# Role of Hand Hygiene in Reducing Transient Flora on the Hands of Kitchen Staff Working In Hospitals Setting

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#### I. Introduction

Hands of the healthcare workers are the main source of transmission of infection in healthcare facilities<sup>1</sup>. We have to re look in the basics of infection control practices:- like hand hygiene as hand hygiene is a simple and low cost measure to reduce transmission of infection yet it has always been a concern in kitchen staff in preparation of patient foods, Attended and staff<sup>2</sup>.

## II. Aims And Objectives

To promote hand hygiene practices in kitchen staff.

#### III. Materials & Methods

A Total sample size of 50 collected from different staff (N=36) working in Kitchen (5 staff used to prepare patient food ,1 staff prepare bakery items, 4 staff helps in Dinning food serving,10 staff helps in cooking food for hospital employee, 5 staff allot for salad cutting ,3 staff prepare liquid diet for patient ,3 staff help in chapatti making and 5 staff serve patient food). Finger print impression culture was collected from kitchen staff on blood agar plates which were incubated at 37°C for 24 hours, after 24 hours blood agar plate observed for micro-organism growth. Sample (finger print) was taken randomly during their duty time and sample was processed in our microbiology laboratory, isolates obtained from the culture were identified through gram stain and routine biochemical tests. Each person was educated on the technique of hand hygiene with soap and water. Both the culture plates shown to each health care workers to provide evidence .The WHO Posters on seven steps of effective hand washing steps were displayed in the appropriate areas of the kitchen as educational tool.

#### IV. Results

After the hand print surveillance, it was found that the hands of kitchen staffs were colonized with Staphylococcus spp, Coagulase negative Staphylococcus, Staphylococcus aureus, Pseudomonas species and Klebsiella pneumoniae.

A total of 36 participants who has significant bacterial count showed complete reduction in transient flora after performing hand hygiene, however, in 12 subjects only 70-80% reduction was seen, which became 2 subjects. After repeat training session on hand hygiene by demonstration method, 100% compliance achieved.

					N=5
PRE HAND WASH FLORA		BLOOD AGAR	ORGANISM ISOLATE FROM HCWs FINGER PRINT		
Growth	No Growth				
12 (24%)	24 (48%)		ORGANSIM	ISOLATION	PERCENTAGE
POST HAND WASH FLORA		PRE HAND WASH FLORA	Klebsiella Pneumoniae	1	2
N=12,(70%-80% reduction in transient flora)			Staphylococcus aureus	3	6
Growth	No Growth		Pseudomonas species	4	4
2 (4 %)	10 (20%)		Coagulase negative Staphylococcus	4	4
POST HAND WASH FLORA (N=2)			Staphylococcus spp	6	12
Growth No Growth		POST HAND WASH			
0	4 (5.5%)=100%	FLORA	Table 1:-As per finger print surveillance got the percentages of transient flora in the hands of the kitchen staff.		

## V. Discussion

Demonstrated the difference in finger print before hand washing and after hand washing. It helped us in possible food borne diseases with associated complication like UTI, respiratory infections, osteomylitis, blood steam infection in every patient, attended and staff <sup>3</sup>.

#### VI. Conclusion

Hand hygiene is one of the most important interventions to remove the transient bacteria present on the hands of kitchen staffs.

This was achieved in the form of repeated training by demonstration of the proper hand washing steps which was required for hospital kitchen staff. Hand hygiene protocols, supervision & feedback; quality improvement initiatives are useful methods to improve compliance. These organisms were transient flora but in future could have led to serious food borne disease. The WHO hand hygiene protocol where practice by kitchen staff in hospital setting. Proper hand hygiene is mandatory for safe hospital environment.

## Acknowledgement

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## References

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