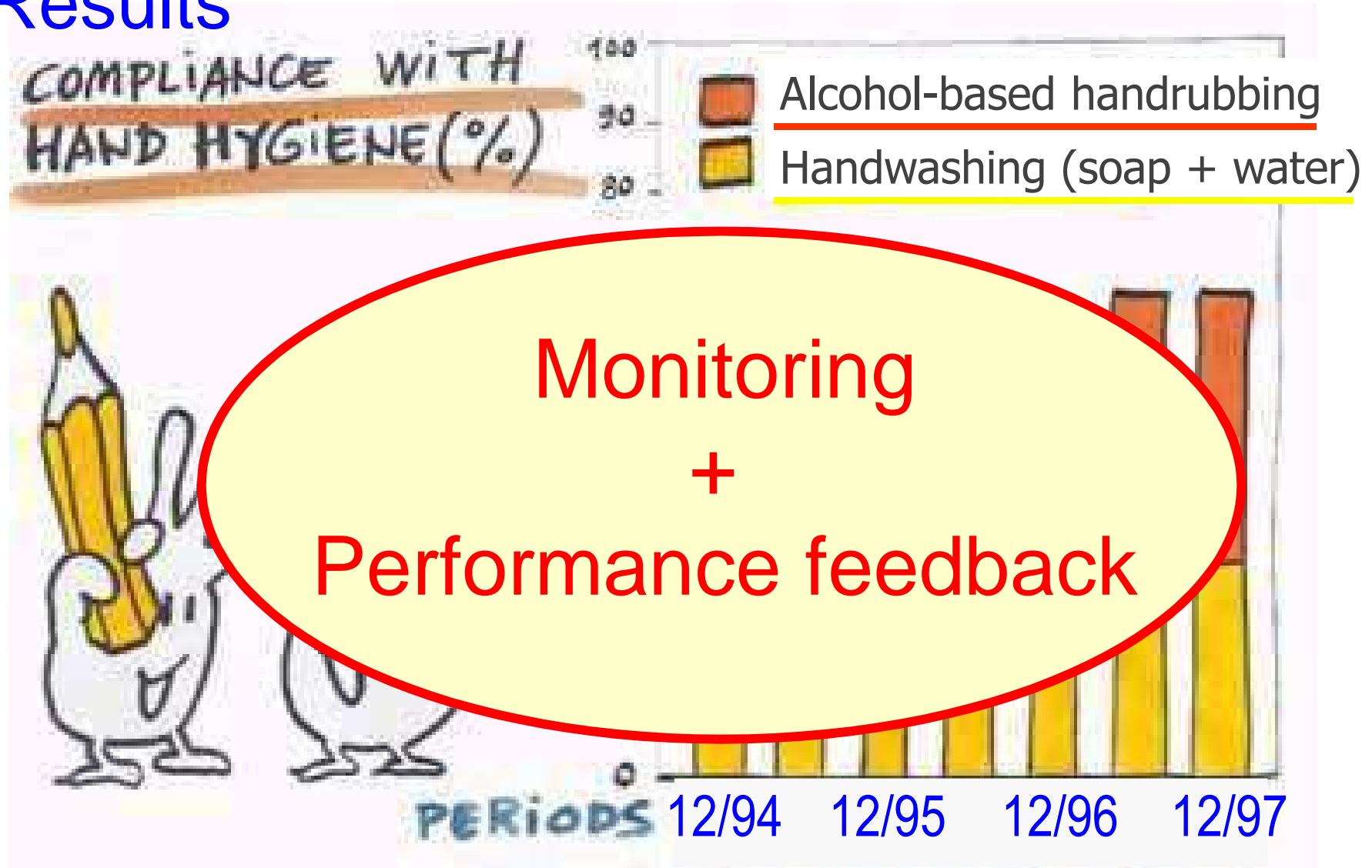


*Doctor Freud,  
in this hospital,  
it's become impossible  
to cause infections  
any more !*

**Safety culture**

Geneva's University  
Hospitals against  
*Dirty Staph* :  
war has been  
declared

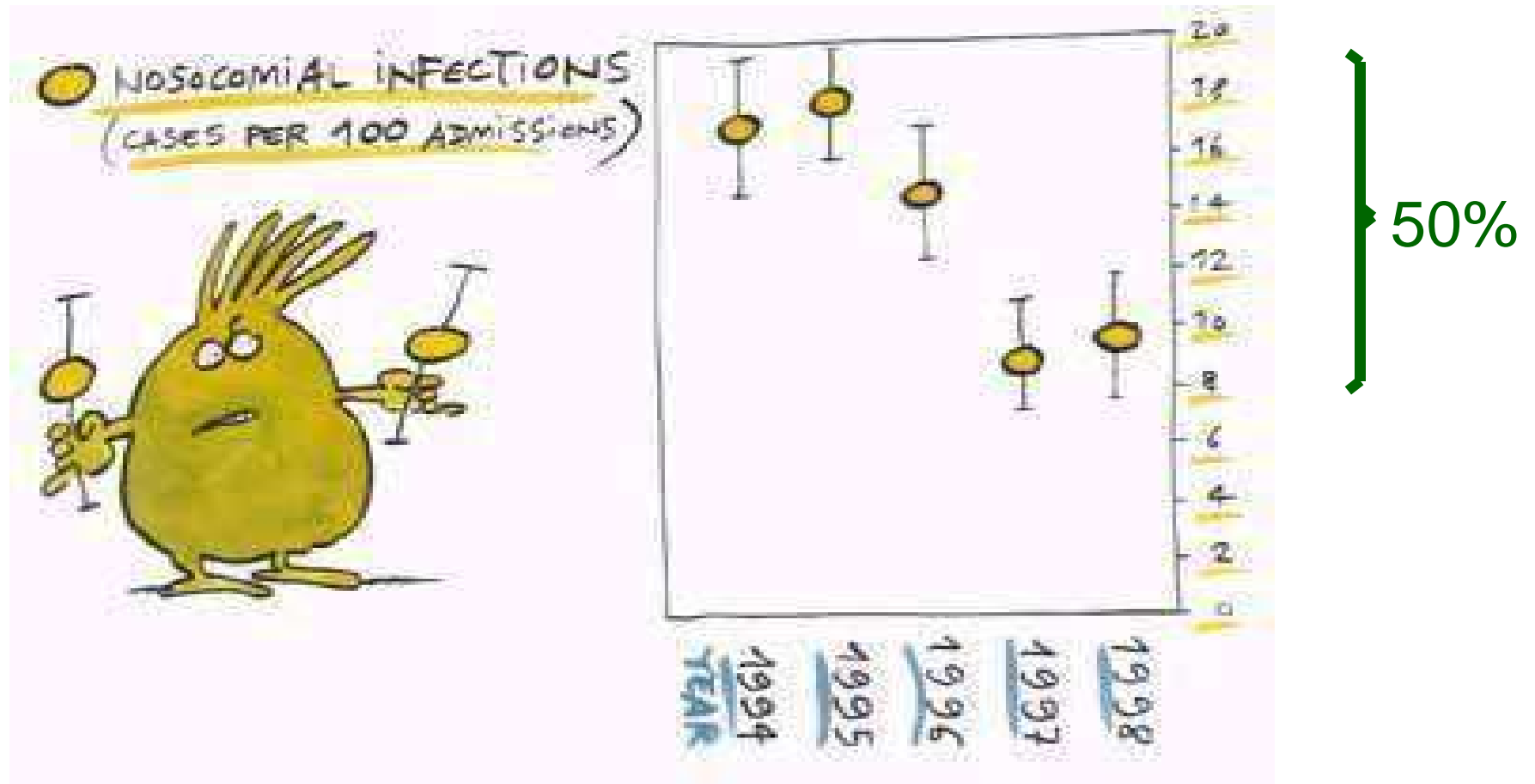
# Results



[www.hopisafe.ch](http://www.hopisafe.ch)

Pittet D et al, *Lancet* 2000; 356: 1307-1312

# Hospital-wide nosocomial infections; trends 1994-1998



[www.hopisafe.ch](http://www.hopisafe.ch)

Pittet D et al, *Lancet* 2000; 356: 1307-1312

*The University of Geneva Hospitals (HUG), 8 years follow-up*



Pittet D et al, *Inf Control Hosp Epidemiol* 2004; 25:264

## **Effectiveness of a hospital-wide programme to improve compliance with hand hygiene**

*Didier Pittet, Stéphane Hugonnet, Stephan Harbarth, Philippe Mourouga, Valérie Sauvan, Sylvie Touveneau, Thomas V Perneger, and members of the Infection Control Programme*

THE LANCET Vol 256 – October 14, 2000

### **« Geneva model » of hand hygiene promotion, Reproduced with success (2002-2005)**

- ◆ in single hospitals in France, Belgium, USA, Australia ...
- ◆ in multiple hospitals in Hong Kong, Australia, Belgium, ...
- ◆ in national promotion campaigns: Belgium, the UK, Switzerland



World Health Organization (WHO),  
Geneva, Switzerland,  
2005



Through the promotion of best practices in hand hygiene and infection control, the 1st Global Patient Safety Challenge aims to reduce health care-associated infection (HCAI) worldwide



**Launch**

***1<sup>st</sup> Global Patient Safety Challenge***

**WHO headquarter, Geneva, Switzerland**

**13 October 2005**



# Political commitment is essential to achieve improvement in infection control

# Ministerial pledges to the 1<sup>st</sup> Global Patient Safety Challenge

**I resolve to work to reduce health care-associated infection (HCAI) through actions such as:**

- acknowledging the importance of HCAI;
- hand hygiene campaigns at national or sub-national levels;
- sharing experiences and available surveillance data, if appropriate;
- using WHO strategies and guidelines...





**Saudi Arabia**



**Kenya**



**France**



**Bangladesh**



**USA**



**Bhutan**



**Northern Ireland**



**Russia**



**Republic of Ireland**



Kabul, Afghanistan - April 2012



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Clean Your Hands



Kabul, Afghanistan - April 2012

# 138 countries committed to address health care-associated infection

World population coverage : > 93 %



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World population coverage : > 93 %

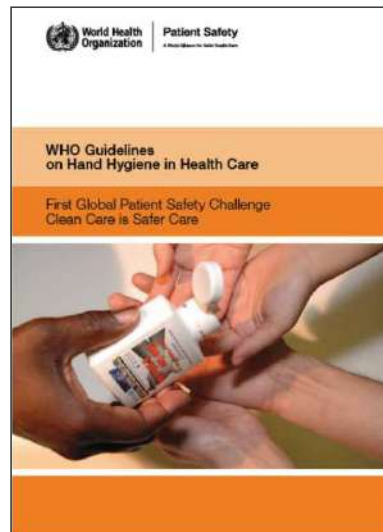


# Implementation strategy and toolkit for the WHO Guidelines on Hand Hygiene in Health Care

Knowledge & evidence



Action



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# What is the WHO Multimodal Hand Hygiene Improvement Strategy?

Based on the evidence and recommendations from the WHO Guidelines on Hand Hygiene in Health Care (2009), made up of **5 core components**, to improve hand hygiene in health-care settings

## **ONE System change**

Alcohol-based handrubs at point of care and access to safe continuous water supply, soap and towels



## **TWO Training and education**

Providing regular training to all health-care workers



## **THREE Evaluation and feedback**

Monitoring hand hygiene practices, infrastructure, perceptions, & knowledge, while providing results feedback to health-care workers



## **FOUR Reminders in the workplace**

Prompting and reminding health-care workers



## **FIVE Institutional safety climate**

Individual active participation, institutional support, patient participation



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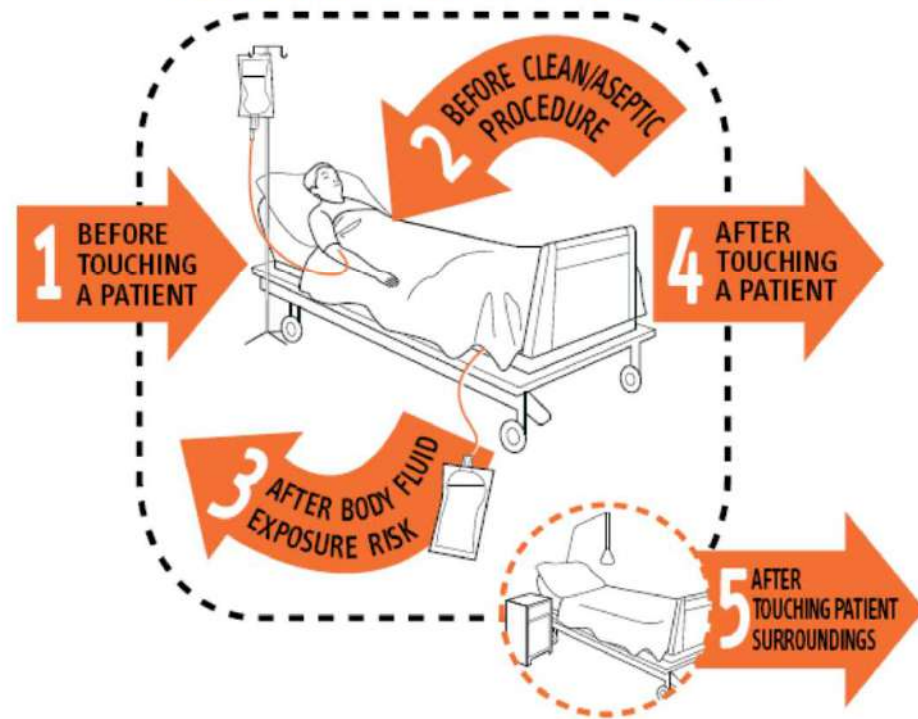
# The My Five Moments approach

Making it easier to

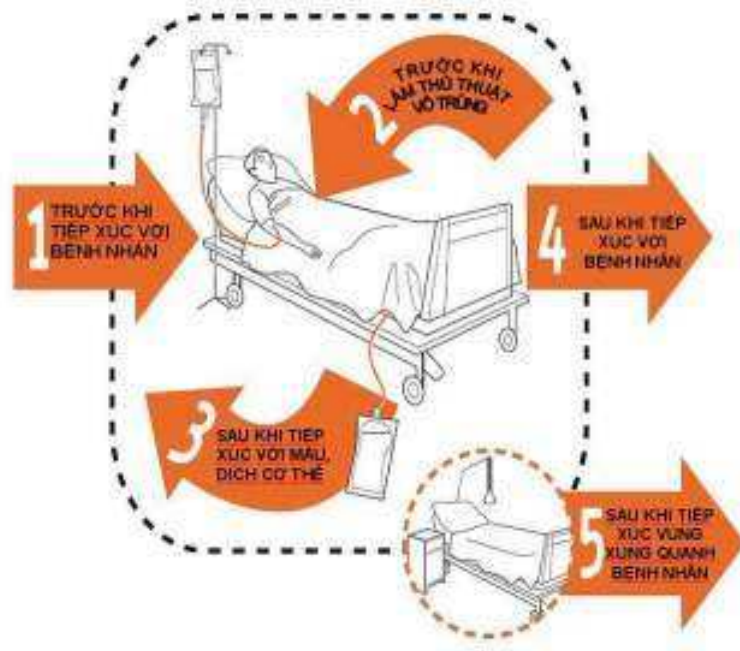
- understand
- remember
- practice

the hand hygiene indications at the point of care

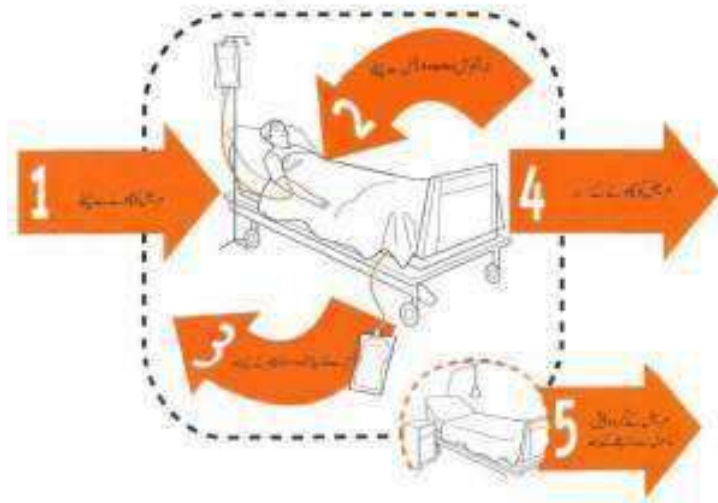
## My 5 moments for HAND HYGIENE



Sax H, Allegranzi B, Uçkay I, Larson E, Boyce J, Pittet D. *J Hosp Infect* 2007;67:9-21



