



Hand Hygiene Audit Form

USER MANUAL

A screenshot of the software interface for the Hand Hygiene Audit Form. The interface is divided into two main sections: "AUDITOR DATA" and "OPPORTUNITIES / OBSERVATIONS".
AUDITOR DATA
This section contains several input fields:

- Facility: [Dropdown menu]
- Unit: [Dropdown menu]
- Auditor: [Text field containing "apaterson"]
- Date: [Text field with a date picker icon]

OPPORTUNITIES / OBSERVATIONS
This section contains a table with the following columns:

- Health Care Provider Codes
- Hygiene Moment
- Gloves
- Hand Hygiene
- Proper Technique
- Watch / Rings / Nails / Sleeve Length

Below the table, there are several icons for adding and removing audit data entries.

Amy Paterson

5 July 2012



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GUIDELINES FOR HAND HYGIENE AUDIT OBSERVATIONS

1. Introduce yourself to the charge person of the clinical area and explain your role.
 - Ensure that you are wearing your VIHA identification badge or name tag.
2. Determine how to best identify the types of health care providers (HCP) you may be observing.
3. Find a convenient place to observe without disturbing care activities or infringing on patient privacy.
 - You may move to follow the HCP, but never interfere with their work.
4. Record only what you observe.
 - Do not assume and record that hand hygiene was performed unless you observe it.
 - Do not record when a HCP tells you they have performed hand hygiene unless you observe it.
5. Take care if you are observing more than one HCP at one time.
 - You may miss observations which will affect the accuracy of the audit.
 - Be vigilant to observe all aspects of hand hygiene of those staff you are monitoring.
6. The HCP may interact with more than one patient during the time you are observing.
 - Create a new opportunity line for each hand hygiene moment.
 - If the HCP moves between patients and has performed hand hygiene after interacting with the first patient and before working with the next patient, that will be considered **2** opportunities.
 - These **2** opportunities would be recorded as 'after patient or patient environment' **and** 'before patient or patient environment'.
 - The same hand hygiene practice would be recorded for each of the 2 opportunities.
7. Do not document more than 5 observations for each HCP.
8. Complete 15 or 30 observations for each accounting period. The total number of observations depends on the number of beds or interactions in the clinical unit/area.
 - ≤ 24 beds/interactions = 15 observations*
 - > 24 beds/interactions = 30 observations*
9. The total number of observations can be collected over the duration of an accounting period.
10. Provide on-the-spot feedback to the HCP if you are comfortable to do so and the situation is appropriate.
 - Some HCPs may ask for this feedback.
11. Print 2 copies of the Audit Summary Working Report.
 - Give one copy to your manager/leader and another copy to your Infection Control Practitioner.
 - You may wish to print a 3rd copy for your own files, or you could save an electronic copy of the Summary Report.

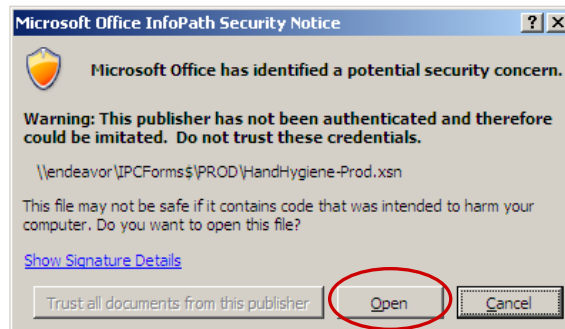
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LOGGING ON TO THE HAND HYGIENE AUDIT FORM

1. Log on to your computer.
2. Locate the **Hand Hygiene Form** icon on the desktop.
3. 'Double-click' on this icon.



4. If the following security notice appears 'click' on the **Open** button.



-
5. If there is **no icon** on your desktop then locate the email that was sent to you that listed the Live Link site for the hand hygiene audit tool.

The Live Link site is [\\endeavor\IPCForms\\$\PROD\HandHygiene-Prod.xsn](\\endeavor\IPCForms$\PROD\HandHygiene-Prod.xsn)

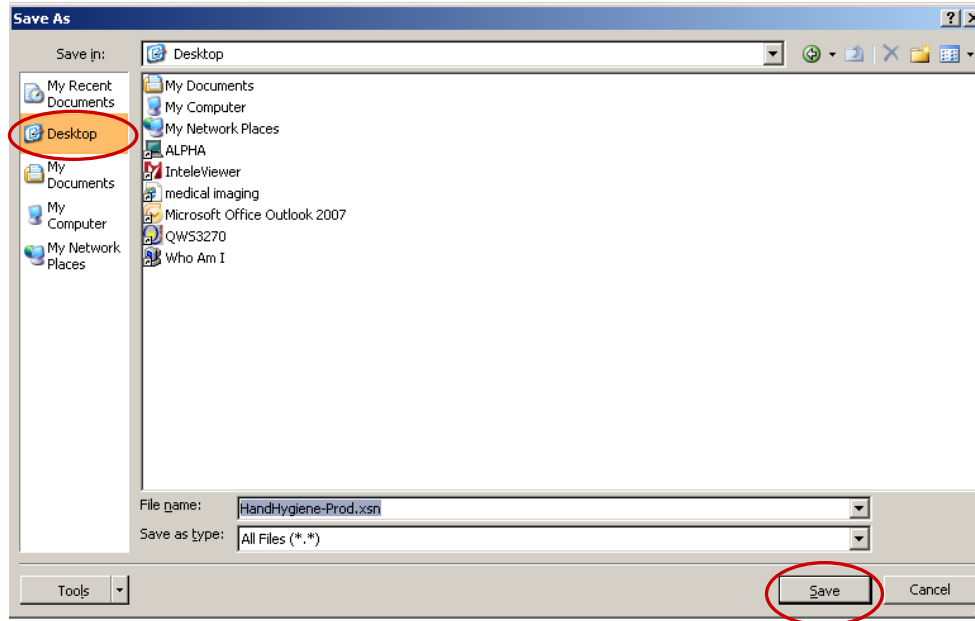
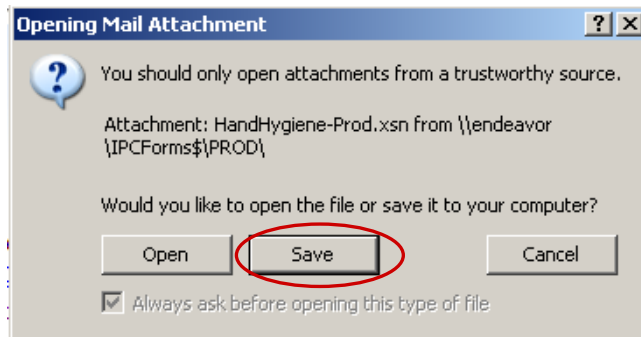
- *You will only be able to enter hand hygiene audit data on this site if you have been registered with Infopath*
- **Save** the Live Link to your Desktop by following the instructions on the next page
- The Desktop is specific to each computer
 - If you use different computers you will need to save the Hand Hygiene audit tool to each computer's Desktop

