Instructions for Using the Hand Hygiene Surveillance Instrument

Summarized instructions. Full instructions can be downloaded from [www.handhygiene.ca](http://www.handhygiene.ca).

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- Each row on the observation form corresponds to a separate hand hygiene observation opportunity.
- It is recommended that you obtain at least 10 observations of hand hygiene opportunities before contact with patients and at least 10 observations of hand hygiene after contact with patients for each unit/ward.
- Perform observations on any shift the observer is able to observe a sufficient number of opportunities.
- Observers should record with a checkmark (✓) on the form the position of the individual(s) being observed. There are 4 personnel position categories:
  - Physician (includes residents)
  - Nurse
  - Other clinician: (respiratory, physical, or occupational) therapists, medical and other students, technicians, and other clinical staff when you are not sure of their positions.
  - Other non-clinicians: environmental and cleaning staff, food service staff, pharmacists, dieticians, secretarial staff, transportation staff and any other non-clinical staff
- Under each type of hand hygiene opportunity, please only record one observation for each person daily.
  - For example: Observation of nurse A’s hand hygiene compliance may include one hand hygiene opportunity before she had contact with a patient and one after she had contact with the same patient.
  - Alternatively, observation of nurse A’s hand hygiene compliance may include one hand hygiene opportunity before she had contact with a patient and one after she had contact with a different patient or after she had contact with a patient’s immediate environment.
  - If nurse A is observed again later for a hand hygiene opportunity after removing gloves this could be counted if she has not already been observed for this activity.
  - Therefore, for the same observed individual, the highest number of hand hygiene opportunities that can be observed each day is four.

Hand Hygiene Opportunities:
- Observers should indicate (Y/N) under the type of hand-hygiene opportunity observed:
  - Before contact with the patient
  - After contact with the patient
  - After contact with environmental surfaces within a patient's immediate area
  - After removal of gloves
  - If possible, try to balance the observations in both the "before contact with patients" and the "after contact" categories as much as possible.
- If no hand hygiene is performed, leave the following columns blank:
  - Water and soap; >=15 seconds*
  - Water and soap; <15 seconds*
  - Water only
- If ABRH is available, record “N” in the column “HH with ABHR”.

* Please refer to [www.handhygiene.ca](http://www.handhygiene.ca) for the Canadian Patient Safety Institute's recommendations
Hand Hygiene Practice:
Observers should record the materials used to perform hand hygiene (water, soap, alcohol-based hand rub). For hand hygiene opportunities that were observed but not performed, observers should still record data in the appropriate columns regarding availability of hand hygiene materials and agents.

- **Soap and Water:** place a checkmark (√) in the column that applies to the individual observation
  - Hand hygiene with soap and water for at least 15 seconds*
  - Hand hygiene with soap and water for less than 15 seconds*
  - Hand washing with water only (any duration)

- **Hand Hygiene Practice: Alcohol-Based Hand Rub (ABHR)**
  - ABHR: (Y/N)
  - This category should be recorded for each observation regardless of whether hand hygiene was performed or not, including observations where soap/water was used for hand hygiene.
  - HH with ABHR (Y/N)
  - If the answer to “ABHR available” is “Yes”, observer should record whether or not ABHR was used for hand hygiene during this individual observation.
  - If the answer to “ABHR available” is “No”, then leave the “HH with ABHR” cell in this row blank.

Gloves:
- If a healthcare worker wears gloves for contact with a patient, this is considered 2 hygiene opportunities. Place one checkmark (√) under the “Before Contact with Patient” column and one checkmark (√) under the “After Gloves Removed” column.
- Gloves are not a substitute for hand hygiene, thus the “HH Practice” columns must still be recorded as previously described even if the observed person wears gloves for a patient care activity.
- Observers should record (Y/N) on the form for the following information regarding gloves for each hand hygiene opportunity observed:
  - Gloves indicated: Does the health care worker’s patient care activity or procedure require using disposable latex gloves?
  - Gloves available: Gloves are located in the patient’s room or in the hallway just outside the patient’s room. This column should be recorded for each observation regardless of whether gloves are indicated or not, or whether gloves are used or not in this observation.
  - Gloves used: If the observed person has used gloves, please record “Y” in this column. If the observed person does not use gloves, regardless of whether or not gloves are indicated, please record “N” in this column.
  - Gloves disposed of after each patient: Gloves should be removed and disposed of immediately after each patient use. Please record “Y” if the health care worker being observed removes their gloves after the observed patient contact and disposes of them.
  - If gloves are not removed between patients or are reused between patients, including if they are removed and washed between patients, this activity should be recorded as “N”.

*Please refer to [www.handhygiene.ca](http://www.handhygiene.ca) for the Canadian Patient Safety Institute's recommendations*

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