

# Hand hygiene compliance among health care providers

## Alternate Name\*

Hand hygiene compliance among health care providers before and after patient or patient environment contact

## INDICATOR DESCRIPTION

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### Description\*

This indicator measures the percentage of hand hygiene compliance by health care providers before and after initial patient or patient environment contact.

### Indicator Status\*

Active

### HQO Reporting tool/product

Public reporting

### Dimension\*

Safe

### Type\*

Process

## DEFINITION AND SOURCE INFORMATION

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### Unit of Measurement\*

Percentage

### Calculation Methods\*

Numerator divided by denominator times 100

### Numerator including inclusion/exclusion\*

Number of times hand hygiene performed before initial patient or patient environment contact

Number of times hand hygiene performed after initial patient or patient environment contact

Inclusion:

1. All publicly funded hospitals
2. Inpatient settings

### Denominator including inclusion/exclusion\*

Number of observed hand hygiene indications before initial patient or patient environment contact

Number of observed hand hygiene indications after initial patient or patient environment contact

Inclusion:

1. All publicly funded hospitals
2. Inpatient settings

### Adjustment (risk, age/sex standardization)- detailed

None

### Data Source

Self-Reporting Initiative (SRI)

### Data provided to HQO by

Ministry of Health and Long-Term Care (MOHLTC)

### Reported Levels of comparability /stratifications (defined)

Province

Time

Institution

## RESULT UPDATES

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### Indicator Results

[Click here to view Health Quality Ontario results for this indicator](#)

## OTHER RELEVANT INFORMATION

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### Caveats and Limitations

1. Data are self-reported by hospitals. 2. The number of observation sessions required will depend on the number of inpatient beds. For example, to ensure statistically valid data, a hospital with 100 beds will observe at least 200 opportunities. The minimum number of observed opportunities is 50 for any hospital with 25 beds or less. 3. Data are collected through direct observation using a validated tool from the Just Clean Your Hands program run by PHO. Observers are trained to identify the indications for hand hygiene occurring during practice and point of care. 4. Since observers only record what they see, certain hand hygiene opportunities will not be captured. For example, if a privacy curtain is drawn closed, the audit cannot be performed.

### Comments Detailed

The definition of a hand hygiene indication is the reason why health care providers must clean their hands at a given moment. For example, a health care provider needs to clean their hands before entering the patient environment to prevent transferring microorganisms onto the patient. Another hand hygiene indication is the need for a health care provider to clean their hands after patient contact so that they do not spread contamination from one patient to another. Self-Reporting Initiative (SRI) (fiscal year 2012/13 to present) and Web Enabled Reporting System (WERS) (fiscal year 2009/10 to 2011/12), Ministry of Health and Long-Term Care

## TAGS

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### TAGS\*

Acute Care/Hospital  
Process  
Patient Safety and Never Events  
Safe  
Self-Reporting Initiative (SRI)

## PUBLISH

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### PUBLISH DATETIME\*

19/10/2017 12:13:00