Outlined below are some suggested standardized interventions for when hand hygiene (HH) compliance rates are lower than expected. Where compliance is in a lower range, consider recommended interventions in higher compliance ranges IN ADDITION TO those outlined for your specific category. Upon receiving the first monthly report of the quarter (i.e., January, April, July, October), review the report results and select a Moment to focus on with 2 interventions from the options provided. For the remainder of the quarter, continue to work on the interventions selected.

Hand Hygiene Moment	Interventions if HH Compliance is between 70 – 99%	Interventions if HH Compliance is between 45 – 69%		Interventions if HH Compliance is 44% or lower
Moment 1: Before initial patient/resident/client (PRC) or PRC environment contact	Consider pocket bottles of alcohol-based hand rub (ABHR) Consider incentive program Leadership rounds and acknowledging compliance	Discuss Moment 1 breaches: e.g., If a h the PRC, this is a missed Moment 1. Thi healthcare zone, except touching a clear (wrha.mb.ca) for listed examples of eac but noted in the setting. When is a Moment 1 required? Moment Before touching a patient	arning Management System (LMS) in the past 2 years ealthcare worker performs hand hygiene and then touches anything before touching is includes touching a part of themselves other than their hands, or any items in the an, sterile, or patient-dedicated equipment. See <u>4Moments-Examples.pdf</u> th moment. Specific examples can also be added that might not be listed in the form, Examples Shaking hands, assisting a patient to move, allied health interventions, touching any medical device connected to the patient (e.g. intravenous line pump, urinary catheter) Bathing, dressing, brushing hair, putting on personal aids such as glasses Taking a pulse, blood pressure, oxygen saturation, temperature, chest auscultation, abdominal palpation, applying ECG electrodes, cardiotocography Apply oxygen mask or nasal cannula, fitting slings/braces, application or incontinence aids (including condom drainage), conducting an oral examination without using a sharp instrument (such as using a mirror probe), performing oral X-ray Oral medications, nebulized medications Feeding a patient (excluding feeding via nasogastric tube or percutaneous	Leadership rounds and role-modeling Encourage staff to voice HH concerns and report safety issues and observations Focus on HH in huddles Identify unit/area-specific hand hygiene champion Education re: patient/resident/client environment and healthcare environment Assess environment to ensure appropriate placement of HH dispensers and sinks Visual cues (e.g., posters) posted and in key locations? Identify 1 or 2 key moments when staff can increase their HH and focus education, visual cues, and availability of HH Ask staff for their suggestions as to what would be helpful in reminding them about Moment 1, e.g., e.g. before taking a BP so
		feeding	endoscopic gastrostomy), brushing teeth or dentures	could put a HH notice on the machine



Hand Hygiene Standardized Interventions

Hand Hygiene Moment	Interventions if HH Compliance is between 70 – 99%	Interventions if HH Compliance is between 45 – 69%		Interventions if HH Compliance is 44% or lower
Moment 2: Before aseptic or clean procedure	– 99% Consider pocket bottles of alcohol-based hand rub (ABHR) Consider incentive program Leadership rounds and acknowledging compliance	Ensure staff have completed the HH Learning Man Discuss Moment 2 breaches. See <u>4Moments-Exam</u> examples can also be added that might not be lister When is a Moment 2 required? Moment Before inserting a needle into a patient's skin or into an invasive medical device connected to the patient Before administration of any medications given via an invasive medical device Before the preparation of an aseptic field Before the administration of medications where there is direct or potentially direct contact with mucous membranes Before the insertion of, or contact with, an invasive medical device	nples.pdf (wrha.mb.ca) for listed examples of each moment. Specific	Leadership rounds and role-modeling Encourage staff to voice HH concerns and report safety issues and observations Focus on HH in huddles Identify unit/area-specific hand hygiene champion Education re: patient/resident/ client environment and healthcare environment Assess environment to ensure appropriate placement of HH dispensers and sinks Visual cues (e.g., posters) posted and in key locations? Ask staff for their suggestions as to what would be helpful in reminding them about Moment 2
		Before preparation and administration of any medications or materials for any oral health/dental procedures	Administering topical medication such as fluoride, topical anaestheric, local anesthetic or tooth mousse or restrative materials used for restoration procedure.	



