

Hand Hygiene Compliance Audit

“Opportunities to get it right”

Key to Compliance

1. Being able to correctly identify “*opportunities*” for hand hygiene
2. Performing hand hygiene using the “*7-step technique*”
3. Demonstrating hand hygiene when “*bare-below-elbow*”
4. Being able to correctly describe the WHO “*5 moments of hand hygiene*”

Standard Operating Procedure

Background Statement	Hand hygiene is the most important method of preventing healthcare associated infections. Care Homes should be able to demonstrate that they know what the key components of effective hand hygiene are and that they are providing assurance that it is being carried out in the care setting.
Objective	<p>To provide evidence that staff are aware of opportunities for hand hygiene and that hand hygiene is performed</p> <ul style="list-style-type: none"> • Bare-below-elbow • Using the 7-step technique <p>To provide evidence that staff know the five moments of hand hygiene</p>
Completion of Hand hygiene Audits	<p>The person who is completing hand hygiene audits should have received training on how to identify opportunities for hand hygiene and how to complete and score the audit forms. They should have knowledge of the five moments and 7-steps hand hygiene technique. Posters should be visible at all hand hygiene facilities of both 5 moments and 7-steps. The auditor should be completely focused on completing the audit form and should not be providing care at the time of the audit. The auditor should record observations over a period of 20-30 minutes.</p> <p>Note: Two opportunities for hand hygiene can be identified during the one episode of hand hygiene. For example, if hand hygiene is performed after helping a resident to walk to their seat and a resident in the same room needs assistance then this can be documented as two opportunities for hand hygiene. If compliance is being audited during an outbreak of diarrhea and / vomiting or when caring for a resident with <i>Clostridium difficile</i> infection, liquid soap and water should be used for hand hygiene, instead of alcohol based hand-rubs. Liquid soap and water should also be used if hands are visibly soiled. Feedback should be provided to staff that have been audited as soon after the event as possible.</p>
Follow-up after completing hand hygiene audits	<p>The comments / planned action section of the audit tool should be completed and compliance scores should be calculated. Compliance scores should be used to determine frequency of future audits, using the table on compliance thresholds. The care home manager should be informed of compliance scores and comments/planned action and should ensure that planned action is implemented within an agreed time-frame. The results of the audits should be used to determine the content of hand hygiene training and the PHA practical hand hygiene training packs should be used to facilitate training. For example if the audit shows that staff knowledge of the five moments is a problem area, the package on five moments can be used. If observations highlight that the 7 –steps / bare-below-elbow is not being adhered to, then the training package for that should be used. If the auditor is experiencing difficulty in identifying opportunities for hand hygiene, they should contact their local Health Protection / Infection Prevention & Control Nurse for advice and support.</p>

