TABLE OF CONTENTS

EXECUTIVE SUMMARY
FINAL REPORT
BALCARRES INTEGRATED CARE CENTRE
DETOX CENTRE
FORT QU’APPELLE ALL NATIONS HEALING HOSPITAL
FORT QU’APPELLE ECHO LODGE
GOLDEN PRAIRIE NURSING HOME
GRENFELL PIONEER HOME
HOME CARE TREATMENT CENTRE
INDIAN HEAD UNION HOSPITAL
KIDNEY HEALTH CENTRE
MENTAL HEALTH SERVICES 3RD FLOOR
MENTAL HEALTH SERVICES CHILD AND YOUTH SERVICES
PASQUA HOSPITAL 2C CARDIO NEURO
PASQUA HOSPITAL 3A
PASQUA HOSPITAL 3B
PASQUA HOSPITAL 3C
PASQUA HOSPITAL 3D
PASQUA HOSPITAL 4A
PASQUA HOSPITAL 4B
PASQUA HOSPITAL 4C
PASQUA HOSPITAL AMBULATORY CARE
PASQUA HOSPITAL CSU
PASQUA HOSPITAL DAY SURGERY
PASQUA HOSPITAL EMERGENCY
PASQUA HOSPITAL EYE CENTRE
PASQUA HOSPITAL FOOD AND NUTRITION SERVICES
PASQUA HOSPITAL ICU
PASQUA HOSPITAL INFUSIONS
PASQUA HOSPITAL OR
PASQUA HOSPITAL PACU
PASQUA HOSPITAL PHLEBOTOMY
PASQUA HOSPITAL RESPIRATORY THERAPY
PASQUA HOSPITAL SHORT STAY
POPULATION AND PUBLIC HEALTH SERVICES
REGINA CROSSING CENTRE FMU
REGINA LUTHERAN HOME
REGINA PIONEER VILLAGE 2 EAST
REGINA PIONEER VILLAGE 2 WEST
REGINA PIONEER VILLAGE 3 WEST
REGINA PIONEER VILLAGE 4 EAST
REGINA PIONEER VILLAGE 4 WEST
REGINA PIONEER VILLAGE HOSTEL
REGINA PIONEER VILLAGE MAIN WEST
RGH 0D/1D
RGH 3B
RGH 3F
RGH 4F
RGH 5A
RGH 6A
RGH 6F
RGH AMBULATORY CARE
RGH CARDIAC CATH LAB
RGH CCU
RGH CSU
RGH DAY SURGERY
RGH ENDOSCOPY
RGH FAU
RGH FOOD AND NUTRITION SERVICES
RGH INTERVENTIONAL CARDIOLOGY EP LAB
RGH INTERVENTIONAL CARDIOLOGY PACER CLINIC
RGH LAB
RGH MBU
RGH MEDICAL IMAGING MDRU
RGH NICU
RGH PEDIATRIC OP
RGH PULMONARY FUNCTION
RGH RENAL - HEMODIALYSIS
RGH RESPIRATORY THERAPY
RGH SHORT STAY
RGH SICU
RGH SLEEP DISORDER CENTRE
RGH WOMEN'S HEALTH CENTRE
SANTA MARIA 2nd FLOOR
SANTA MARIA 3rd FLOOR
SANTA MARIA 4th FLOOR
EXECUTIVE SUMMARY

This report provides an analysis of the October 2014 hand hygiene audits for the Regina Qu'Appelle Health Region. Methods of analyses included hand hygiene compliance and the frequency of missed hand hygiene opportunities and the presence of jewellery and artificial nails/nail polish at the regional, hospital, department, and healthcare worker levels.

Overall, the number of facilities/departments participating in the October audit increased from June. However, hand hygiene audits were not received from a number of facilities/departments that have direct patient care. Compared to previous hand hygiene audits, hand hygiene compliance at the regional level has remained relatively stable since October 2013. Although the number of healthcare workers wearing jewellery or having artificial nails/nail polish has decreased, approximately 24% of staff failed to conduct hand hygiene. Furthermore, hand hygiene compliance among healthcare workers was generally higher after patient contact compared to before patient contact.

Hand hygiene compliance in the Regina Qu'Appelle Health Region continues to fall below the expected target of 100%. The introduction of a hand hygiene policy as well as increased promotion and training among healthcare workers is expected to increase hand hygiene compliance. This compliance will be assessed in February 2015.

