

Ambulatory Care / Clinics

Guide to Conduct Hand Hygiene Reviews



© 2021 Alberta Health Services

If you have questions about this guide or about hand hygiene reviews in general, you can email hand.hygiene@ahs.ca or contact your zone [Project Manager](#).



This work is licensed under a [Creative Commons Attribution-Non-commercial-Share Alike 4.0 International license](https://creativecommons.org/licenses/by-nc-sa/4.0/). The License does not apply to AHS trademarks, logos or content for which Alberta Health Services is not the copyright owner.

Disclaimer: This material is intended for general information only and is provided on an "as is", "where is" basis. Although reasonable efforts were made to confirm the accuracy of the information, Alberta Health Services does not make any representation or warranty, express, implied or statutory, as to the accuracy, reliability, completeness, applicability or fitness for a particular purpose of such information. This material is not a substitute for the advice of a qualified health professional. Alberta Health Services expressly disclaims all liability for the use of these materials, and for any claims, actions, demands or suits arising from such use.

Ambulatory Care settings are located within hospitals and at community-based health centers. There is a diverse range of services provided within these clinics.

Types of Ambulatory Care / Clinics

There are various types of care centers and clinics in the ambulatory setting. Examples are as follows; this list is not intended to be all-inclusive:

- IV therapy treatments
- wound assessments and care, women's health assessments and associated procedures
- procedures such as colonoscopy, endoscopy, electrocardiogram, bronchoscopy
- physician and nurse consults in specialty clinics

Healthcare Environment vs Patient Environment

In an ambulatory setting, the patient environment follows the same principles outlined in Section 3.5 Environments.

Observation Point: As many ambulatory care settings are multi-patient environments divided by privacy curtains or are a single patient treatment space, reviewers must be aware of how contact with privacy curtains and doorknobs are recorded during hand hygiene reviews.

Observation Point: Clean supplies such as dressings, irrigation solutions and linens may be stored in cabinets or drawers within the treatment room. Hand hygiene must be performed before contact is made with the storage cabinets or drawers to access the clean supplies contained within Moment 2 (BEF-ASP).

Original date: February 2018
Revised date: March 4, 2020

Common examples of the 4 Moments for Hand Hygiene within the ambulatory care setting are as follows, this list is not intended to be all-inclusive:

Moment 1 (BEF-PAT/ENV):

- before a physical assessment of the patient
- before assisting a patient onto the examination table
- before contact with a patient's personal items (i.e. clothing, purses, or ambulation aides such as wheelchairs, walkers and canes)

Moment 2 (BEF-ASP)

- before donning PPE including gloves
- before gathering clean supplies and linens
- before preparing medication including IVs
- before aseptic procedures (i.e. dressing change, IV therapy or accessing venous access devices)

Moment 3 (AFT-BFL)

- after doffing gloves used to contact blood and/or body fluids
- after disposing of linens soiled with blood and/or body fluids
- after removing a soiled dressing

Moment 4 (AFT-PAT/ENV)

These examples only apply if they are the last point of contact with the patient/patient environment.

- after contacting the patient environment and before charting at the nursing station
- after shaking the patient's hand
- after contact with a patient's personal items (i.e. clothing, purses, or ambulation aides such as wheelchairs, walkers and canes)
- after physical assessment



Curtains are considered healthcare environment in all settings.
Door knobs in an ambulatory setting are considered healthcare environment.

Ambulatory Care/Clinics - Scenario 1 (RN Interaction)

A patient is sitting in the waiting room waiting for the registered nurse (RN) to call her in for a re-assessment of the wound on her ankle. The RN calls the patient, performs hand hygiene, shakes the patient's hand and escorts her to the treatment room. The RN instructs the patient to sit on the treatment bed. The RN advises the patient that she will be back. The RN performs hand hygiene and closes the door.



