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Research Article

OBSERVATIONAL STUDY ON HAND WASHING PRACTICES AMONG HEALTH CARE PROFESSIONALS

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ABSTRACT

Introduction: Hand washing is now regarded as one of the most important element of infection control activities. This is because enough scientific evidence supports the observation that if properly implemented, hand washing alone can significantly reduce the risk of cross-transmission of infection in healthcare facilities. Hand hygiene should start from our health professionals; Nurses & Doctors are health experts and are therefore expected to portray a good example to the other people.

Objectives: The study was conducted to assess the hand washing practices and to compare the hand washing practices between the different categories of health care professionals.

Material and Methods: Quantitative approach with Non-experimental, Uni-variant descriptive research design was adopted for the study. Using Non probability, convenient sampling technique, 100 health care professionals were enrolled for the study. Data collection technique used for the study was observational technique and among the observational method, the researcher selected non-participatory observational technique. Data was analyzed by using descriptive and inferential statistics.

Results: Out of total 100 health care professionals 63% nurses and 37% doctors were observed as during hand washing. In different pediatric units, among 38% health care professionals, there were 27% nurses and 11% doctors observed in the pediatric ward, among 19% health care professionals, 14% nurses and 07% doctors were observed in the P.I.C.U and majority i.e. among 43% health care professionals 24% nurses and 19% doctors were observed in the N.I.C.U. There were only 09% out of 100 health care professionals followed all the 13 steps of hand washing practices, majority i.e. 74% of health care professionals followed the $\geq 7-12$ steps of hand washing practices and the 17% of health care professionals followed < 7 steps. The findings shows that most of the healthcare professionals were not doing hand washing properly, which can result in transferring of infectious diseases more and more and thus increase the rate of hospital acquired infection.

Conclusion: There are less percentage of health care professionals who are doing proper hand washing practices. This means that the health care professionals are responsible for nosocomial infection. Also there is no difference in the compliance of hand washing practices among health care professionals.

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INTRODUCTION

Good health is a result of combination of many factors, one of these factors is hand hygiene. The hands are probably the most used body part. A day barely passes without holding multiple objects with our hands; we greet people, hold money, eat and clean our houses with our hands. It is therefore apparent that our hands are at a higher exposure to germs than any other part of our body.¹

Hand washing is an important healthcare issue globally and is a single most cost-effective and practical measure to reduce the incidence of healthcare-associated infection and the spread of

antimicrobial resistance across all settings—from advanced health care systems to primary healthcare centers.²

Microorganisms are naturally present in almost all environments. Some are beneficial but some are not or some harmless or harmful. Nosocomial infections constitute a very real and serious threat to all people who are admitted in the hospital. On an average, nosocomial infections complicate approximately 20% of all hospital infections. But in India this rate is more than 30%.³

Nosocomial infections have increasing attention in recent years and are believed to involve about 2 million clients per year. The most common settings, where a nosocomial infection

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develops are medical or surgical ICU. It can either develop during a client's stay in a facility or manifest after discharge. Nosocomial microorganism may also be acquired by health personnel working in the facility and can cause significant illness and time lost from work. The hands of personnel are a common vehicle for the spread of microorganisms. Insufficient hand washing is thus an important factor contributing to the spread of nosocomial microorganisms.⁴

Doctor's & Nurse's responsibilities include assessment of the patient, dispensing medication, insertion of catheter, dressing wounds etc. Also when the health care workers give care to one patient, they should wash their hands before going to another patient. All these require clean hands to prevent patients from getting an infection.⁵

So the present study was undertaken to observe the hand washing practices among health care professionals.

washing practices of health care professionals was observed without interacting with them and health care professionals are observed without their knowledge that they are being observed. So. the samples were collected by using non-participatory observational technique.