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How to SAVE the Hand Hygiene Audit Tool Link to Your Computer Desktop:


- 'Click' on the link
- 'Click' **Save**
- 'Double-click' on **Desktop**
- 'Click' **Save**
 - *Do not rename audit link before saving*



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ON-LINE vs OFF-LINE

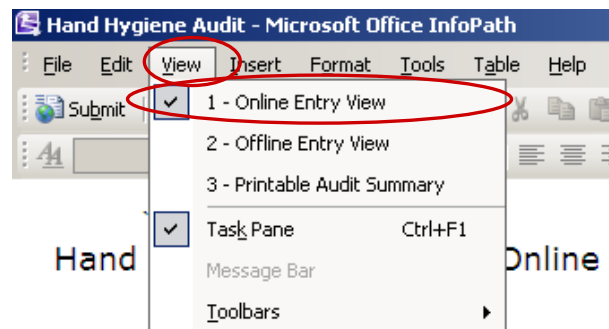
You should use the **Online Entry View** of the Hand Hygiene Audit form when they are connected to the VIHA network.

- Being connected to the network will allow you to submit your audit data automatically to the database for reporting
- To check if you are on-line -
 - 'Click' on  icon
- You are connected to the network when the VIHA Intranet homepage is displayed
- You are **not** connected to the network when you will receive an error message –
 - ***This page cannot be displayed***

Transferring audit data OFF-LINE → ON-LINE

You can complete an audit off-line and then go with your mobile computer to an area where you will be connected to the internet.

- Find location where you can receive a wireless Internet connection or connect your computer to a hard drive
- 'Click' **View** (top left of audit tool)
- 'Click' **1-Online Entry View**



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ON-LINE vs OFF-LINE

- The on-line form is blue. You are connected to the VIHA network

Hand Hygiene Adherence - Online Entry View



- Please fill out all values in the form. Red asterisks and boxed outlines indicate required data fields.

AUDITOR DATA Audit ID Data not yet submitted

Facility: *

Unit: *

Auditor: *

Date: Enter date here in dd-mmm-yyyy format or use control at the right *

OPPORTUNITIES / OBSERVATIONS

Health Care Provider Code	Hygiene Moment	Gloves	Hand Hygiene	Proper Technique†	Watch / Rings / Nails / Sleeve Length‡
<input type="text"/> *	<input type="text"/> *	<input type="text"/> C M C N	<input type="text"/> C M C N	<input type="text"/> C Y C N	<input type="text"/> C Y C N

Add an audit entry row by clicking here or on the "thumb" to the left of this text; delete entries using the "thumb" to the left of the entire row and clicking "Remove Audit Data"

† Indicate whether the hand hygiene method and duration was correct (all surface areas including wrists, thumbs, and tops of hands scrubbed with either hand rub or soap for 15-20 seconds. If hands are visibly soiled then the correct method = wash; if hands are not visibly soiled then the correct method = rub or wash)

‡ If nail length correct, sleeves are above elbows, and NO nail extensions/artificial nails, nail art, rings other than solid bands, or watches worn then select "N"

- The off-line form is gray and you are **not** connected to the VIHA network
- You will **not** be able to submit your results immediately if you are working off-line

Hand Hygiene Adherence - Offline Entry View



- Please fill out all values in the form. Red asterisks and boxed outlines indicate required data fields.
- After each audit is complete, save it as a file to the C:\ drive, Audits folder.
- When you connect to the network, open each of the saved forms and submit them to the database, then delete them from the C:\ drive, Audits folder.

AUDITOR DATA Audit ID Data not yet submitted

Facility: *

Unit: *

Auditor:

Date: Enter date here in dd-mmm-yyyy format or use control at the right *

OPPORTUNITIES / OBSERVATIONS

Health Care Provider Codes	Hygiene Moment	Gloves	Hand Hygiene	Proper Technique†	Watch / Rings / Nails / Sleeve Length‡
<input type="text"/> *	<input type="text"/> *	<input type="text"/> C M C N	<input type="text"/> C M C N	<input type="text"/> C Y C N	<input type="text"/> C Y C N

Add an audit entry row by clicking here or on the "thumb" to the left of this text; delete entries using the "thumb" to the left of the entire row and clicking "Remove Audit Data"

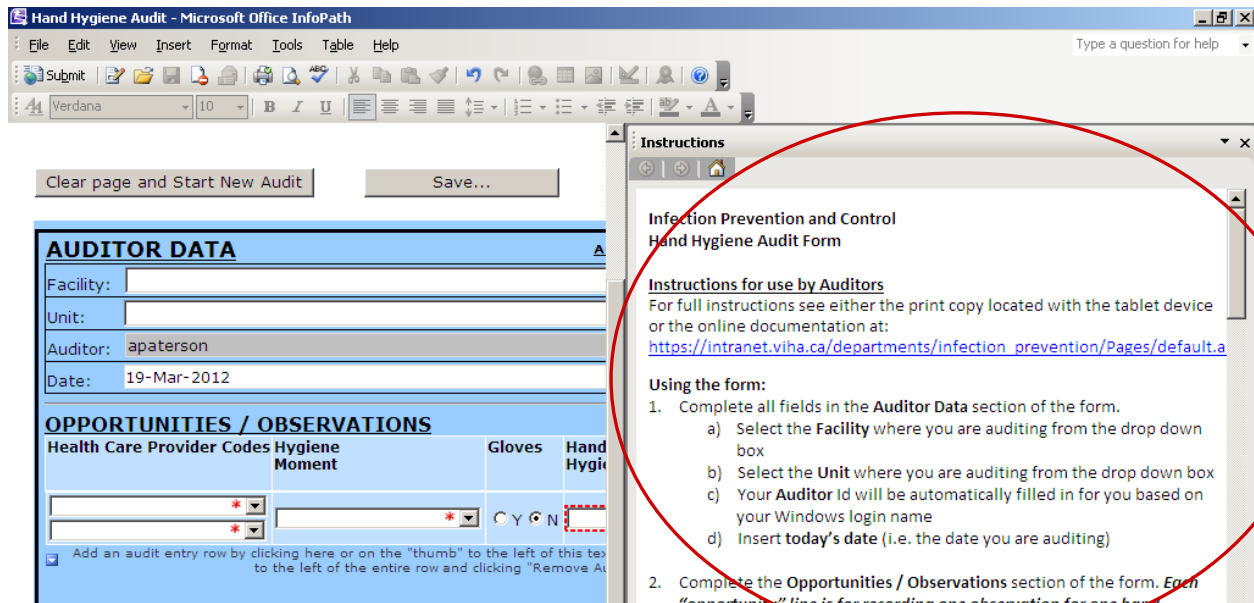
† Indicate whether the hand hygiene method and duration was correct (all surface areas including wrists, thumbs, and tops of hands scrubbed with either hand rub or soap for 15-20 seconds. If hands are visibly soiled then the correct method = wash; if hands are not visibly soiled then the correct method = rub or wash)

COMPLETING THE AUDIT FORM

- **Abbreviated instructions**

Abbreviated instructions are located along side the audit tool.