Hand Hygiene Standardized Interventions

Hand Hygiene Moment	Interventions if HH Compliance is between 70 – 99%	Interventions if HH Compliance is between 45 – 69%		Interventions if HH Compliance is 44% or lower
Moment 3: After body fluid exposure risk	Consider pocket bottles of alcohol-based hand rub (ABHR) Consider incentive program Leadership rounds and acknowledging compliance	Ensure staff have completed the HH LMS in the past 2 years Discuss Moment 3 breaches: e.g., After a procedure or body fluid exposure risk, nothing should be touched before the removal of gloves and the performance of hand hygiene. Touching the outside of a drain or drainage bag, even when the circuit is closed and not broken, is a body fluid exposure risk. See <u>4Moments-Examples.pdf (wrha.mb.ca)</u> for listed examples of each moment. Specific examples can also be added that might not be listed in the form, but noted in the setting. When is Moment 3 required? Moment Examples		Leadership rounds and role-modeling Encourage staff to voice HH concerns and report safety issues and observations
		After performing a procedure	 After insertion of a needle into a patients' skin or an invasive medical device After administration of any medications given via an invasive medical device, preparation of a sterile field After administration of medications where there is direct contact with mucous membranes After insertion of, or disruption to, the circuit of an invasive medical device After any assessment, treatment, or patient care where contact is made with non-intact skin or mucous membranes or there is likelihood of penetration of tissue or cavity After preparation and administration of any medications or materials for any oral health/dental procedure 	Focus on HH in huddles Identify unit/area-specific <u>hand hygiene</u> <u>champion</u> Education re: patient/resident/client environment and healthcare environment Assess environment to ensure appropriate placement of HH dispensers and sinks
		After a potential body fluid exposure	 Contact with a used urinary bottle/bedpan Contact with sputum either directly or indirectly via a cup or tissue Contact with used specimen jars/pathology samples Cleaning dentures Cleaning spills of body fluids from patient surroundings After touching the outside of a wound or chest drain or oral suction tubing Contact with a used dental instrument or appliances After touching surfaces that potentially contaminated with body fluid 	Visual cues (e.g., posters) posted and in key locations? Ask staff for their suggestions as to what would be helpful in reminding them about Moment 3
			nit on the floor inside a single patient room, removes gloves and performs hand d table, and then performs hand hygiene before leaving the room. These hand hygiene prrect Moment 3.	



Hand Hygiene Standardized Interventions

Hand Hygiene Moment	Interventions if HH Compliance is between 70 – 99%	Interventions if HH Compliance is between 45 – 69%	Interventions if HH Compliance is 44% or lower
Moment 4: After PRC or PRC environment contact	Consider pocket bottles of alcohol-based hand rub (ABHR) Consider incentive program Leadership rounds and acknowledging compliance	Ensure staff have completed the HH LMS in the past 2 years Discuss Moment 4 breaches: e.g., a nurse touches an indwelling urinary catheter to check urine output (Moment 3), performs hand hygiene, records urine output on a patient's observation chart, which is kept at the patient's bed end (Moment 4), and then performs hand hygiene. These hand hygiene moments should be recorded as a correct Moment 3 and a correct Moment 4. See <u>4Moments-Examples.pdf (wrha.mb.ca)</u> for listed examples of each moment. Specific examples can also be added that might not be listed in the form, but noted in the setting. When is Moment 4 required? Moment Examples After a Moment 1, except if there has been exposure to body fluids After touching any items in the patient zone but the patient has not been touched while the healthcare worker was in the patient zone Any items in the patient zone Any items in the patient zone 	Leadership rounds and role-modeling Staff empowerment to voice HH concerns and report safety issues and observations Focus on HH in huddles Identify unit/area-specific hand hygiene champion Education re: patient/resident/ client environment and healthcare environment Assess environment to ensure appropriate placement of HH dispensers and sinks Visual cues (e.g., posters) posted and in key locations? Ask staff for their suggestions as to what would be helpful in reminding them about Moment 4