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|---|--|---|--|
|  At or better than target. Continue to monitor. |  Within 5% of target. Monitor and take action as appropriate. |  Below target by more than 5%. Take action and monitor progress. |  No target identified or available. |
|---|--|---|--|

WHAT IS BEING MEASURED?

Hand hygiene compliance rates are reported on an annual basis, by site, for the following two indications:

1. Hand hygiene before initial contact with the patient/patient environment for all healthcare providers; and
2. Hand hygiene after contact with the patient/patient environment for all health care providers.

WHY IS THIS IMPORTANT?

Healthcare providers move from patient-to-patient and room-to-room while providing care and working in the patient environment. This movement provides many opportunities for the transmission of organisms on hands that can cause infections. Proper hand hygiene will protect patients and providers, reduce the spread of infections and the associated treatment costs, reduce hospital lengths of stay and readmissions, reduce wait times, and prevent deaths.

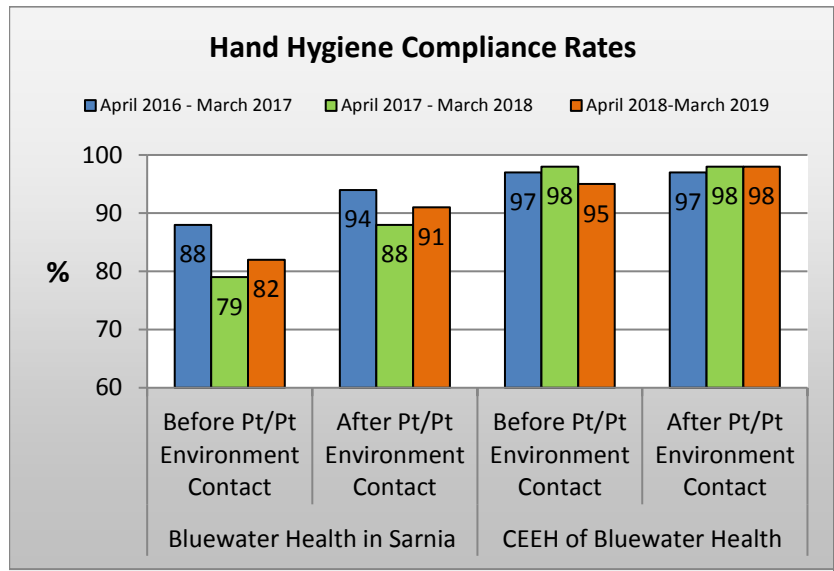
WHAT IS THE TARGET?

Bluewater Health aims to achieve 90% or better for each indication.

HOW ARE WE DOING?

Hand hygiene rates before patient/patient environment contact have increased in Sarnia, and had a slight decrease at CEEH over the past year.

Hand hygiene compliance after patient/patient environment continues to be better than compliance before patient/patient environment.



WHAT ACTIONS ARE WE TAKING?

Specific improvement strategies continue to further improve compliance before patient/patient environment contact to protect the patient/patient environment from the spread of infections.

WHERE CAN I LEARN MORE ABOUT THIS MEASURE?

- MOHLTC [see website](#)
- OHA [see website](#)
- [Contact us](#)

FREQUENCY REPORTED: Annually

NEXT UPDATE: April 2020