- To change the size of the 'Instructions' box hold the cursor over the left border of the box, 'click' and drag to increase or decrease the size of the box



Auditor Data

- Complete all fields in the **Auditor Data** section of the form.

- **Location: Facility and Unit**

1. 'Click' on the **Facility** drop down box. Select and 'click' the facility you are auditing.

AUDITOR DATA Audit ID: Data not yet submitted

Facility: []

Unit: []

Auditor: apaterson

Date: Enter date here in dd-mmm-yyyy format or use control at the right

Clear page

Ladysmith Hospital (LADYSMITH)
 Mental Health & Addictions Service CI - Community Care (MHASCC-CI)
 Mental Health & Addictions Services - Acute Care (MHASAC)
Nanaimo Regional General Hospital - Acute Care (NRGAC)
 Nanaimo Regional General Hospital - Mental Health (NRGMH)
 Port Alice Hospital (PAH)
 Port Hardy Hospital (PHHAC)
 Port McNeill District Hospital - Acute Care (PMHAC)
 Rainbow Gardens (RAINBOW)
 Royal Jubilee - Acute Care (RJHAC)
 Royal Jubilee - Geriatric Psychiatry (RJHGP)
 Royal Jubilee - Mental Health (RJHMH)
 Auditor: Royal Jubilee - Residential Care (RJHRC)
 Date: Saanich Peninsula - Acute Care (SPHAC)
 Saanich Peninsula - Residential Care (SPHRC)
 Seniors Health CI (Seniors-CI)

AUDIT

Facility: [dropdown]
 Unit: [dropdown]
 Auditor: [dropdown]
 Date: [dropdown]

OPPORTUNITIES / OBSERVATIONS

Health Care Provider Codes	Hygiene Moment	Gloves	Hand Hygiene	Proper Technique†	Watch / Rings / Nails / Sleeve Length‡
[dropdown]	[dropdown]	[dropdown]	[dropdown]	[dropdown]	[dropdown]

Add an audit entry row by clicking here or on the "thumb" to the left of this text; delete entries using the "thumb" to the left of the entire row and clicking "Remove Audit Data"

2. 'Click' on the **Unit** drop down box. Select and 'click' the unit of that facility you are auditing.

Ensure that the Facility and Unit you have selected accurately correspond with the actual location where you are performing the audit.

AUDITOR DATA Audit ID: Data not yet submitted

Facility: [dropdown]

Unit: [dropdown]

Auditor: apaterson

Date: Enter date here in dd-mmm-yyyy format or use control at the right [calendar icon]

1. Please

Clear page

NRG - Floor 6E - Surgical (6E-N)
 NRG - Floor 6W - Medical (6W-N)
 Amniocentesis Clinic (AMNI-N)
 Anaesthetic Clinic (ANAE-N)
 Cast Clinic (CAST-N)
 Chemo Clinic (CHEM-N)
 NRG - Colposcopy Clinic (COLP-N)
 Cardiac Rehab Program (CRP-N)
 C-Section Preop Visit (CSPV-N)
 Diabetes Education Clinic (DEC-N)
 Ambulatory Dialysis Services-Nanaimo (DIALYSIS-N)
 Electrodiagnostic Services (EDS-NRG)
 NRG - Endoscopy (ENDO-N)
 ENT Clinic (ENT-N)
 NRG - Emergency (ER-NRG)
 Fluorescein Clinic (FLUOR-N)
 Home Dialysis PD-Nanaimo (HDPD-N)
 Auditor: NRG - Intensive Care Unit (ICU-N)
 Date: NRG - Inpatient (SDC) Unit (IPOCB-N)
 Joint Replacement Clinic (JRC-N)
 NRG-Lab Outpatient (Lab-NRG)

AUDIT

Facility: [dropdown]
 Unit: [dropdown]
 Auditor: [dropdown]
 Date: [dropdown]

OPPORTUNITIES / OBSERVATIONS

Health Care Provider Codes	Hygiene Moment	Gloves	Hand Hygiene	Proper Technique†	Watch / Rings / Nails / Sleeve Length‡
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- **Name and Date**

3. **Auditor Name** is your Windows login name and is automatically entered on the audit form.
4. Insert **Date** by 'Clicking' on calendar. Select the **Today** button or the date that audit was done.

AUDITOR DATA Audit ID Data not yet submitted

Facility: *

Unit: *

Auditor: apaterson

Date: Enter date here in dd-mmm-yyyy format or use control at the right *

OPPORTUNITIES / OBSERVATIONS

Health Care Provider Codes	Hygiene Moment	Gloves	Hand Hygiene	Proper Technique	Watch / Rings / Nails / Sleeve Length
<input type="text"/> *	<input type="text"/> *	<input type="text"/> MON	<input type="text"/>	<input type="text"/> Y N	<input type="text"/> Y N
<input type="text"/> *	<input type="text"/> *	<input type="text"/> MON	<input type="text"/>	<input type="text"/> Y N	<input type="text"/> Y N
<input type="text"/> *	<input type="text"/> *	<input type="text"/> MON	<input type="text"/>	<input type="text"/> Y N	<input type="text"/> Y N

Add an audit entry row by clicking here or on the "thumb" to the left of this text; delete entries using the "thumb" to the left of the entire row and clicking "Remove Audit Data"

Calendar: March, 2012
 S M T W T F S
 26 27 28 29 1 2 3 /
 4 5 6 7 8 9 10
 11 12 13 14 15 16 17
 18 19 20 21 22 23 24
 25 26 27 28 29 30 31
 1 2 3 4 5 6 7
 Today

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Opportunities/Observations

- Complete all fields in the **Opportunities / Observations** section of the form.
- Each "opportunity" line is for recording one observation for one hand hygiene opportunity.
- Each field or section must have an entry selected.