This report is available on-line for healthcare workers and the public:


http://www.rqhrlean.com/hand-hygiene.html

http://www.rqhealth.ca/programs/infection_control/hand_hygiene.shtml
A total of 2528 hand hygiene observations were submitted for analysis. Of these, only 2499 (98.9%) observations could be analyzed. Information regarding compliance at the facility and healthcare worker levels is provided in this report.

For the analysis, the following definition of hand hygiene was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish
Table 1: Hand hygiene results for May 2013, October 2013, February 2014, June 2014, and October 2014.

<table>
<thead>
<tr>
<th>Descriptive statistics</th>
<th>May 2013 (%)</th>
<th>October 2013 (%)</th>
<th>February 2014 (%)</th>
<th>June 2014 (%)</th>
<th>October 2014 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of observations submitted</td>
<td>2847</td>
<td>2651</td>
<td>2626</td>
<td>2078</td>
<td>2528</td>
</tr>
<tr>
<td>Number of observations excluded from analysis</td>
<td>1177 (41.3)</td>
<td>36 (1.4)</td>
<td>67 (2.6)</td>
<td>24 (1.2)</td>
<td>29 (1.1)</td>
</tr>
<tr>
<td>Compliance at the region level</td>
<td>572/1670 (34.3)</td>
<td>1513/2615 (57.9)</td>
<td>1516/2559 (59.2)</td>
<td>Not reported</td>
<td>1461/2499 (58.5)</td>
</tr>
<tr>
<td>Noncompliance at the region level</td>
<td>1098/1670 (65.7)</td>
<td>1102/2615 (42.1)</td>
<td>1043/2559 (40.8)</td>
<td>Not reported</td>
<td>1038/2499 (41.5)</td>
</tr>
<tr>
<td>Number of observations in which the healthcare worker wore jewellery</td>
<td>331/1670 (19.8)</td>
<td>246/2615 (9.4)</td>
<td>259/2559 (10.1)</td>
<td>129/2054 (6.3)</td>
<td>156/2499 (6.2)</td>
</tr>
<tr>
<td>Number of observations in which the healthcare worker had artificial nails/nail polish</td>
<td>46/1670 (2.8)</td>
<td>71/2615 (2.7)</td>
<td>46/2559 (1.8)</td>
<td>68/2054 (3.3)</td>
<td>51/2499 (2.0)</td>
</tr>
<tr>
<td>Number of observations in which the healthcare worker did not conduct hand hygiene at all</td>
<td>Not reported</td>
<td>Not reported</td>
<td>Not reported</td>
<td>438/2054 (21.3)</td>
<td>602/2499 (24.1)</td>
</tr>
</tbody>
</table>
### Table 2: Facilities and units that participated in the October 2014 hand hygiene audit