Compliance Thresholds for commencing daily hand hygiene audits

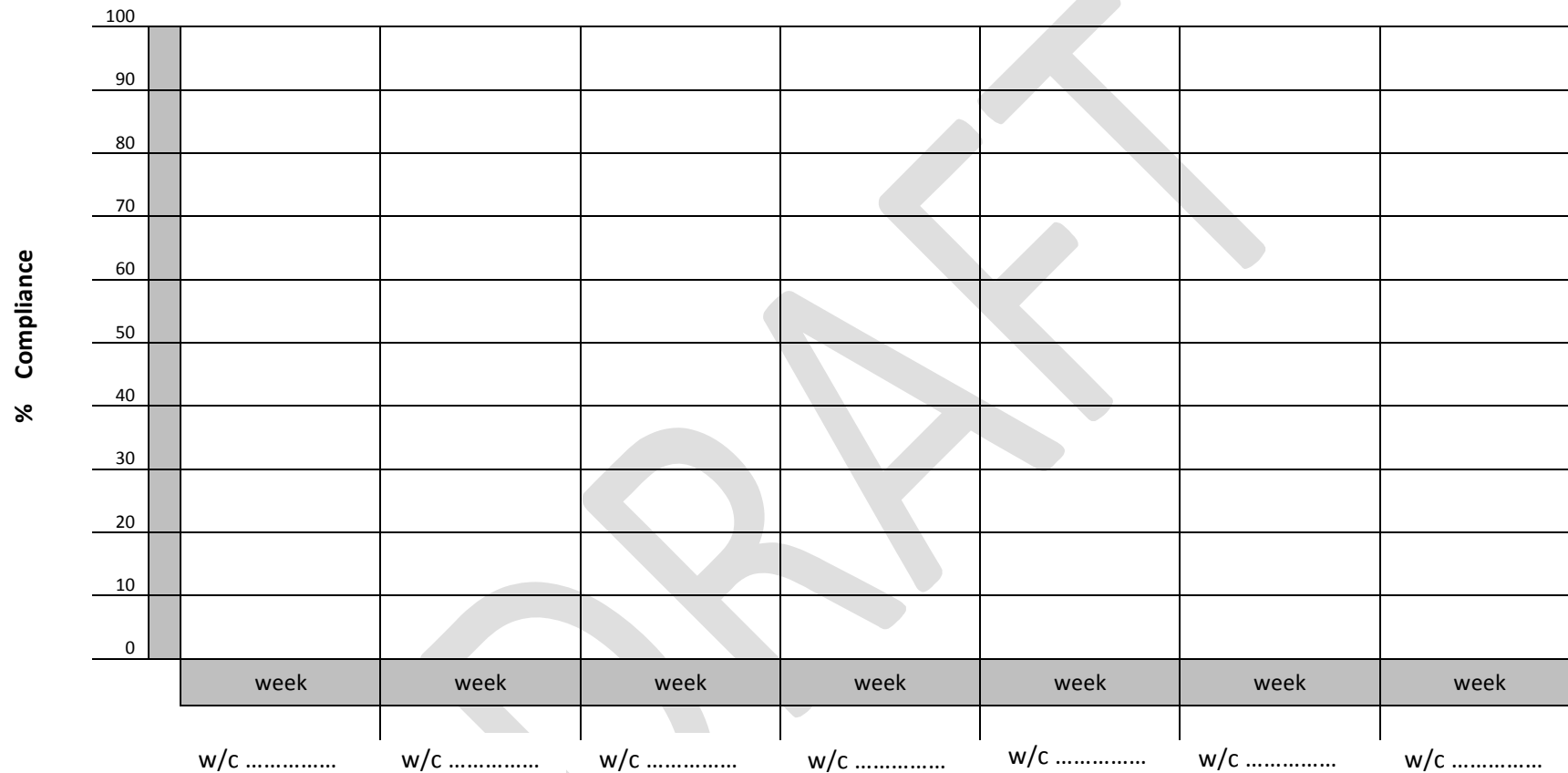
Number of Observations Completed	Threshold for commencements of daily audits
1	N/A
2	N/A
3	N/A
4	<75%
5	<80%
6	<80%
7	<85%
8	<85%
9	<85%
10	<90%
11	<90%
12	<90%
13	<90%
14	<90%
15	<90%
16	<90%
17	<90%
18	<90%
19	<90%
20	<95%

Trend Analysis Sheet to determine if Compliance with Hand Hygiene Opportunities is Optimal

	Date:		Date:		Date:		Date:		Date:		Date:		Date:		Total (average % compliance for week)	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total number of key moments that occurred																
Total number of opportunities taken																

% = total number of opportunities taken as a percentage of number of key moments that occurred

Hand Hygiene Compliance Feedback Run Chart



N.B. Please note that Week refers to the week of the monitoring period eg. Week 1

Sample below of Hand Hygiene Observational Tool – available as separate Excel document

Community Hand Hygiene Observational Tool



Care Home / Floor: _____
 Date(s) of Audit: _____
 Auditor: _____

Staff Name	Designation of Staff Member/ Band	Describe opportunity for hand hygiene?	Staff member observed performing 7-step hand hygiene technique? i.e. was opportunity taken	If not, why?	Was the staff member "bare below the elbow" while cleaning their hands? (i.e. no clothing below the elbow, no wristwatch, no stoned rings, not wearing nail polish/artificial nails)	Did the staff member know the five moments for hand hygiene: (1) Before patient contact (2) Before aseptic task (3) After body fluid exposure risk (4) After patient contact (5) After contact with patient surroundings	Staff Signature	Team Manager Signature
Numerator	0							
Compliance Rate (%)								