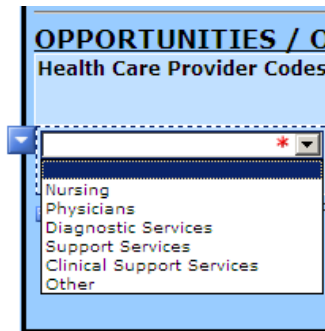
OPPORTUNITIES / OBSERVATIONS

Health Care Provider Codes	Hygiene Moment	Gloves	Hand Hygiene	Proper Technique	Watch / Rings / Nails / Sleeve Length
<input type="text"/> *	<input type="text"/> *	<input type="text"/> MON	<input type="text"/>	<input type="text"/> Y N	<input type="text"/> Y N
<input type="text"/> *	<input type="text"/> *	<input type="text"/> MON	<input type="text"/>	<input type="text"/> Y N	<input type="text"/> Y N
<input type="text"/> *	<input type="text"/> *	<input type="text"/> MON	<input type="text"/>	<input type="text"/> Y N	<input type="text"/> Y N

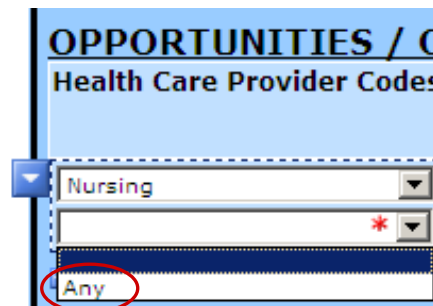
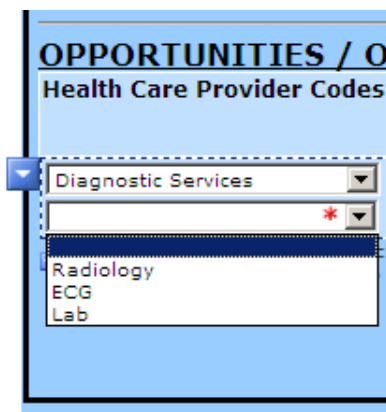
Add an audit entry row by clicking here or on the "thumb" to the left of this text; delete entries using the "thumb" to the left of the entire row and clicking "Remove Audit Data"

- **Health Care Provider**

1. 'Click' on the **Health Care Provider (HCP)** drop-down box.
'Click' on the category of **HCP** you are observing.



2. 'Click' on the specific discipline listed in the second drop down box of the HCP.
 - Select '**Any**' if there is no specific discipline listed for that HCP i.e. Nursing and Physicians

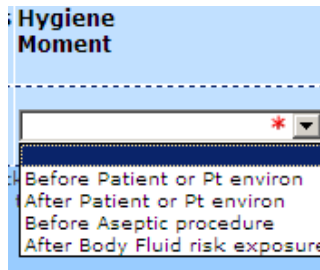


Nursing – (Any) RN, RPN, LPN, Nursing Student, ESN, Care Aide
Physicians – (Any) MD, Resident, Med Student
Support Services – Housekeeping, Porter, Security, Food Services, Unit Clerk
Clinical Support Services – Dietician, Occupational Therapist, Physiotherapist, Social Worker, Pharmacist, Pastoral Care, Respiratory Therapist, Speech Therapist, Psychologist, Child Life Worker
Diagnostic Services – Radiology, ECG, Laboratory
Other – Volunteer, Midwife, Paid Companion or Other type of HCP not listed above

- **Hygiene Moment**

3. 'Click' on the **Hygiene Moment** drop-down box.

'Click' on the hygiene moment that applies to the particular situation you are observing.



Before Patient or Pt environ: the health care provider -

- touches the patient's environment and then touches the patient
- goes directly to touch the patient after having touched the hospital environment (any other surface not in the patient's environment) or another patient's environment
- enters the patient's environment from the hospital environment and touches only the patient's environment (does not touch patient) and then leaves the patient's environment

After Patient Pt environ: the health care provider -

- leaves the patient and their environment and goes on to work in the hospital environment or with another patient
- leaves the patient area after touching objects in the patient environment (without touching the patient) and goes on to work in the hospital environment or with another patient

Before aseptic procedure: the health care provider –

- performs any of the following after having touched any other surface including the patient and their environment:
 - touch/manipulate a body site that should be protected against any colonization (e.g., wound care)
 - manipulate an invasive device that could result in colonization of a body area that should be protected against colonization (e.g., procedures involving an IV)
 - any procedure that is deemed to require an aseptic procedure

After body fluid exposure risk: the health care provider –

- has engaged in a care activity involving a risk of body fluid exposure and before touching any other surface including the patient their environment

See [Appendix A](#) for examples of each of the hand hygiene moments.

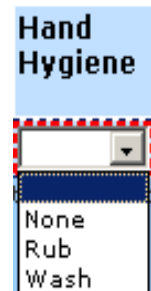
- **Gloves**

4. Indicate if **Gloves** were worn. ‘Click’:
- **Y** (Yes) if gloves were worn at any time during that hygiene moment
 - **N** (No) if gloves were **not** worn



- **Hand Hygiene Type**

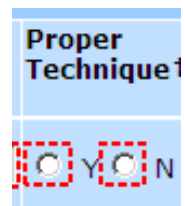
5. **Hand Hygiene Type.** ‘Click’ on the drop-down box for **Hand Hygiene** and select the type of hand hygiene used.
- **None** indicates that hand hygiene was **not** performed
 - **Wash** indicates the use of soap and water
 - **Rub** indicates the use of alcohol-based hand rub



- **Proper Technique**

6. Indicate if **Proper Technique** was performed during hand hygiene. ‘Click’:
- **Y** (Yes) if proper technique was used
 - **N** (No) if proper technique was **not** used

See [Appendix B](#) for description of proper technique.



- **Watches/Rings/Nails/Sleeve Length**

7. For **Watch / Rings / Nails / Sleeve Length** ‘click’:
- **Y** (Yes) if the HCP:
 - is wearing a wrist watch or ring (other than a solid band ring) **or**
 - has long nails or is wearing nail extensions, artificial nails or nail art **or**
 - has sleeves that are not above the elbows
 - **N** (No) if the HCP:
 - is **not** wearing a wrist watch or ring (other than a solid band ring) **and**
 - has short nails or is **not** wearing nail extensions, artificial nails or nail art **and**
 - has sleeves above the elbows

All of these criteria must be satisfied in order to indicate No.



Add Opportunity/Observation Lines

- Add lines by 'clicking' on the text below your last opportunity line.