<table>
<thead>
<tr>
<th>Facility</th>
<th>Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>RGH</td>
<td>0D/1D</td>
</tr>
<tr>
<td></td>
<td>3B</td>
</tr>
<tr>
<td></td>
<td>3F</td>
</tr>
<tr>
<td></td>
<td>4F</td>
</tr>
<tr>
<td></td>
<td>5A</td>
</tr>
<tr>
<td></td>
<td>6A</td>
</tr>
<tr>
<td></td>
<td>6F</td>
</tr>
<tr>
<td></td>
<td>Ambulatory Care</td>
</tr>
<tr>
<td></td>
<td>Cardiac Cath Lab</td>
</tr>
<tr>
<td></td>
<td>CCU</td>
</tr>
<tr>
<td></td>
<td>CSU</td>
</tr>
<tr>
<td></td>
<td>Day Surgery</td>
</tr>
<tr>
<td></td>
<td>Endoscopy</td>
</tr>
<tr>
<td></td>
<td>FAU</td>
</tr>
<tr>
<td></td>
<td>Food and Nutrition Services</td>
</tr>
<tr>
<td></td>
<td>Interventional Cardiology/EP Lab</td>
</tr>
<tr>
<td></td>
<td>Interventional Cardiology/Pacer Clinic Lab</td>
</tr>
<tr>
<td></td>
<td>MBU</td>
</tr>
<tr>
<td></td>
<td>Medical Imaging - MDRU</td>
</tr>
<tr>
<td></td>
<td>NICU</td>
</tr>
<tr>
<td></td>
<td>Pediatric OP</td>
</tr>
<tr>
<td></td>
<td>Pulmonary Function</td>
</tr>
<tr>
<td></td>
<td>Renal/Hemodialysis</td>
</tr>
<tr>
<td></td>
<td>Respiratory Therapy</td>
</tr>
<tr>
<td></td>
<td>Short Stay</td>
</tr>
<tr>
<td></td>
<td>SICU</td>
</tr>
<tr>
<td></td>
<td>Sleep Disorder Centre</td>
</tr>
<tr>
<td></td>
<td>Women’s Health Centre</td>
</tr>
<tr>
<td>PASQUA</td>
<td>2C Cardio Neuro</td>
</tr>
<tr>
<td>----------------</td>
<td>-----------------</td>
</tr>
<tr>
<td></td>
<td>3A</td>
</tr>
<tr>
<td></td>
<td>3B</td>
</tr>
<tr>
<td></td>
<td>3C</td>
</tr>
<tr>
<td></td>
<td>3D</td>
</tr>
<tr>
<td></td>
<td>4A</td>
</tr>
<tr>
<td></td>
<td>4B</td>
</tr>
<tr>
<td></td>
<td>4C</td>
</tr>
<tr>
<td></td>
<td>Ambulatory Care</td>
</tr>
<tr>
<td></td>
<td>CSU</td>
</tr>
<tr>
<td></td>
<td>Day Surgery</td>
</tr>
<tr>
<td></td>
<td>Emergency</td>
</tr>
<tr>
<td></td>
<td>Eye Centre</td>
</tr>
<tr>
<td></td>
<td>Food and Nutrition Services</td>
</tr>
<tr>
<td></td>
<td>ICU</td>
</tr>
<tr>
<td></td>
<td>Infusions</td>
</tr>
<tr>
<td></td>
<td>OR</td>
</tr>
<tr>
<td></td>
<td>PACU</td>
</tr>
<tr>
<td></td>
<td>Phlebotomy</td>
</tr>
<tr>
<td></td>
<td>Respiratory Therapy</td>
</tr>
<tr>
<td></td>
<td>Short Stay</td>
</tr>
<tr>
<td>WRC</td>
<td>2-5</td>
</tr>
<tr>
<td></td>
<td>3-5</td>
</tr>
<tr>
<td></td>
<td>3-6</td>
</tr>
<tr>
<td></td>
<td>Main 5</td>
</tr>
<tr>
<td></td>
<td>Main 6</td>
</tr>
<tr>
<td></td>
<td>Adult OT</td>
</tr>
<tr>
<td></td>
<td>Children's Program</td>
</tr>
<tr>
<td></td>
<td>Food and Nutrition Services</td>
</tr>
<tr>
<td></td>
<td>FRP</td>
</tr>
<tr>
<td>RURAL ACUTE</td>
<td>Fort Qu'Appelle All Nations Healing Hospital</td>
</tr>
</tbody>
</table>
A hand hygiene audit was conducted by the Home Care Treatment Centre. However, the audit process is different compared to the audit process for other patient care areas. Therefore, the Home Care Treatment Centre numbers are not included in the overall analyses for this report.
Table 3: Facilities and units that did not participate in the October 2014 hand hygiene audit

