

## Hand hygiene staff survey

You are in direct contact with patients on a daily basis and this is why we are interested in your opinion on health care-associated infections and hand hygiene.

- It should take you about 10 minutes to complete this questionnaire.
- Your responses should reflect your current experience in this hospital.
- Each question has **one answer only**.
- Please read the questions carefully and then respond spontaneously. Your answers are anonymous and will be kept confidential.

1. Did you receive education in hand hygiene in the last year?

Yes     No

2. Do you routinely use an alcohol-based hand rub for hand hygiene?

Yes     No

3. What effort is required for you to perform good hand hygiene?

No effort                    A big effort

4. In general, what is the impact of a health care-associated infection on a patient's clinical outcome?

Very low                    Very high

5. What is the effectiveness of hand hygiene in preventing health care-associated infection?

Very low                    Very high

6. Among all patient safety issues, how much of a priority is hand hygiene at your institution?

Very low                    Very high

7. In your opinion, how effective would the following actions be to improve hand hygiene permanently in your institution? Please check one box on the scale, according to your opinion.

a. Leaders and senior managers at your institution support and openly promote hand hygiene.

Not effective                    Very effective

b. The health care facility makes alcohol-based hand rub always available at each point of care.

Not effective                    Very effective

c. Hand hygiene posters are displayed at point of care as reminders.

Not effective                    Very effective

d. Each health care worker receives education on hand hygiene.

Not effective                    Very effective

e. Clear and simple instructions for hand hygiene are made visible for every health care worker.

Not effective                    Very effective

f. Health care workers regularly receive feedback on their hand hygiene performance.

Not effective                    Very effective

g. You always perform hand hygiene as recommended (being a good example for your colleagues).

Not effective      Very effective

h. Patients are invited to remind health care workers to perform hand hygiene.

Not effective      Very effective

8. What importance does the head of your department attach to the fact that you perform optimal hand hygiene?

Not effective      Very effective

9. What importance do your colleagues attach to the fact that you perform optimal hand hygiene?

No importance      Very high importance

10. What importance do patients attach to the fact that you perform optimal hand hygiene?

No importance      Very high importance

11. Is hand hygiene automatic or do you need to remember or be reminded to do it?

No importance      Very high importance

12. Who do you want to remind you to perform hand hygiene? (Check all that apply)

Manager

Peer

Patient

13. How much do the following barriers interfere with optimal hand hygiene?

	Not at all		Very much		
Not convenient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Out of product	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Don't like/problem with product	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Too busy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forget	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unsure of need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other barrier: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other barrier: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No current barriers	<input type="checkbox"/>				

**Thank you very much for your time!**

*Adapted from World Health Organization Perception Survey for Health Care Workers*