A SIMPLE FRAMEWORK FOR ESTABLISHING ACCOUNTABILITY
IN HAND HYGIENE PROGRAMS

Activities
- Develop burning platform / context- passion for participating in targeted optimal hand hygiene activities
- Obtain senior leadership passion and support (needs an executive sponsor)
- Name the leader(s) you will report to
- Find your positive deviants or find groups of individuals who are ready to launch a hand hygiene improvement project in their particular area
- Educate everyone in the group

Outputs
- Education Program available and accessible
- Tool Kit widely available and accessible
- Group chooses their project. Starts small, receives support, and begins to collect data
- Positive results begin to become more evident. Collective interest increases
- Executive sponsor and senior leadership tangibly acknowledge progress and support / advice regarding next steps
- Group chooses to expand original project or start a second project related to hand hygiene.

Immediate Outcomes
- Momentum outside of the initial study location begins to build (interest spreads)
- Next group becomes enthusiastic about creating their own program
- Interest in improving hand hygiene knowledge and compliance is evident
- Executive sponsor and senior leadership provide further recognition of activities and acknowledge successes
- Patients and families become active participants in supporting hand hygiene activities

Long Term Outcomes
- Compliance to hand hygiene activities improves and is sustained
- Incidence of healthcare associated infections begins to decrease and improvement is sustained
- Use of hand hygiene products is increased and appropriate use for specific situations / locations is evident.
- Integration is achieved - optimal hand hygiene is becoming simply a part of day-to-day work life across the system
  If not already part of Balanced Score Card or Strategic Plan, the organization ensures formal acknowledgement and support by including in long term organizational direction.

Adapted from: Health Canada, First Nations and Inuit Health Branch, Home and Community Care Program: Results-based management and accountability framework, 2002.
<table>
<thead>
<tr>
<th>STEPS</th>
<th>FILL IN THE BLANKS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Describe your local context (your reason for starting a hand hygiene project)</td>
<td></td>
</tr>
</tbody>
</table>
| 2. Identify your leader(s) and obtain written support to go forward | Project Lead  
Direct Supervisor  
Executive Sponsor |
| 3. Identify your educational needs |  |
| 4. Book / arrange education as needed |  |
| 5. Choose your improvement objective(s) | 1.  
2. |
| 6. Describe the supports needed to ensure success (& obtain agreement from those individuals or groups to provide that support) | Name  
Type of supports described |
| 7. Describe your reporting methods:  
  - Frequency  
  - Style (Excel, Text Report etc)  
  - Dissemination of information | Frequency:  
Report Style:  
Dissemination to: |
| 8. Describe how you plan to celebrate  
  - Participation  
  - Completion of project  
  - Increased awareness in burning platform  
  - Results of data  
  - Engagement  
  - etc... |  |
| 9. Signatures | Project Lead  
Direct Supervisor  
Executive Sponsor |

STOP!  
Cleaning your hands  
Safer healthcare now!
A SAMPLE ACCOUNTABILITY CONTRACT

From (date)______________ To (date) ________________

I agree to support the organization’s efforts to improve adherence to optimal hand hygiene activities by: (describe your role in this project in three or four specific points)

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

I expect that my organization will support this effort by offering: (describe the agreed upon supports that will be available)

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

Participant’s Signature: ______________________ Date ________________

Direct Manager’s Signature: ______________________ Date ________________

Executive Sponsor’s Signature: ______________________ Date ________________