<table>
<thead>
<tr>
<th>Facility</th>
<th>Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>RGH</td>
<td>3E</td>
</tr>
<tr>
<td>RGH</td>
<td>5E</td>
</tr>
<tr>
<td>RGH</td>
<td>5F</td>
</tr>
<tr>
<td>RGH</td>
<td>AU</td>
</tr>
<tr>
<td>RGH</td>
<td>ER</td>
</tr>
<tr>
<td>RGH</td>
<td>Labour and Birth</td>
</tr>
<tr>
<td>RGH</td>
<td>MICU</td>
</tr>
<tr>
<td>RGH</td>
<td>OR</td>
</tr>
<tr>
<td>RGH</td>
<td>PACU</td>
</tr>
<tr>
<td>RGH</td>
<td>Phlebotomy</td>
</tr>
<tr>
<td>RGH</td>
<td>Podiatry Clinic</td>
</tr>
<tr>
<td>RGH</td>
<td>Therapy Department</td>
</tr>
<tr>
<td>PASQUA</td>
<td>4D</td>
</tr>
<tr>
<td>PASQUA</td>
<td>Lab - Histology (submitted after deadline)</td>
</tr>
<tr>
<td>PASQUA</td>
<td>Medical Imaging (submitted after deadline)</td>
</tr>
<tr>
<td>PASQUA</td>
<td>Short Stay</td>
</tr>
<tr>
<td>WRC</td>
<td>2-6</td>
</tr>
<tr>
<td>WRC</td>
<td>3-2</td>
</tr>
<tr>
<td>WRC</td>
<td>3-3</td>
</tr>
<tr>
<td>RURAL ACUTE</td>
<td>Broadview Union Hospital</td>
</tr>
<tr>
<td>RURAL ACUTE</td>
<td>Broadview Centennial Lodge (submitted after deadline)</td>
</tr>
<tr>
<td>RURAL ACUTE</td>
<td>Cupar &amp; District Nursing Home</td>
</tr>
<tr>
<td>RURAL ACUTE</td>
<td>Elmview Extendicare</td>
</tr>
<tr>
<td>RURAL ACUTE</td>
<td>Long Lake Valley Integrated Care Centre</td>
</tr>
<tr>
<td>RURAL ACUTE</td>
<td>Lumsden &amp; District Heritage Home</td>
</tr>
<tr>
<td>RURAL ACUTE</td>
<td>Montmarte Health Centre</td>
</tr>
<tr>
<td>RURAL ACUTE</td>
<td>Parkside Extendicare</td>
</tr>
<tr>
<td>RURAL ACUTE</td>
<td>Qu'Appelle House</td>
</tr>
<tr>
<td>RURAL ACUTE</td>
<td>Regina Pioneer Village – 3 East</td>
</tr>
<tr>
<td>Location</td>
<td></td>
</tr>
<tr>
<td>--------------------------------</td>
<td></td>
</tr>
<tr>
<td>Sunset Extendicare</td>
<td></td>
</tr>
<tr>
<td>East Office Child Health Clinic</td>
<td></td>
</tr>
<tr>
<td>EMS</td>
<td></td>
</tr>
<tr>
<td>Four Directions Child Health</td>
<td></td>
</tr>
<tr>
<td>Grenfell Health Centre</td>
<td></td>
</tr>
<tr>
<td>North Office Child Health Clinic</td>
<td></td>
</tr>
<tr>
<td>Surgical Assessment Centre</td>
<td></td>
</tr>
</tbody>
</table>
Hand hygiene compliance, by facility, Regina Qu’Appelle Health Region, October 2014

Facility

Hand hygiene compliance ≥ 80 - 100%
Hand hygiene compliance ≥ 70 - 79.9%
Hand hygiene compliance < 70%
Hand hygiene compliance, by healthcare worker category, Regina Qu'Appelle Health Region, October 2014

Hand hygiene compliance ≥ 80 - 100%
Hand hygiene compliance ≥ 70 - 79.9%
Hand hygiene compliance < 70%

Healthcare worker category (n = total number of observations)
Hand hygiene compliance, before and after patient contact, by healthcare worker category,
Regina Qu'Appelle Health Region, October 2014

Hand hygiene compliance ≥ 80 - 100%
Hand hygiene compliance ≥ 70 - 79.9%
Hand hygiene compliance < 70%

B = Before patient contact
A = After patient contact

Healthcare worker category
Distribution of jewellery, artificial nails/nail polish, and missed hand hygiene opportunities by healthcare worker category

% of observations

<table>
<thead>
<tr>
<th>Healthcare worker category</th>
<th>Physician (n=204)</th>
<th>Phlebotomist (n=79)</th>
<th>Porter (n=33)</th>
<th>EMT/Paramedic (n=15)</th>
<th>Pastoral Care/Volunteer (n=17)</th>
<th>Unit Support Worker (n=27)</th>
<th>Social Worker (n=31)</th>
<th>Food and Nutrition Services (n=91)</th>
<th>Nurse (n=900)</th>
<th>Student (n=60)</th>
<th>Pharmacist (n=10)</th>
<th>Technologist (n=114)</th>
<th>Therapies (n=296)</th>
<th>Other HCW (n=54)</th>
<th>Aide/SCA/HHA (n=395)</th>
<th>Environmental Services (n=115)</th>
<th>Information not provided (n=8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Jewellery</td>
<td>3</td>
<td>22</td>
<td>3</td>
<td>0</td>
<td>12</td>
<td>11</td>
<td>39</td>
<td>2</td>
<td>5</td>
<td>2</td>
<td>0</td>
<td>6</td>
<td>3</td>
<td>11</td>
<td>7</td>
<td>7</td>
<td>33</td>
</tr>
<tr>
<td>% Nails</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>6</td>
<td>4</td>
<td>16</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>% Missed</td>
<td>41</td>
<td>19</td>
<td>54</td>
<td>67</td>
<td>35</td>
<td>37</td>
<td>55</td>
<td>29</td>
<td>16</td>
<td>17</td>
<td>20</td>
<td>18</td>
<td>21</td>
<td>39</td>
<td>26</td>
<td>23</td>
<td>50</td>
</tr>
</tbody>
</table>
BALCARRES INTEGRATED CARE CENTRE

