B4. Intervention design worksheet

Specific objectives:

1) To facilitate participatory sessions for stakeholders to design hospital hand hygiene interventions

Steps:

- 1) Provide privacy advisory statement:
 - "Information is being collected for this survey under the authority of 10 U.S.C. 2358, Research and Development Projects; DoDI2000.30, Global Health Engagement (GHE) Activities; the Fiscal Year (FY) 2013 National Defense Authorization Act (NDAA); and E.O. 13747, Advancing the GlobalHealth Security Agenda to Achieve a World Safe and Secure from Infectious Disease Threats; and will be used to help the DoD Center for Global Health Engagement to understand and evaluate hospital hand hygiene policies and practices. No personally identifiable information (PII) is being collected from you, and all information will be de-identified prior to being reported. Completing the survey is voluntary; you may stop the survey at any time and skip any questions you choose. There is no penalty if you choose not to respond, although maximum participation is encouraged so the data will be complete and representative."
- 2) Personal introductions of all participants
- 3) Split participants into smaller groups (at least 3 groups)
- 4) Group members share their experiences and insights on hospital hand hygiene
- 5) Groups brainstorm intervention design ideas with one specific hand hygiene material -- soap or alcohol or chlorine/hypochlorite will be assigned
- 6) Groups present ideas to other groups and receive feedback
- 7) Groups revise ideas into one design idea for further development
- 8) Groups create design prototypes
- 9) Groups present prototypes to other groups and receive feedback
- 10) Groups refine prototypes
- 11) Summarize common and distinguishing features of interventions
- 12) Discuss future meetings if possible for further feedback on research team prototypes
- 13) Thank participants and offer to take group photo

Activity flowsheet:

	1.	2.	3.	4.	5.	6.
	Brainstorm	Feedback	Design	Prototype	Feedback	Prototype
	ideas		one idea	#1		#2
Equipment						
Consumables						
Instructional/						
motivational						
materials						
Institutional						
change						

Consider using guiding questions from IBM-WASH model:

IBM-WASH				
Technology factors	Guiding questions			
	Who /where are the local suppliers of equipment and consumable materials?			
1) Societal/Structural level	consumable materials?			
	Are these products made locally or foreign?			
	• Are there specific brands that are preferred? If so, why?			
	Where are hand hygiene materials, including water,			
2) Community level	accessible inside the hospital? On the wards? Functionality?			
,	Who is responsible for ordering, stocking and maintaining			
	hand hygiene materials?			
2) 1	What is the availability of hand hygiene materials for			
3) Interpersonal level	doctors? Nurses? Other hospital staff? Designated rooms or			
	sinks? For patients and family caregivers?			
4) Individual level	Specific hand hygiene material advantages? Disadvantages			
,	Smell? Effect on skin? Effectiveness? Convenience? Cost?			
	What do you think about soap as a hand cleansing material			
5, 111: 11	for routine and daily use in the hospital? Alcohol? 0.05%			
5) Habitual level	chlorine / hypochlorite / dilute bleach?			
	Which do you think is most effective? Why?			
	Which do you think is easiest/ most convenient? Why?			

Record notes and comments on participatory sessions: