Standardized Training for Hand Hygiene Observers

for the Maryland Hospital Hand Hygiene Collaborative

developed and supported by Center for Innovation in Quality Patient Care and Dept of Hospital Epidemiology and Infection Control at Johns Hopkins Medicine.

Description

This training course is a 40-60 min online module for the Hand Hygiene observers. The overall objective of this training course is to ensure we have valid and reliable hand hygiene data across all the hospitals in the state of Maryland. The training course includes interactive activities, practice videos and opportunity for learner to practice filling out the data collection forms. **All Hand Hygiene observers for Maryland hospitals are required take this standardized training.** Observers are required to pass a test composed of training scenarios with a score of 90% or higher.

Access link to the training at the <u>Maryland Hospital Hand Hygiene Collaborative Web Portal</u>.

Frequently Asked Questions on Hand Hygiene Monitoring Method:

This FAQ sheet is developed to educate your healthcare workers about the hand hygiene monitoring method you are implementing. It complements the online "Standardized Training for Hand Hygiene Observers" course that teaches your hand hygiene observers how to conduct direct observations for hand hygiene.

1. **What kind of monitoring is used?**

    Direct observation of healthcare provider hand hygiene practices.

2. **Who does the monitoring?**

    The Infection Control Department at individual Maryland hospital will oversee the observation process, data collection and analysis of the hand hygiene (HH) data. The actual observations are performed by "undercover" observers from various disciplines. All observers for the Maryland hospitals must complete the standardized training online, pass an online test with a passing grade of 90 %, print their certificate, and submit to their infection control office to keep on file. Both the training and test are available for all staff and faculty to access by following the link from the Collaborative Web Portal.   The course name is Standardized Training for HH Observers.

3. **What do observers look for?**

    There are multiple indications/opportunities for hand hygiene that hospitals in Maryland may choose to track. However, all hospitals must track and report one common measure which constitutes the "Maryland Hand Hygiene Core Dataset". This measure aims at capturing hand hygiene practices after patient care activities and is defined for purposes of clarity, accuracy, and reliable data collection as "EXIT from a patient environment".

4. **What does the "Standardized Training for Hand Hygiene Observers" course cover and how does it differ from the Maryland Hand hygiene core dataset requirement?**

    A standardized training course for hand hygiene observers was developed at Johns Hopkins and is now available for all Maryland hospitals to use. It is accessible from the Collaborative Web Portal. It trains observers on how to track two measures defined as "Upon Entry" and "Upon Exit" from the patient environment. Though hospitals are encouraged to track hand hygiene compliance during various times it is indicated; before donning gloves, before invasive procedures, after removing gloves, after touching contaminated equipment in the patients immediate environment etc., only one is included in the Maryland hand hygiene core dataset which is upon "Exit from patient environment".

5. **How is a "patient environment" defined?**

In a private room, a patient environment is defined by its walls. In a semi-private room or a multi-patient room the boundaries are defined by the adjacent walls and the "curtain line". Additional details and case scenario demonstrations are available in the "Standardized Training for Hand Hygiene Observers" course.

6. **What happens when an observer sees a provider walking into a room or leaving it without cleaning his/her hands?**

When tracking the "Upon Entry" measure, the observer watches to see whether the provider cleaned their hands before entering the room or used the dispenser inside room. If the provider did not clean their hands at either dispenser, the observer will enter "no HH" for that observation. If, however, the view was not clear and the observer cannot say for sure whether provider cleaned/ disinfected their hands inside room (e.g. provider closed room door after entering), the observer will enter for that observation a "Blocked view/unsure" designation and that observation is cancelled. A similar procedure is followed when providers are observed leaving the room. Additional details and practice scenarios can be viewed in the training course for HH observers

7. **What hand cleaning method should be used?**

Both alcohol based hand rubs or soap and water are appropriate hand cleaning agents.

8. **What if a provider used the dispenser inside a patient's room and not the one at the room door?**

A provider may use the dispenser installed inside the room (usually installed between patient beds) or the one just outside the room door to clean their hands as long as they perform the hand hygiene prior to touching the patient.

9. **What if the area around dispenser is crowded?**

If it is crowded at the dispenser just outside room, or if the dispenser is empty, then the provider may walk to another close dispenser as long as s/he does not touch anything in the interim.

10. **What if a provider just left one room to enter another? Does s/he need to clean hands again?**

No. As long as the provider's hands are still wet with alcohol gel and s/he has not touched anything on their way to the next room, s/he does not need to clean hands again.

11. **What is reported on the HH data graphs?**

HH data is reported as % compliance.

% Compliance = Number of HH episodes/ Total # of observations multiplied by 100

12. **What constitutes as a HH episode?**

In the standardized training course a HH episode is defined as anytime a provider uses alcohol gel or washes their hands with soap and water upon "Entry" or "Exit" from a patient environment. (Individual Maryland hospitals, however, in compliance with the Maryland Hand Hygiene Core Dataset, may choose to track "Exit" episodes only.

The observers do not make judgments on how well a provider cleaned his/her hands; they simply take note if the provider attempted to clean hands. Periodic audits outside this HH monitoring plan, however, do take note of hand cleaning adequacy, all hand hygiene opportunities, and compliance with wearing isolation garb when entering isolation rooms.

13. **What is considered a hand hygiene observation?**

When an observer sees a provider "EXIT" (or "ENTER") a patient's environment, s/he enters that on the data collection form as a hand hygiene observation. If s/he, however, marked "unsure/ blocked view" on the form for HH behavior, then that observation is excluded from all HH compliance calculations (i.e., it is excluded from both the numerator and the denominator).

14. **What if a provider donned gloves upon entry or exit to a room or between patients?**

Glove use does not substitute for HH. Hands must be cleaned after removing gloves when leaving a patient environment; otherwise, it will constitute as a failure to perform HH upon "Exit". Similarly, for tracking upon "Entry" measure, if a provider plans to don gloves before entering the room, s/he must clean hands first; otherwise, it is counted as a failure to perform HH upon "Entry".