Wash your hands

Studies on hand hygiene practice suggest an average of 40% compliance. In an average ward in an average hospital, staff clean their hands less than half as often as they should. rcni.com/hand-hygiene

12% of nursing students are diagnosed with dyslexia, research has found. This equates to around 10,000 nurses. rcni.com/dyslexia-model

REFLECTIVE ESSAY

Good hand hygiene is essential

Observing staff not washing their hands inspired nursing student Shan Moses to introduce new measures

During a second-year placement on a 25-bed medical ward, I attended a ward round with a medical consultant and his team, to observe how they assessed patients and decided on a care plan. The team was made up of seven staff members, including four junior doctors. They saw about 13 patients on our ward before heading to other wards.

I noticed on several occasions that the medical team did not wash their hands or use alcohol-based hand rub after touching a patient or the surrounding area.

On average, 4% of patients in Wales pick up a healthcare-associated infection during a hospital stay. Cross-transmission of microorganisms from healthcare workers’ hands is largely to blame.

As a nursing student, I felt nervous highlighting poor hand hygiene to experienced doctors. But when I attended another ward round, I put an alcohol-based hand rub dispenser on the patient notes trolley just as the medical team arrived and asked the doctors to decontaminate their hands. I began with the most senior team member, the consultant, reminding him of the importance of good hand hygiene.

If I noticed any of the medical team not washing their hands or using the rub, I asked them to do so. I had to remind junior doctors three times, but they followed my instructions as soon as they realised the consultant was.

Praised by consultant

I was apprehensive about the response from the doctors and thought they might be patronising or dismissive. To my surprise, the consultant praised my knowledge and congratulated me for highlighting the importance of cross-contamination. This motivated me to carry on, and I always take the opportunity to remind patients and staff.

Noticing my enthusiasm, the ward sister asked me to carry out weekly hand hygiene audits once I had completed my six-week placement. Audits were already being undertaken monthly, but I carried out weekly spot checks and observed different staff groups. The results were put up on the ward for staff and the public to see.

The different staff groups became competitive, and the audit results showed an improvement in hand hygiene, with a noticeable difference among the doctors. Hand rub on the patient notes trolley also became the norm.

What started as a simple observation on a ward round ended up making a difference to staff hand hygiene practice and, as a result, patient care. The experience showed how a simple step, such as placing hand rub on a notes trolley, can make a real difference. It also highlighted the importance of not being afraid to intervene.

As a result, I am determined to carry on raising the profile of infection prevention and patient safety throughout my nursing career.