HCP – Nurses (RN)

Moment 1 (wash/ABHR); Moment 4 (wash/ABHR)

Rationale:

- Moment 1 (BEF-PAT/ENV) is recorded as compliant when the RN performs hand hygiene before shaking the patient's hand.
- Moment 4 (AFT-PAT/ENV) is recorded as compliant when the RN performs hand hygiene after the patient contact (i.e. handshake) before she closes the door.

Exploring Possibilities:

- If the RN did not shake the patient's hand, there would have been no need for hand hygiene as the RN did not contact the patient or the patient's environment.

Take Away Message:

- Moment 1 (BEF-PAT/ENV) can only be recorded if the healthcare provider makes contact with the patient or patient's environment.
- Moment 4 (AFT-PAT/ENV) can only be recorded if the healthcare provider has had contact with the patient or patient's environment, and then makes contact with the healthcare environment.
- Doorknobs in an ambulatory care setting are considered healthcare environment.

Ambulatory Care/Clinics - Scenario 2 (Wound Dressing Change)

A registered nurse (RN) performs hand hygiene and begins to gather supplies for a wound dressing change. The RN enters the patient's space and pulls the curtain closed. She performs hand hygiene, dons the gloves, and removes the old dressing. Once the old dressing is removed, the RN removes her gloves, performs hand hygiene, dons new gloves and re-dresses the patient's wound. The RN removes her gloves, opens the curtain, and escorts the patient out of the room and returns to the nurse's station.



HCP – Nurses (RN)

Moment 2 (wash/ABHR);	Moment 2 (wash/ABHR), gloves;	Moment 1 (wash/ABHR), gloves;
Moment 3 (wash/ABHR), gloves;	Moment 2 (wash/ABHR), gloves;	Moment 3 (miss), gloves;
Moment 4 (miss)		

Rationale:

- Moment 2 (BEF-ASP) is recorded as compliant when the RN performs hand hygiene before gathering clean supplies.
- Moment 2 (BEF-ASP) is considered compliant when the RN performs hand hygiene before donning gloves to remove the soiled dressing (clean procedure). This is a combined moment with Moment 1 (BEF-PAT/ENV) below (see Section 3.4 Combined Moments).
- Moment 1 (BEF-PAT/ENV) is recorded as compliant as hand hygiene is performed before touching the patient; wearing gloves. The RNs first moment of contact with the patient is the removal of the dressing.
- Moment 3 (AFT-BFL) is recorded as compliant when hand hygiene is performed after the RN removes her gloves used to contact the soiled dressing.
- Moment 2 (BEF-ASP) is recorded as compliant when hand hygiene is performed before accessing new clean gloves to redress wound.
- Moment 3 (AFT-BFL) is recorded as a miss when hand hygiene is not performed after doffing gloves used to contact the patient's wound.
- Moment 4 (AFT-PAT/ENV) is recorded as miss as hand hygiene was not performed after removing gloves and before touching the curtain. This is a combined moment with Moment 3 (AFT-BFL) above.

Exploring Possibilities:

- If the RN would have performed hand hygiene, had ready access to the clean supplies and did not have to contact the curtain, then hand hygiene would not have been needed to be performed before donning her gloves and beginning the wound care.

Original date: February 2018
Revised date: March 4, 2020

- If hand hygiene was performed after removing the gloves and before touching the curtain, then the Moment 3 (AFT-BFL) and Moment 4 (AFT-PAT/ENV) would be recorded as compliant.

Take Away Message:

- Curtains are considered the healthcare environment. Once the RN touched the curtains her hands are no longer considered clean.
- Wound care is a clean/aseptic procedure with a blood and/or body fluid exposure risk.
- Hand hygiene is required before moving from a dirty procedure to a clean procedure on the same patient.

Ambulatory Care/Clinics - Scenario 3 (Physician Assessment)

A patient is sitting in an exam room waiting for a physician assessment. The physician enters the room, shakes the patient's hand and sits down. The physician takes a verbal history from the patient and then contacts the patient to perform a physical assessment. Once completed the physician performs hand hygiene, opens the door and leaves the room.