## ہاتھوں کی صفائی کے پانچ مواقع



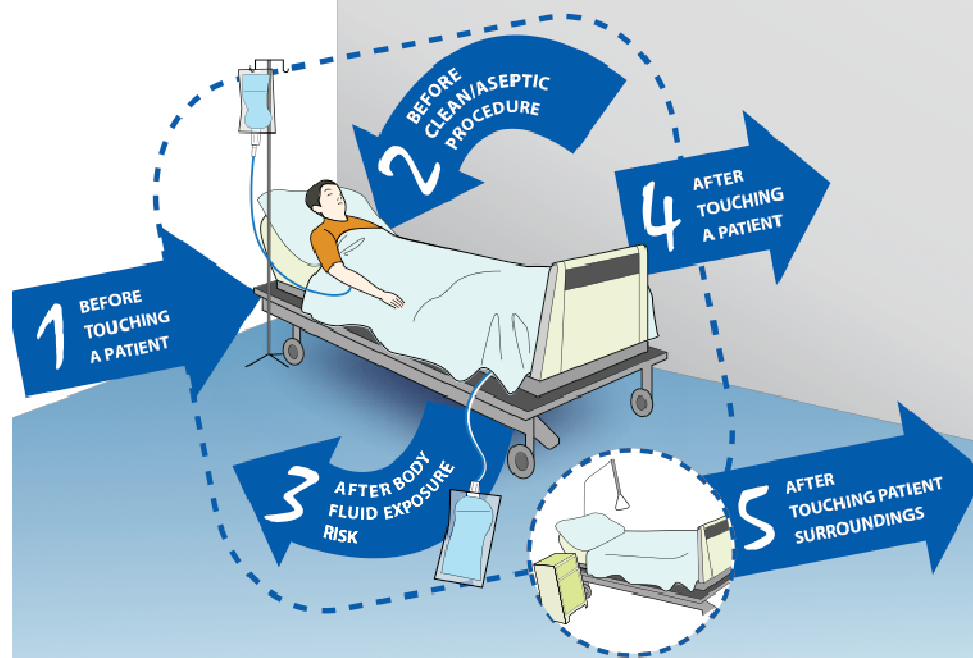
## حملة غسل الأيدي ٢٠٠٨ Your 5 moments for HAND HYGIENE



# 5



## MOMENTS for Hand Hygiene



- 1 BEFORE TOUCHING A PATIENT
- 2 BEFORE CLEAN/ASEPTIC PROCEDURE
- 3 AFTER BODY FLUID EXPOSURE RISK
- 4 AFTER TOUCHING A PATIENT
- 5 AFTER TOUCHING PATIENT SURROUNDINGS

WHEN?	Clean your hands before touching a patient when approaching him/her.
WHY?	To protect the patient against harmful germs carried on your hands.
WHEN?	Clean your hands immediately before performing a clean/aseptic procedure.
WHY?	To protect the patient against harmful germs, including the patient's own, from entering his/her body.
WHEN?	Clean your hands immediately after an exposure risk to body fluids (and after glove removal).
WHY?	To protect yourself and the health-care environment from harmful patient germs.
WHEN?	Clean your hands after touching a patient and her/his immediate surroundings, when leaving the patient's side.
WHY?	To protect yourself and the health-care environment from harmful patient germs.
WHEN?	Clean your hands after touching any object or furniture in the patient's immediate surroundings, when leaving – even if the patient has not been touched.
WHY?	To protect yourself and the health-care environment from harmful patient germs.



Los 4 momentos de la higiene de manos

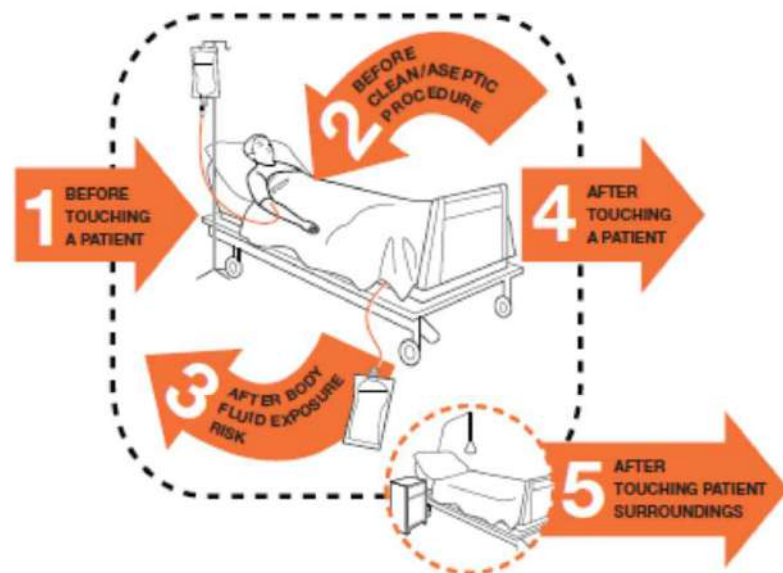




齊齊潔手**5**時刻  
院舍醫院一樣得！



# Your 5 Moments for Hand Hygiene



<b>1</b>	<b>BEFORE TOUCHING A PATIENT</b>	<b>WHEN?</b> Clean your hands before touching a patient when approaching him/her. To protect the patient against harmful germs carried on your hands.
<b>2</b>	<b>BEFORE CLEAN/ASEPTIC PROCEDURE</b>	<b>WHEN?</b> Clean your hands immediately before performing a clean/aseptic procedure. To protect the patient against harmful germs, including the patient's own, from entering his/her body.
<b>3</b>	<b>AFTER BODY FLUID EXPOSURE RISK</b>	<b>WHEN?</b> Clean your hands immediately after an exposure risk to body fluids (and after glove removal). To protect yourself and the health-care environment from harmful patient germs.
<b>4</b>	<b>AFTER TOUCHING A PATIENT</b>	<b>WHEN?</b> Clean your hands after touching a patient and his/her immediate surroundings, when leaving the patient's side. To protect yourself and the health-care environment from harmful patient germs.
<b>5</b>	<b>AFTER TOUCHING PATIENT SURROUNDINGS</b>	<b>WHEN?</b> Clean your hands after touching any object or furniture in the patient's immediate surroundings, when leaving – even if the patient has not been touched. To protect yourself and the health-care environment from harmful patient germs.



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May 2008

# How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

**1** Duration of the entire procedure: 20-30 seconds

**1a**

Apply a palmful of the product in a cupped hand, covering all surfaces;

**1b**

Rub hands palm to palm;

**2**

Rub hands palm to palm;

**3**

Right palm over left dorsum with interlaced fingers and vice versa;

**4**

Palm to palm with fingers interlaced;

**5**

Backs of fingers to opposing palms with fingers interlocked;

**6**

Rotational rubbing of left thumb clasped in right palm and vice versa;

**7**

Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;

**8**

Once dry, your hands are safe.



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May 2008



Turmi, Ethiopia



Local clinic in Turmi, Ethiopia  
The Hamlin Fistula Hospital in Addis

VIDEOS IN CLINICAL MEDICINE

## Hand Hygiene

Yves Longtin, M.D., Hugo Sax, M.D., Benedetta Allegranzi, M.D.,  
Franck Schneider, and Didier Pittet, M.D.

**FREE AVAILABLE at <http://www.nejm.org/doi/full/10.1056/NEJMvcm0903599>**

### OVERVIEW

Health-care associated infections are a threat to patient safety and the most common adverse events resulting from a stay in the hospital.<sup>1</sup> Approximately 5 to 10% of hospitalized patients in the developed world acquire such infections, and the burden of disease is even higher in developing countries. Proper use of hand hygiene is a critical to the prevention of these infections, but compliance among health care workers is most often below 40%.

Hand hygiene serves many purposes in the health care setting.<sup>1</sup> It prevents both endogenous and exogenous infections in patients, contamination of the hospital environment with potential pathogens, and cross-transmission of microorganisms between patients. When used in conjunction with the appropriate protective equipment, it also protects health care workers from the hazards of occupational infections.

### EQUIPMENT

Essential equipment for the performance of adequate hand hygiene includes an alcohol-based hand-rub formulation or soap, water, and drying agents such as disposable paper or cloth towels. Alcohol-based hand rubs with optimal antimicrobial efficacy usually contain 75 to 85% ethanol, isopropanol, or n-propanol, or a com-

From the Infection Control Program, University of Geneva Hospitals and Faculty of Medicine (Y.L., H.S., D.P.); World Health Organization (WHO) Patient Safety, WHO Headquarters (B.A., D.P.); and the Communication Service (F.S.) and WHO Collaborating Center for Patient Safety (D.P.) — all in Geneva. Address reprint requests to Dr. Pittet at the Infection Control Program, University of Geneva Hospitals and Faculty of Medicine, 4 Rue Gabrielle-Perret Gentil, 1211 Geneva 14, Switzerland, or at [didier.pittet@hcuge.ch](mailto:didier.pittet@hcuge.ch).

\*Drs. Longtin and Sax contributed equally to this article.

N Engl J Med 2011;364:e24.

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FREE AVAILABLE at <http://www.nejm.org/doi/full/10.1056/NEJMvcm0903599>

VIDEOS IN CLINICAL MEDICINE

## Hand Hygiene

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N Engl J Med 2011; 364:e24 | March 31, 2011



### CHAPTERS

Introduction | 1. Overview | 2. Objectives | 3. Equipment | 4. Indications | 5. Hand-Hygiene Techniques | 6. Appropriate Use of Gloves | 7. Jewelry and Fingernails | 8. Skin Irritation and Fire Hazard | 9. Religious Issues | 10. Summary



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Wash Your Hands

VIDEOS IN CLINICAL MEDICINE

## Hand Hygiene

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### Translated in :

- French
- Portuguese
- Japanese
- Spanish
- Italian
- German
- Chinese
- Russian
- Arabic
- Romanian
- Turkish
- Polish
- Vietnamese

### -Available soon:

- Shewali
- Urdu
- .....

# Using innovative ways around the world to apply the 5 Moments

THE NEW ENGLAND JOURNAL OF MEDICINE

## VIDEOS IN CLINICAL MEDICINE

### Hand Hygiene

Yves Langtin, M.D., Hugo Sax, M.D., Benedetta Allegranzi, M.D.,  
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OVERVIEW **FREE AVAILABLE at <http://www.nejm.org/doi/full/10.1056/NEJMc0903599>**

Health-care associated infections are a threat to patient safety and the most com-

#### Hand Hygiene VIDEOS in The New England Journal of Medicine in YOUR language

Produced in collaboration with the WHO Collaborating Centre on Patient Safety,  
University of Geneva Hospitals & Faculty of Medicine, Geneva, Switzerland

Share

Print

#### Hand Hygiene NEJM English



#### Hygiène des mains NEJM French



#### Higiene de manos NEJM Spanish



#### Hand Hygiene NEJM Arabic



#### Hand Hygiene NEJM Chinese



#### Hand Hygiene NEJM Russian



Translated in :

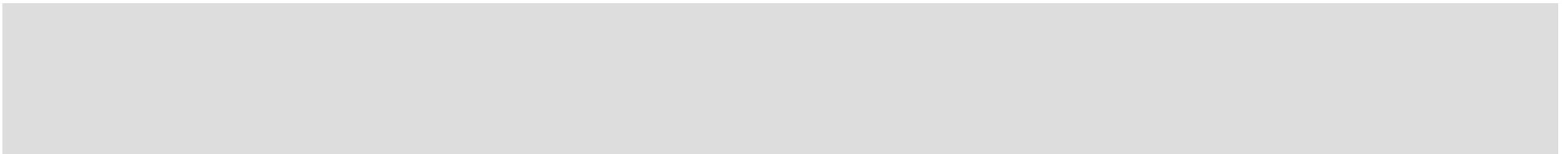
- French
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- Turkish

Available soon

- Shewali
- Urdu.....

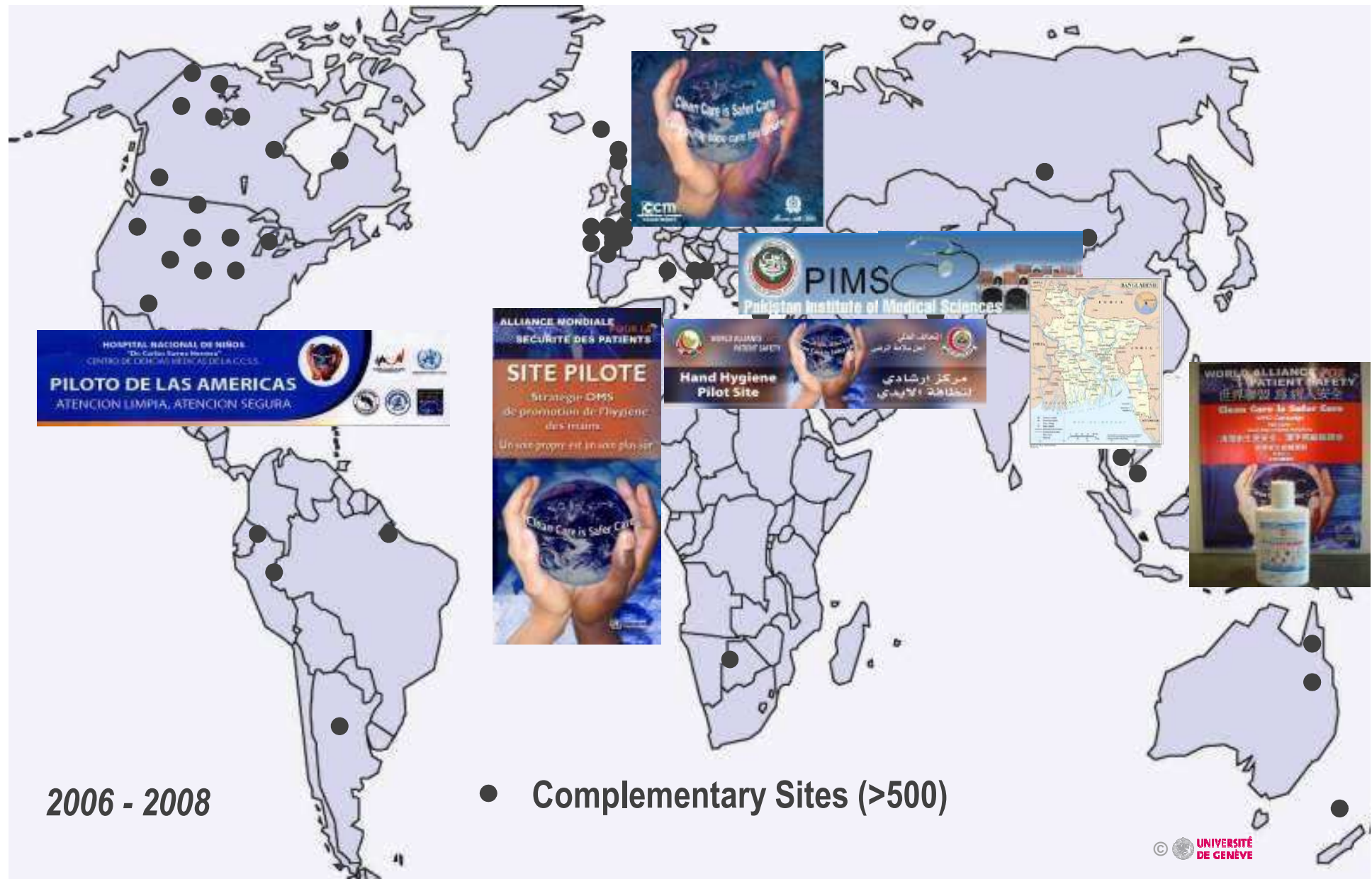
[http://www.who.int/gpsc/5may/hand\\_hygiene\\_video/en/](http://www.who.int/gpsc/5may/hand_hygiene_video/en/)

