

Public Health (including Oral Health)

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](#). 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.

The emphasis for Public Health (PH) is to keep the population healthy, and improve the health of the community. Community and Public Health provides services to the community in four main areas:

- Maternal, Child and Family Health
- Communicable Disease Control
- School Health
- Health Promotion
- Sexual Health

This includes, but is not limited to, prenatal education, home visits and support for families following a birth, breastfeeding support, parent support, travel health services, oral health, immunization, and communicable disease follow-up and sexual health. PH work in partnership with other internal health service providers as well as community agencies/groups. PH may provide health education services to individuals, families or groups in settings such as schools, community sites and at public health sites / community health centers.

Hand hygiene reviews will be primarily focused to areas where clients and healthcare providers are interacting such as:

- treatment spaces in public health sites
- oral health clinics
- immunization clinics (schools, community centers)
- pop-up clinics: a pop-up clinic is a travelling clinic where necessary infrastructure (e.g. dental chair, lights, etc.) is taken to the facility where care is provided
- home visits: for hand hygiene reviews performed in the home environment, please refer to the Home Care (Home Visits) section in Appendix B

Original date: February 2018
Revised date: March 4, 2021

Observation Point: Hand hygiene reviews will not be performed in vaccine depots or in education-based classroom settings.

The predominant types of healthcare providers that will be observed during hand hygiene reviews in PH settings include but are not limited to:

- nurses (RNs, LPNs)
- administrative and clerical services
- dental hygienists, dental assistants
- dentists (dentists and volunteer dentists are recorded as physicians)
- volunteers

The 4 Moments for Hand Hygiene can be observed within the Public Health setting. The following are examples of moments for hand hygiene that reviewers may observe; the list is not intended to be all-inclusive:

Moment 1 (BEF-PAT/ENV)

- before contact with client belongings (e.g. identification documents, client immunization cards, ambulation aids, car seats)
- before taking a client's weight or measurement
- before positioning a client

Moment 2 (BEF-ASP)

- before accessing clean or sterile supplies (e.g. intramuscular, oral or subcutaneous vaccines, drapes for weigh scales)
- before donning PPE (e.g. gloves, face protection)
- before clean/aseptic procedures such as vaccinations, assisting with breastfeeding, blood draws, oral health checks, pap smears etc.

Moment 3 (AFT-BLF)

- after administering an oral or nasal vaccine
- after collecting a patient specimen (e.g. urine, pap, swab)
- after an oral hygiene check
- after helping with breastfeeding
- after doffing PPE used to protect against blood or body fluid exposure risk

Moment 4 (AFT-PAT/ENV)

- after helping a patient with belongings (e.g. purses, diaper bags, car seats, sweaters etc.)

Original date: February 2018
Revised date: March 4, 2021

- after contact with used linens (e.g. drapes for infant weigh scales)
- after contact with toys used for the client visits

Observation Point: When providing care to a parent and a baby (e.g. helping a mom to feed), the baby and parent are considered one unit. There is no need to perform hand hygiene when moving from parent to baby unless interactions involve Moment 2 (BEF-ASP) or Moment 3 (AFT-BLF).

Public Health - Scenario 1 (Baby-well Visit)

Mom and baby present to the treatment space for the baby's 6-month baby-well visit. The registered nurse (RN) confirms the baby's identification without making contact. The mom hands the baby's immunization record to the RN. The RN accesses a clean drape to cover the weigh scale and proceeds to take baby's measurements. The RN enters the information into the computer, provides consultation and gains permissions from mom.

The RN performs hand hygiene and retrieves the vaccine from vaccine fridge located in the treatment space. The RN prepares and administers the oral rotavirus vaccine, performs hand hygiene and accesses the vaccine fridge within the room for the remaining vaccines. The RN prepares and administers the vaccines consecutively into the baby's thighs and updates the patient's passport. The RN performs hand hygiene, finishes the computerized charting, and gives verbal instructions to mom and opens the door to escort the mom to the waiting room.



HCP – Nurses (RN)

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

Rationale:

- Moment 1 (BEF-PAT/ENV) is recorded as miss when the RN contacts the baby's immunization record. The immunization record is considered patient belongings (environment).
- Moment 2 (BEF-ASP) is recorded as miss when the RN accesses the clean drape. The drape is considered clean supplies.
- Moment 4 (AFT-PAT/ENV) is recorded as a miss when the RN leaves the patient and returns to the computer. The computer is considered healthcare environment.
- Moment 1 is recorded as compliant when the nurse contacts the patient after contact with the healthcare environment (i.e. the computer)
- Moment 2 (BEF-ASP) is recorded as compliant when the RN performs hand hygiene before accessing the fridge where the vaccines are stored, preparing and administering the vaccine.
- Moment 3 (AFT-BFL) is recorded as compliant when the RN performs hand hygiene after administering the oral vaccine. Oral vaccines present a risk of exposure to patient's saliva.
- Moment 2 (BEF-ASP) is recorded as compliant when the RN accesses the fridge to retrieve the remaining vaccines. This is an example of a combined moment with Moment 2 (BEF-ASP) above (see Section 3.4 Combined Moments).
- Moment 4 (AFT-PAT/ENV) is recorded as compliant when the RN performed hand hygiene after the vaccines were completed and she contacted the computer to finish the charting.

Exploring Possibilities:

- If the RN did not have to give the oral vaccine and the visit only required intramuscular injections, no Moment 3 (AFT-BFL) would be recorded. Intramuscular or subcutaneous vaccinations do not present a significant risk of exposure to blood when safety engineered devices and proper protocols are followed.
- If the RN had contact with the patient, before opening the door, a Moment 4 (AFT-PAT/ENV) would be recorded as a miss. Doorknobs in treatment areas are considered healthcare environment.
- If vaccines are stored in the vaccine cooler bag and the cooler bag has been cleaned before loading vaccines, the vaccine bag functions as a vaccine fridge and observations would be recorded the same.

