

Hand Hygiene Compliance

Name and Definition

Full Name	Overall Hand Hygiene Compliance	
Short Name	Hand Hygiene Compliance	
Definition	The percentage of times healthcare workers clean their hands during the course of patient care.	
Domain	Health Services Delivery	
Dimension		
Acceptability	Efficiency	Appropriateness
Yes	No	No
Effectiveness	Accessibility	Safety
No	No	Yes
Category of Measure	Strategic	
Type of Measure	Outcome Measure	
Other Comments / Notes	N/A	

Context

Business Context	Alberta Health Services (AHS) Strategic Performance Measures AHS Health Plan and Business Plan 2014-2017
Rationale	<p>Hand Hygiene is the most effective strategy to reduce the transmission of microorganisms in the healthcare setting. Based on work done by the World Health Organization and the Canadian Patient Safety Institute, specific opportunities have been identified during the course of patient care when hand hygiene must be performed. These opportunities are: before and after patient contact or contact with patients' environment, before an aseptic procedure and after possible contact with blood or body fluids. Direct observation is recommended as the most effective method of obtaining and assessing hand hygiene compliance for health care workers.</p> <p>While measuring hand hygiene performance is a challenge for all healthcare settings, ongoing hand hygiene monitoring and reporting are required organizational practices set out by Accreditation Canada.</p>
Notes for Interpretation	N/A
Organizational Strategy	Alberta Health Services has invested in a single, hand hygiene data platform which can be used by all reviewers (e.g. front-line healthcare workers, infection prevention and control reviewers, external reviewers etc.). Education on using the new platform and the appropriate methodology for conducting reviews has been standardized provincially, and is a requirement prior to conducting reviews. Infection Prevention and Control will continue to use reviewers external to AHS during the Summer months to evaluate and compare routine observations by healthcare workers.
Benchmark Comparisons	<p>National or International comparisons available:</p> <p>British Columbia hand Hygiene Compliance rates are based on measuring Moments 1 & 4 only. Each facility over 25 beds is expected to report on 200 observations per quarter.</p> <p>British Columbia Overall Hand Hygiene Compliance (2013/14 Q4): 77%</p> <p>British Columbia Overall Hand Hygiene Compliance (2012/13 Q4): 73%</p> <p>British Columbia Overall Hand Hygiene Compliance (2011/2012): 70%</p> <p>Ontario Hand Hygiene Compliance rates are based on measuring Moments 1 & 4 only.</p> <p>Ontario Hand Hygiene Compliance Before Patient Contact (2013/2014): 86.2%</p> <p>Ontario Hand Hygiene Compliance After Patient Contact (2013/2014): 91.2%</p>
Cited References	World Health Organization. WHO guidelines on Hand Hygiene in health care: a summary. WHO Press. Geneva, Switzerland. 2009. http://whqlibdoc.who.int/publications/2009/9789241597906_eng.pdf

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Canadian Patient Safety Institute. Hand Hygiene toolkit training presentation.
http://www.google.ca/url?url=http://www.handhygiene.ca/English/Documents/Education/Hand%2520Hygiene%2520Training%2520Toolkit%2520Presentation.ppt&rct=j&frm=1&q=&esrc=s&sa=U&ei=qUzEU6foN-L9igKuh4HoCA&ved=0CBoQFjAA&usg=AFQjCNHe_CKL-BG4WY8TFLzNW90CNePHBQ (Verified 2014 July 14)

Progress Report on Hand Hygiene: Follow up to the Office of the Auditor General of B.C.'s Review of Hand Hygiene. British Columbia Ministry of Health, October 2013.
<http://www.health.gov.bc.ca/library/publications/year/2013/progress-report-on-hand-hygiene.pdf>

Hand hygiene compliance report. Provincial Hand Hygiene Working Group of British Columbia. Provincial Infection Control Network of British Columbia (PICNet), June 2012.
https://www.picnet.ca/uploads/files/surveillance/PICNet%20HCC%20Annual%20Report%202013_2014.pdf (Verified 2014 July 14)

Health Quality Ontario Patient Safety Quality Indicators: Hand Hygiene Compliance.
<http://www.hqontario.ca/public-reporting/patient-safety> (accessed May 20, 2014)