**Evidence of successful  
implementation of the strategy  
worldwide...**



# Field testing the implementation of the WHO strategy (2006-2008)

Allegranzi B et al. *Lancet Infect Diseases* 2013



# From modern health care settings



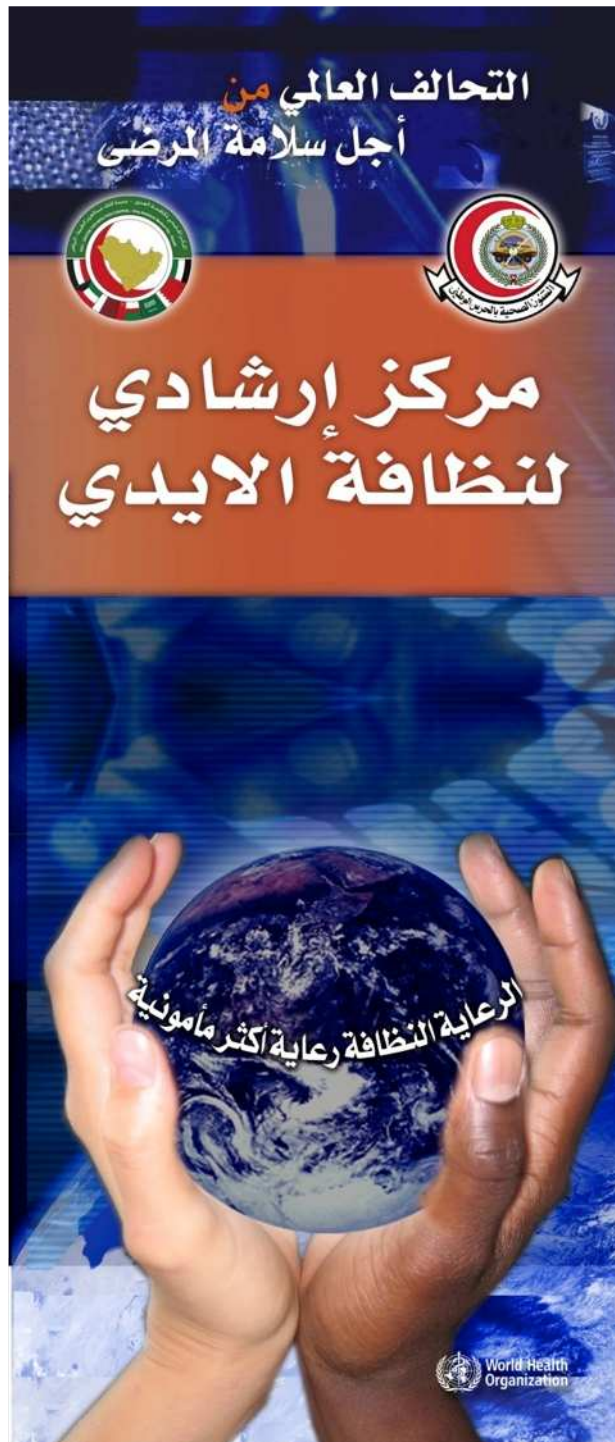
# To settings with limited resources





In a multi-cultural environment

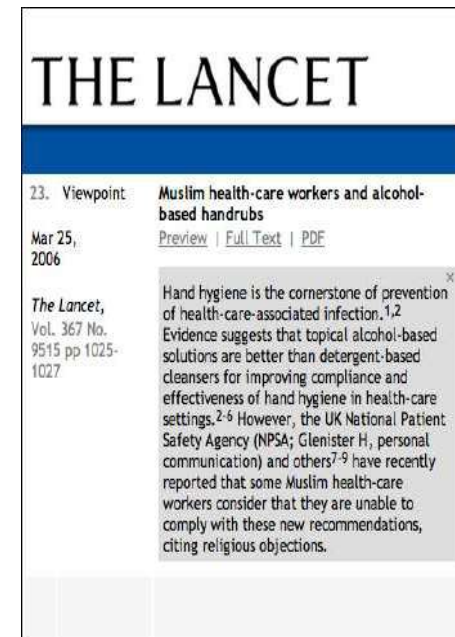
# Overcoming religious barriers



كُرُون ۞ وَإِذَا مَا أُنْزِلَتْ سُورَةٌ نَظَرَ بَعْضُهُمْ إِلَى  
بَعْضٍ مِنْكُمْ مَنْ أَحَدٌ ثُمَّ انْصَرَفُوا صَرَفَ اللَّهُ قُلُوبَهُمْ بِأَنَّهُمْ  
رُفُوا عَلَىٰ أَعْيُنِهِمْ فَذَكَرُوا فَلَا يَفْقَهُونَ ۞ لَقَدْ جَاءَكُمْ رَسُولٌ مِنْ أَنْفُسِكُمْ  
وَحَرِيصٌ عَلَيْكُمْ بِالْمُؤْمِنِينَ رَؤُوفٌ  
وَحَسْبِيَ اللَّهُ لَا إِلَهَ إِلَّا هُوَ  
الْعَظِيمُ ۞



# *Kingdom of Saudi Arabia June, 2006*



*Lancet* 2006; 367:1025

Ministry of National Guard - Health Affairs  
King Abdulaziz Medical City, Riyadh, KSA



January 2015



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# Ensuring universal system change



# Equity - Solidarity





*Kenya, Africa, January 2006*



*Kenya, Africa, January 2006*



*Kenya, Africa, January 2006*




*Kenya, Africa, January 2006*

A woman in a white uniform stands in a room with a large, multi-paned window. She is holding a small object in her hands. A sink is visible in the foreground. The room is dimly lit, with light coming from the window. A clock is mounted on the wall above the sink.

**How much does the product cost ?**

*Kenya, Africa, January 2006*

A woman in a white lab coat is standing in a laboratory. She is positioned in front of a large, multi-paned window that looks out onto greenery. Below the window is a white sink with two faucets. A small, dark, rectangular object is hanging on the wall above the sink. The woman is looking down at something in her hands.

**How much does the product cost ?  
2.5x the price in Boston or in Geneva**

*Kenya, Africa, January 2006*

# Guide to the local production of the license-free WHO alcohol-based handrub formulation

From sugar can byproducts, at low costs – Mali, Africa, 2007





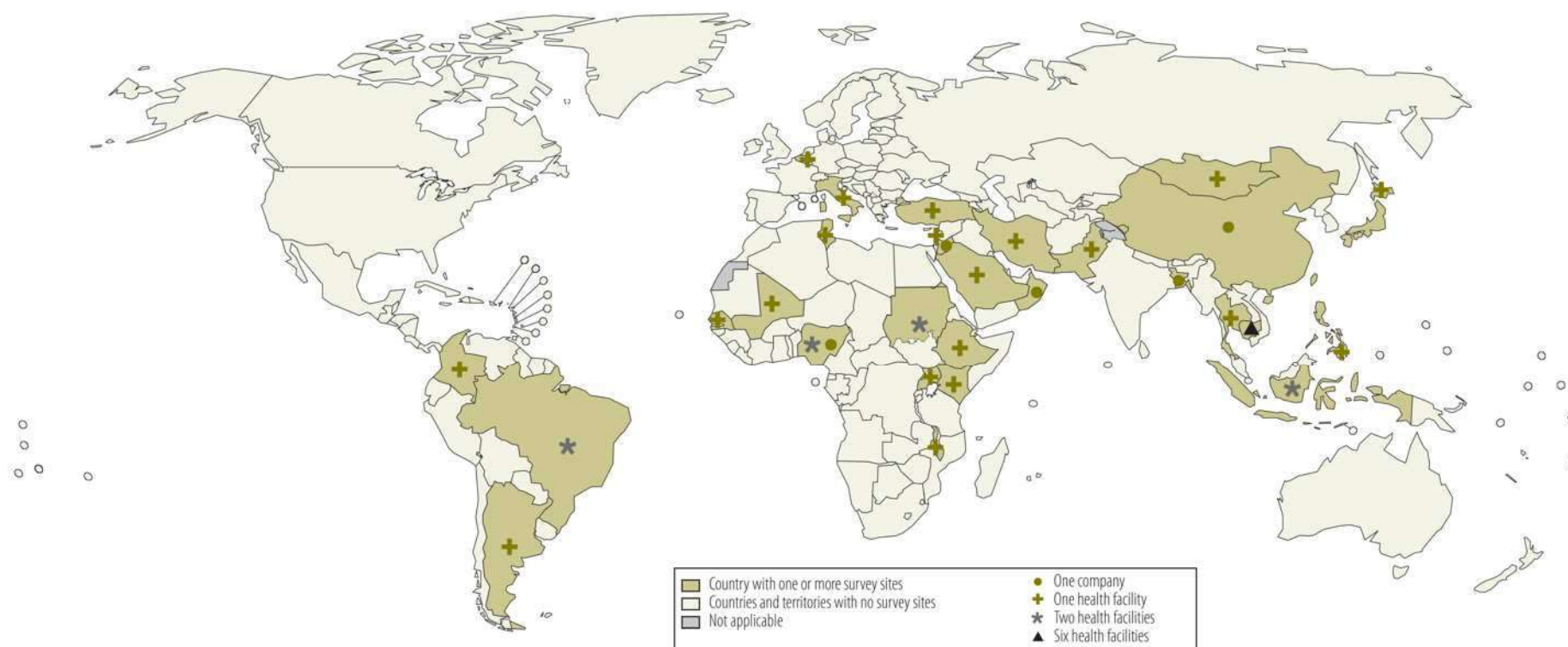
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Note: There was one site each in Argentina, Bangladesh, Belgium, China (Province of Taiwan), Colombia, Ethiopia, Islamic Republic of Iran, Italy, Japan, Jordan, Kenya, Lebanon, Malawi, Mali, Mongolia, Oman, Pakistan, Philippines, Saudi Arabia, Senegal, Thailand, Tunisia, Turkey and Uganda; two sites each in Brazil, Indonesia and Sudan; three in Nigeria; and six in Cambodia.

Source: Public Health Information and Geographic Information Systems, World Health Organization.

**Bull World Health Organ vol.91 n.12 Geneva Dec. 2013 Epub Sep 30, 2013**

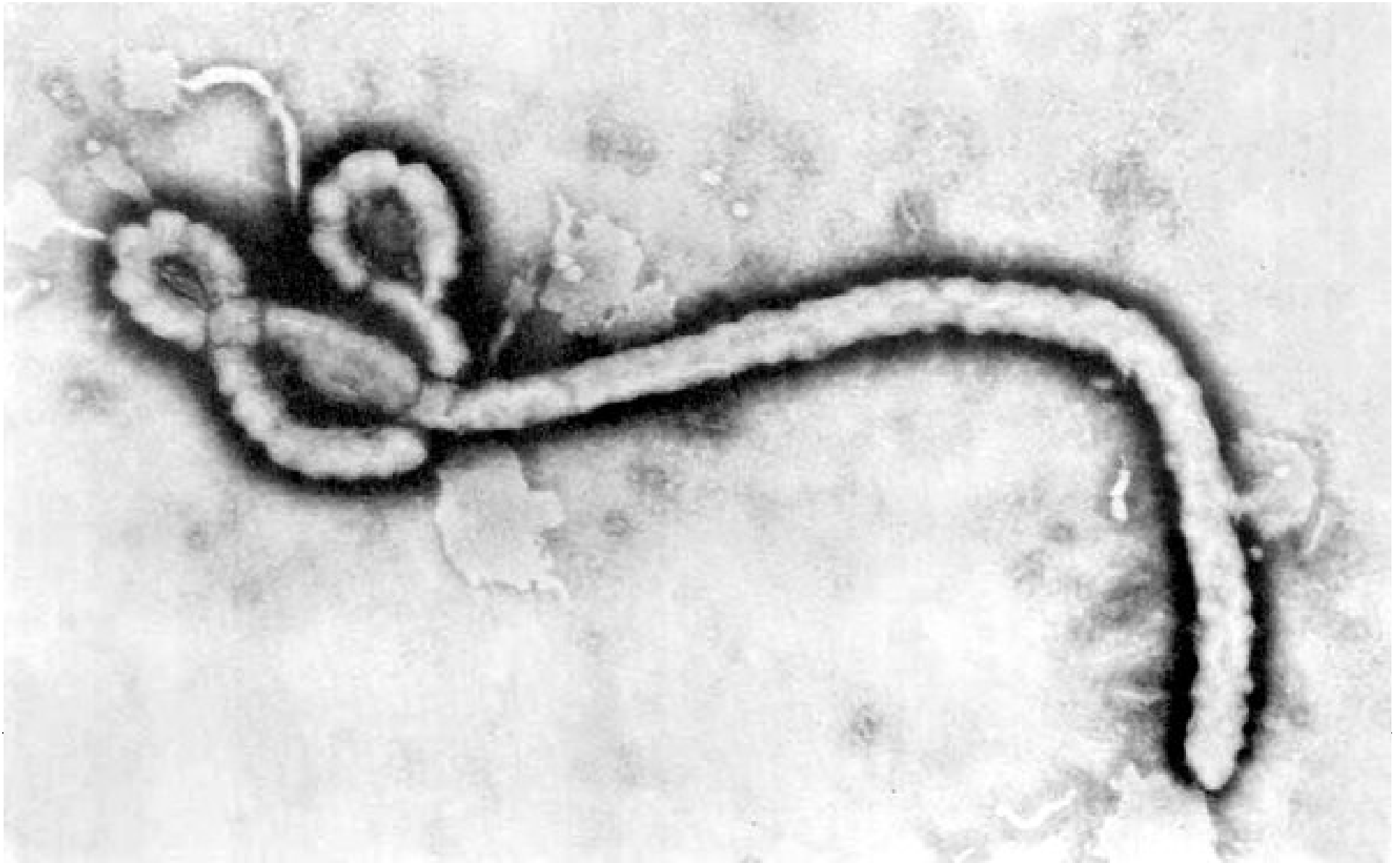
**Local production of WHO-recommended alcohol-based handrubs:  
feasibility, advantages, barriers and costs**

Joanna Bauer-Savage, Didier Pittet, EunMi Kim & Benedetta Allegranzi

# Universal system change implemented (handrubbing vs handwashing)



© UNIVERSITÉ DE GENÈVE



**Ebola virus**

# On the ground



Redemption Hospital,  
Monrovia, May 2014  
(Courtesy Dr Olivier Hagon)

On the ground 4 months later



Redemption Hospital,  
Monrovia, September 2014  
(Courtesy Dr Olivier Hagon)



**Kit for the local preparation of the WHO  
alcohol-based formulation for hand hygiene**  
*Destination: Monrovia, Liberia, October 2014*

# Sticker for the locally prepared alcohol-based WHO formulation for hand hygiene

*Destination: Monrovia, Liberia, October 2014*

**Alcohol-  
based  
hand rub**

- Apply a palmful ( 3 ml )
- Cover all surfaces of the hands
- Rub hands until dry

[CleanHandsSaveLives.org](http://CleanHandsSaveLives.org)

# Clean Hands Save Lives

Photographie Jean-Baptiste Huyn

**Composition:** Ethanol 80 % (v/v), Glycerol 1.45 % (v/v) Hydrogen peroxide (H<sub>2</sub>O<sub>2</sub>) 0.125% (v/v).



**Highly  
flammable**



**Irritant**

**General information:** WHO-recommended hand-rub formulation. For external use only. Avoid contact with eyes. Keep out of the reach of children. Flammable: keep away from flame and heat.

Irritating to eyes. Avoid heat, flames and other sources of ignition. Vapours may cause drowsiness and dizziness. Keep out of reach of children.

Do not use after the expiry date.

**For external use only**

**HUG**    
**Hôpitaux Universitaires de Genève**

University of Geneva Hospitals  
and Faculty of Medicine, Geneva, Switzerland



WHO Collaborating Center  
on Patient Safety  
Infection Control & Improving Practices

**Exp.:**

**Batch:**





Local production of the WHO  
alcohol-based formulation,  
Monrovia, Liberia  
November 2014  
(*Courtesy Dr Olivier Hagon*)









## WHO leadership commitment – hand hygiene and Ebola in 2015



Dr A. Nordstrom, WR,  
Sierra Leone



Dr E. Kelley, Director,  
WHO HQ SDS

Drs B. Aylward, A. Gasgasira,  
J.M. Dangou WHO Ebola  
West Africa



Page 75

# Universal – Adaptable



Allegranzi B. et al. *Lancet Infectious Diseases*, 2013; Aug 22

# Global implementation of WHO's multimodal strategy for improvement of hand hygiene: a quasi-experimental study



Benedetta Allegranzi, Angèle Gayet-Ageron, Nizam Damani, Loséni Bengaly, Mary-Louise McLaws, Maria-Luisa Moro, Ziad Memish, Orlando Urroz, Hervé Richet, Julie Storr, Liam Donaldson, Didier Pittet

## Summary

**Background** Health-care-associated infections are a major threat to patient safety worldwide. Transmission is mainly via the hands of health-care workers, but compliance with recommendations is usually low and effective improvement strategies are needed. We assessed the effect of WHO's strategy for improvement of hand hygiene in five countries.

**Methods** We did a quasi-experimental study between December, 2006, and December, 2008, at six pilot sites (55 departments in 43 hospitals) in Costa Rica, Italy, Mali, Pakistan, and Saudi Arabia. A step-wise approach in four 3–6 month phases was used to implement WHO's strategy and we assessed the hand-hygiene compliance of health-care workers and their knowledge, by questionnaire, of microbial transmission and hand-hygiene principles. We expressed compliance as the proportion of predefined opportunities met by hand-hygiene actions (ie, handwashing or hand rubbing). We assessed long-term sustainability of core strategy activities in April, 2010.