Health Care Provider Codes	Hygiene Moment	Gloves	Hand Hygiene	Proper Technique†	Watch / Rings / Nails / Sleeve Length‡
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Add an audit entry row by clicking here or on the "thumb" to the left of this text; delete entries using the "thumb" to the left of the entire row and clicking "Remove Audit Data"

Delete Opportunity/Observation Lines

- Delete lines by 'clicking' on the ▼.
- 'Click' on the **Remove Audit Data** option. This will delete the opportunity line that you have selected.

Note: *This data cannot be restored once it has been deleted.*

OPPORTUNITIES / OBSERVATIONS

Health Care Provider Codes Hygiene Moment

Insert Audit Data before

Insert Audit Data after Ctrl+Enter

Remove Audit Data

Cut Ctrl+X

Copy Ctrl+C

Paste Ctrl+V

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CLEARING AUDIT DATA

- To *clear* all the information that you have entered into the form and start your audit again, 'click' on the **Clear page and Start New Audit** button on the top left corner of the form
- **Note:** *All Information will be lost and cannot be restored once you clear the page.*

Hand Hygiene Adherence - Online Entry View



1. Please fill out all values in the form. Red asterisks and boxed outlines indicate required data fields.

Clear page and Start New Audit

Save...

Submit this Audit for Reporting

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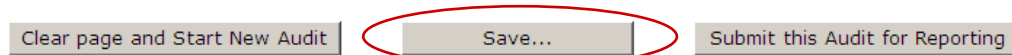
SAVING AUDIT DATA

- If at any point you would like to *save* all of the information that you have entered into the audit form, 'Click' on the **Save...** button at the top middle of the form.
- **Note:** *Saving audit information does not submit the data to the database*

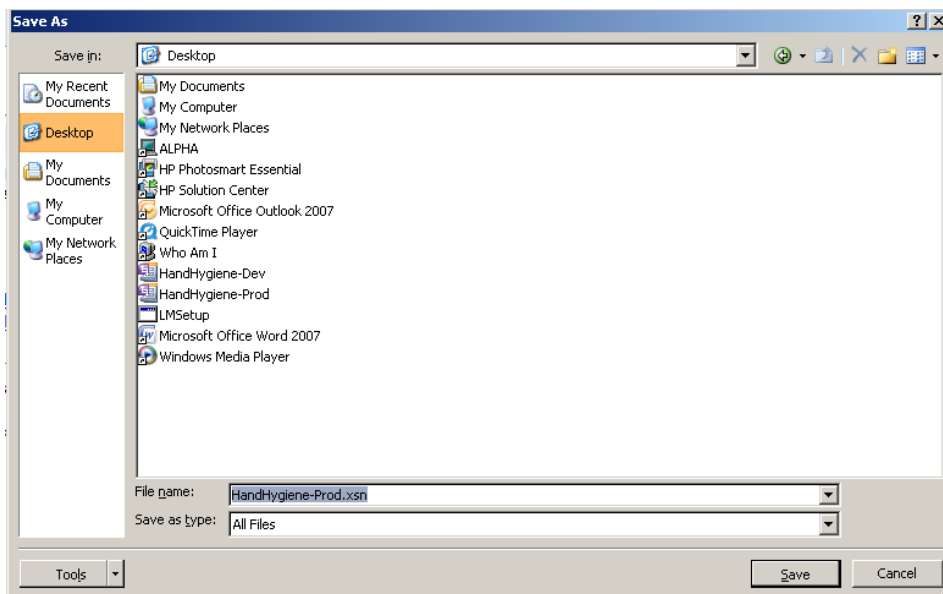
Hand Hygiene Adherence - Online Entry View



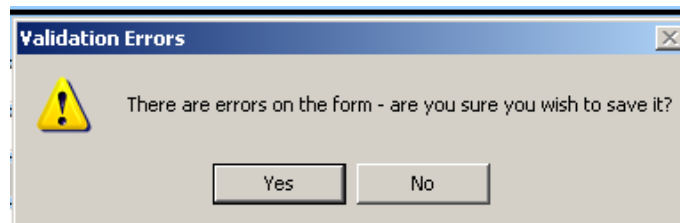
1. Please fill out all values in the form. Red asterisks and boxed outlines indicate required data fields.



- If all fields in the form were complete at the time you 'clicked' **Save** the following window will appear
- You can save this form to [My Documents](#) or the [C:\ drive](#)



If there are any incomplete fields in the form, the following message will appear:

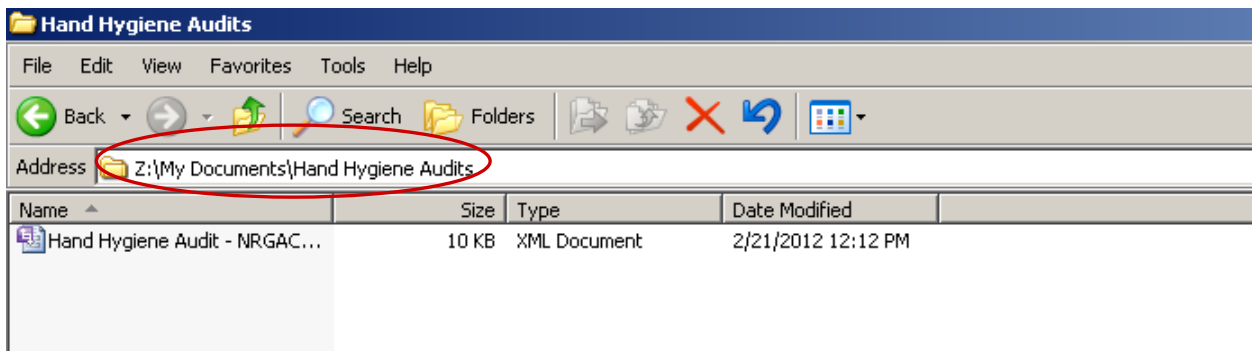
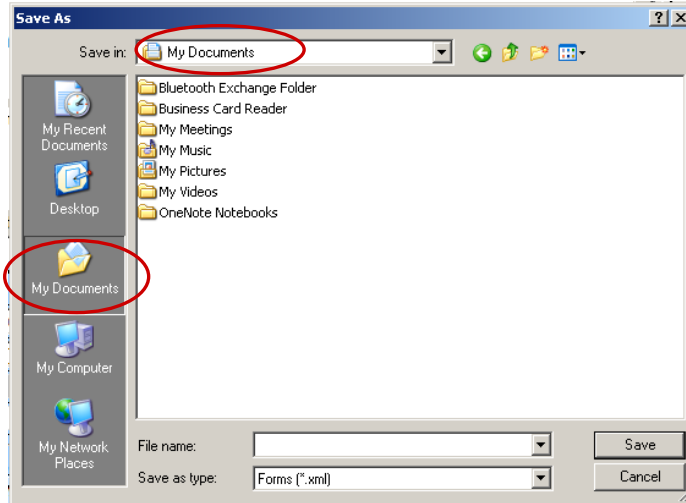


The errors on the form are due to incomplete fields and will be identified by a **red asterisk*** or are outlined in a **red dashed box** on the audit form.

