**Title: Written report CHCPOL003 Research and apply evidence to practice**

**Student Name:**

**Name of Institution:**

 **Hand Washing Practices in Aged Care:**

**Introduction:**

 Human beings are always at risk of exposure to dangerous diseases that could really harm us and even result in mortality. This is especially even more true for people who are much older and aged. Their immunity and ability to fight diseases is far less and leaves them open to any number of diseases. This is why in aged care and aged care homes it is imperative to keep a healthy sterile environment. This can easily be done by small acts such as washing hands, which reduces the chances of outbreak of healthcare associated infections. This report researches this notion and tries to work out if handwashing reduce transmitting of infections.

**Areas Where Research Can Improve Infection Prevention:**

 While caring for the aged, medical professionals generally use gloves to minimise the risk of exposure to the healthcare professional or to the patient to any sort of bacteria or virus that can cause harm to their biological system. But putting on gloves is not enough as there are still millions of bacteria and viruses carried around by the human body. So to effectively reduce any chance of infection, handwashing can be used before and between donning of gloves. This will reduce risk of infection and reduce prolonged stays in hospitals.

**Reason for Undertaking Research:**

The primary reason for taking on this research is to clarify how a simple act of handwashing can be useful towards disease prevention. People in aged care are already not strong enough to take care of themselves but if proper care and attention is not given to them they might not survive. By simply following a habit of handwashing while doing any sort of activity that is related to them will help them to feel secure and maintain their health.

**Hypothesis:**

 The hypothesis that is going to be tested in this research paper is of determining that chances of transmission of diseases will occur less if hands are washed between donning of gloves during aged care compared to changing of gloves without properly washing hands.

**Research Objective:**

The objective to be achieved by this research is to find the degree to which washing hands before and between donning gloves will affect the rate of transmission of infections compared to not washing hands between donning gloves. The report will focus on this objective and research on literature evidence to support the outcome. These objectives will be accomplished when evidence will be fully collected to overhemly support either sides.

**Other Connected Discipline:**

 This research is focused on whether handwashing between donning gloves can reduce chance of infection compared to donning gloves without it. This research can be modified and used to determine the validity of different brands of soap and handwash to determine which one is better at killing bacteria. This modified research would help to determine the truthfulness of the marketing strategy used to sell these different types of products and provide an assessment based on actual scientific research.

**Literature Search:**

 The literary work behind the importance of handwashing between donning of gloves compared to not washing them at all is extensive. For the purpose of this only two sources were selected, which will be used to support the hypothesis stated above. These sources are as follows:

**Hand Hygiene Practices in a Neonatal Intensive Care Unit: A Multimodal Intervention and Impact on Nosocomial Infection:** [**https://pediatrics.aappublications.org/content/pediatrics/114/5/e565.full.pdf**](https://pediatrics.aappublications.org/content/pediatrics/114/5/e565.full.pdf)

According to this source, healthcare associated infections have become a dominating problem in most neonatal intensive care units. This is accredited to low implementation of hand hygiene policy making hand hygiene as the major cause for increasing spread rate of infections among patients and doctors. This study then looked at how much contact patients had with their caregivers and the compliance of healthcare professionals to hand hygiene policy.

**Role of Hand Hygiene in Healthcare-Associated Infection Prevention** [https://www.journalofhospitalinfection.com/article/S0195-6701(09)00186-8/pdf](https://www.journalofhospitalinfection.com/article/S0195-6701%2809%2900186-8/pdf)

 According to this study, healthcare workers are the major transporters of healthcare related infections by not washing their hands . They then come into contact with a variety of patients and get them infected within the healthcare environment. So healthcare professionals using medical equipment without properly washing their hands is becoming the leading cause of infectious disease spread. But their compliance to hand hygiene is also considered as the best measure towards prevention of spread of anti-bacterial or microbial resistance.

**Methods for Data Collection:**

Data for this research would be collected from a combination of different materials and sources. Firstly, data would be collected from existing literature. This would be helpful because it will provide a basis for the research and the research would be able to evolve using it as a basis. This is because there has already been so much work done related to the hypothesis being tested in this paper, which can help this research to gain credibility. Second method of data collection would be interviews and surveys. These are important because they are done for a more specific reason and have an human element to it. This will allow the readers of this research to connect with the data collected and will have an immense impact on their thinking leading them to changing their normal behaviour. Lastly, search engines with specific keywords such as Web-of-science and BIOSIS search engines would be used to get research specific information.

**Systematic Approach to Data Collection:**

The systematic approach to data collection determines the research’s viability. This is done by application of clearly defined steps based on experience and to evaluate the outcome of the steps taken. This is done to generate consistent optimal results. In this research, a systematic approach towards compiling information has been used. This is evident from the use of authenticated literature to support and advance our hypothesis being tested in this research.

**Discussion:**

According to the Allegranzi and Pittet (2009), the most common form of transference of diseases is through the hands of Health care professionals. They have access to a variety of different types of diseases in their normal work hours. This means they have to extra careful with their hygiene and use proper sterilised medical tools so that they do not inturn hurt the patients they are trying to take care of. They should be vigilant and keep their body neat and clean before exchanging words or checking out a patient. Especially, they need to be aware of the fact of how much bacteria and other viral diseases can linger around for a long period of time. So hygiene maintenance including hand washing should be their habit and go to action before any interaction with any type of patient. Hospitals need to administer firmly the hygiene code on each and every employee. This will keep the doctors on high alert against slacking off regarding their hygiene especially washing their hands before putting on gloves to see patients. Even after knowing how much danger healthcare professionals put their patients at by not washing their hands and keeping a healthy hygiene, the compliance ratio to optimal hygiene conditions has been low. Their can be several reasons for this low compliance ratio such as most health care professionals are over worked, with long hours and limited sleep that at a certain point they might not have the mindset to properly adhere to every code and ethic regarding their profession. This can be very detrimental for the patient if his healthcare provider does not care to adhere to a small activity such as washing hands before meeting him. Whereas, a study conducted by Lam (2004), observed the ratio of compliance to hygiene standards such as handwashing and nature of patient contacts in neonatal intensive care units. To do this the study focused on observing the patient contacts, hand hygiene compliance and healthcare professionals hand washing techniques. As the study progressed it was found that through hand hygiene education hand hygiene compliance increased for before patient contact as well as after patient contact. Even more progress was seen towards high risk procedures and this all accumulated into a factor for decreasing health care associated infection rate. This research if used correctly can be used to educate a number of healthcare professionals of the benefit of hand hygiene and without any doubt will be deciding factor behind mortality rates from infectious diseases. Health hygiene education should definitely be provided to aged care workers as they interact with people who have low immunity to fight common everyday diseases.

**Conclusion:**

Hence, it is imperative that hand hygiene compliance should be made mandatory and should be done before any interaction with patients especially those who are aged. Before any checkup or procedure hand hygiene should be maintained to the highest degree. The data collected through literature, search engines and other sources clearly support the hypothesis. The data also clearly supports the hypothesis and relates the rise of hospital related infectious diseases to a lack of compliance towards medical entities hand hygiene compliance policies. As more and more health care professionals were educated regarding its dangers the degree of infection related deaths became less and less.

**References:**

Allegranzi, B. and Pittet, D. (2009). Role of hand hygiene in healthcare-associated infection prevention. Journal of Hospital Infection, 73(4), pp.305-315.

Lam, B. (2004). Hand Hygiene Practices in a Neonatal Intensive Care Unit: A Multimodal Intervention and Impact on Nosocomial Infection. PEDIATRICS, 114(5), pp.e565-e571.