**Findings** We noted 21884 hand-hygiene opportunities during 1423 sessions before the intervention and 23746 opportunities during 1784 sessions after. Overall compliance increased from 51·0% before the intervention (95% CI 45·1–56·9) to 67·2% after (61·8–72·2). Compliance was independently associated with gross national income per head, with a greater effect of the intervention in low-income and middle-income countries (odds ratio [OR] 4·67, 95% CI 3·16–6·89;  $p < 0·0001$ ) than in high-income countries (2·19, 2·03–2·37;  $p < 0·0001$ ). Implementation had a major effect on compliance of health-care workers across all sites after adjustment for main confounders (OR 2·15, 1·99–2·32). Health-care-workers' knowledge improved at all sites with an increase in the average score from 18·7 (95% CI 17·8–19·7) to 24·7 (23·7–25·6) after educational sessions. 2 years after the intervention, all sites reported ongoing hand-hygiene activities with sustained or further improvement, including national scale-up.

**Interpretation** Implementation of WHO's hand-hygiene strategy is feasible and sustainable across a range of settings in different countries and leads to significant compliance and knowledge improvement in health-care workers, supporting recommendation for use worldwide.

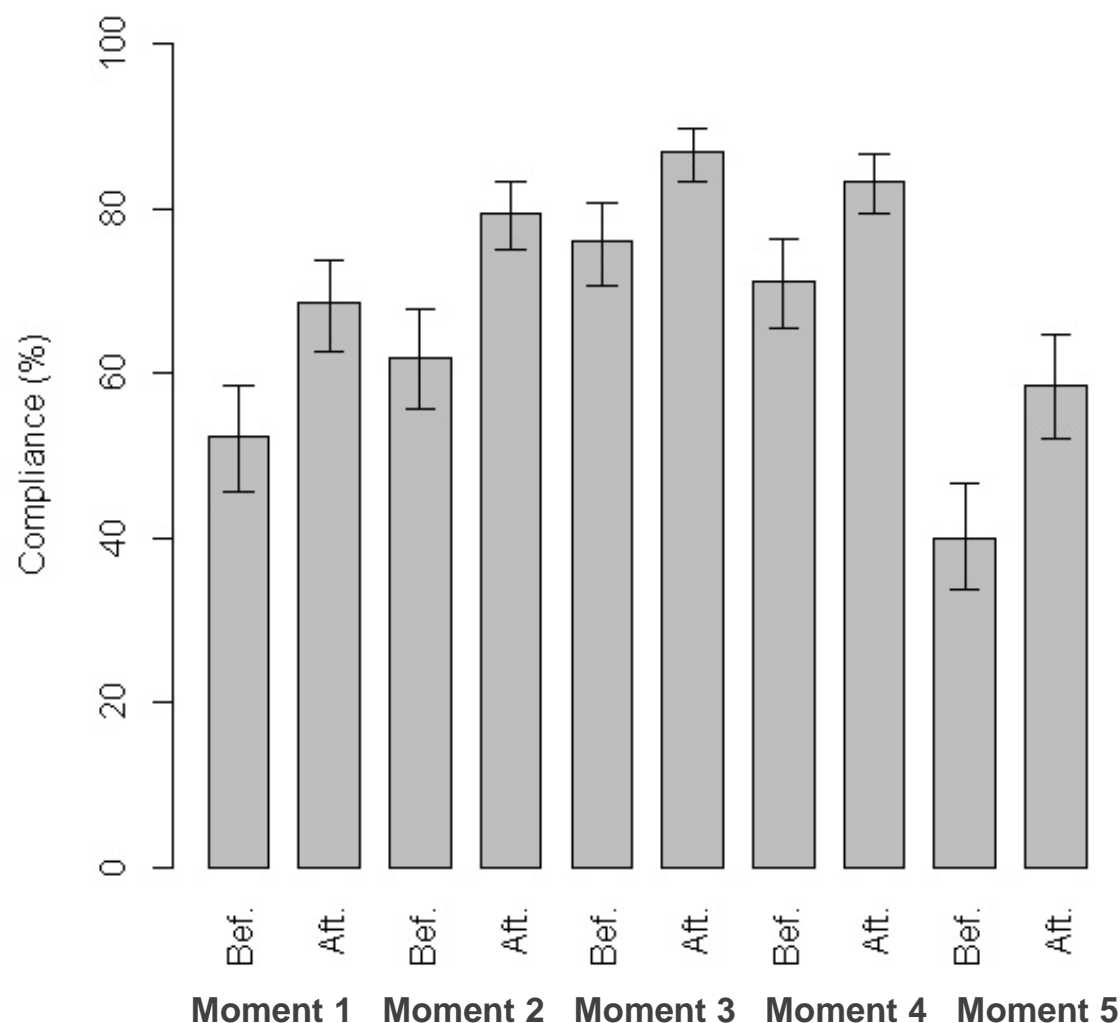
Published Online  
August 23, 2013  
[http://dx.doi.org/10.1016/S1473-3099\(13\)70163-4](http://dx.doi.org/10.1016/S1473-3099(13)70163-4)

See Online/Comment  
[http://dx.doi.org/10.1016/S1473-3099\(13\)70223-8](http://dx.doi.org/10.1016/S1473-3099(13)70223-8)

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First Global Patient Safety Challenge, WHO Patient Safety Programme, WHO, Geneva, Switzerland (B Allegranzi MD); Infection Control Programme and WHO Collaborating Centre on Patient Safety, University of Geneva Hospitals and Faculty of Medicine, Geneva, Switzerland (A Gayet-Ageron MD, Prof D Pittet MD); Craigavon Area Hospital, Portadown, UK (N Damani MD); Hôpital Gabriel Touré, Bamako, Mali (L Bengaly PhD); University of New South Wales (UNSW), School of Public Health and

# Hand hygiene compliance by indication before and after strategy implementation

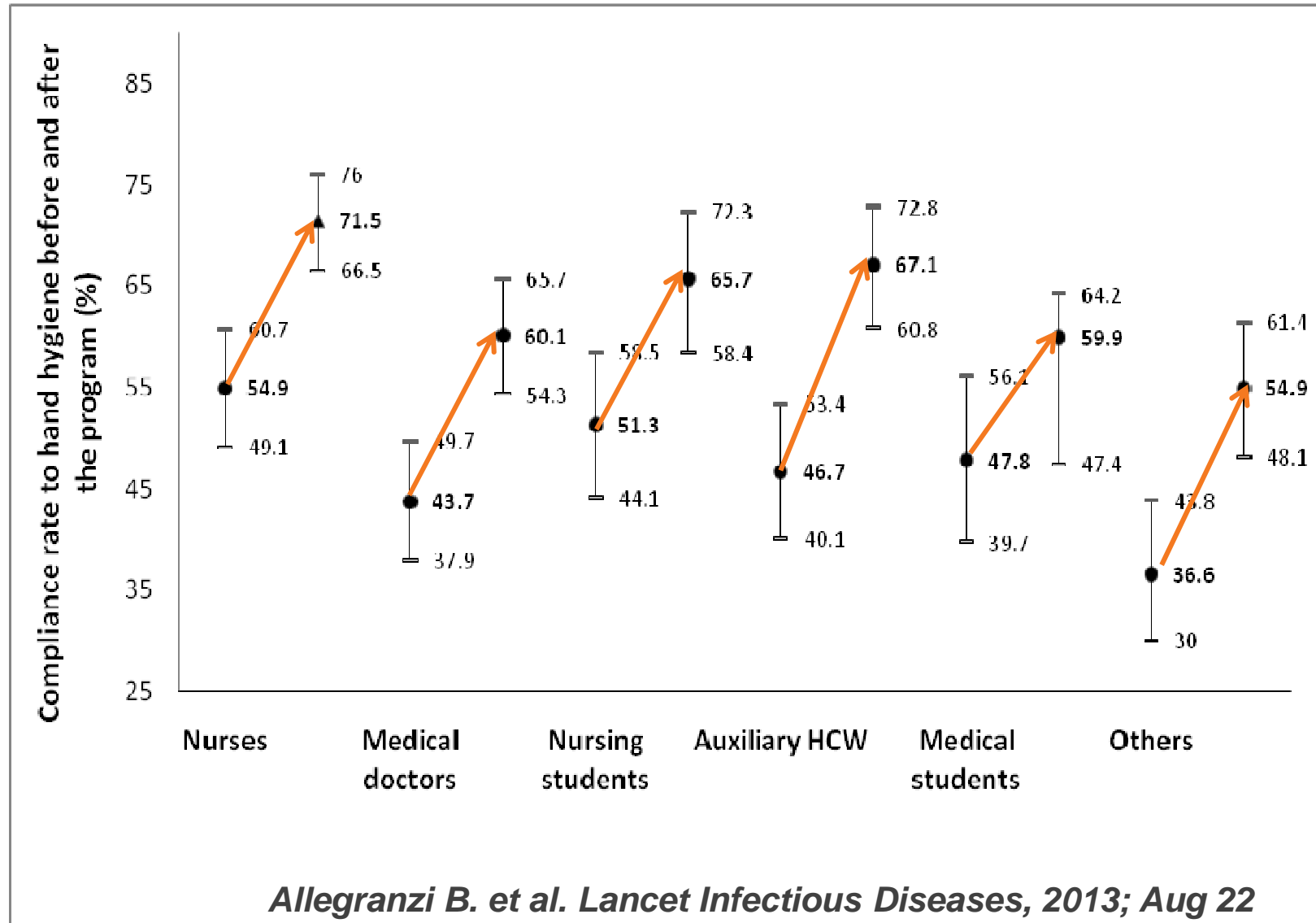


Overall compliance improved:  
from 51% to 67%



*Allegranzi B. et al.  
Lancet Infectious Diseases,  
2013; Aug 22*

# Hand hygiene compliance rates before and after the implementation by professional categories



# Effect of the WHO intervention strategy on Hand Hygiene compliance by Pilot Site

Pilot site	Number of opportunities	Odds Ratio	95% CI	P Value
Costa Rica	2100	5.82	3.28-10.32	< 0.001
Italy	18906	2.27	2.00-2.57	< 0.001
Mali	3546	2.40	1.62-3.55	< 0.001
Pakistan	1332	2.48	1.75-3.52	< 0.001
Saudi Arabia KAMC	2829	2.54	2.00-3.21	< 0.001
Saudi Arabia KSMC	15621	1.83	1.60-2.09	<0.001

**Overall effect: OR = 2.15; 95% CI, 1.99-2.32;  $P < .001$**

*Allegranzi B. et al. Lancet Infectious Diseases, 2013; Aug 22*

# Effect of the WHO Intervention Strategy on Hand Hygiene Compliance by Patient Population

Patient population	Number of opportunities	Odds Ratio	95% CI	P Value
Intensive care units	28096	2.09	1.90-2.30	<0.001
Surgery wards	7383	2.88	2.34-3.54	<0.001
Emergency wards	2034	0.99	0.72-1.36	0.94
Internal medicine wards	1815	7.31	4.10-13.02	<0.001
Pediatric wards	1664	3.99	2.74-5.81	<0.001
Others	3342	0.71	0.51-0.98	0.04

*Allegranzi B. et al. Lancet Infectious Diseases, 2013; Aug 22*

## Indicators of long-term sustainability (2 years follow-up)

Number of  
sites/total

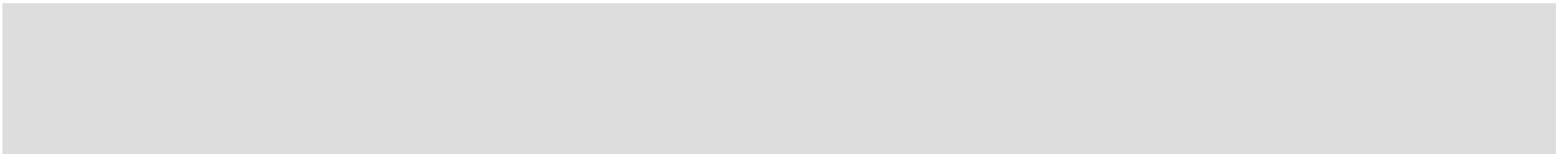
Site

Strategy implementation continued	6/6	All
Alcohol-based handrub continued to be available*	5/5	All
Educational sessions repeated at least once a year*	5/5	All
Hand hygiene compliance monitoring and feedback repeated regularly*	4/5	Costa Rica, Mali, Saudi KAMC and KSMC
Implementation expanded to other hospitals in the country	5/6	Costa Rica, Italy, Mali, Saudi KAMC and KSMC
Launch or sustainment of a national campaign following pilot testing	4/6	Costa Rica, Italy, Saudi KAMC and KSMC

# Adoption and adaptation of *Clean Care is Safer Care* worldwide



**Evidence of **impact** of the  
strategy worldwide...**



# The effect of hand hygiene compliance on hospital-acquired infections in an ICU setting in a Kuwaiti teaching hospital

Journal of Infection and Public Health (2013) 6, 27–34

Mona F. Salama<sup>a,b</sup>, Wafaa Y. Jamal<sup>a,c</sup>, Haifa Al Mousa<sup>d</sup>,

## “The 3/3 Strategy”: A Successful Multifaceted Hospital Wide Hand Hygiene Intervention Based on WHO and Continuous Quality Improvement Methodology

Gabriel Mestre<sup>1\*</sup>, Gema Gallemí<sup>2</sup>, Jesús Rodríguez-

Reduction in the incidence of MRSA with use of alcohol-based hand rub solutions and gloves

Kazuaki Matsumoto • Akari Shigemi • Keiko Yaji • Yoshihiro Shimodozono •

## Impact of a hand hygiene educational programme on hospital-acquired infections in medical wards

O. Monistrol<sup>1</sup>, E. Calbo<sup>2</sup>, M. Riera<sup>1</sup>,  
1) Infection Control Nurse and 2) Service of

## Impact of a hospital-wide hand hygiene promotion strategy on healthcare-associated

Time-series analysis of the relationship of antimicrobial use and hand hygiene promotion with the incidence of healthcare-associated infections.

Lee YT, Chen SC, Lee MC, Hung HC, Huang HJ, Lin HC, Wu DJ, Tsao SM.  
J Antibiot (Tokyo). 2012;65:311-6

Positive deviance: Using a nurse call system to evaluate hand hygiene practices

Rita de Cássia Ribeiro de Macedo RN<sup>a,\*</sup>, Eloísa Martins Oliveira Jacob RN<sup>a</sup>,  
Vanessa Pio da Silva RN<sup>a</sup>, Edson Américo Santana RN<sup>a</sup>, Antonio Ferreira de Souza RN<sup>a</sup>,  
Priscila G... MD<sup>c</sup>,  
Miguel Ce...