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How to save to 'My Documents'

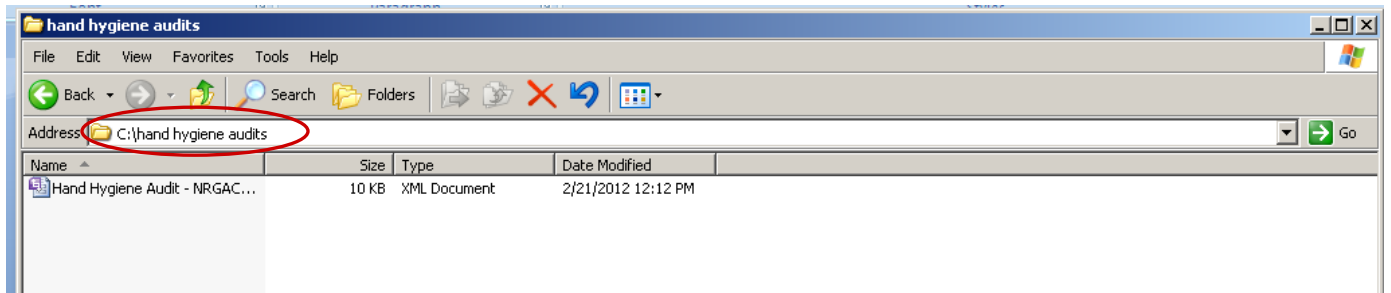
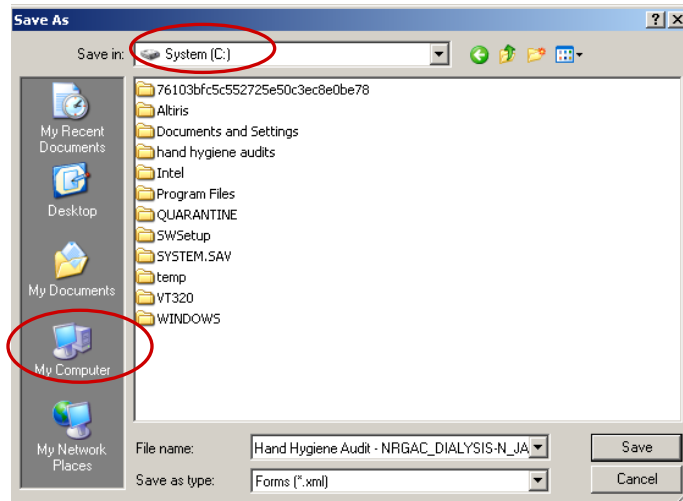
- 'Click' on **My Documents** either in the main white window or the icon pane to left of this window
- For ease of finding your audit information at another time create a folder in **My Documents** that is titled *Hand Hygiene Audits*



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How to save to C-Drive - System (C:)

- 'Click' on **My Computer** icon in the navigation pane on the left.
- 'Click' on **System (C:)**
- For ease of finding your audit information at another time create a folder in System (C:) titled *Hand Hygiene Audits*

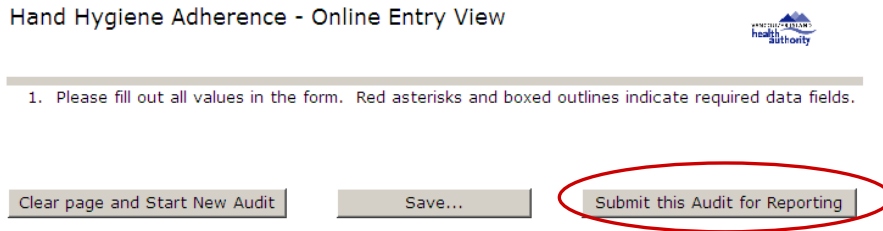


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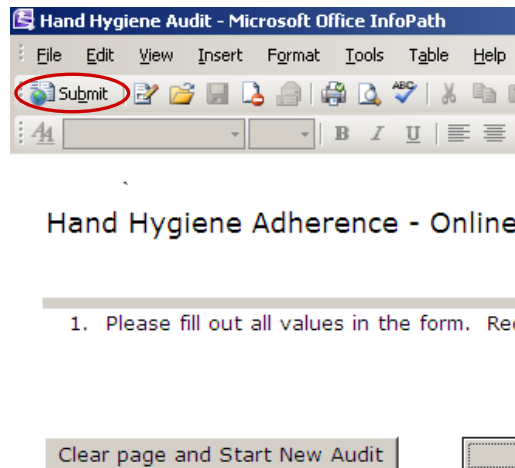
Submitting Audit Data

There are 2 ways to submit your audit data:

1. 'Click' the **Submit this Audit for Reporting** button on the top right corner of the form.

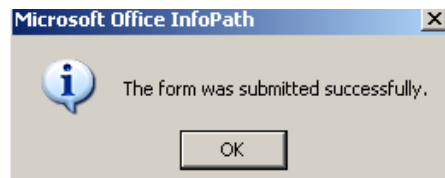


2. 'Click' on the **Submit** button in the menu bar.



If there are no validation errors in the report (i.e. all data fields are complete), then a message indicating that the form was submitted successfully will appear.

'Click' **OK**.



What do if you are unable to submit your audit:

Note: If there are any incomplete fields in the form, an error message will appear stating that the form cannot be submitted due to validation errors.

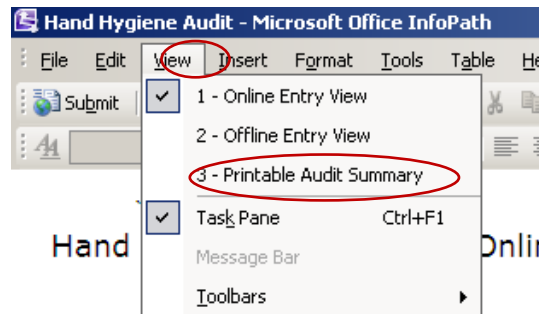


If this message appears, click **OK** and complete all fields that have a **red asterisks*** beside them or are outlined in a **red dashed box** and then try to resubmit.

PRINTING THE AUDIT SUMMARY REPORT

Once you have submitted your audit data *print* copies of the audit summary report for **your manager/leader and Infection Control Practitioner**.