Hand hygiene results, before patient contact,
Balcarres Integrated Care Centre,
October 2014

Hand hygiene results, after patient contact,
Balcarres Integrated Care Centre,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- Compliant:
  1) Hand gel or wash, AND
  2) A required time component of \(\geq 15\) seconds

- Noncompliant:
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of \(< 15\) seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for the Balcarres Integrated Care Centre was 70%.

For the Balcarres Integrated Care Centre audit:

- 1 staff member did not conduct hand hygiene at all
- 5 staff members were observed with jewellery
- 1 staff member was observed with artificial nails/nail polish
Hand hygiene results, Detox Centre, October 2014

- Compliant: 26%
- Noncompliant: 74%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for the Detox Centre was 26%

Information regarding before/after patient contact was not recorded by the auditor.

For the Detox Centre audit:

- 20 staff members did not conduct hand hygiene at all
- 1 staff member was observed with jewellery
- 1 staff member was observed with artificial nails/nail polish
Hand hygiene results, before patient contact,  
Fort Qu’Appelle All Nations Healing Hospital,  
October 2014

Hand hygiene results, after patient contact,  
Fort Qu’Appelle All Nations Healing Hospital,  
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Fort Qu’Appelle All Nations Healing Hospital was 64%

- Hand hygiene compliance for the Lab/X-ray was 100%

For the Fort Qu’Appelle All Nations Healing Hospital audit:

- 23 staff members did not conduct hand hygiene at all
- 4 staff members were observed with jewellery
- 2 staff members were observed with artificial nails/nail polish
Hand hygiene results, before patient contact,
Fort Qu’Appelle Echo Lodge,
October 2014

Hand hygiene results, after patient contact,
Fort Qu’Appelle Echo Lodge,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- Compliant:
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- Noncompliant:
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Fort Qu’Appelle Echo Lodge was 48%

For the Fort Qu’Appelle Echo Lodge audit:

- 13 staff members did not conduct hand hygiene at all
- 1 staff member was observed with jewellery
- No staff members were observed with artificial nails/nail polish
GOLDEN PRAIRIE NURSING HOME

Hand hygiene results, before patient contact, Golden Prairie Nursing Home, October 2014

- Compliant: 64%
- Noncompliant: 36%

Hand hygiene results, after patient contact, Golden Prairie Nursing Home, October 2014

- Compliant: 33%
- Noncompliant: 67%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for the Golden Prairie Nursing Home was 44%

For the Golden Prairie Nursing Home audit:

- 11 staff member did not conduct hand hygiene at all
- 3 staff members were observed with jewellery
- Artificial nails/nail polish was not observed
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for the Grenfell Pioneer Home was 55%

For the Grenfell Pioneer Home audit:

- 7 staff members did not conduct hand hygiene at all
- 16 staff members were observed with jewellery
- No staff member was observed with artificial nails/nail polish
Hand hygiene results, before patient contact,
Home Care Treatment Centre,
October 2014

Hand hygiene results, after patient contact,
Home Care Treatment Centre,
October 2014
Hand hygiene results, before patient contact, Indian Head Union Hospital, October 2014

Hand hygiene results, after patient contact, Indian Head Union Hospital, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Indian Head Union Hospital was 11%

For the Indian Head Union Hospital audit:

- 10 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Kidney Health Centre,
October 2014

Hand hygiene results, after patient contact,
Kidney Health Centre,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of \( \geq 15 \) seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of \(< 15\) seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for the Kidney Health Centre was 48%.

