

Topic Expert Group: Patient safety and hygiene practice

Personal hygiene

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Target group Infants, parents, families, and healthcare professionals

User group Healthcare professionals, neonatal units, hospitals, and health services

Statement of standard

High personal hygiene standard is ensured to reduce the risk of nosocomial infections.

Rationale

Personal carriage of pathogens places infants at risk for nosocomial infections. The risk is increased because of immature host defences and frequent invasive procedures, which in turn increases the risk of mortality, morbidity, and prolonged hospital stay. (1–4) Apart from hand carried contamination (5,6), several other potential sources for personally carried pathogens among healthcare professionals, parents and families have been identified, including clothing/textiles (7,8), personal jewellery (9,10), artificial fingernails (11), personal electronic devices (10,12), and contagious diseases, e.g. human respiratory syncytial virus. (13) Implementation of standardised hygiene protocols reduces the bacterial burden in the NICU environment, and subsequently the risk of sepsis. (14) (see TEG Patient safety & hygiene practices)

Benefits

Short-term benefits

- Generally reduced risk of infection (consensus)
- Facilitated parental presence and kangaroo care (consensus)

Long-term benefits N/A

Components of the standard

Component For parents and family	Grading of evidence	Indicator of meeting the standard
 Parents and family are informed and instructed by healthcare professionals about personal hygiene, personal clothing, and use of electronic personal devices to reduce the risk of nosocomial infections. 	B (Moderate quality)	Patient information sheet, training documentation





2.	Parents are asked to instruct the own family and relatives to apply NICU hygiene guidelines.	B (Moderate quality)	Parent feedback
3.	Fingernails are kept clean and short and artificial nails are not used. (11)	A (Moderate quality)	Guideline
4.	Strict adherence to local infections control politics (such as proper hand hygiene) practices are followed when electronic devices are handled. (10,12) (see TEG Patient safety & hygiene practices)	A (Moderate quality)	Guideline
F	or healthcare professionals		
5.	Healthcare professionals are informed and instructed about personal hygiene, personal clothing, and use of electronic personal devices to reduce the risk of nosocomial infections.	B (Moderate quality)	Guideline
6.	A unit guideline on personal hygiene is adhered to by all healthcare professionals.	B (Moderate quality)	Guideline
7.	Healthcare professionals are encouraged to identify poor practice.	B (Moderate quality)	Audit report, training documentation
8.	Fingernails are kept clean and short and artificial nails are not used. (11)	A (Moderate quality)	Guideline
9.	Strict adherence to local infections control politics (such as proper hand hygiene) practices are followed when electronic devices are handled. (10,12) (see TEG Patient safety & hygiene practices)	A (Moderate quality)	Guideline
1(D. Single use of non-sterile gloves, gown, and mask is ensured: in case of infectious diseases non-sterile gloves are worn when in contact with blood, mucous membranes, non-intact skin or other potentially infectious materials. Gloves are worn and changed according to the WHO "5 moments of handy hygiene". (15) (see TEG Patient safety & hygiene practices) 	B (Moderate quality)	Guideline
		powe	ered by





A (Moderate quality) B (High quality)	Guideline
A (Moderate quality) B (Moderate quality)	Guideline
A (Moderate quality) B (Moderate quality)	Guideline
B (Moderate quality)	Audit report
B (Moderate quality)	Guideline
	A (Moderate quality) B (High quality) A (Moderate quality) B (Moderate quality) B (Moderate quality) B (Moderate quality) B (Moderate quality)

Where to go - further development of care

Further development	Grading of evidence
For parents and family	
N/A	
For healthcare professionals	
N/A.	
For neonatal unit	
 Focus future interventions on newborn infants ≤1000 g birth weight, in whom infection rates are higher. (17) 	A (Moderate quality)
Report compliance to personal hygiene guideline.	B (Moderate quality)
For hospital	
 Audit adherence to protocol regularly including a combination of staff education, promotion hand hygiene, and performance monitoring with regular feedback in order to promote/maintain a high level of hygiene. 	A (Low quality) B (Low quality)
For health service	





Getting started

Initial steps

For parents and family

• Parents and family are informed and instructed by healthcare professionals about personal hygiene, personal clothing, and use of electronic personal devices to reduce the risk of nosocomial infections.

For healthcare professionals

- Healthcare professionals are informed and instructed about personal hygiene, personal clothing, and use of electronic personal devices to reduce the risk of nosocomial infections.
- Monitor nosocomial infection rates.

For neonatal unit

- Develop and implement a unit guideline on personal hygiene.
- Develop information material on personal hygiene for parents and family.
- Promote adherence to hand hygiene protocols to prevent healthcare-associated infections.
- Measure compliance on regular base.
- Educate healthcare personnel about the importance of hand hygiene for infection prevention, reminders, and adherence surveillance with feedback of results to frontline providers in hand hygiene adherence programmes.
- Develop inter-professional awareness by educating all healthcare professionals and family on preventing personal carried contamination/transmission of nosocomial agents: include medical, nursing, laboratory, and maintenance personnel, students, volunteer staff, visitors, and families.

For hospital

- Promote adherence to hand hygiene to prevent healthcare-associated infections. For health service
- Develop and implement a national guideline on personal hygiene.

Source

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Lifecycle

5 years/next revision 2023

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