



# Public Reporting of Hand Hygiene at Ross Memorial Hospital

## Background

- On April 30, 2009, eligible hospitals in Ontario, including the Ross Memorial Hospital began posting their Hand Hygiene rates on their websites.
- Health care providers **are** washing their hands. What the provincial audit tool does is help ensure that they are washing them the right way at the right times.
- Patient safety remains the most important priority for our hospital; this involves ensuring that patients are not at risk for contracting health care-associated infections.
- We know that good hand hygiene is the most effective way to reduce the risk of health care-associated infections.

### What is Hand Hygiene?

Hand hygiene relates to the removal of visible soil and the removal or killing of transient micro-organisms from the hands and may be accomplished using soap and running water or an alcohol-based hand rub.

### Why is hand hygiene compliance one of the publicly reported indicators?

The most common transmission of health care-associated infections (HAIs) in a health care setting is from the hands of health care workers who acquire it from contact with colonized or infected patients, or after handling contaminated material or equipment. Monitoring hand hygiene practices and the provision of timely feedback are vital to improving compliance and, in turn, reducing HAIs.

### What is the definition of hand hygiene compliance?

Four indications define proper hand hygiene compliance:

- 1) Before initial patient/patient environment contact
- 2) Before aseptic procedure
- 3) After body fluid exposure risk
- 4) After patient/patient environment contact

### What will be publicly reported for Hand Hygiene?

Beginning April 30<sup>th</sup>, 2009, Ontario hospitals began submitting compliance data to the Ministry of Health and Long Term Care on all four indications for hand hygiene. Hospitals are also posting the percent compliance rates for each period end date on their corporate websites.

Hospitals are posting the compliance rate for:

- 1) hand hygiene before initial patient/patient environment contact by combined health care provider type
- 2) hand hygiene after patient/patient environment contact by combined health care provider type

Hospitals are not publicly reporting data on “before aseptic procedures” and “after body fluid exposure risk” as it is difficult for some hospitals to obtain a large enough sample size for these indications. The Ministry is also reporting the above data, by hospital site, on its website, [www.ontario.ca/patientsafety](http://www.ontario.ca/patientsafety).

### **How are the hand hygiene compliance rates calculated?**

Hospitals will calculate the percent compliance for each of the four indications of hand hygiene as follows:

$\frac{\text{\# of times hand hygiene performed before initial patient/patient environment contact}}{\text{\# observed hand hygiene indications for before initial patient/patient environment contact}} \times 100$

$\frac{\text{\# of times hand hygiene performed before aseptic procedure}}{\text{\# observed hand hygiene indications for before aseptic procedure}} \times 100$

$\frac{\text{\# of times hand hygiene performed after body fluid exposure risk}}{\text{\# observed hand hygiene indications for after body fluid exposure risk}} \times 100$

$\frac{\text{\# of times hand hygiene performed after patient/patient environment contact}}{\text{\# observed hand hygiene indications for after patient/patient environment contact}} \times 100$

### **Why is it so hard for health care professionals to wash their hands?**

To be clear, health care providers are washing their hands, and it is a practice that continues to improve as we expand hand hygiene best practices. Both hospitals and the government have done considerable amounts of work to improve the access and process challenges that once made hand washing in hospitals less expedient. For example, where sinks used to be located inconveniently throughout hospitals, there is now fast and easy access to alcohol-based hand rubs at patients’ bedside. The Ministry’s provincial hand hygiene campaign, Just Clean Your Hands, in which all Ontario hospitals have participated, was designed in a way that helps hospitals and individuals overcome barriers to proper hand hygiene and to improve compliance with hand hygiene best practices.

### **Is it true that hospital staff aren’t washing their hands because they are too busy?**

No, this is not the case. The Just Clean Your Hands program recognizes that health care providers are busy and require immediate access to hand hygiene products at the right time in the patient care process. The program supports having alcohol-based hand rub at the point of care to address this barrier and to make it easier and faster for health care providers to clean their hands. This type of system support is critical to sustaining improved hand hygiene compliance.

### **How frequently will you be reporting this information?**

Hand hygiene compliance rates will be posted for the public on an annual basis. However, hospitals all continue to audit their hand hygiene compliance regularly and may, and their discretion, post updates on their websites more often.

**What conclusions should patients draw from a low hand hygiene compliance rate? Do low rates mean that patients have a higher risk of catching a hospital-associated infection?**

Patients should know that the Ross Memorial is safe, that the care they receive is top-notch, and that every effort is made to ensure the highest quality of care possible. Public reporting of hand hygiene compliance rates is another helpful measure to ensure the care provided to our patients is even safer, and continues to improve over time.

A low compliance rate does not necessarily mean that health care providers are not washing their hands. What the Just Clean Your Hands observational audit tool measures is whether health care providers are washing their hands at the right times, and the right way. That is why it is vital that hand hygiene compliance rates are viewed in the context of other performance indicators.

That said, the analysis of these rates, over time, will certainly provide helpful information that can be used to make system improvements.

**What can patients do to help improve their own safety?**

Hand hygiene involves everyone in the hospital, including patients. Hand cleaning is one of the best ways you and your health care team can prevent the spread of many infections. Patients and their visitors should also practice good hand hygiene before and after entering patient rooms.

More patient-specific information is available at [www.ontario.ca/patientsafety](http://www.ontario.ca/patientsafety) and [www.oha.com/patientsafetytips](http://www.oha.com/patientsafetytips).

## **Our Commitment**

Public reporting of our patient safety scores is important because it will allow us to work with a standardized approach across the province. Our commitment to our patients is one of safety and continuous improvement. We monitor our results closely, identifying areas for improvement and implementing strategies to ensure our patients are safe.

**Who can I contact to learn more?**

Ross Memorial's Infection Prevention & Control team can be reached at 705-324-6111

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