Impact of a hospital-wide hand hygiene  
promotion strategy on healthcare-associated  
infections

Moi Lin Ling<sup>\*</sup> and Kue Bier

Impact of a hospital-wide hand hygiene  
initiative on healthcare-associated  
infections: results of an interrupted  
time series

Major article

Promoting and sustaining  
resulted in significant re

Jaffar A. Al-Tawfiq MD<sup>a,\*</sup>, Mahn

Effectiveness of a compre  
rates in a long-term care fa

Kath  
Eile

**>40 papers in 2012/2014:  
>1 paper / month**

Steven J.  
Douglas

Review article

Bundling hand hygiene i  
care—associated infections

Ted Pincock RN, CIC<sup>a,\*</sup>, Paul Bernstein RN, CIC<sup>a</sup>, ... Elizabeth Holst BA<sup>d</sup>

<sup>a</sup>Department of Infection Prevention and Control, Queen Elizabeth II Health Sciences Centre, Halifax, NS, Canada

<sup>b</sup>Department of Infection Prevention and Control, New York-Presbyterian Hospital, New York, NY

<sup>c</sup>GOJO Industries, Inc, Akron, OH

<sup>d</sup>Strategic Gear, Cleveland, OH

# Universal – Adaptable – Sustained



# Countries running national hand hygiene campaigns (at least 60 campaigns)



*Dec 2014 update*



World Health  
Organization

Patient Safety

A World Alliance for Safer Health Care

SAVE LIVES

Clean Your Hands

# *CleanHandsNet*

## Hand hygiene national campaigns



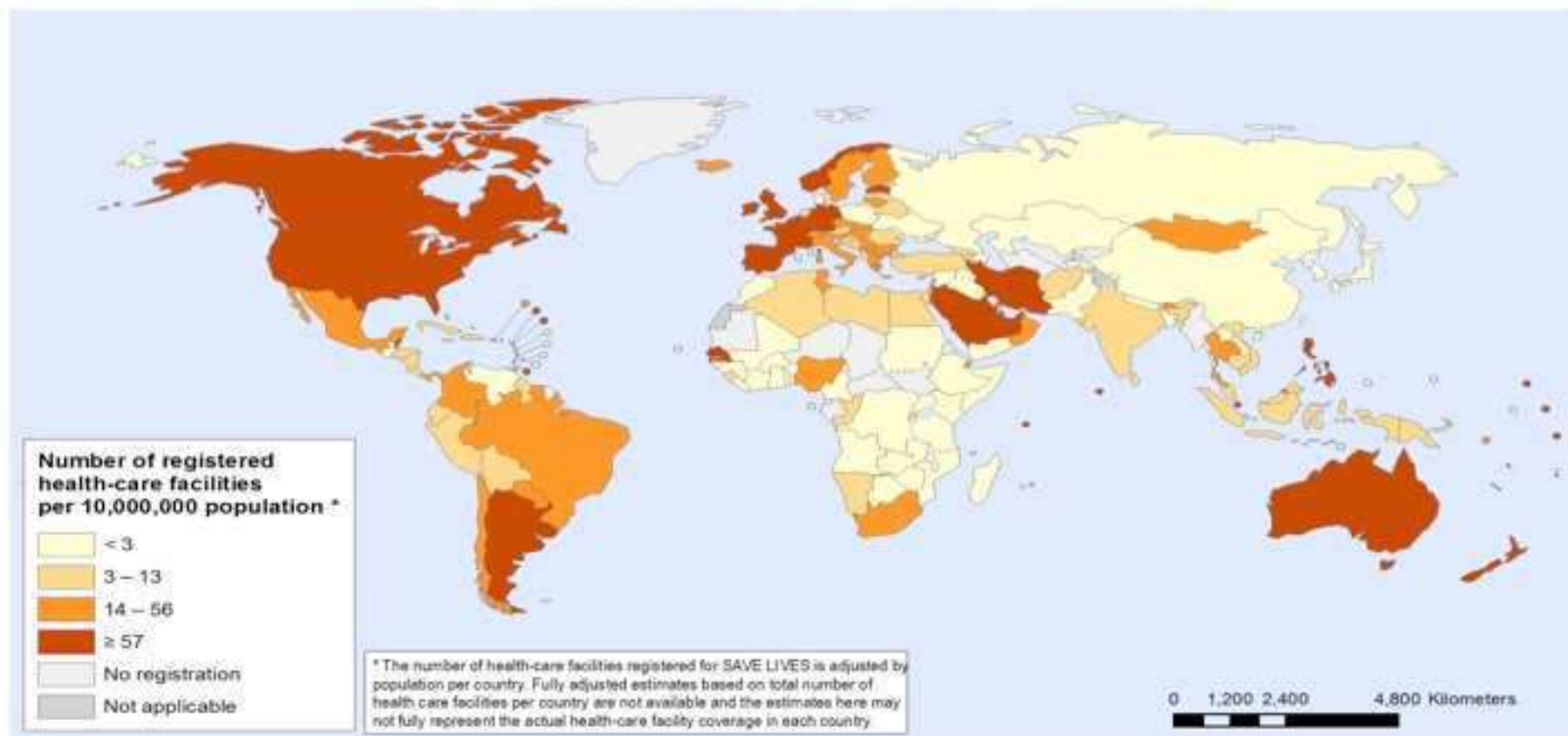
# World Hand Hygiene Day in healthcare

## WHO **SAVE LIVES**: Clean **Your** Hands

- To maintain a global profile on the importance of **hand hygiene** in health care to reduce **health care-associated infections** and enhance **patient safety** worldwide
- **Every 5 May** – WHO, **bringing people together** to improve and sustain hand hygiene



## Countries with health-care facilities registered for SAVE LIVES: Clean Your Hands global campaign



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

Data Source: World Health Organization  
Map Production: Health Statistics and  
Information Systems (HSI)  
World Health Organization



**World Health  
Organization**

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**World Health  
Organization**

**SAVE LIVES**  
Clean Your Hands



# Private Organizations for Patient Safety



*Private Organisations for Patient Safety (POPS):  
A collaboration between the World Health Organisation Patient Safety Programme and industry*

# POPS is...



- A unique model that allows for a sense of '**community**' with **sharing** of intelligence, expertise and most importantly **ownership** of the challenge that is avoidable patient and health worker harm – **together** working for the same outcome
- It provides an enhanced **global presence** and image for all involved, translating into a greater **global reach**
- *An approach based on the principles of corporate social responsibility, the work is focused on **benefit** to member states, particularly those in low and middle-income countries*

# Private Organisations for Patient Safety (POPS) – example commitment



Active in 12 countries  
Almost 1000 web page views  
2000 direct emails

Secured a registration in 1 new country!



Active in 10%  
of Irish  
Hospitals

**ECOLAB**

2500 cards  
issued  
100 posters  
Engaged 100  
hospitals

## 2014 WHO May 5<sup>th</sup> Stats (April 28<sup>th</sup>)



### Global Reach

- 41,413 web site visits exposed to May 5<sup>th</sup> message
- 5,051 emails were sent to global healthcare contacts
- Produced 3 new blog articles focused on WHO May 5<sup>th</sup> which have been viewed 1,530 times
- May 5<sup>th</sup> Press Release featured in several languages
- 1,036 visits to WHO May 5<sup>th</sup> landing pages

### Results

- 96 pledge card downloads to date from 19 countries



## Diversey Organizes Art Contest to Promote Hand Hygiene

**May 1, 2014** — Sealed Air Diversey Care has launched a global art contest supporting hand hygiene in recognition of World Hand Hygiene Day (May 5).



The contest calls for participants to create a piece of art out of a [hand-shaped downloadable template](#) or submit a photo of hands. Entries should convey the theme of "creating a better way for life through hand hygiene." The contest runs from May 5 to May 31.



3M Infection Prevent ([3M Infection](#))

01/05/2014 12:15

Save lives: Clean your hands - @WHO Hand Hygiene day is coming on May 5th!



**SARAYA**

Les cinq indications  
de l'hygiène des mains:  
Prise en charge d'un patient  
avec un cathéter urinaire



World Health  
Organization

**SAVE LIVES**  
Clean Your Hands

# Examples of POPS Commitment



GOJO Supports World Health Organization's SAVE Lives: Clean Your Hands Annual Global Campaign

4/28/2015

GOJO Supports World Health Organization's SAVE LIVES: Clean Your Hands Annual Global Campaign

## Hand Hygiene: Your Entrance Door to Safer, More Effective Interdisciplinary Care Across the Continuum

Posted by [DebMed](#) on Apr 30, 2015 9:30:00 AM

[Tweet](#)

May 5 is the World Health Organization's (WHO's) annual [Save Lives: Clean Your Hands Day](#). It's a time for healthcare professionals to reflect on the impact of hand hygiene compliance on care quality and outcomes. This year's theme as designated by the WHO is: Strengthening healthcare systems and delivery – *hand hygiene is your entrance door*.

[surewash](#)

[Home](#) [Blog](#) [SureWash](#)

## Blog

**SureWash supports 5 May 2015 SAVE LIVES: Clean your hands campaign**



[www.who.int/gpsc/pops/en](http://www.who.int/gpsc/pops/en)



**3M AVAGARD™**  
**Hand Hygiene Poster Contest 2015**  
*It's the time to bring out your freedom and stretch your ideas as your reaction  
 into and spread Hand Hygiene Awareness...*  
 Make a poster on any one of the following

Theme 1: Why Should You Protect Your Hands

or

Theme 2: How To Practice Hand Hygiene

Tweets   Tweets & replies   Photos & videos

**3M Infection Prevent** @3M\_infection · Apr 30  
 Set a reminder for May 5. We all can help The  
 @WHO raise awareness for #handhygiene.  
[s.3m.com/2bP0](https://s.3m.com/2bP0)

General Sensing  
 Like 1,902

General Sensing  
 April 30 at 12:48pm  
 #safehands

**WHO SAVE LIVES: Clean Your Hands - 5 May 2015**  
 WHO asks health workers and others to demonstrate their commitment to clean hands in health care by posting their

# Country campaigns committed to WHO call to action

## Clean Care is Safer Care

### WHO CleanHandsNet - a network of campaigning countries

#### What is WHO CleanHandsNet?



↓ CleanHandsNet global map of participants  
png, 95kb

Embedding hand hygiene promotional activities as a national priority is key for sustainability. Efforts have therefore been made to support countries or areas with large scale activities to promote hand hygiene in health care.

WHO Patient Safety supports an informal network of coordinators/leaders of such activities with the aim of sharing experiences and learning from each other. At this moment there are 48 participants in the network with coordinated activities to promote hand hygiene in health care either as specific activities or as part of infection prevention and control activities or patient safety initiatives.

[WHO Patient Safety web site](#)

[Find out who has signed up to the campaign](#)

[Latest WHO campaign and Hand Hygiene news](#)

[Hand hygiene in the control of Ebola and health system strengthening](#)

[Private Organizations for Patient Safety \(POPS\) for Hand Hygiene](#)

[#safeHANDS promotional video](#)

WHO SAVE LIVES: Clean Your Hands

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World Health  
Organization

**SAVE LIVES**  
Clean Your Hands

# Examples of country work 2015 (1)

ADECI HIGIENE DE MANOS

## Celebremos 10 años!!!

Junta por la Seguridad de los Pacientes a través del Primer Desafío Mundial de la Organización Mundial de la Salud

VI Jornada Nacional para la Mejora de la Higiene de Manos en Argentina



El camino transitado en Argentina y en el Mundo

## Hand Hygiene Promotion Activities HK, China

From 2005 to 2015



المهمة المنيعة المنيعة

وإذا لم يكن هناك مانيعة

مانيعة المنيعة

2015/04

من المنيعة المنيعة المنيعة المنيعة

Mission Mains Propres

28 avril 2015



La France a été désignée par l'OMS de l'OMS pour le 2015 mondial - a été sélectionnée pour être un pays pilote à l'occasion de la Journée mondiale de l'hygiène des mains à l'occasion de la 10<sup>ème</sup> édition de la Journée mondiale de l'hygiène des mains.

Tout d'abord, il faut savoir que les établissements de santé et les professionnels de santé ont une responsabilité dans la promotion de l'hygiène des mains.

En 2015, le Ministère chargé de la santé renouvelle son engagement auprès de l'OMS pour encourager l'implication des patients et des professionnels de la santé dans la promotion de meilleures pratiques d'hygiène des mains. L'objectif étant de faire passer la main à l'hygiène des mains pour une meilleure communication autour des mains et de leur sécurité.

Cette année, le 28 avril sur le thème de l'hygiène des mains, nous vous invitons à :



Ministère de la Santé  
Ministère des Affaires sociales, de la Santé et des Droits des Femmes

- Blogposts
- Calendrier
- Agenda

METIERS & CONCOURS

VOS DÉMARCHES

ÉTUDES, RECHERCHES & STATISTIQUES

Le concours « affiche & vidéo »

De Mundial de Higiene das Mãos

Não transmita a sua impressão microbiana!

HIGIENIZE AS MÃOS

#safeHANDS



Republic of Turkey Ministry of Health,  
Hacettepe University and World Health Organization Country Office in Turkey and  
Turkish Society of Hospital Infections and Control  
request the honour of your company at the celebration of  
Save Lives, Clean Your Hands Initiative  
on Tuesday, 5th May 2015, at 11:00 hours.

As we are approaching the launching of the 2015 National Hand Hygiene on May 3<sup>rd</sup>, we are glad to announce that a 2<sup>nd</sup> e-learning module (Multidrug-Resistant Organisms) has been uploaded on our website. This module - as the previous - is CME accredited.

To try it, log in  
lcdkwt.com

إدارة منع العدوى  
Infection Control Directorate (ICD)

Welcome to  
Infection Control Directorate

2<sup>nd</sup> e-learning Package

## Examples of country work 2015 (2)



Page 83

## Examples of country work 2015 (3)

**Infection Control Africa Network**  
Home About Projects

ICAN, Tygerberg Hospital Staff and Stellenbosch University supporting this initiative




Why a campaign for making Africa Orange?

**Hand Hygiene Australia**

For Healthcare Workers Online Learning Package

World Hand Hygiene Day - 5th May 2015

WHO SAVE LIVES. Clean Your Hands - 5 May 2015

Information on this year's theme can be found at [WHO](#). This is important, as it emphasises the importance of hand hygiene action in demonstrating overall quality of care within health care facilities.



Join us!

5<sup>th</sup> May 2015, World Hand Hygiene day

Search term, now listed by WHO as "Clean Hands Save Lives"

**World Hand Hygiene Day - 05 MAY**

World Hand Hygiene Day is nearly here! This year's 5 May theme from the World Health Organization (WHO) is: **Strengthening healthcare systems and delivery - hand hygiene is your entrance door.**

The theme emphasises the importance of hand hygiene action in demonstrating overall quality of care within health care facilities (HCFs).

This year the WHO is calling for healthcare facilities to "Take this opportunity to show your colleagues, your country and the world what a strong quality indicator of care hand hygiene is" and to "Take the opportunity to commemorate all that has happened around the world over these last 15 years".

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African Region- SAVE LIVES: clean your hands



# Help Us Turn Africa Orange

Feb 2014: 669 hospitals      April 2015: 801 hospitals

Countries with health-care facilities registered for SAVE LIVES: Clean Your Hands global campaign



Countries with health-care facilities registered for SAVE LIVES: Clean Your Hands global campaign



Register your health facility at:  
[http://www.who.int/csr/communicable\\_disease\\_surveillance/clean\\_hands/en/](http://www.who.int/csr/communicable_disease_surveillance/clean_hands/en/)



## Commitment in Sierra Leone: Country pledge, campaign activities, hospital registrations



Dr Alaa Gad, IPC Team



Miranda Deeves, IPC Team

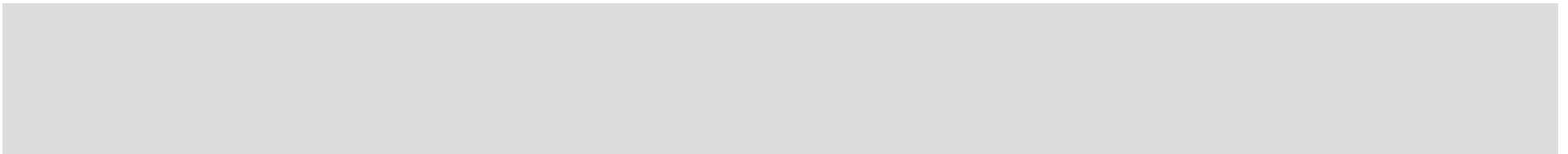
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World Health  
Organization

**SAVE LIVES**  
Clean Your Hands

**Tools to ensure sustainability  
of the solution worldwide...**



# Monitoring your institution

## **“Hand Hygiene Self-Assessment Framework”**

### **CDC-WHO partnership to Assess Hand Hygiene Infrastructure at Healthcare Facilities**

The CDC and the World Health Organization (WHO) are committed to improving hand hygiene in healthcare facilities. An important aspect of this effort is facility self-assessments. Healthcare facilities can track their progress in hand hygiene promotion, plan improvements and set goals for hand hygiene improvement and sustainability through the use of the WHO Hand Hygiene Self-Assessment Framework.

<http://www.who.int/gpsc/5may/en/>

<http://www.cdc.gov/handhygiene/partners/WHO-assess-hand-hygiene.html>



## Hand Hygiene Self-Assessment Framework 2010

### 1. System Change

Question	Answer	Score	WHO improvement tools
<b>1.1</b> How easily available is alcohol-based handrub in your health-care facility?  <b>Choose one answer</b>	Not available	0	→ Ward Infrastructure Survey
	Available, but efficacy <sup>1</sup> and tolerability <sup>2</sup> have not been proven	0	→ Protocol for Evaluation of Tolerability and Acceptability of Alcohol-based Handrub in Use or Planned to be Introduced: Method 1
	Available only in some wards or in discontinuous supply (with efficacy <sup>1</sup> and tolerability <sup>2</sup> proven)	5	→ Guide to Implementation II.1
	Available facility-wide with continuous supply (with efficacy <sup>1</sup> and tolerability <sup>2</sup> proven)	10	
	Available facility-wide with continuous supply, and at the point of care <sup>3</sup> in the majority of wards (with efficacy <sup>1</sup> and tolerability <sup>2</sup> proven)	30	
	Available facility-wide with continuous supply at each point of care <sup>3</sup> (with efficacy <sup>1</sup> and tolerability <sup>2</sup> proven)	50	
<b>1.2</b> What is the sink:bed ratio?  <b>Choose one answer</b>	Less than 1:10	0	→ Ward Infrastructure Survey
	At least 1:10 in most wards	5	→ Guide to Implementation II.1
	At least 1:10 facility-wide and 1:1 in isolation rooms and in intensive care units	10	





## Hand Hygiene Self-Assessment Framework 2010

### 2. Training and Education

Question	Answer	Score	WHO improvement tools
<b>2.1</b> Regarding training of health-care workers in your facility:			
<b>2.1a</b> How frequently do health-care workers receive training regarding hand hygiene <sup>7</sup> in your facility?  <b>Choose one answer</b>	Never	0	→ Slides for Education Session for Trainers, Observers and Health-care Workers
	At least once	5	→ Hand Hygiene Training Films
	Regular training for medical and nursing staff, or all professional categories (at least annually)	10	→ Slides Accompanying the Training Films
	Mandatory training for all professional categories at commencement of employment, then ongoing regular training (at least annually)	20	→ Slides for the Hand Hygiene Co-ordinator → Hand Hygiene Technical Reference Manual
<b>2.1b</b> Is a system in place to ensure that all health-care workers complete this training?	No	0	→ Hand Hygiene Why, How and When Brochure
	Yes	20	→ Guide to Implementation II.2
<b>2.2</b> Are the following educational resources (or locally produced equivalents with similar content) easily available to all health-care workers?			→ Guide to Implementation II.2
<b>2.2a</b> 'WHO Guidelines on Hand Hygiene in Health-care: A Summary'	No	0	→ WHO Guidelines on Hand Hygiene in Health Care: A Summary
	Yes	5	
<b>2.2b</b> 'Hand Hygiene Technical Reference Manual'	No	0	→ Hand Hygiene Technical Reference Manual
	Yes	5	





## Hand Hygiene Self-Assessment Framework 2010

### 3. Evaluation and Feedback

Question	Answer	Score	WHO improvement tools
<b>3.1</b> Is a ward infrastructure survey regarding available hand hygiene products and facilities performed at least annually?	No	0	→ Ward Infrastructure Survey
	Yes	10	→ Guide to Implementation II.3
<b>3.2</b> Is health-care worker knowledge regarding indications and technique for hand hygiene assessed at least annually?	No	0	→ Hand Hygiene Knowledge Questionnaire for Health-Care Workers
	Yes	10	→ Five Standardized Questions → Guide to Implementation II.3
<b>3.3</b> <b>Indirect Monitoring of Hand Hygiene Compliance</b>			
3.3a Is consumption of alcohol-based handrub monitored monthly (or at least every 3-5 months)?	No	0	→ Soap/Handrub Consumption Survey
	Yes	5	→ Guide to Implementation II.3
3.3b Is consumption of soap monitored monthly (or at least every 3-5 months)	No	0	
	Yes	5	
3.3c Is alcohol based handrub consumption at least 20L per 1000 patient-days?	No	0	
	Yes	5	





## Hand Hygiene Self-Assessment Framework 2010

### 4. Reminders in the Workplace

Question	Answer	Score	WHO improvement tools
<b>4.1</b> Are the following posters (or locally produced equivalent with similar content) displayed?			→ Guide to Implementation II.4
4.1a Poster explaining the indications for hand hygiene  <b>Choose one answer</b>	Not displayed	0	→ Your 5 Moments for Hand Hygiene (Poster)
	Displayed in some wards/treatment areas	15	
	Displayed in most wards/treatment areas	20	
	Displayed in all wards/treatment areas	25	
4.1b Poster explaining the correct use of handrub  <b>Choose one answer</b>	Not displayed	0	→ How to Handrub (Poster)
	Displayed in some wards/treatment areas	5	
	Displayed in most wards/treatment areas	10	
	Displayed in all wards/treatment areas	15	
4.1c Poster explaining correct hand-washing technique  <b>Choose one answer</b>	Not displayed	0	→ How to Handwash (Poster)
	Displayed in some wards/treatment areas	5	
	Displayed in most wards/treatment areas	7.5	
	Displayed at every sink in all wards/treatment areas	10	





## Hand Hygiene Self-Assessment Framework 2010

### 5. Institutional Safety Climate for Hand Hygiene

Question	Answer	Score	WHO improvement tools
<b>5.1</b> With regard to a hand hygiene team <sup>10</sup> that is dedicated to the promotion and implementation of optimal hand hygiene practice in your facility:			→ Guide to Implementation II.5
5.1a Is such a team established?	No	0	
	Yes	5	
5.1b Does this team meet on a regular basis (at least monthly)?	No	0	
	Yes	5	
5.1c Is there dedicated time available to organize a hand hygiene campaign and to teach hand hygiene principles	No	0	
	Yes	5	
<b>5.2</b> Have the following members of the facility leadership made a visible commitment to support hand hygiene improvement?			→ Template Letter to Advocate Hand Hygiene to Managers → Template Letter to communicate Hand Hygiene Initiatives to Managers → Guide to Implementation II.5
5.2a Chief executive officer	No	0	
	Yes	10	
5.2b Medical director	No	0	
	Yes	5	
5.2c Director of nursing	No	0	
	Yes	5	



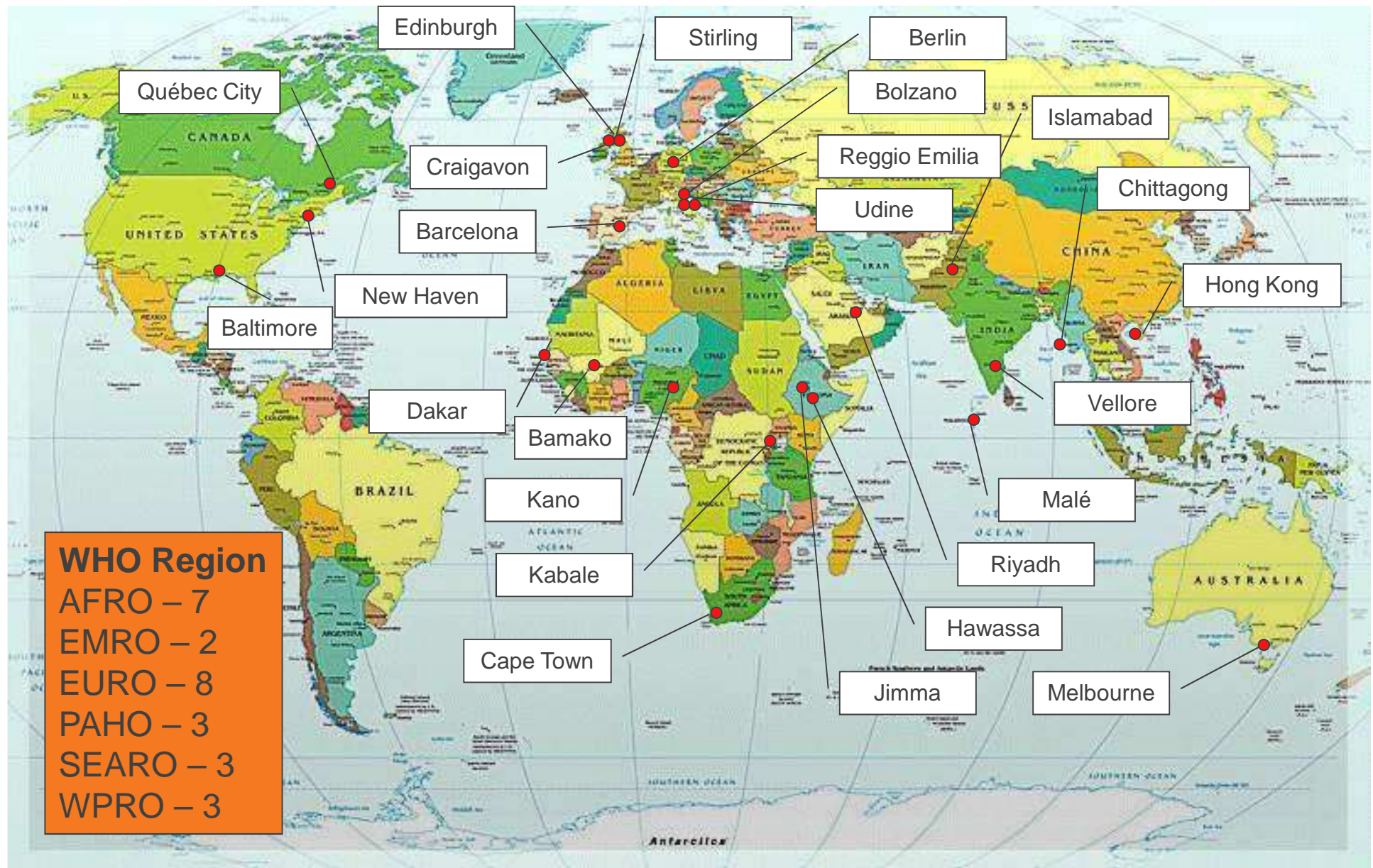
Score	
Component	Subtotal
1. System Change	
2. Education and Training	
3. Evaluation and Feedback	
4. Reminders in the Workplace	
5. Institutional Safety Climate	
Total	



**2.**  
Determine the  
assigned  
'Hand Hygiene Level'  
for your facility.

Total Score (range)	Hand Hygiene Level
0 - 125	Inadequate
126 - 250	Basic
251 - 375	Intermediate (or Consolidation)
376 - 500	Advanced (or Embedding)

# Testing the framework usability- 26 Respondents



Stewardson A. et al. *J Hosp Infection* 2013; 83: 30-35

# Interpretation:

**1.**

Add up your points.

Score	
Component	Subtotal
1. System Change	85
2. Education and Training	60
3. Evaluation and Feedback	55
4. Reminders in the Workplace	70
5. Institutional Safety Climate	65
Total	335



**2.**

Determine the assigned 'Hand Hygiene Level' for your facility.

Total Score (range)	Hand Hygiene Level
0 - 125	Inadequate
126 - 250	Basic
251 - 375	Intermediate (or Consolidation)
376 - 500	Advanced (or Embedding)

## 4 levels of HH promotion and practice

1. **Inadequate:** HH practices and promotion are deficient. Significant improvement is required.
2. **Basic:** some measures are in place, but not to a satisfactory standard. Further improvement is required.
3. **Intermediate:** an appropriate HH promotion strategy is in place and HH practices have improved. It is now crucial to develop long-term plans to ensure that improvement is sustained and progresses.
4. **Advanced:** HH promotion and optimal HH practices have been sustained and/or improved, helping to embed a culture of safety in the health-care setting.

# Continue to use the WHO Hand Hygiene Self-assessment Framework

## Assessment



## Action



[http://www.who.int/gpsc/5may/hhsa\\_framework/en/](http://www.who.int/gpsc/5may/hhsa_framework/en/)

# WHO Global Hand Hygiene Self-Assessment Framework Survey - 2011



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## WHO Hand Hygiene Self-Assessment Framework Global Survey Summary Report

From April to December 2011, health-care facilities registered for the WHO SAVE LIVES: Clean Your Hands initiative and those participating in some national hand hygiene campaigns were invited to participate in a global survey based on the

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Clean Your Hands

# WHO HHSAF Global Survey 2011



## WHO Hand Hygiene Self-Assessment Framework Global Survey Summary Report

From April to December 2011, health-care facilities registered for the WHO SAVE LIVES: Clean Your Hands initiative and those participating in some national hand hygiene campaigns were invited to participate in a global survey based on the completion of the Hand Hygiene Self-Assessment Framework (HHSAF).

The survey objectives were three-fold:

- to assess the level of progress of health-care facilities in terms of hand hygiene infrastructure, promotional activities, performance monitoring and feedback, and institutional commitment, according to a range of indicators relevant to the WHO Multimodal Hand Hygiene Improvement Strategy summarized in a score;
- to identify gaps in hand hygiene infrastructures and activities according to the HHSAF indicators;
- to provide feedback through summary results.

### Methods

The HHSAF is a tool providing a systematic situation analysis of hand hygiene structures, resources, promotion, and practices within a health-care facility. It resembles a questionnaire and is structured in five sections, based on the five components of the WHO Multimodal Hand Hygiene Improvement Strategy (namely system change, training and education, evaluation and performance feedback, reminders in the workplace, and institutional safety climate). The tool includes 27 indicators reflecting the key elements of each strategy component. These are assigned values totaling 100 points within each HHSAF section, adding up to a maximum overall score of 500 points. Based on its overall score, a facility is assigned to one of four levels of progress:

1. **Inadequate** (score of 0-125): hand hygiene practices and hand hygiene promotion are deficient. Significant improvement is required.

- Participation of **2119 health-care settings** from **69 countries**
- Find more at [http://www.who.int/gpsc/5may/hhsa\\_framework/en/](http://www.who.int/gpsc/5may/hhsa_framework/en/)
- **Scientific publication:**  
*B. Allegranzi et al. American Journal of Infection Control 2014;42:224-30*

# WHO launches a new HHSAF Global Survey starting on 1 June 2015



## HOW TO PARTICIPATE ?

- All health-care facilities registered for

**SAVE LIVES: Clean Your Hands** will be invited by WHO to participate and submit their Framework results online

- Download the Framework at [http://www.who.int/gpsc/5may/hhsa\\_framework/en/](http://www.who.int/gpsc/5may/hhsa_framework/en/)

and fill out the online form to give WHO your details

- Facilities' identity and results will be kept strictly confidential
- Results will be issued on **13 October 2015**, the 10<sup>th</sup> anniversary of the ***Clean Care is Safer Care*** programme

## WHO Hand Hygiene Self-Assessment Framework Global Survey May – Sept 2015

*Use the Framework to identify where your facility stands in terms of hand hygiene resources, practices and promotion!*

**AND**

*By submitting your results online, help WHO follow up the progress on hand hygiene worldwide and identify areas for further improvement!*

To participate in the global survey your health-care facility must be registered for **SAVE LIVES: Clean Your Hands**

**GET READY TO PARTICIPATE!!!**

<http://www.who.int/gpsc/5may> EN\_PSP\_GPSC1\_5May\_2015/en/

*Facilities awarded  
with the  
Hand Hygiene  
Excellence Award  
in South-East Asia  
and  
Western Pacific,  
in Europe,  
and in Latin  
America*



**WHO Hand Hygiene  
Self-assessment  
Framework**

[www.handhygieneexcellenceaward.com](http://www.handhygieneexcellenceaward.com)

Hand Hygiene



## Asia Pacific Hand Hygiene Excellence Award

## Asia Pacific Hand Hygiene Innovation Award

2013



[www.handhygieneexcellenceaward.com](http://www.handhygieneexcellenceaward.com)



### Expert Review Panel

#### Professor Didier Pittet (Chair)

Director  
Infection Control Program & WHO Collaborating Centre on  
Patient Safety  
Hôpitaux Universitaires de Genève  
Geneva, Switzerland

#### Professor Wing-Hong Seto

Chief Infection Control Officer, Hospital Authority  
Senior Consultant Microbiologist & Director  
Quality Management, Queen Mary Hospital  
WHO Collaborating Centre for Infection Control  
Hospital Authority, Hong Kong

#### Dr Moi-Lin Ling

Director, Infection Control Department  
Singapore General Hospital &  
President, Asia Pacific Society of Infection Control

#### Professor Lindsay Grayson

Director, Infectious Diseases & Microbiology  
Austin Health  
Victoria, Australia

#### Ms Patricia Ching

Infection Control Specialist  
Infection Control & Quality Improvement Department  
Queen Mary Hospital, Hong Kong

#### Ms Glenys Harrington RN, RM

Infection Control Consultant  
Infection Control Consultancy (ICC)  
Melbourne, Australia



Apply now –  
<http://www.handhygieneexcellenceaward.com>



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SAVE LIVES  
Clean Your Hands  
Shanghai

# Hand Hygiene Excellence Award Video

[tinyurl.com/HHExcAward](https://tinyurl.com/HHExcAward)



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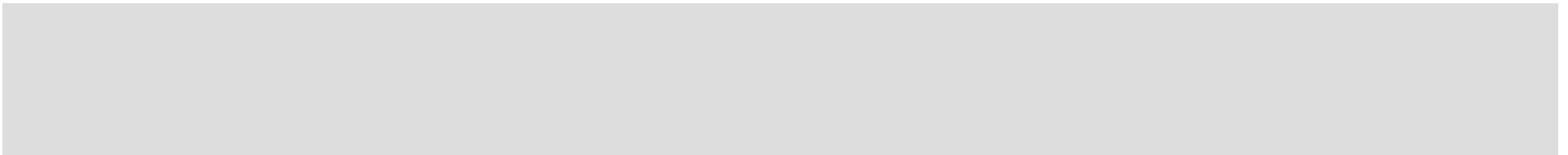
Patient Safety

