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SVP. VOIR PLUS BAS POUR LA VERSION FRANÇAISE

LA VERSIÓN EN ESPAÑOL SE ENCUENTRA AL FINAL.

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VERSIÓN EN ESPAÑOL

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Se recibe acuse de recibo el 22 ENERO 2019



Hand Hygiene Self-Assessment Framework

Introduction and user instructions

The Hand Hygiene Self-Assessment Framework is a systematic tool with which to obtain a situation analysis of hand hygiene promotion and practices within an individual health-care facility.

What is its purpose?

While providing an opportunity to reflect on existing resources and achievements, the Hand Hygiene Self-Assessment Framework also helps to focus on future plans and challenges. In particular, it acts as a diagnostic tool, identifying key issues requiring attention and improvement. The results can be used to facilitate development of an action plan for the facility's hand hygiene promotion programme. Repeated use of the Hand Hygiene Self-Assessment Framework will also allow documentation of progress with time.

Overall, this tool should be a catalyst for implementing and sustaining a comprehensive hand hygiene programme within a health-care facility.

Who should use the Hand Hygiene Self-Assessment Framework?

This tool should be used by professionals in charge of implementing a strategy to improve hand hygiene within a healthcare facility. If no strategy is being implemented yet, then it can also be used by professionals in charge of infection control or senior managers at the facility directorate. The framework can be used globally, by health-care facilities at any level of progress as far as hand hygiene promotion is concerned.

How is it structured?

The Hand Hygiene Self-Assessment Framework is divided into five components and 27 indicators. The five components reflect the five elements of the [WHO Multimodal Hand Hygiene Improvement Strategy](#) and the indicators have been selected to represent the key elements of each component. These indicators are based on evidence and expert consensus and have been framed as questions with defined answers (either "Yes/No" or multiple options) to facilitate self-assessment. Based on the score achieved for the five components, the facility is assigned to one of four levels of hand hygiene promotion and practice: Inadequate, Basic, Intermediate and Advanced.

Inadequate: hand hygiene practices and hand hygiene promotion are deficient. Significant improvement is required.

Basic: some measures are in place, but not to a satisfactory standard. Further improvement is required.

Intermediate: an appropriate hand hygiene promotion strategy is in place and hand hygiene practices have improved. It is now crucial to develop long-term plans to ensure that improvement is sustained and progresses.

Advanced: hand hygiene promotion and optimal hand hygiene practices have been sustained and/or improved, helping to embed a culture of safety in the health-care setting.

Leadership criteria have also been identified to recognise facilities that are considered a reference centre and contribute to the promotion of hand hygiene through research, innovation and information sharing. The assessment according to leadership criteria should only be undertaken by facilities having reached the Advanced level.

How does it work?

While completing each component of the Hand Hygiene Self-Assessment Framework, you should circle or highlight the answer appropriate to your facility for each question. Each answer is associated with a score. After completing a component, add up the scores for the answers you have selected to give a subtotal for that component. During the interpretation process these subtotals are then added up to calculate the overall score to identify the hand hygiene level to which your health-care facility is assigned.

The assessment should not take more than 30 minutes, provided that the information is easily available.

Within the Framework you will find a column called "WHO implementation tools" listing the tools made available from the WHO First Global Patient Safety Challenge to facilitate the implementation of the [WHO Multimodal Hand Hygiene Improvement Strategy](#). These tools are listed in relation to the relevant indicators included in the Framework and may be useful when developing an action plan to address areas identified as needing improvement.

Is the Hand Hygiene Self-Assessment Framework suitable for inter-facility comparison?

Health-care facilities or national bodies may consider adopting this tool for external comparison or benchmarking. However, this was not a primary aim during the development of this tool. In particular, we would draw attention to the risks inherent in using a self-reported evaluation tool for external benchmarking and also advise the use of caution if comparing facilities of different sizes and complexity, in different socioeconomic settings. It would be essential to consider these limitations if inter-facility comparison is to be undertaken.