For the Kidney Health Centre audit:

- 10 staff members did not conduct hand hygiene at all
- 7 staff members were observed with jewellery
- 3 staff members were observed with artificial nails/nail polish
MENTAL HEALTH SERVICES 3RD FLOOR

Hand hygiene results, before patient contact, Mental Health Services. 3rd Floor, October 2014

[Bar chart showing 80% compliant and 20% noncompliant]

Hand hygiene results, after patient contact, Mental Health Services, 3rd Floor, October 2014

[Bar chart showing 58% compliant and 42% noncompliant]
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Mental Health Services 3rd Floor was 41%

For the Mental Health Services 3rd Floor audit:

- 11 staff members did not conduct hand hygiene at all
- 6 staff members were observed with jewellery
- 2 staff were observed with artificial nails/nail polish
Hand hygiene results, before patient contact, Mental Health Services, Child & Youth Services, October 2014

- Compliant: 6%
- Noncompliant: 94%

Hand hygiene results, after patient contact, Mental Health Services, Child & Youth Services, October 2014

- Compliant: 57%
- Noncompliant: 43%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Mental Health Services Child & Youth Services was 23%

For the Mental Health Services Child & Youth Services audit:

- 14 staff members did not conduct hand hygiene at all
- 12 staff members were observed with jewellery
- 8 staff were observed with artificial nails/nail polish
Hand hygiene results, before patient contact,
Pasqua Hospital, 2C Cardio Neuro,
October 2014

Hand hygiene results, after patient contact,
Pasqua Hospital, 2C Cardio Neuro,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

- Overall, hand hygiene compliance for 2C Cardio Neuro was 100%

- For the 2C Cardio Neuro audit:
  - Jewellery was not observed
  - Artificial nails/nail polish was not observed
PASQUA HOSPITAL 3A

Hand hygiene results, before patient contact,
Pasqua Hospital, 3A,
October 2014

Hand hygiene results, after patient contact,
Pasqua Hospital, 3A,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 3A was 81%

For the 3A audit:
- 3 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Pasqua Hospital, 3B,
October 2014

- Compliant: 73%
- Noncompliant: 27%

Hand hygiene results, after patient contact,
Pasqua Hospital, 3B,
October 2014

- Compliant: 57%
- Noncompliant: 43%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 3B was 67%.

For the 3B audit:

- 4 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
PASQUA HOSPITAL 3C

Hand hygiene results, before patient contact, Pasqua Hospital, 3C, October 2014

Compliant: 67%
Noncompliant: 33%

Hand hygiene results, after patient contact, Pasqua Hospital, 3C, October 2014

Compliant: 62%
Noncompliant: 38%
For this analysis, the following definition of hand hygiene compliance was used:

- Compliant:
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- Noncompliant:
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 3C was 63%

For the 3C audit:

- 5 staff members did not conduct hand hygiene at all
- 2 staff members were observed with jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Pasqua Hospital, 3D,
October 2014

56% Compliant
44% Noncompliant

Hand hygiene results, after patient contact,
Pasqua Hospital, 3D,
October 2014

82% Compliant
18% Noncompliant
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 3D was 70%.

For the 3D audit:

- 4 staff members did not conduct hand hygiene at all
- 1 staff member was observed with jewellery
- 1 staff member was observed with artificial nails/nail polish
Hand hygiene results, before patient contact,
Pasqua Hospital, 4A,
October 2014

- Compliant: 29%
- Noncompliant: 71%

Hand hygiene results, after patient contact,
Pasqua Hospital, 4A,
October 2014

- Compliant: 72%
- Noncompliant: 28%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 4A was 51%.

For the 4A audit:

- 17 staff members did not conduct hand hygiene at all
- 4 staff members were observed with jewellery
- 1 staff member was observed with artificial nails/nail polish
Hand hygiene results, before patient contact,
Pasqua Hospital, 4B,
October 2014

30% Compliant
70% Noncompliant

Hand hygiene results, after patient contact,
Pasqua Hospital, 4B,
October 2014

58% Compliant
41% Noncompliant
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

- Overall, hand hygiene compliance for 4B was 48%.

