

Hand Hygiene Improvement Plan Template

Frequently Asked Questions

How often do I need to build a hand hygiene (HH) improvement plan?

HH compliance is formally reported for every fiscal quarter. HH compliance results should be reviewed and an improvement plan created and updated for each formal quarterly report. Accreditation Canada Required Organizational Practices (ROP) requires current HH Improvement Plans.

What if I don't finish my goals by the set date?

Try to set realistic timelines to achieve your goals and keep referencing those dates throughout the quarter to stay on track. Readjust timelines only if necessary.

My area's compliance is >90%, do I need to develop a hand hygiene improvement plan?

If your area's compliance is >90%, you are on the right track, but overall HH compliance is only one measurement of success. It is important to look at several aspects (e.g., compliance by moment) of your HH program to ensure all the elements for success are in place.

I have never heard of a minimum commitment before. What does this mean?

With the release of the HH protocol, AHS Infection Prevention & Control (IPC) is recommending that the site-based reviewer (SBR) spend 30 minutes each week at different times and on different days to optimize sampling opportunities for data collection.

What are data quality concerns? Where would we find out if we have any?

Each quarter, an IPC Coordinator reviews the IPC HH Data Quality Report. If there are data quality concerns noted, the IPC Coordinator will contact the SBR by email and provide recommendations for corrections. Managers may be copied on these emails. Asking the SBR about this may be helpful in identifying if data quality is an issue in your area.

Do I have to use the HH Improvement Plan Template to build my improvement plan?

You may use alternative resources providing they meet the compliance requirements of Accreditation Canada. The HH Improvement plan template was developed in collaboration with AHS Accreditation to be a user-friendly resource to accomplish the Improving HH Practice Required Organizational Practice (ROP).

Do I need to complete Decision boxes B and C if I can build my improvement plan from A?

Yes, it is important to base your improvement plan decisions after assessing A, B, and C on the workflow diagram. This will allow you to engage staff, patients and families and establish priorities for HH improvements.

Do I need to complete the work outlined in Decision boxes A, B, and C myself?

HH improvement planning is a team responsibility. For example, completing the checklist elements may be delegated or shared with members across the team.

How long should it take me to develop a HH Improvement Plan with my team?

Once the information required to complete Decision boxes A, B, and C has been obtained, the improvement plan should take approximately 30 minutes to complete.

Who do I contact if I have questions?

Questions may be directed to your IPC project manager by submitting an email to hand.hygiene@ahs.ca.