1 System Change		
Question	Answer	Score
How easily available is alcohol-based handrub in your health-care facility?	<input type="checkbox"/> Not available	0
	<input checked="" type="checkbox"/> Available, but efficacy ¹ and tolerability ² have not been proven	0
	<input type="checkbox"/> Available only in some wards or in discontinuous supply (with efficacy ¹ and tolerability ² proven)	5
	<input type="checkbox"/> Available facility-wide with continuous supply (with efficacy ¹ and tolerability ² proven)	10
	<input type="checkbox"/> Available facility-wide with continuous supply, and at the point of care ³ in the majority of wards (with efficacy ¹ and tolerability ² proven)	30
	<input type="checkbox"/> Available facility-wide with continuous supply at each point of care ³ (with efficacy ¹ and tolerability ² proven)	50
What is the sink:bed ratio?	<input type="checkbox"/> Less than 1:10	0
	<input checked="" type="checkbox"/> At least 1:10 in most wards	5
	<input type="checkbox"/> At least 1:10 facility-wide and 1:1 in isolation rooms and in intensive care units	10
Is there a continuous supply of clean, running water ⁴ ?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	10
Is soap ⁵ available at each sink?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	10
Are single-use towels available at each sink?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	10
Is there dedicated/available budget for the continuous procurement of hand hygiene products (e.g. alcohol-based handrubs)?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	10
Is there realistic plan in place to improve the infrastructure ⁶ in your health-care facility?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
Subtotal score		50 / 100

2 Training and Education		
Question	Answer	Score
<i>Regarding training of health-care workers in your facility: How frequently do health-care workers receive training regarding hand hygiene⁷ in your facility?</i>	<input type="checkbox"/> Never	0
	<input type="checkbox"/> At least once	5
	<input type="checkbox"/> Regular training for medical and nursing staff, or all professional categories (at least annually)	10
	<input checked="" type="checkbox"/> Mandatory training for all professional categories at commencement of employment, then ongoing regular training (at least annually)	20

Regarding training of health-care workers in your facility: Is a process in place to confirm that all health-care workers complete this training?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	20
Is the 'WHO Guidelines on Hand Hygiene in Health-care: A Summary' (available at www.who.int/gpsc/5may/tools), or similar local adaptations, easily available to all health-care workers?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
Is the WHO 'Hand Hygiene Technical Reference Manual' (available at www.who.int/gpsc/5may/tools), or similar local adaptations, easily available to all health-care workers?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
Is the WHO 'Hand Hygiene: Why,How and When' Brochure (available at www.who.int/gpsc/5may/tools), or similar local adaptations, easily available to all health-care workers?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
Is the WHO 'Glove Use Information' Leaflet (available at www.who.int/gpsc/5may/tools), or similar local adaptations, easily available to all health-care workers?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
Is a professional with adequate skills⁸ to serve as trainer for hand hygiene educational programmes active within the health-care facility?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	15
Is a system in place for training and validation of hand hygiene compliance observers?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	15
Is there is a dedicated budget that allows for hand hygiene training?	<input checked="" type="checkbox"/> No	0
	<input type="checkbox"/> Yes	10
Subtotal score		90 / 100

3 Evaluation and Feedback

Question	Answer	Score
Are regular (at least annual) ward-based audits undertaken to assess the availability of handrub, soap, single use towels and other hand hygiene resources?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	10
Is health care worker knowledge of the indications for hand hygiene assessed at least annually (e.g. after education sessions)?	<input checked="" type="checkbox"/> No	0
	<input type="checkbox"/> Yes	5
Is health care worker knowledge of the correct technique for hand hygiene assessed at least annually (e.g. after education sessions)?	<input checked="" type="checkbox"/> No	0
	<input type="checkbox"/> Yes	5
Indirect Monitoring of Hand Hygiene Compliance: Is consumption of alcohol-based handrub monitored regularly (at least every 3 months)?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
Indirect Monitoring of Hand Hygiene Compliance: Is consumption of soap monitored regularly (at least every 3 months)?	<input checked="" type="checkbox"/> No	0
	<input type="checkbox"/> Yes	5
Indirect Monitoring of Hand Hygiene Compliance: Is alcohol based handrub consumption at least 20L per 1000 patient-days?	<input type="checkbox"/> No (or not measured)	0
	<input checked="" type="checkbox"/> Yes	5
Direct Monitoring of Hand Hygiene Compliance: Only complete section 3.4 (3.4a, 3.4b) if hand hygiene compliance observers in your facility have been trained and validated and utilise the WHO 'My 5 Moments for Hand Hygiene' (or similar) methodology		
How frequently is direct observation of hand hygiene compliance performed using the WHO Hand Hygiene Observation tool (or similar technique)?	<input type="checkbox"/> Never	0
	<input type="checkbox"/> Irregularly	5
	<input type="checkbox"/> Annually	10
	<input checked="" type="checkbox"/> Every 3 months or more often	15
What is the overall hand hygiene compliance rate according to the WHO Hand Hygiene Observation tool (or similar technique) in your facility?	<input type="checkbox"/> ≤ 30%	0
	<input type="checkbox"/> 31 - 40%	5
	<input type="checkbox"/> 41 - 50%	10

