These recommendations provide steps for implementing a targeted intervention to address inadequate hand hygiene practices in HCF. These actions were derived from a pilot study at a referral hospital in Cameroon focused on local production and distribution of alcohol based hand rubs (ABHR) for HCF staff.

1. **Investigate the hygiene practices within the facility and identify of problem areas**
   - An observational assessment to capture frequency of staff hand washing at key times, as well as a survey of hygiene knowledge attitudes and practices can help to define the problem and determine if intervention is needed

2. **Produce alcohol based hand rub (ABHR) within the facility, if possible**
   - Depending on the context, production within the facility may be possible, but sourcing ABHR externally may be more appropriate
   - Producing ABHR within the facility may be more cost effective than buying from outside sellers, but is also more labor intensive

3. **Perform quality assurance testing of ABHR for safety and efficacy**
   - Quality assurance testing could include composition, microbiological contamination, and efficacy of disinfection

4. **Distribute and store ABHR**
   - ABHR can be made available to both staff as well as patients and caregivers if provided in dispensers throughout the facility. Personal sized bottles for staff can also be packaged and distributed

5. **Monitor production, demand, and use of ABHR**
   - Monitoring the amount produced, requested, and used by HCF staff can provide insights into compliance to good hand hygiene practices

6. **Incorporate hygiene behavior change communication alongside and throughout program**
   - The WHO’s framework for hand hygiene in healthcare facilities for incorporating behavior change and system strengthening for hand hygiene is a good resource for this
   - Providing ABHR improves access to hygiene facilities, and incorporating behavior change improves the likelihood that it will be taken up by staff within the HCF