The Role of Hand Hygiene in Healthcare Settings

DEFINITION OF EVIDENCE-BASED PRACTICE

Evidence-based practice (EBP) is the process of coming up with informed medical conclusions based on evidence integrated with clinical familiarity and patient expectations (Kampf et al., 2009). The concept of EBP finds its greatest application in nursing, and it entails assessing proof and combining it with experience while considering the response of the patient in question. Influence of EBP on nursing ranges from impacting the nursing model frameworks to the general nursing practices (Aiello et al., 2008).

Impact on the general nursing practice takes a central role since it carries with it verified effectiveness in preventing illnesses cognizant of the developed and third-world countries (Aiello et al., 2008). As Aiello et al. (2008) affirm, hand hygiene practices are useful in averting gastrointestinal diseases. Secondly, nursing education gets a boost from EBP since it offers professional growth-oriented programs where one gets to update his/her experience and expertise (Aiello et al., 2008). Lastly, EBP has a greater impact on nursing research as many researchers find out the relations between washing of hands and a person’s health. Attempts to boost efficiency and effectiveness in healthcare have seen a major increase in recent days.  Aiello et al. (2008), acknowledge a funding of research by Finnish Work Environment Fund (grant 108306) and the National Institute of Health and Welfare.  The scholars further depicted the deliverables of the study as they ascertained that combining regular hand washing using soap and water coupled with good personal hygiene practices, to a large extent; minimize the incidences of self-reported severe illnesses in any confined work environment.

RATIONALE FOR THE HAND-WASHING PROGRAM

The rationale for selecting this problem attributes to increased attention to healthcare-associated infections by the healthcare practitioners, the government, and the regulatory bodies such as the World Heath Organizations (WHO). Aiello et al. (2008) ascertain that most of the infections are preventable. They add that problems regarding the magnitude of mortality rates, morbidity, and the cost associated with treatment in contrast to prevention draw their interests in this topic.  The only developments in the comprehension of the physiology of contagious illnesses, a rampant increase in multi-drug resistant strains, and the unavailability of new antimicrobials have led to a reconsideration of the role of fundamental practices for preventing infections. One of these practices is hand hygiene (Savolainen-Kopra et al., 2012)

SUMMARY OF THE READINGS

According to Savolainen-Kopra et al. (2012), execution of a proper hand hygiene program on the healthcare prevents nosocomial infections. The scholars further illustrated the effectiveness of hand hygiene in minimizing gastrointestinal and respiratory infections. Due to the success associated with this approach, studies evaluating how hygienic practices, respiratory illness, and interventions relates while focusing on the aerosol transmission are required.

Aiello et al. (2008) have foci on the risk possibility associated with hand hygiene on infectious diseases in an environment that is primarily on gastrointestinal and respiratory illnesses. Accordingly, Aiello et al. (2008) advancements in hand hygiene practices reaped benefits as gastrointestinal disease analyzed to be at 31% and respiratory illness at 21% reduced greatly with success associated with education on hand hygiene using no antibacterial soap. These authors look at how effective hand hygiene is depending on specific intervention and the symptoms displayed by the infectious illness. Evaluation is also done to verify the effectiveness of antibacterial soap in contrast to non-antibacterial soap. In essence, Aiello et al. (2008) concede that there is no evidence to back up the idea, and hand hygiene practices are effective for inhibiting gastrointestinal illnesses. Despite this, the ideology depicts that hand hygiene suffices in curbing respiratory infections. Hence, it does not encourage the use of alcohol-based hand sanitizer in control of gastrointestinal infections.

Savolainen-Kopra et al. (2012) recommend behaviors which can be integrated with hand washing with soap and water to prevent infections in workplace arena. Behaviors of interest here are shaking hands, coughing and sneezing (Savolainen-Kopra et al., 2012). Respiratory and diarrheal infections are common in the workplace. These infections are traced back to droplets attributed to coughing and sneezing (Savolainen-Kopra et al., 2012). A study carried out in an attempt to reduce transmission involved proper hand hygiene practices integrated with behavioral suggestion while absence from work acted as a control element. In this course, the intervention test signified a decrease in infections. More so when those strategies attributed to respiratory system when hand washing with soap and water, integrated with directives of minimizing transmission attributed to coughing and sneezing (Savolainen-Kopra et al., 2012). Contrary to this, rubbing hands with alcohol-based disinfectant combined with directives on coughing or sneezing did not aid in reducing this menace.

Kampf et al., (2009) suggest how proper hand hygiene can aid in the prevention of nosocomial infections in accordance to WHO. Through disinfection of hands, hygienically, better antimicrobial control is achieved as opposed to washing hands without the use of disinfectants. Additionally, this finds its application in the nursing field and should always be adhered to whenever one comes into direct contact with a patient (Kampf et al., 2009). In situations involving soiling of hands, they should be washed not disinfected. Healthcare workers are prone to skin irritation attributed to regular contact with water and soap besides consistent wearing of gloves. To eradicate this menace, Kampf et al. (2009) suggest that dispensers for rubbing hands should be well situated in environs of need. Furthermore, patients and healthcare providers should be well trained while physicians should lead by example. The article sums it up by noting that disinfection gets rid off transient flora; thence, it is a crucial precaution when it comes to preventing the specific spread of nosocomial infection.

RELATIONSHIP OF NURSING TO THE HAND-WASHING PROGRAM

Nursing practice related to EBP could be improved in a variety of ways. Firstly, advancing scientific research will boost healthcare services. These studies will be inclined towards coming up with supportive evidence concerning EBP, which will act as a guide to making informed managerial decisions that will translate to quality improvement (Savolainen-Kopra et al. 2012). The central goal of this scientific improvement will be to ensure that the obtained quality is based on EBP. Furthermore, successful research should be implemented in actual practice, and it should pass the test of time as well as efficacy (Aiello et al. 2008). Secondly, emphasis on the program for disseminating and implementing the EBP decisions should be stressed. Implementation will see adoption and combination of evidence-based health practices to bring change depending on the environment of concern. Fundamentally, it paves the way for understanding the best approach to evaluating and training staff to improve compliance.

AREAS THAT NEED FURTHER RESEARCH

Hand hygiene in avoiding the spread of seasonal influenza (flu) needs further investigation. Searches should be done to quantify the impact hand hygiene interventions have on flu infections and to ascertain the specific interventions that offer utmost efficacy. Analysis of the effect of hand hygiene interventions for reducing flue infection is crucial due to the rampant rise in the use of hand hygiene products in most communities. Secondly, hand hygiene is being regarded as a key intervention control of infections (Aiello et al. 2008).

Further research should be inclined towards establishing the governing relationship between contaminated hands and spread of foodborne disease such as Cholera. Proper hand washing practices reduce the risks of foodborne illnesses and other infections. Further, analysis of correlation of the two will form the basis of affirming the best intervention approach in controlling Vibrio cholerae infection.

CONCLUSION

Evidence-based practice takes a central role in community integrated healthcare. It directly influences nursing practices by potentially preventing illnesses cognizant of any environmental setting. Therefore, EBP should be incorporated in all healthcare aspects as a means of better services. Hand hygiene plays a central role in minimizing gastrointestinal and respiratory illnesses besides nosocomial infections. The conception of hand hygiene works well if integrated with recommended behaviors when shaking hands, coughing, and sneezing. In fact, it reduces common workplace-associated illnesses attributed to respiratory and diarrheal infections. Proper hand hygiene, therefore, should be campaigned regarding the diverse effects it has on this health perspective.