1. 'Click' **View** from the menu bar at the top of the screen.
2. 'Click' **3 – Printable Audit Summary**.



- The data within this view will show a summary of the audit that you have just completed and submitted

HAND HYGIENE OBSERVATIONS

Working Report

Facility:		*
Unit:		*
Date:		*
Auditor Name:		*

Do NOT
DISTRIBUTE or POST



The following working report represents a brief summary of the current observations and is intended to assist the auditor in reporting their findings to the leaders/managers.

NOTE: The following results only indicate what was observed on this date - *generalities should not be made based on these findings*. Summary reports by accounting period are available via IDEAS.

SUMMARY OF ALL OBSERVATIONS		# of Observations	# Compliant Observations	# Non-Compliant Observations	Compliant Observations as % of Total
Provider Group	Clinical Support Services: (e.g. OT, PT, SW, Pharmacist, Pastoral Care, Respiratory Therapist, Speech Therapist, Psychologist, Child Life Worker)	0	0	0	0
	Diagnostic Services: (e.g. Radiology, ECG, Lab)	0	0	0	0
	Nurse: (e.g. RN, RPN, LPN, Student, ESN, Care Aide)	0	0	0	0
	Other: (e.g. Volunteers, Paid Companions)	0	0	0	0
	Physicians: (e.g. DR, Resident, Med Student)	0	0	0	0
	Support Services: (e.g. Housekeeping, Porter, Security, Food Services, Unit Clerk)	0	0	0	0

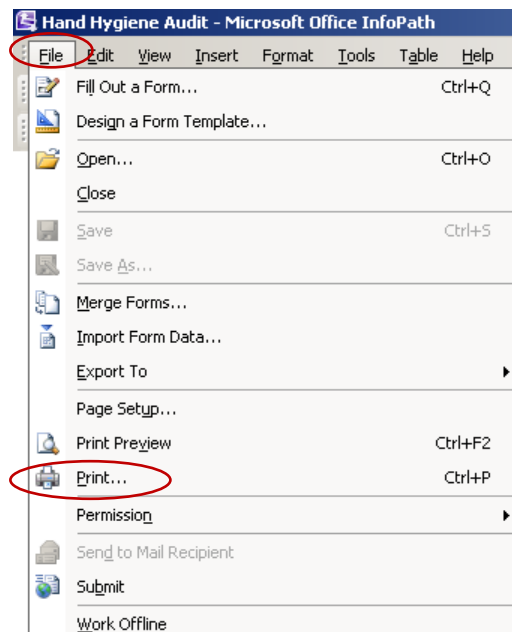
SUMMARY OF FAILED OBSERVATIONS		Gloves Worn AND Hand Hygiene Not Done OR Not Done Properly	Hand Hygiene Not Done	Hand Hygiene Not Done Properly	Watch / Rings / Acrylic / Gel Nails / Nail Art Worn OR Sleeves / Nail Length too long
Provider Group	Clinical Support Services:	0	0	0	0
	Diagnostic Services:	0	0	0	0
	Nurse:	0	0	0	0
	Other:	0	0	0	0
	Physicians:	0	0	0	0
	Support Services:	0	0	0	0

- At the bottom of the Hand Hygiene Summary Report is a section for ‘**Comments**’
- More specific information about the audit (e.g. specific steps missed during the hand hygiene procedure, or type of hand jewelry worn i.e. ring or bracelet) can either be typed in this ‘Comments’ section or written by hand once the Summary Report is printed
- This information does not enter the database but may be helpful in follow-up.

SUMMARY OF FAILED OBSERVATIONS		Gloves Worn AND Hand Hygiene Not Done OR Not Done Properly	Hand Hygiene Not Done	Hand Hygiene Not Done Properly	Watch/Rings/Acrylic/Gel Nails/Nail Art Worn OR Sleeves/Nail Length too long
Provider Group	Clinical Support Services:	0	0	0	0
	Diagnostic Services:	0	0	0	0
	Nurse:	0	0	0	0
	Other:	0	0	0	0
	Physicians:	0	1	0	0
	Support Services:	0	0	0	0

Comments:

3. ‘Click’ **File**
‘Click’ **Print** to print this report summary.

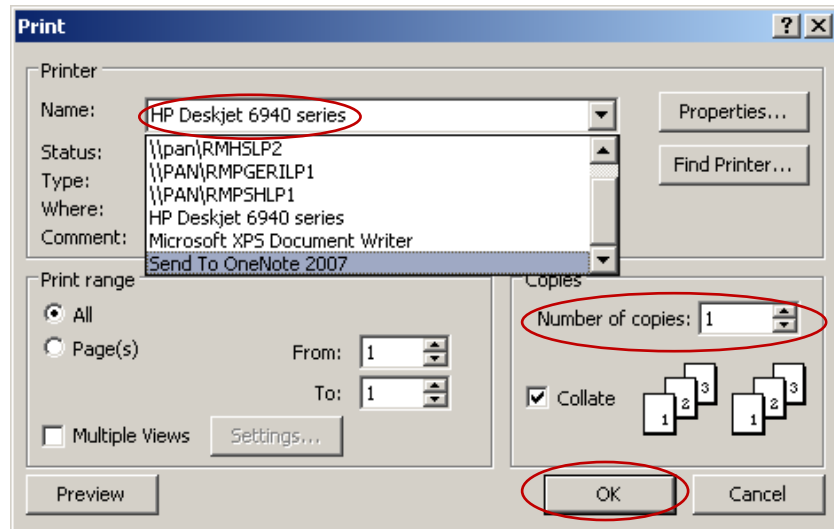


4. The following screen will display.

Check to ensure that the printer in the **Name** field accurately corresponds with the printer that you wish to print to (the name of the printer can be found on the front of the printer).

Click on ▲ of the **Number of copies:** drop down box to print more than 1 copy of the report.

Click **OK** if this printer name *does* correspond with the printer that you wish to print to.