HCP – Physicians (Physician)

Moment 1 (miss); Moment 4 (wash/ABHR)

Rationale:

- Moment 1 (BEF-PAT/ENV) is recorded as a miss when the physician did not perform hand hygiene before shaking the patient's hand.
- Moment 4 (AFT-PAT/ENV) is recorded as compliant as the physician performed hand hygiene after patient contact (physical assessment).

Take Away Message:

- Moment 1 (BEF-PAT/ENV) can only be recorded if the healthcare provider makes contact with the patient or patient's environment.
- Moment 4 (AFT-PAT/ENV) can only be recorded if the healthcare provider has had contact with the patient or patient's environment, and then makes contact with the healthcare environment (doorknob).
- Doorknobs in an ambulatory care setting are considered healthcare environment.

Ambulatory Care/Clinics - Scenario 4 (IV Start)

A registered nurse (RN) approaches a patient sitting in a treatment chair in the chemotherapy area of Cancer Care. She performs hand hygiene and assists the patient to roll-up his sleeve. The RN then leaves the patient space and goes to the supply cart to begin retrieving the clean and sterile supplies for the procedure. The RN returns to the patient, performs hand hygiene and closes the curtain. The RN assesses the patient’s vein and positions the arm to prepare for the IV insertion. The RN performs hand hygiene, dons gloves, inserts the IV into the vein and attaches a saline lock. The RN flushes the saline lock with a syringe, and gathers the used supplies to discard. The RN removes their gloves and performs hand hygiene, attaches the IV tubing to the IV site and starts the IV pump. The RN performs hand hygiene and draws the curtain and leaves the patient’s space to begin charting at the nursing station.



HCP – Nurses (RN)

Moment 1 (wash/ABHR);	Moment 4 (miss);	Moment 2 (miss);	Moment 1 (miss);
Moment 2 (wash/ABHR), gloves;	Moment 3 (wash/ABHR), gloves;	Moment 4 (wash/ABHR)	

Rationale:

- Moment 1 (BEF-PAT/ENV) is recorded as compliant when the RN performs hand hygiene before contacting the patient to assist with his sleeve.
- Moment 4 (AFT-PAT/ENV) is recorded as a miss when the RN leaves the patient’s chair space to go to the clean supply cart without performing hand hygiene.
- Moment 2 (BEF-ASP) is recorded as a miss when the RN accesses clean supplies without performing hand hygiene.
- Moment 1 (BEF-PAT/ENV) is recorded as a miss when the RN returns to the patient’s chair space without performing hand hygiene after contacting the privacy curtain (healthcare environment).
- Moment 2 (BEF-ASP) is recorded as compliant when the RN performs hand hygiene before donning gloves. The gloves are used for the IV start and are considered part of the aseptic procedure; therefore, only one Moment 2 is recorded for donning gloves and starting the IV.
- Moment 3 (AFT-BFL) is recorded as compliant when the RN removed their gloves and performed hand hygiene after the IV start. The IV start poses a blood exposure risk.
- Moment 4 (AFT-PAT/ENV) is recorded as compliant when the RN performs hand hygiene after patient contact and before drawing the curtain to leave the patient’s space.

Exploring Possibilities:

- If the RN wouldn’t have contacted the privacy curtain before accessing the vein and positioning the patient’s arm; Moment 1 (BEF-PAT/ENV) would have been recorded as compliant.

Original date: February 2018
Revised date: March 4, 2020

Take Away Messages:

- Curtains are considered healthcare environment in all settings (see Section 3.5 Environments).
- Gloves should be removed and hand hygiene performed immediately after a procedure where there is a risk of blood and/or body fluid exposure before continuing care with the same patient.
- When the healthcare provider has to leave the patient's space to retrieve clean supplies and returns to the patient, the reviewer should record the movement of the healthcare provider as such: Moment 4 (AFT-PAT/ENV), Moment 2 (BEF-ASP) and a Moment 1 (BEF-PAT/ENV).