



	<b>Moment 1</b>	The % compliance for <b>before initial patient/patient environment</b> contact by combined categories of health care provider (HCP). (865/1,297 moments observed)
	<b>Moment 4</b>	The % compliance for <b>after patient/patient environment</b> contact by combined categories of HCP. (1,593/1,869 moments observed)
* Moments 2 and 3 can be more difficult to observe and are therefore not required for public reporting		

There are [four moments of hand hygiene](#). They are:

1. Before patient contact
2. Before an aseptic task, for example checking a wound or changing a dressing
3. After body fluid exposure risk
4. After patient contact

Consistent with the Department of Health and Wellness's reporting requirements, Capital Health reports rates with respect to proper hand hygiene compliance for the first and fourth moment. Auditors can only record what care providers do before going into a patient's room and after they leave. They don't go inside, to protect patient privacy. Audits are conducted four times a year, for most inpatient units within Capital Health. During this audit, 3,166 moments were observed.

### What is Hand Hygiene?

Hand hygiene is the action of cleaning your hands. Hands can be cleaned by using alcohol-based hand rub or soap and running water. Promoting hand hygiene is considered the cornerstone of infection prevention and control programs and preventing health-care-associated infections. Measuring adherence and providing feedback with accepted hand hygiene practices is an important quality improvement tool. The Accreditation Canada Qmentum Program includes hand hygiene audits as one of the Required Organizational Practices within the Infection Prevention and Control Standards.

## **What is the purpose of this indicator and why is it important?**

As we move from patient to patient and room to room caring for people, our hands pick up microorganisms that can cause infections. Hand hygiene works by interrupting this transmission of microorganisms. The World Health Organization has suggested that improvements in hand hygiene compliance can prevent 50 per cent of hospital associated infections, making it the single most important practice in reducing the rate of these infections.

## **What are we doing to improve our rates?**

We are taking an evidenced based approach:

- *Environment:* We continually assess availability and placement of alcohol based hand rub (ABHR) product to make sure it is readily available.
- *Continued Education & Training:* including general orientation; nursing, allied health and medical students; mandatory annual completion of learning module on Learning Management System
- *[One-Stop-Shop Internet site](#):* with unit-based ideas, links to posters, videos, etc.
- *Visual Reminders:* targeted poster campaigns
- *Monitoring & Feedback:* Audits and quarterly reporting with feedback to all units, poster with rate
- *Staff/Learner Recognition & Engagement:* including slogan contest, Hand Hygiene Champion poster, and more
- *Patient/Family Engagement :* Pilot project to engage patients and families to ask staff to perform hand hygiene; development of a pamphlet for patients and families