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- **How to add an additional printer:**

If the printer in the **Name** field *does not* correspond with the printer that you wish to print to:

- Click on the ▼ at the end of the **Name:** drop down box.
 - A list of printer options will display.
- Locate the printer that is in your clinical area that you wish to print your summary report to.
 - If the name of the printer you would like to print to is not in this list, please go to the IM/IT (Information Management/Information Technology) link on the VIHA website.
 - Click 'On-Line Help'
 - Click 'Printing'

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4 Moments Summary

1	BEFORE PATIENT CONTACT	<p>When? - When approaching - clean your hands before touching</p> <ul style="list-style-type: none"> ✓ a patient ✓ any equipment, furniture or surface in their bed space <p>Why? - To protect the patient against harmful germs carried on your hands</p>
Examples		
<ul style="list-style-type: none"> - Before courtesy / comfort gestures: greeting a patient by shaking their hand or comforting them by touching their arm or shoulder - Before direct patient assistance with: dressing or undressing, personal hygiene, skin care, transfer to - or from - a chair or commode - Before clinical examination: taking a patient's pulse or blood pressure, chest auscultation, abdominal palpation - Before IV pump adjustment, silencing monitoring alarms, replenishing supplies, sitting at bedside 		
2	BEFORE AN ASEPTIC TASK	<p>When? - Clean your hands immediately before any aseptic task (and before donning gloves)</p> <p>Why? - To protect the patient against harmful germs, including the patient's own germs, entering his or her body</p>
Examples		
<ul style="list-style-type: none"> - Before contact with mucous membranes: oral/dental care, giving eye drops, suctioning respiratory secretion - Before contact with non-intact skin: skin lesions, wound care, any type of injection - Before contact with medical devices: catheter insertion, opening a vascular access system or drainage system - Before preparation of: medications, dressing sets, enteral feeds 		
3	AFTER BODY FLUID EXPOSURE RISK	<p>When? - Clean your hands immediately after an exposure risk to body fluids (and after glove removal)</p> <p>Why? - To protect yourself and the health-care environment from harmful patient germs</p>
Examples		
<ul style="list-style-type: none"> - After contact with mucous membranes and with non-intact skin: as detailed above in 2 - BEFORE AN ASEPTIC TASK - After contact with medical devices or clinical samples: drawing and manipulating any fluid sample, opening a drainage system, endotracheal tube insertion and removal - After cleaning up of: urine, faeces, vomit or other body fluids - After handling waste: (bandages, sanitary napkins, incontinence pads), cleaning of contaminated and visibly-soiled areas or equipment (commodes, bedpans and urinals, K-basins, medical instruments, patient 's bed, chair, over-bed or bedside table) 		
4	AFTER PATIENT CONTACT	<p>When? - When leaving – clean your hands after touching</p> <ul style="list-style-type: none"> ✓ a patient ✓ any equipment, furniture or surface in their bed space <p>Why? - To protect yourself and the health-care environment from harmful patient germs</p>
Examples		
<ul style="list-style-type: none"> - After courtesy and comfort gestures: touching or holding a patient's hand - After directly assisting with: personal hygiene, ambulation or repositioning, transferring to - or from - a stretcher or wheelchair - After clinical assessment: examining limbs or dressing sites, adjusting bed cloths and patient garments to assess signs & symptoms - After contact with a bed rail, changing bed linen, touching or moving patient care equipment / furniture, sitting in the bedspace 		

Adapted from WHO "Your 5 Moments for Hand Hygiene" 2008

Your 4 Moments for Hand Hygiene

A COMPONENT OF ROUTINE PRACTICES

THE ROUTINE PRACTICES PROJECT

A Quality Improvement Initiative of Capital Health Infection Control Department

In Collaboration with "STOP clean your hands" Canada's National Hand Hygiene Campaign

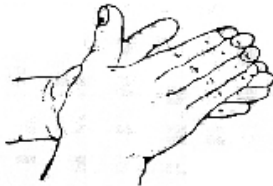


APPENDIX B

- Hand Hygiene Techniques

7 STEPS TO EFFECTIVE HAND WASHING

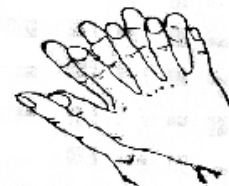
“Wet hands under running water and apply soap . .



1. Palm to palm



2. Right palm over left dorsum
and left palm over right dorsum



3. Palm to palm
fingers interlaced



4. Backs of fingers to
opposing palms with
fingers interlocked



5. Rotational rubbing of
right thumb clasped in left
palm and vice versa



6. Rotational rubbing,
backwards and forwards
with clasped fingers of
right hand in left palm and
vice versa



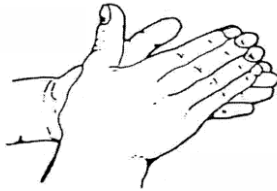
7. Rotational rubbing of left wrist
with right palm and vice versa

.. rinse hands under running water and dry with disposable towel; turn off taps with towel and discard into garbage bin”

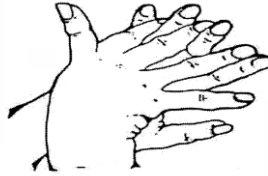
Health Care Workers should be aware that hand decontamination is not as effective if rings, wrist watches, nail polish or false nails (including gel/acrylic nails) are worn and therefore these are NOT PERMITTED within the clinical area.



7 STEPS TO APPLY ALCOHOL HAND RUB



1. Palm to palm



2. Right palm over left dorsum and left palm over right dorsum



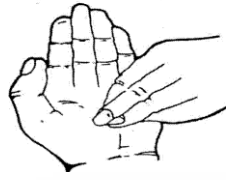
3. Palm to palm fingers interlaced



4. Backs of fingers to opposing palms with fingers interlocked



5. Rotational rubbing of right thumb clasped in left palm and vice versa



6. Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa



7. Rotational rubbing of left wrist with right palm and vice versa

Health Care Workers should be aware that hand decontamination is not as effective if rings, wrist watches, nail polish or false nails (including gel/acrylic nails) are worn and therefore these are NOT PERMITTED within the clinical area.



APPENDIX C

- “Wash Your Hands” in 24 Languages

እጅዎን ይታጠቡ
Amharic

Ntxuav koj txhais tes
Hmong

اغسل يديك
Arabic

Lávese las manos
Spanish

လက်တွေဆေးပါ။
Burmese

Nawa Mikono
Swahili

Hugasan ang iyong mga kamay
Tagalog

Bitte Hände waschen
German

Помойте Ваши Руки
Russian

ត្រូវលាងដៃរបស់អ្នក ។
Khmer

अपने हाथ धोएं।
Hindi

손을 씻으십시오
Korean

ล้างมือของคุณ
Laotian

請洗手
Chinese

हात धुनुहोस्
Nepali

Maydh gacmahaaga
Somali

English

သုနုတဖၣ်တက့ၢ်.
KaRen

gi zii bii gi nin jiin
Ojibwe

לָבֵשׁ לְיָדַי
Hebrew

Lavez-vous les mains
French

xin rửa tay
Vietnamese

ล้างมือให้สะอาด
Thai

洗手
Chinese (Mandarin)

MINNESOTA MDH
DEPARTMENT OF HEALTH
Minnesota Department of Health
625 N Robert Street
St. Paul, MN 55155
www.health.state.mn.us

Revised 1/2010
Wash Your Hands in 24 languages