Technical Specifications

Metric	Percentage
Preferred Display Format	99.9%
Numerator	Number of compliant hand hygiene observations
Inclusion Criteria for Numerator	<p>Inclusions</p> <p>Number of times healthcare workers performed hand hygiene when in contact with patient. *Items to be assessed include:</p> <ol style="list-style-type: none"> Whether healthcare workers' hand hygiene is performed (i.e. hands are sanitized using alcohol-based hand rub (ABHR) or washed with soap and water) before a contact with the patient or the patient's environment; Whether healthcare workers' hand hygiene is performed (i.e. hands are sanitized using alcohol-based hand rub (ABHR) or washed with soap and water) before a clean or aseptic procedure is performed on the patient; Whether healthcare workers' hand hygiene is performed (i.e. hands are sanitized using alcohol-based hand rub (ABHR) or washed with soap and water) after possible contact with blood or bodily fluids from the patient; Whether healthcare workers' hand hygiene is performed (i.e. hands are sanitized using alcohol-based hand rub (ABHR) or washed with soap and water) after a contact with the patient or the patients' environment.
Exclusion Criteria for Numerator	Activities that do not involve contact with a patients or a patient's environment.
Data Source(s) for Numerator	Infection Prevention and Control personnel and trained reviewers external to AHS performing observations
Refresh Rate for Numerator	Annually
Data Steward for Numerator	Alberta Health Services, Infection Prevention and Control, Surveillance
Denominator	Total number of observations where hand hygiene is expected
Inclusion Criteria for Denominator	<p>Number of times healthcare workers should have performed hand hygiene when in contact with patient (Opportunity). *Items to be assessed include:</p> <ol style="list-style-type: none"> Whether healthcare workers' hand hygiene is performed (i.e. hands are sanitized using alcohol-based hand rub (ABHR) or washed with soap and water) before a contact with the patient or the patient's environment; Whether healthcare workers' hand hygiene is performed (i.e. hands are sanitized using alcohol-based hand rub (ABHR) or washed with soap and water) before a clean or aseptic procedure is performed on the patient; Whether healthcare workers' hand hygiene is performed (i.e. hands are sanitized using alcohol-based hand rub (ABHR) or washed with soap and water) after possible contact with blood or bodily fluids from the patient;

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	4. Whether healthcare workers' hand hygiene is performed (i.e. hands are sanitized using alcohol-based hand rub (ABHR) or washed with soap and water) after a contact with the patient or the patients' environment.							
Exclusion Criteria for Denominator	Activities that do not involve contact with a patients or a patient's environment.							
Data Source(s) for Denominator	Infection Prevention and Control personnel or trained external reviewers performing observations							
Refresh Rate for Denominator	Annually							
Data Steward for Denominator	Alberta Health Services, Infection Prevention and Control, Surveillance							
Technical Notes	N/A							
Calculation	$(\text{Number of compliant hand hygiene observations} / \text{total number of hand hygiene observations}) \times 100$							
Relationship to Other Indicators	Related to Clostridium difficile infection (CDI) and Methicillin-resistant Staphylococcus aureus (MRSA) rates. As the hand hygiene compliance rates increase the CDI and MRSA rates should decrease.							
Level of Reporting	National	No	Provincial	Yes	Zone	Yes	Site	Yes
Reporting Notes								
Frequency of Reporting	Annually	Yes	Quarterly	No	Monthly	No	Other	No
Other Reporting Frequency	N/A							
Limitations	<p>Indicator status: Currently under review</p> <p>Data Comments: Standardization to the approaches in measuring hand hygiene performance across the province is currently underway, based on the following processes:</p> <ul style="list-style-type: none"> • Consistent hand hygiene measurement processes for all personnel and practice settings; • Sufficient resources and trained personnel to monitor and measure, collect and enter data on hand hygiene practices for care providers in all care settings; • Inter-rater reliability testing between 2 reviewers and • Standard electronic data collection instrument and a secure site for data collection and management. <p>The Hawthorne Effect, where healthcare workers (HCWs) improve or modify their behaviour simply in response to being observed is also a bias in overt observational Hand Hygiene compliance methods. In addition, compliance rates also have a tendency to be influenced by seasonal trends as well as nursing workload. Moreover, because observations are not conducted in the evening or weekends, limited to specific types of sites (e.g. acute care, continuing care), and inadequate training of observers may also influence the validity of results.</p> <p>Compliance rates are compiled through an annual audit and results therefore only available once per calendar/fiscal year.</p>							