	<input type="checkbox"/> 51 - 60%	15
	<input checked="" type="checkbox"/> 61 - 70%	20
	<input type="checkbox"/> 71 - 80%	25
	<input type="checkbox"/> ≥ 81%	30
Immediate feedback: Is immediate feedback given to health-care workers at the end of each hand hygiene compliance observation session?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
Systematic feedback: Is regular (at least 6 monthly) feedback of data related to hand hygiene indicators with demonstration of trends over time given to health-care workers?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	7.5
Systematic feedback: Is regular (at least 6 monthly) feedback of data related to hand hygiene indicators with demonstration of trends over time given to facility leadership?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	7.5
Subtotal score		75 / 100

4 Reminders in the Workplace

Question	Answer	Score
Is the poster explaining the indications for hand hygiene (or locally produced equivalent with similar content) displayed?	<input type="checkbox"/> Not displayed	0
	<input type="checkbox"/> Displayed in some wards/treatment areas	15
	<input type="checkbox"/> Displayed in most wards/treatment areas	20
	<input checked="" type="checkbox"/> Displayed in all wards/treatment areas	25
Is the poster explaining the correct use of handrub (or locally produced equivalent with similar content) displayed?	<input type="checkbox"/> Not displayed	0
	<input type="checkbox"/> Displayed in some wards/treatment areas	5
	<input type="checkbox"/> Displayed in most wards/treatment areas	10
	<input checked="" type="checkbox"/> Displayed in all wards/treatment areas	15
Is the poster explaining correct hand-washing technique (or locally produced equivalent with similar content) displayed?	<input type="checkbox"/> Not displayed	0
	<input type="checkbox"/> Displayed in some wards/treatment areas	5
	<input type="checkbox"/> Displayed in most wards/treatment areas	7.5
	<input checked="" type="checkbox"/> Displayed in all wards/treatment areas	10
How frequently does a systematic audit of all posters for evidence of damage occur, with replacement as required?	<input type="checkbox"/> Never	0
	<input type="checkbox"/> At least annually	10
	<input checked="" type="checkbox"/> Every 2-3 months	15
Is hand hygiene promotion undertaken by displaying and regularly updating posters other than those mentioned above?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	10
Are hand hygiene information leaflets available on wards?	<input checked="" type="checkbox"/> No	0
	<input type="checkbox"/> Yes	10
Are other workplace reminders located throughout the facility? (e.g. hand hygiene campaign screensavers, badges, stickers, etc)	<input checked="" type="checkbox"/> No	0
	<input type="checkbox"/> Yes	15
Subtotal score		75 / 100

5 Institutional Safety Climate for Hand Hygiene

Question	Answer	Score
<i>With regard to a hand hygiene team¹⁰ that is dedicated to the promotion and implementation of optimal hand hygiene practice in your facility: Is such a team established?</i>	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
Does this hand hygiene team ¹⁰ meet on a regular basis (at least monthly)?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
Does this hand hygiene team have dedicated time to conduct active hand hygiene promotion? (e.g. teaching monitoring hand hygiene performance, organizing new activities)	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
Has the chief executive officer of the facility made a clear commitment to support hand hygiene improvement? (e.g. a written or verbal commitment to hand hygiene promotion received by the majority of health-care workers)	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	10
Has the medical director of the facility made a clear commitment to support hand hygiene improvement? (e.g. a written or verbal commitment to hand hygiene promotion received by the majority of health-care workers)	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
Has the director of nursing of the facility made a clear commitment to support hand hygiene improvement? (e.g. a written or verbal commitment to hand hygiene promotion received by the majority of health-care workers)	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
Has a clear plan for the promotion of hand hygiene throughout the entire facility for the 5 May (Save Lives Clean Your Hands Annual Initiative) been established ?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	10
Is a system for designation of Hand Hygiene champions ¹¹ in place?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
Is a system for recognition and utilisation of Hand Hygiene role models ¹² in place?	<input checked="" type="checkbox"/> No	0
	<input type="checkbox"/> Yes	5
<i>Regarding patient involvement in hand hygiene promotion: Are patients informed about the importance of hand hygiene? (e.g. with a leaflet)</i>	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
<i>Regarding patient involvement in hand hygiene promotion: Has a formalised programme of patient engagement been undertaken?</i>	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	10
<i>Are initiatives to support local continuous improvement being applied in your facility, for example: Hand hygiene E-learning tools</i>	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
<i>Are initiatives to support local continuous improvement being applied in your facility, for example: A hand hygiene institutional target to be achieved is established each year</i>	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
<i>Are initiatives to support local continuous improvement being applied in your facility, for example: A system for intra-institutional sharing of reliable and tested local innovations</i>	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
<i>Are initiatives to support local continuous improvement being applied in your facility, for example: Communications that regularly mention hand hygiene e.g. facility newsletter, clinical meetings</i>	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
<i>Are initiatives to support local continuous improvement being applied in your facility, for example: System for personal accountability¹³</i>	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	5
<i>Are initiatives to support local continuous improvement being applied in your facility, for example: A Buddy system¹⁴ for new employees</i>	<input checked="" type="checkbox"/> No	0
	<input type="checkbox"/> Yes	5
Subtotal score		90 / 100