A World Alliance for Better Health Care

**SAVE LIVES**  
Clean Your Hands

**How to continue ...**

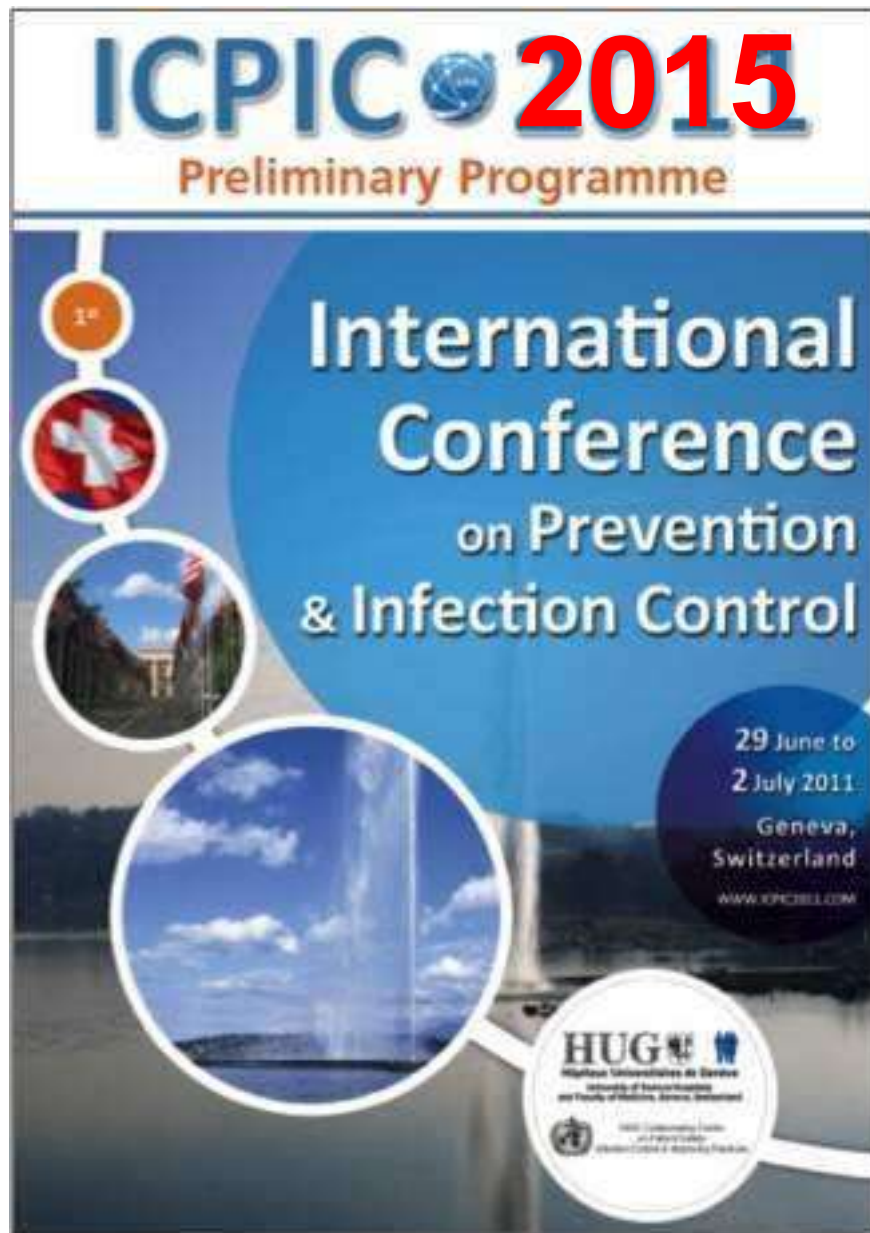
**what's next ?**





HUG / Faculty of Medicine  
WHO Collaborating Center  
on Patient Safety  
Geneva, Switzerland





[www.icpic2015.com](http://www.icpic2015.com)

**Save the Date:**

**3<sup>rd</sup> ICPIC, 16-19 June 2015,  
Geneva, Switzerland**



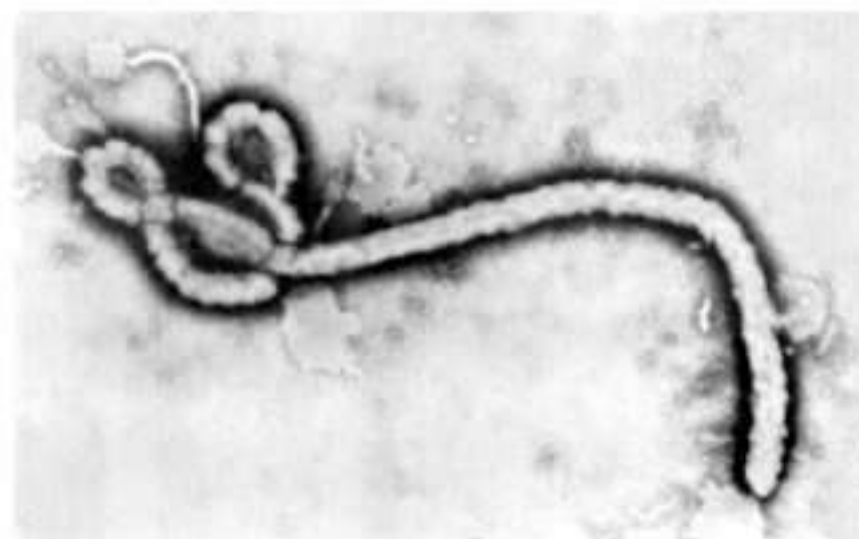
**Semmelweis at ICPIC**



[www.icpic2015.com](http://www.icpic2015.com)

**Save the Date:**

**3<sup>rd</sup> ICPIC, 16-19 June 2015,  
Geneva, Switzerland**




**Ebola: Hands-On  
Pre-ICPIC workshop**  
16 June 2015: 10AM to 5PM

See: [www.ICPIC.com](http://www.ICPIC.com)

# Vision - Perspectives



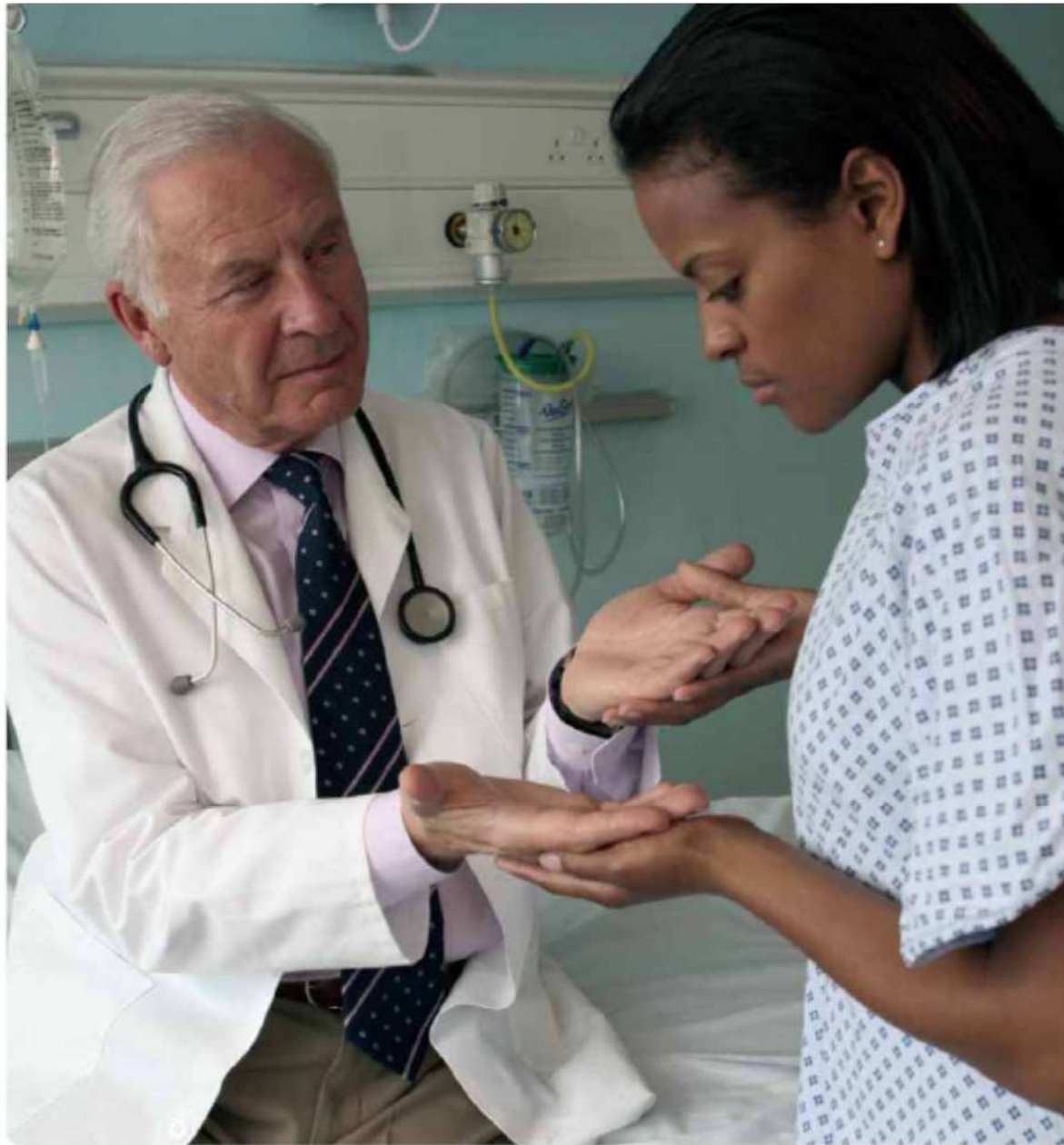
2006 Annual Report of  
The Chief Medical Officer  
On the State of Public Health

A photograph of a middle-aged man with a serious expression, sitting in a wooden armchair. He is wearing a dark polo shirt and trousers. His right leg is a prosthetic, and he is holding a silver cane in his right hand. The background is dark and out of focus.

## Dirty hands... the human cost

### MAIN FEATURES

Healthcare-Associated Infection  
Organ Transplants  
Radiotherapy  
Intrapartum-Related Deaths  
Women in Medicine



Longtin Y, Sax H, Leape L, Sheridan S, Donaldson L, Pittet D.  
Patient participation: current knowledge and applicability to patient safety.  
*Mayo Clin Proc* 2010, 85:53-62



IMSS 91, Social Security System  
Mexico  
Hand Hygiene Excellence Award



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THIERRY CROUZET

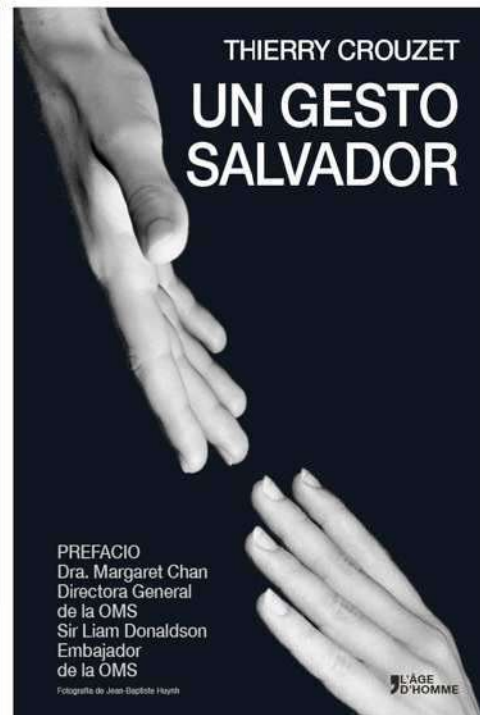
# CLEAN HANDS SAVE LIVES

FOREWORD

Dr. Margaret Chan  
WHO Director-General  
Sir Liam Donaldson  
WHO Patient Safety  
Envoy

[CleanHandsSaveLives.org](http://CleanHandsSaveLives.org)

 L'ÂGE  
D'HOMME



Published  
5 May 2014  
WHO hand hygiene Day

More translations  
in preparation:

- Persian
- Chinese (s)
- Russian
- Turkish
- Shewali
- Romanian
- Urdu
- Kmer
- ....

***The Economy of Peace***



A black and white photograph of two hands reaching towards each other, palms facing each other, set against a black background. The hands are positioned on the left and bottom right of the frame.

# THIERRY CROUZET

# CLEAN HANDS

# SAVE LIVES

FOREWORD

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[CleanHandsSaveLives.org](http://CleanHandsSaveLives.org)

 L'ÂGE  
D'HOMME



**Follow and like**  
**@didierpittet**  
**@GLOBAL\_POPS**  
**@WHO**

[www.who.int/gpsc/5may](http://www.who.int/gpsc/5may)

[www.cleanhandssaveslives.org](http://www.cleanhandssaveslives.org)

**#safeHANDS**



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Organizations  
for Patient  
Safety**

**CleanHandsSaveLives.org**

# Were You Ready for 5 May 2015 ? Are You Ready to celebrate the 10 YEARS of CCiSC ?

World Health Organization 1st Global Patient Safety Challenge

---

**Professor Didier Pittet**, MD, MS,

Infection Control Programme

WHO Collaborating Centre on Patient Safety

University of Geneva Hospitals, Switzerland

Lead Adviser, Clean Care is Safer Care

& African Partnerships for Patient Safety programmes,

World Health Organization (WHO) Patient Safety

### Background to Clean Care is Safer Care

In previous years, WHO Global Patient Safety Challenges were born from calls from around the world on specific patient safety issues, and were also reflected in global campaigns, which have brought together governments, health professionals and the public, and to catalyze political and professional action. They have also generated knowledge and resources to improve the safety of patients receiving care globally.



### The focus and objectives of Clean Care is Safer Care

The first of these Challenges, Clean Care is Safer Care, was launched in 2005, targeted the important aspect of patient safety (HCAIs). HCAI is the most frequent type of infection acquired worldwide in both developed and developing countries. Every year, millions of patients are affected each year by HCAIs, with significant losses for health systems too.



### The burden of health care-associated infection worldwide

Health care-associated infection (HCAI), also referred to as "nosocomial" or "hospital" infection, is an infection occurring in a patient during the process of care in a hospital or other health care facility which was not present or incubating at the time of admission. HCAI can affect patients in any type of setting where they receive care and can also appear after discharge. Furthermore, they



## Registration update - countries or areas

# JOIN US!



As of 13 April 2015, a total of to 17 522 hospitals and health-care facilities in 171 countries or areas have registered their commitment to hand hygiene as part of the global campaign – SAVE LIVES: Clean Your Hands.

<http://www.who.int/gpsc/5may/register/en/>

<http://www.who.int/entity/gpsc/5may/en/>

# Safety Starts Here.



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Clean Your Hands

Hong Kong  
5 May 2014

**1<sup>st</sup> Hand Sanitizing Relay Guinness World Record  
on Compliance with Hand Hygiene  
Hong Kong Baptist Hospital**



***Get ready & Participate from 5 May to 5 Sept***

**2015**

***Get ready & Participate from 5 May to Sept 2015***



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Hong Kong  
Patient Safety  
5 May 2014

**SAVE LIVES**  
Clean Your Hands

Hong Kong, 5 May 2014  
START POINT



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5 May 2014

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Hong Kong  
5 May 2014



*Get ready & Participate from 5 May to Sept 5 2015*



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5 May 2014

**SAVE LIVES**  
Clean Your Hands

# Hanrub technique to practice

*Have  
staff  
practice  
in  
advance!*

## How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

**⌚** Duration of the entire procedure: 20-30 seconds

1a



Apply a palmful of the product in a cupped hand, covering all surfaces;

1b



2



Rub hands palm to palm;

3



Right palm over left dorsum with interlaced fingers and vice versa;

4



Palm to palm with fingers interlaced;

5



Backs of fingers to opposing palms with fingers interlocked;

6



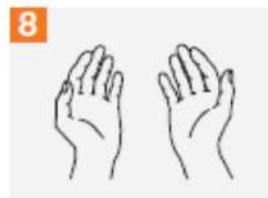
Rotational rubbing of left thumb clasped in right palm and vice versa;

7



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;

8



Once dry, your hands are safe.



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SAVE LIVES  
Clean Your Hands

All recommendations have been reviewed by the World Health Organization to verify the information contained in this document. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material rests with the reader. In no event shall the World Health Organization be liable for damages arising from its use. WHO acknowledges the National Universities of Cordoba (UNIC), in particular the members of the Infectious Control Programme, for their active participation in developing this material.