- Demographic data was collected.
- The analysis includes descriptive and inferential Statistics. Data was presented in tabular & graphical form.
- Frequency and percentage distribution was done for Demographic Characteristics
- Z test was done to calculate the Comparison between nurses and doctors in regard with their compliance to hand washing practice.

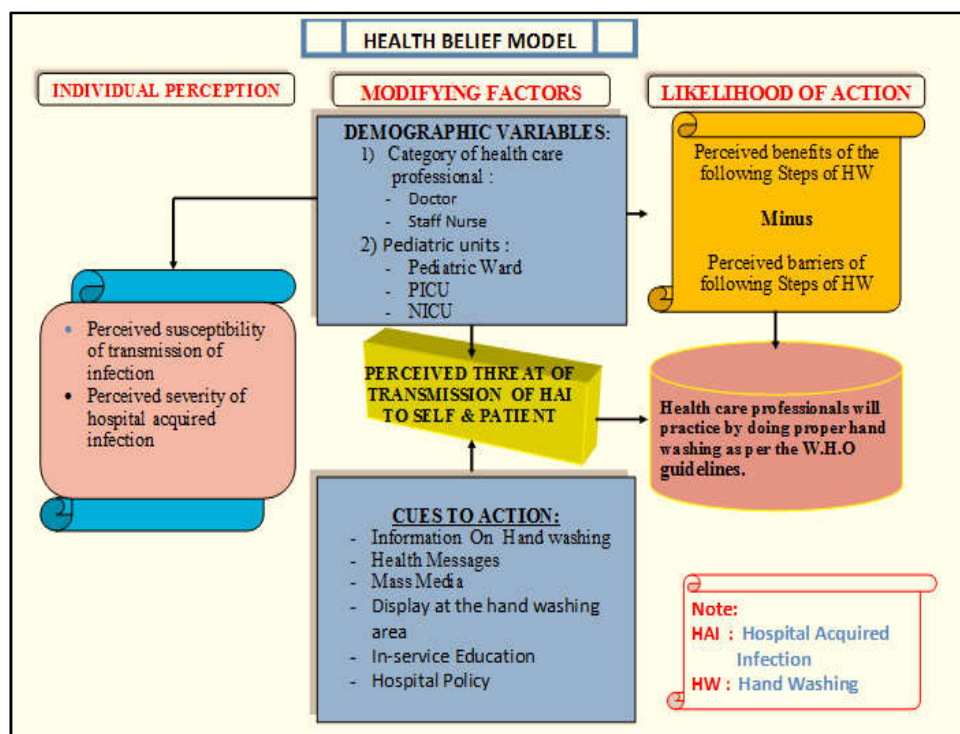


Fig. 1 Conceptual Framework Based on Rosenstock's Health Belief Model

RESEARCH METHODOLOGY

The research approach adopted for this study Quantitative approach with Non-experimental, Uni-variant descriptive research design was adopted for the study. Using Non probability, convenient sampling technique, 100 health care professionals were enrolled for the study. Data collection technique used for the study was observational technique and among the observational method, the researcher selected non-participatory observational technique. Data was analyzed by using descriptive and inferential statistics.

- Validity and reliability of the research tool was done.
- Administrative approval and permission was obtained from the Deputy Medical Director of Bharati Hospital and Research Centre, Pune.
- Sample selection was done by non-probability, convenient sampling technique for this study. The hand

- The dissertation will be displayed in the college library for reference. It will be published in various journals.

RESULTS

Table 1 Distribution of Sample According To the Category of Health Care Professionals and Their Unit

Ped. Units	Category Of Health Care Professionals				Total
	Nurses		Doctors		
	Frequency	Percentage	Frequency	Percentage	
Ped. Ward	27	27	11	11	38
PICU	12	12	07	07	19
NICU	24	24	19	19	43
TOTAL	63	63	37	37	100

N = 100

Above table shows that out of 100 health care professionals 63 were the nurses and 37 were the doctors from different pediatric units.

Above table shows that majority i.e 43% health care professionals were from NICU which include 24% nurses and 19% doctors.

Above table shows that 38% health care professionals were from pediatric ward which include 27% nurses and 11% doctors.

Above table shows that 19% health care professionals were from PICU which include 14% nurses and 7% doctors.

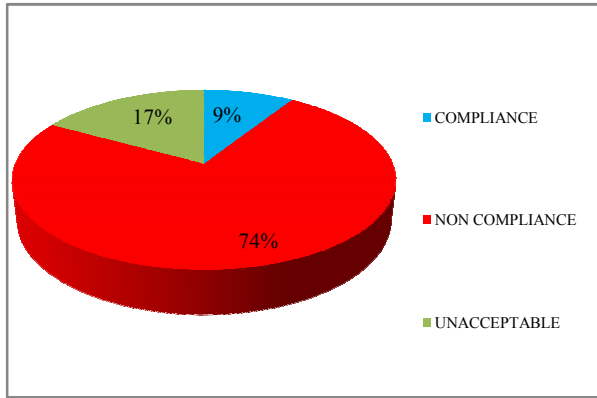


Figure 2 Distribution of participants according to the compliance to hand washing steps. N=100

Above fig. shows that only 09 out of 100 health care professional’s followed all the 13 steps of hand washing. This means that most of the health care professionals are not following all the steps of hand washing practices.

Above fig. shows that 74 out of 100 health care professionals followed the $\geq 7-12$ steps of hand washing .In this category, there is more chance of transfer germs from health care professionals to patients as some of the areas of hands are missed during hand washing. Which leads to increase in the rate of hospital acquired infection.

Above fig. shows that among the total samples, 17% of health care professionals followed < 7 steps, which are not considered as the proper hand washing practices. This means that most of the areas of hands are missed during hand washing. Thus more and more chances of spreading germs from health care professionals to patients.

Table 2 Comparison between nurses and doctors in regard with their compliance to hand washing practice.N = 100

	NURSES (n = 63)		DOCTORS (n = 37)		Z CAL	Z TABLE	P VALUE
	F	%	F	%			
Compliance	04	6.3	05	13.5	1.40	1.96	0.068
Non- compliance	48	76.2	26	70.3			
Unacceptable	11	17.5	06	16.2			
	X = 8.04		X = 8.72				

Above table Shows that the z-cal value $<$ z-tabulated value at 5% level of significance, this means that there is no difference in the compliance of hand washing practices among nurses and doctors.

CONCLUSION

The following conclusions can be drawn from the study findings. There are less percentage of health care professionals who are doing proper hand washing practices.

This means that most of the health care professionals are not following all the steps of hand washing practices which indicates that there is more chance of getting infectious diseases due to transmitting of germs from the unclean hands of health care professionals to the patients. Which will result in increasing the morbidity and mortality rate in pediatric units. Also there is no difference in the compliance of hand washing practices among health care professionals.

Recommendations

Keeping in view the findings of the present study, the following recommendations were made:

1. A similar study can be replicated in different settings to strength the findings.
2. The same study could be replicated on a large sample size.
3. Same study can be replicated on other health care professionals.
4. A comparative study to examine the hand hygiene knowledge, beliefs and practices of nursing and medical students.
5. Same study can be replicated on health care workers and visitors in intensive care units.
6. The study can be done on association between various demographic variables, which were significant, on large samples.

Acknowledgement

My sincere & whole hearted thanks to the administrators of Bharati Hospital and Research Centre, Pune for granting me permission to conduct the study. I am also grateful to all the Nursing and Doctor in-charges of Pediatric Units; without their cooperation it would have been impossible to conduct the study. I am indebted to all the faculty of Bharati Vidyapeeth University College of Nursing, Pune for their timeless effort and sincere guidance to complete my study.

Ethical Consideration

All administrative permission from hospitals was taken. All the data were kept confidential and used for re-research purpose only.

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