Question	Answer	Score
System Change: Has a cost-benefit analysis of infrastructure changes required for the performance of optimal hand hygiene at the point of care been performed?	<input checked="" type="checkbox"/> No	0
	<input type="checkbox"/> Yes	1
System Change: Does alcohol-based handrubbing account for at least 80% of hand hygiene actions performed in your facility?	<input checked="" type="checkbox"/> No	0
	<input type="checkbox"/> Yes	1
Training and Education: Has the hand hygiene team undertaken training of representatives from other facilities in the area of hand hygiene promotion?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	1
Training and Education: Have hand hygiene principles been incorporated into local medical and nursing educational curricula?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	1
Evaluation and Feedback: Are specific healthcare associated infections (HCAIs) monitored? (eg. <i>Staphylococcus aureus</i> bacteremia, Gram negative bacteremia, device-related infections)	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	1
Evaluation and Feedback: Is a system in place for monitoring of HCAI in high risk-settings? (e.g. intensive care and neonatal units)	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	1
Evaluation and Feedback: Is a facility-wide prevalence survey of HCAI performed (at least) annually?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	1
Evaluation and Feedback: Are HCAI rates presented to facility leadership and to health-care workers in conjunction with hand hygiene compliance rates?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	1
Evaluation and Feedback: Is structured evaluation undertaken to understand the obstacles to optimal hand hygiene compliance and the causes of HCAI at the local level, and results reported to the facility leadership?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	1
Reminders in the Workplace: Is a system in place for creation of new posters designed by local health-care workers?	<input checked="" type="checkbox"/> No	0
	<input type="checkbox"/> Yes	1
Reminders in the Workplace: Are posters created in your facility used in other facilities?	<input checked="" type="checkbox"/> No	0
	<input type="checkbox"/> Yes	1
Reminders in the Workplace: Have innovative types of hand hygiene reminders been developed and tested at the facility?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	1
Institutional Safety Climate: Has a local hand hygiene research agenda addressing issues identified by the WHO Guidelines as requiring further investigation been developed?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	1
Institutional Safety Climate: Has your facility participated actively in publications or conference presentations (oral or poster) in the area of hand hygiene?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	1
Institutional Safety Climate: Are patients invited to remind health-care workers to perform hand hygiene?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	1
Institutional Safety Climate: Are patients and visitors educated to correctly perform hand hygiene?	<input checked="" type="checkbox"/> No	0
	<input type="checkbox"/> Yes	1
Institutional Safety Climate: Does your facility contribute to and support the national hand hygiene campaign (if existing)?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	1
Institutional Safety Climate: Is impact evaluation of the hand hygiene campaign incorporated into forward planning of the infection control programme?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	1
Institutional Safety Climate: Does your facility set an annual target for improvement of hand hygiene compliance facility-wide?	<input type="checkbox"/> No	0
	<input checked="" type="checkbox"/> Yes	1

Institutional Safety Climate: If the facility has such a target, was it achieved last year?	<input checked="" type="checkbox"/> No	0
	<input type="checkbox"/> Yes	1

Subtotal score **14 / 20**

1. Sum up your points

Component	Subtotals
1 System Change	50 / 100
2 Training and Education	90 / 100
3 Evaluation and Feedback	75 / 100
4 Reminders in the Workplace	75 / 100
5 Institutional Safety Climate for Hand Hygiene	90 / 100
Total	380 / 500
Leadership Criteria	14 / 20

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

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

- 1. Efficacy:** The alcohol-based handrub product used should meet recognised standards of antimicrobial efficacy for hand antisepsis (ASTM or EN standards). Alcohol-based handrubs with optimal antimicrobial efficacy usually contain 75 to 85% ethanol, isopropanol, or n-propanol, or a combination of these products. The WHO-recommended formulations contain either 75% v/v isopropanol, or 80% v/v ethanol.
- 2. Skin tolerability:** The alcohol-based handrub product is well tolerated by health-care workers skin (i.e. it does not harm or irritate the skin) when used in clinical care, as demonstrated by reliable data. The WHO Protocol for Evaluation of Tolerability and Acceptability of Alcohol-based Handrub in Use or Planned to be Introduced can be used as a reference.
- 3. Point of care:** The place where three elements come together: the patient, the health-care worker, and care or treatment involving contact with the patient or his/her surroundings (within the patient zone). Point-of-care products should be accessible without having to leave the patient zone (ideally within arms reach of the health-care worker or within 2 meters).
- 4. Clean, running water:** A water supply that is either piped in (or where this is not available, from onsite storage with appropriate disinfection) that meets appropriate safety standards for microbial and chemical contamination. Further details can be found in Essential environmental health standards in health care (Geneva, World Health Organization, 2008, http://whqlibdoc.who.int/publications2008/9789241547239_eng.pdf).
- 5. Soap:** Detergent-based products that contain no added antimicrobial agents, or may contain these solely as preservatives. They are available in various forms including bar soap, tissue, leaf, and liquid preparations.
- 6. Infrastructure:** The "infrastructure" here referred to includes facilities, equipment, and products that are required to achieve optimal hand hygiene practices within the facility. Specifically, it refers to the indicators included in questions 1.1-1.5 and detailed in the WHO Guidelines on Hand Hygiene in Health Care 2009, Part I, Chapter 23.5 (e.g. availability of alcohol based handrub at all points of care, a continuous supply of clean, running water and a sink:bed ratio of at least 1:10, with soap and single-use towels at each sink).
- 7. Training in hand hygiene:** This training can be done using different methods but the information conveyed should be based on the WHO multimodal hand hygiene improvement strategy or similar material. Training should include the following:
 - The definition, impact and burden of health care-associated infection (HCAI)
 - Major patterns of transmission of health care-associated pathogens
 - Prevention of HCAI and the critical role of hand hygiene
 - Indications for hand hygiene (based on the WHO 'My 5 Moments for Hand Hygiene' approach)
 - Correct technique for hand hygiene (refer to 'How to Handrub' and 'How to Hand Wash')
- 8. A professional with adequate skills:** Medical staff or nursing staff trained in Infection Control or Infectious Diseases, whose tasks formally include dedicated time for staff training. In some settings, this could also be medical or nursing staff involved in clinical work, with dedicated time to acquire thorough knowledge of the evidence for and correct practice of hand hygiene (the minimum required knowledge can be found in the WHO Guidelines on Hand Hygiene in Health Care and the Hand Hygiene Technical Reference Manual).
- 9. Epi Info™:** This software can be downloaded free of charge from the CDC website (<http://www.cdc.gov/epiinfo/>)
- 10. Hand hygiene team:** The make-up of this team will vary. It is likely to most frequently consist of an infection control unit, but may range (depending on resources available) from a single person with the role of managing the hand hygiene programme, to a group of staff members from various departments within the facility with meetings dedicated to the hand hygiene programme.
- 11. Hand hygiene champion:** A person who is an advocate for the causes of patient safety and hand hygiene standards and takes on responsibility for publicizing a project in his/her ward and/or facility-wide.
- 12. Hand hygiene role model:** A person who serves as an example, whose behaviour is emulated by others. In particular, a hand hygiene role model should have a hand hygiene compliance rate of at least 80%, be able to remind others to comply, and be able to teach practically about the WHO 5 Moments for Hand Hygiene concept.
- 13. System for personal accountability:** explicit actions are in place to stimulate health-care workers to be accountable for their behaviour with regard to hand hygiene practices. Examples are notification by observers or infection control professionals, reproaches by peers, and reports to higher level facility authorities, with possible consequences on the individual evaluation.
- 14. Buddy system:** A programme in which each new health-care worker is coupled with an established, trained health-care worker who takes responsibility for introducing them to the hand hygiene culture of the health-care setting (including practical training on indications and technique for performing hand hygiene, and explanation of hand hygiene promotion initiatives within the facility).