May 2005



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SAVE LIVES  
Clean Your Hands

Hong Kong, 5 May  
2014





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Hong Kong  
Patient Safety  
5 May 2014

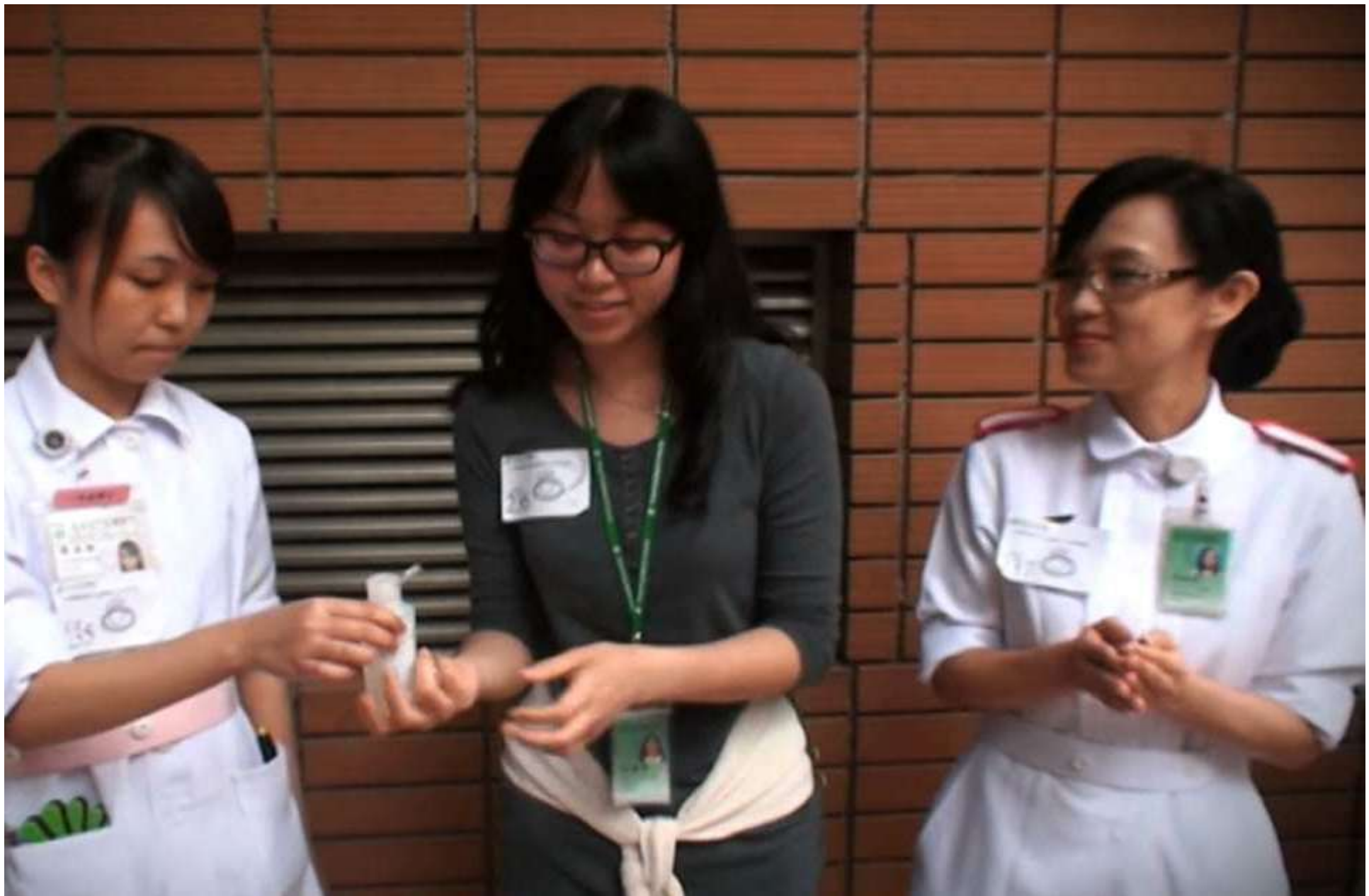
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5 May 2014

**SAVE LIVES**  
Clean Your Hands

A group of people, including men in suits and a woman in a nurse's uniform, are participating in a hand sanitizing relay. They are holding small bottles of hand sanitizer and raising them in the air. The background shows a building with a green awning and a red carpet.

1<sup>st</sup> Hand Sanitizing Relay Guinness World Record  
Hong Kong Baptist Hospital , Hong Kong, 5 May 2014

***Participate from 5 May to Sept 5  
2015***



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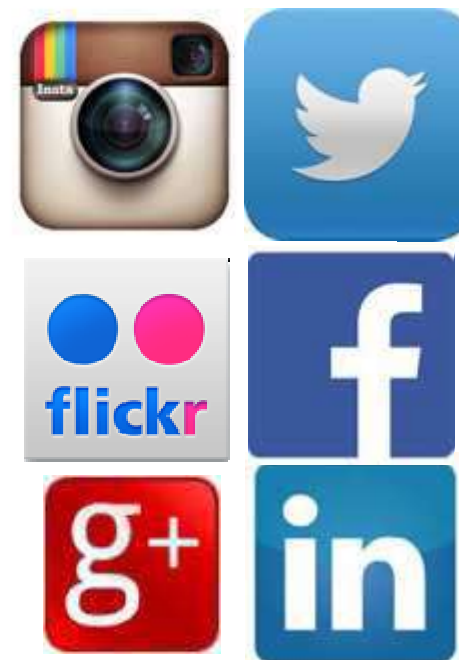
Hong Kong  
Patient Safety  
5 May 2014

**SAVE LIVES**  
Clean Your Hands



# JOIN US!

From 5 May to 5 Sept 2015



All info: [who.int/5may/en/](http://who.int/5may/en/)

Send your photos and videos to:

[CleanHandsSaveLives.org](http://CleanHandsSaveLives.org)



See the explanatory video  
at: [tinyurl.com/HHRelay](http://tinyurl.com/HHRelay)

SAVE LIVES  
Clean Your Hands

*Join us  
from 5 May 2015 ?*



*Join us  
from 5 May 2015 ?*

I provide clean care

**#safeHANDS**

FLAMINIA, Italy

A smiling man with a beard, wearing a white lab coat, holds a sign. The background is a clinical setting with a light fixture visible.

*Join us  
from 5 May 2015 ?*

I provide clean care

#safeHANDS

Lionel, HUG, Genève

A man with grey hair, wearing a dark blue polo shirt, is smiling and holding a white sign in front of him. He is standing in a workshop or factory setting with various equipment and lights in the background. The sign he is holding has a large letter 'A' at the top, followed by the hashtag '#safeHANDS', the name 'JEAN-MARC', and a simple smiley face drawing. The background is slightly blurred, showing industrial equipment and bright lights.

*Join us  
from 5 May 2015*

A  
#safeHANDS  
JEAN-MARC 😊

*« We provide clean care - #safeHANDS »*



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***Join us from 5 May 2015 ?***

*Join us  
from 5 May 2015 ?*



*Join us  
from 5 May 2015*

#safeHANDS

A woman with dark, curly hair, wearing a mustard-colored shirt and a patterned scarf, is smiling and holding a young child. The child is wearing a pink shirt. They are both looking towards the camera. The woman is holding a white sign in front of her. The background is a blurred indoor setting with fluorescent lights.

*Join us  
from 5 May 2015*

#safeHANDS

# Use *YOUR* own language ....

I provide clean care  
I deserve clean care  
I promote clean care

Je prodigue des soins propres  
Je mérite des soins propres  
Je m'engage pour des soins propres

نظيف علاج أقدم  
نظيف علاج أستحق  
النظيف الـعلاج أعزز أنا

# #safeHANDS

Yo proporciono una atención limpia  
Yo merezco una atención limpia  
Yo promuevo una atención limpia

我提供清洁医疗  
我应得清洁医疗  
我提倡清洁医疗

Я соблюдаю гигиену рук  
Я требую соблюдения гигиены рук  
Я способствую гигиене рук



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**SAVE LIVES**  
Clean Your Hands

Health-care facilities and  
individuals around the world

# THE GLOBAL REACH!

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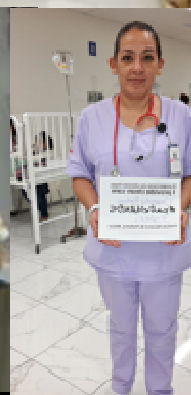
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Clean Your Hands







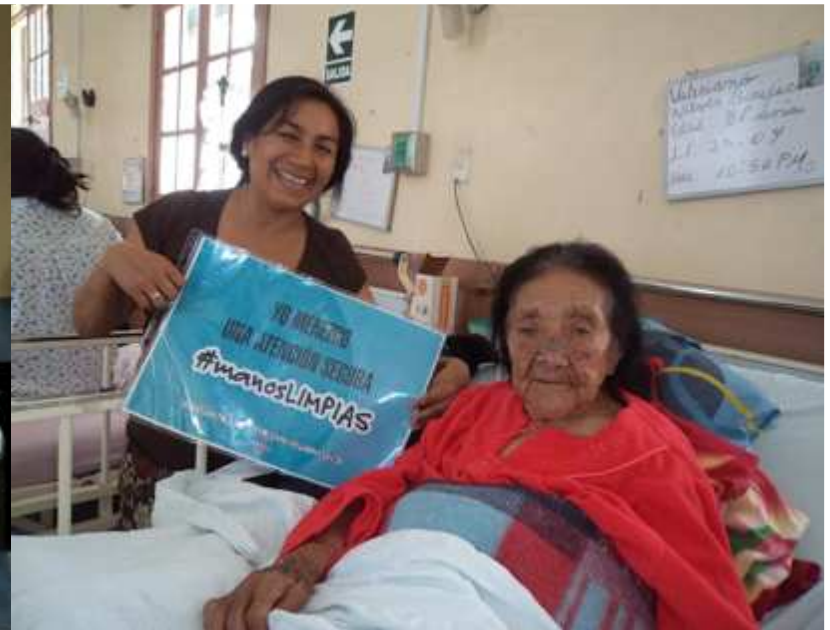




Je mérite des soins propres

#safeHANDS

MALOU 94 ans



**Families pledging  
for #safeHANDS  
for their parents**

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**SAVE LIVES**  
Clean Your Hands



**Clean Care  
is Safer Care**  
2005-2015

# JOIN US!

**Info&Tools – 5 May – SAVE LIVES: Clean Your Hands**  
**<http://www.who.int/gpsc/5may/en/>**

**POST YOUR PHOTOS/SELFIES at:**  
**<http://cleanhandssavelives.org>**



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# # safeHANDS video



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# Clean Care is Safer Care 2005-2015

## Ten years, number 10 - more to come in 2015!



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THIERRY CROUZET

# CLEAN HANDS SAVE LIVES

FOREWORD

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WHO Patient Safety  
Envoy

[CleanHandsSaveLives.org](http://CleanHandsSaveLives.org)

L'ÂGE  
D'HOMME



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**@didierpittet**

**@GLOBAL\_POPS**

**@WHO**

[who.int/5may/en/](http://who.int/5may/en/)

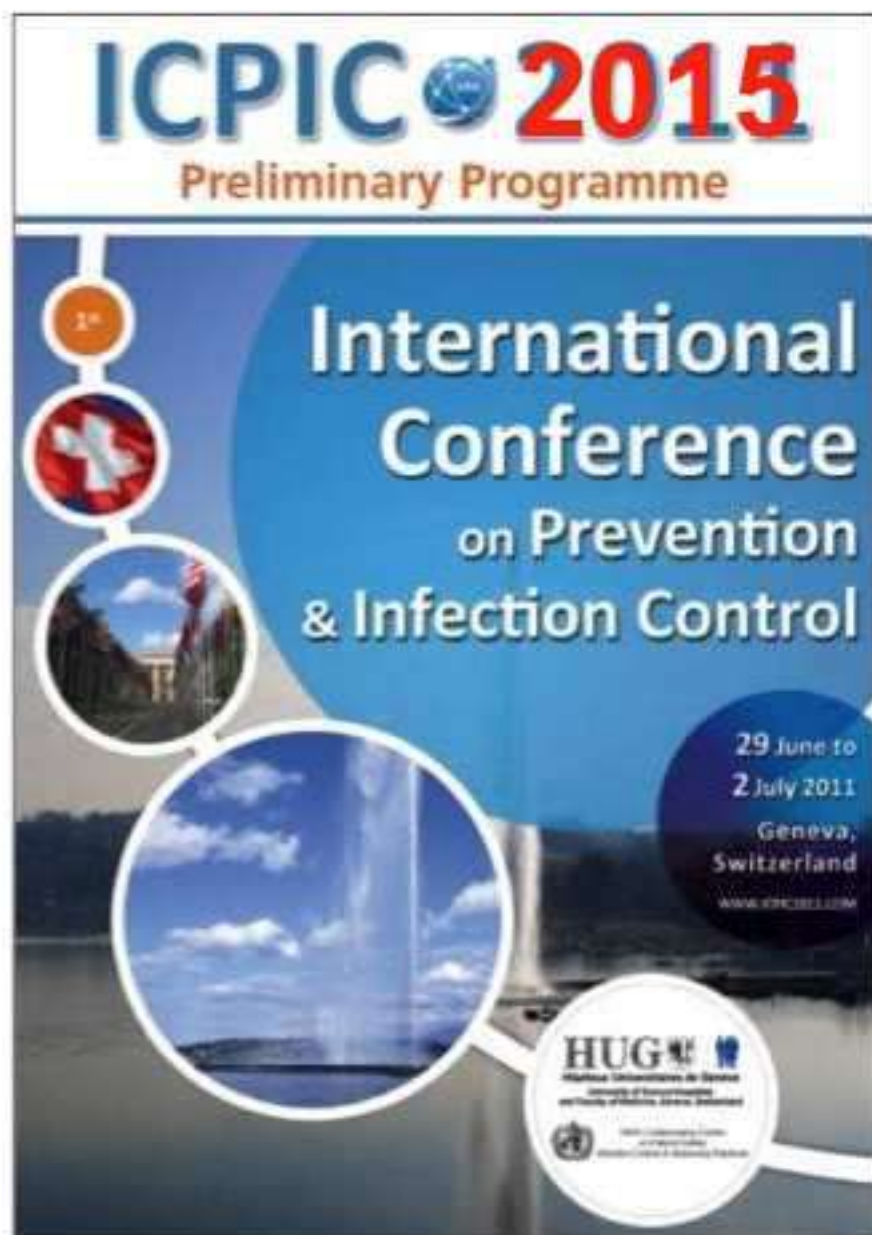
[CleanHandsSaveLives.org](http://CleanHandsSaveLives.org)

**#safeHANDS**



**Private  
Organizations  
for Patient  
Safety**

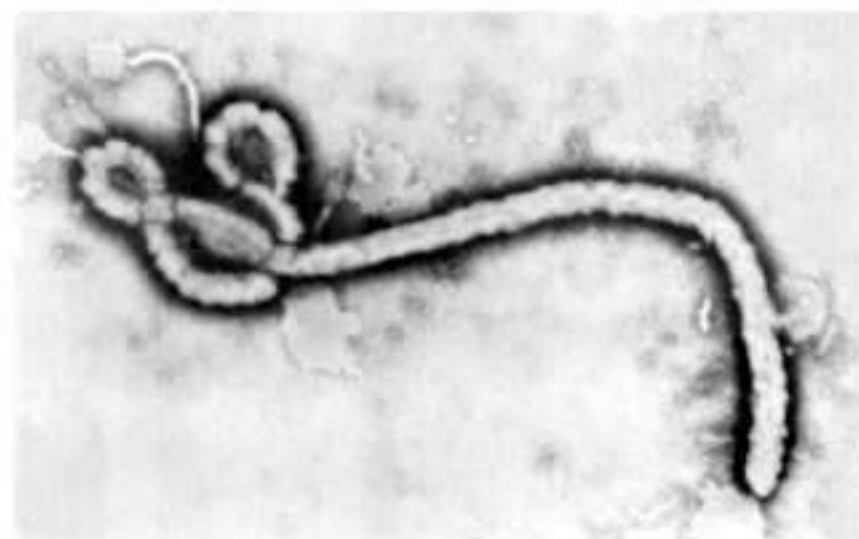
**CleanHandsSaveLives.org**



[www.icpic2015.com](http://www.icpic2015.com)

**Save the Date:**

**3<sup>rd</sup> ICPIC, 16-19 June 2015,  
Geneva, Switzerland**



**Ebola: Hands-On  
Pre-ICPIC workshop**  
16 June 2015: 10AM to 5PM

See: [www.ICPIC.com](http://www.ICPIC.com)