Take away messages:

- Oral vaccines present body fluid exposure risk. Intramuscular and sub-cutaneous injections do not present significant body fluid exposure risk if safety devices are engaged and proper protocols are followed.
- Patient identification and immunization cards are considered patient environment.
- The computer within the treatment space is considered healthcare environment.
- Doorknobs are considered healthcare environment.

Public Health - Scenario 2 (School Immunization Clinic)

The registered nurse (RN) is providing vaccines at a school clinic. The RN has established a pop-up clinic with the vaccines stored in the cooler bag. The RN accesses the required vaccines from the cooler bag. The RN performs hand hygiene, accesses the clean syringes and prepares the immunizations for a student.

The RN flips through school consent forms, finds the correct form, identifies the student and rolls up the student's shirt sleeve. The RN performs hand hygiene and administers the vaccine. The RN completes the necessary after care, paperwork, and discharges the student. The RN performs hand hygiene and begins preparing supplies for the next student's immunization.



HCP – Nurses (RN)

Moment 2 (miss);	Moment 2 (wash/ABHR);	Moment 1 (miss);
Moment 2 (wash/ABHR);	Moment 4 (wash/ABHR);	Moment 2 (wash/ABHR)

Rationale:

- Moment 2 (BEF-ASP) is recorded as a miss when the RN accesses the vaccine in the cooler bag without performing hand hygiene.
- Moment 2 (BEF-ASP) is recorded as compliant when the RN accesses the clean supplies (syringes) and prepares the vaccine.
- Moment 1 (BEF-PAT/ENV) is recorded as a miss when the RN contacts the student to roll up their sleeve.
- Moment 2 (BEF-ASP) is recorded as compliant when the RN administers the vaccine. This is a clean/aseptic procedure.
- Moment 4 (AFT-PAT/ENV) is recorded is compliant when the RN provides the aftercare to the student.
- Moment 2 (BEF-ASP) is recorded as compliant when the RN performs hand hygiene to access the clean supplies required to administer the vaccine to the next student. This is a combined moment with Moment 2 (BEF-ASP) above (see Section 3.4 Combined Moments).

Exploring possibilities:

- If the RN had not pre-prepared the two patient's vaccines and had to re-access the cooler bag, hand hygiene would need to be performed.
- If the RN could not move directly from the first student to the second student (i.e. had to adjust the chair), a combined moment would not apply. Additional hand hygiene moments would be required.

Take away messages:

- Hand hygiene must be performed after opening the cooler bag before accessing the vaccinations stored inside; Moment 2 (BEF-ASP). The exterior of the vaccine bag is not considered clean, therefore, an additional hand hygiene Moment 2 (BEF-ASP) is required before preparing the vaccination.
- If contact is made with the patient (e.g. clothing) or healthcare environment (chair) additional hand hygiene moments are required before performing the clean/aseptic procedure.

Public Health - Scenario 3 (Oral Care)

The dental hygienist performs hand hygiene, verbally greets the mom and child; takes the child's identification card from the mom and sets it down on computer desk. The hygienist verifies client information in the computer. The hygienist performs hand hygiene, dons gloves and PPE (i.e. face protection, gloves) and continues to prepare clean supplies needed for exam. Mom assists child to climb up on the exam chair.

The hygienist performs an oral assessment and fluoride treatment. The hygienist collects contaminated supplies and disposes in appropriate area. The hygienist removes her gloves, performs hand hygiene, removes her mask/eye protection and performs hand hygiene. The hygienist returns the identification to the mom, gives post care instructions and returns to her workstation. The mom and child leave the exam room.



HCP – Dental Care (Dental hygienist)

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

Rationale:

- Moment 1 (BEF-PAT/ENV) is recorded as compliant as the hygienist performs hand hygiene before contact with child's identification card.
- Moment 4 (AFT-PAT/ENV) is recorded as a miss when the hygienist accesses the computer without performing hand hygiene.
- Moment 2 (BEF-ASP) is recorded as compliant as the hygienist performs hand hygiene before preparing clean supplies, donning PPE and performing the oral assessment. This is recorded as a single Moment 2 (BEF-ASP) as accessing PPE is part of the clean/aseptic procedure.
- Moment 1 (BEF-PAT/ENV) is recorded as compliant when the hygienist performs the oral assessment. The oral assessment is the hygienist's first point of contact with the client. This is recorded as a combined moment with Moment 2 (BEF-ASP) above (see Section 3.4 Combined Moments).
- Moment 3 (AFT-BFL) is recorded as compliant when the hygienist performs hand hygiene following PPE removal (used to protect against an exposure of bodily fluids).
- Moment 4 (AFT-PAT/ENV) is recorded as a miss when the hygienist does not perform hand hygiene after returning identification card to the mom and makes contact with the workstation (healthcare environment).

Exploring Possibilities:

- If the hygienist could confirm the patient's identification without making contact with the ID card (e.g. card held by mom), the first Moment 1 (BEF-PAT/ENV) and Moment 4 (AFT-PAT/ENV) would not apply. Moment 1 (BEF-PAT/ENV) would be recorded when beginning the oral assessment as this would be the hygienist's first point of contact with the child.
- If the hygienist had to position the child, there would be an additional hand hygiene needed in accordance with the 4 Moments for Hand Hygiene.

Take away message:

- Proper PPE removal requires multiple hand hygiene steps to be performed (i.e. between the removal of gloves and face protection and after the removal of face protection) but only a single Moment 3 (AFT-BFL) is recorded.