

TERMS OF REFERENCE

Consultant

to support WHO in assessing the perception of knowledge on hand hygiene among nurses in four hospitals in Pristina

1. Background

Healthcare-associated infections (HCAs) are estimated to affect hundreds of millions of patients globally, resulting in major mortality and financial losses for health services. In high income countries, it is estimated that 6-7 out of every 100 hospitalized patients will develop at least one HCAs, while in developing countries this number increases to 10 out of every 100 patients. HCAs can affect patients in any type of treatment setting and can even appear after they have been discharged.

Hand hygiene is recognized as the leading measure to prevent cross-transmission of microorganisms and to reduce the incidence of HCAs. In 2005, WHO initiated the first patient safety initiative and a multimodal hand hygiene improvement strategy to strengthen public health action and reduce the number of people who die from HCAs. Studies shows that increased hand hygiene before and after contact with a patient is the most effective strategy to prevent infection transmission. Increased hand hygiene performance in healthcare setting can lower HCAs by up to 50%.

In Kosovo^[1], infection prevention and control (IPC) remains one of the most critical and most worrisome aspects of clinical service delivery. WHO studies conducted in 2020-2021 indicate extremely high rate of HCAs in the premises of the Intensive Care Unit (almost 69%). During 2021, WHO and the Institute of Public Health conducted a study revealing that 100% of health workers did not receive any formal or informal training on hand hygiene during COVID-19 response. While hand cleaning was a routine practice, it was not time-fixed or formalized in SOPs.

Without a doubt, nurses constitute the largest percentage of the healthcare workers – the trend that is observed in Kosovo^[1], too. Because they spend more time with patients than any other healthcare worker, their knowledge of and compliance with hand washing guidelines may be the most vital in reducing and preventing HCAs.

Recognizing central role that nurses play in healthcare service delivery and critical role that hand hygiene plays in reducing incidence of HCAs, WHO is conducting a study to assess knowledge and perception among nurses on hand hygiene in Kosovo^[1]. The study will examine the relationship between hand hygiene knowledge, perception, and self-reported performance among nurses in four hospitals in Pristina (Infectious Diseases, Emergency Care Unit, Pulmonology Unit and Surgery Unit). To support the Organization on this work, WHO is recruiting a locally-based consultant to support WHO office in Pristina on designing and conducting the assessment as well as to organize policy dialogue with health partners to present the results of the assessment and follow-up recommendations.

2. Deliverables

The consultant is expected to perform the following duties:

1. To review, adjust to the specificities of Kosovo^[1], and based on the feedback from WHO office in Pristina, to finalize the structure of the WHO survey “Hand Hygiene Knowledge Questionnaire for Healthcare Workers” and to translate it into Albanian by 30 November 2022;
2. To organize and facilitate consultation meetings between WHO and the leadership of four hospitals in Pristina (Infectious Diseases, Emergency Care Unit, Pulmonology Unit and Surgery Unit) to inform about planned WHO survey by 15 December 2022;
3. Identify, in consultation with the leadership of four hospitals and WHO office in Pristina, a cohort of 50 nurses who will participate in the survey, organize and facilitate a pre-survey meeting with the cohort by 31 December 2022;
4. To organize and facilitate the survey with the identified cohort of 50 nurses and to collect data by 15 January 2023;
5. To review the survey results, prepare draft technical report, incorporate WHO comments and finalize the report by 30 January 2023; and
6. To organize and co-facilitate together with WHO a policy dialogue with health partners to present the results of the assessment and follow-up recommendations by 28 February 2023.

3. Contract duration
36 working days (8 hours/day) during 15 November 2022 – 28 February 2023
4. Qualifications, experience, skills and languages
Qualifications <i>Required</i> University degree in public health, medicine, nursery, statistics or other relevant discipline in social or medical sciences <i>Desirable</i> Advanced University degree (MA, MSc. or PhD) in public health, medicine, nursery, statistics, or other relevant discipline in social or medical sciences Experience <i>Required</i> At least 2 (two) years of experience working in nursery, IPC, clinical care, hospital management in Kosovo^[1] Experience in and engagement with conducting surveys on health matters, ideally on IPC or similar topics <i>Desirable</i> Work experience in WHO or another public health organization Skills/Knowledge Solid knowledge on methodologies of organizing assessments on health matters In-depth understanding of Kosovo^[1] health systems Ability to work with various partners and under minimum supervision Ability to work under tight deadlines Ability to analyse data and produce reports Languages Excellent knowledge of English and Albanian
5. Application
Interested applicants should send their CV and a short motivation letter by email to martynenkoo@who.int by 31 October 2022 (10:00 am Pristina time). Shortlisted candidates will be invited for an interview and technical assessment.
6. Location (including in-country missions, if any)
The consultant should be based in Pristina or within commuting distance. The consultant will work offsite/not on WHO premises. Occasional travel may be required upon agreement between WHO and the consultant.

^[1]All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).