- For the 4B audit:
  - 23 staff members did not conduct hand hygiene at all
  - 4 staff members were observed with jewellery
  - No staff member was observed with artificial nails/nail polish
PASQUA HOSPITAL 4C

Hand hygiene results, before patient contact,
Pasqua Hospital, 4C,
October 2014

Hand hygiene results, after patient contact,
Pasqua Hospital, 4C,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq$ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

- Overall, hand hygiene compliance for 4C was 57%

- For the 4C audit:
  
  - 6 staff members did not conduct hand hygiene at all
  
  - Jewellery was not observed
  
  - Artificial nails/nail polish was not observed
PASQUA HOSPITAL AMBULATORY CARE

Hand hygiene results, before patient contact,
Pasqua Hospital, Ambulatory Care,
October 2014

Hand hygiene results, after patient contact,
Pasqua Hospital, Ambulatory Care,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Ambulatory Care was 81%

For the Ambulatory Care audit:

- 4 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Pasqua Hospital, CSU,
October 2014

Hand hygiene results, after patient contact,
Pasqua Hospital, CSU,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for CSU was 88%

For the CSU audit:

- 2 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
PASQUA HOSPITAL DAY SURGERY

Hand hygiene results, before patient contact, Pasqua Hospital, Day Surgery, October 2014

Hand hygiene results, after patient contact, Pasqua Hospital, Day Surgery, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- Compliant:
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- Noncompliant:
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Day Surgery was 84%

For the Day Surgery audit:

- 3 staff members did not conduct hand hygiene at all
- 1 staff member was observed with jewellery
- 1 staff member was observed with artificial nails/nail polish
PASQUA HOSPITAL EMERGENCY

Hand hygiene results, before patient contact,
Pasqua Hospital, Emergency,
October 2014

Hand hygiene results, after patient contact,
Pasqua Hospital, Emergency,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- Compliant:
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds
- Noncompliant:
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Emergency was 21%

For the Emergency audit:

- 13 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Pasqua Hospital, Eye Centre,
October 2014

- Compliant: 52%
- Noncompliant: 48%

Hand hygiene results, after patient contact,
Pasqua Hospital, Eye Centre,
October 2014

- Compliant: 56%
- Noncompliant: 44%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for the Eye Centre was 54%

For the Eye Centre audit:

- 11 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
PASQUA HOSPITAL FOOD & NUTRITION SERVICES

Hand hygiene results, before patient contact, Pasqua Hospital, Food & Nutrition Services, October 2014

Hand hygiene results, after patient contact, Pasqua Hospital, Food & Nutrition Services, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Food & Nutrition Services was 62%.

For the Food & Nutrition Services audit:

- 4 staff members did not conduct hand hygiene at all
- 1 staff member was observed with jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Pasqua Hospital, ICU,
October 2014

Hand hygiene results, after patient contact,
Pasqua Hospital, ICU,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for ICU was 61%

For the ICU audit:

- 2 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
PASQUA HOSPITAL INFUSIONS

Hand hygiene results, before patient contact,
Pasqua Hospital, Infusions,
October 2014

Hand hygiene results, after patient contact,
Pasqua Hospital, Infusions,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

- Overall, hand hygiene compliance for the Lab was 92%

- For the Lab audit:
  - 2 staff members did not conduct hand hygiene at all
  - Jewellery was not observed
  - Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, Pasqua Hospital, OR, October 2014

- Compliant: 67%
- Noncompliant: 33%

Hand hygiene results, after patient contact, Pasqua Hospital, OR, October 2014

- Compliant: 57%
- Noncompliant: 43%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant**:
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant**:
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for the OR was 59%

For the Lab audit:

- 2 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
PASQUA HOSPITAL PACU

Hand hygiene results, before patient contact,
Pasqua Hospital, PACU,
October 2014

100%

Compliant

Hand hygiene results, after patient contact,
Pasqua Hospital, PACU,
October 2014

95%

Compliant

5%

Noncompliant
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, **AND**
  2) A required time component of ≥ 15 seconds
- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for PACU was 96%

For the PACU audit:

- Jewellery was not observed
- Artificial nails/nail polish was not observed
PASQUA HOSPITAL PHLEBOTOMY

Hand hygiene results, before patient contact,
Pasqua Hospital, Phlebotomy,
October 2014

87%

Hand hygiene results, after patient contact,
Pasqua Hospital, Phlebotomy,
October 2014

92%

8%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Phlebotomy was 89%

For the Phlebotomy audit:

- 2 staff members were observed with jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, Pasqua Hospital, Respiratory Therapy, October 2014

Hand hygiene results, after patient contact, Pasqua Hospital, Respiratory Therapy, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Respiratory Therapy was 100%

For the Respiratory Therapy audit:

- Jewellery was not observed
- Artificial nails/nail polish was not observed
PASQUA HOSPITAL SHORT STAY

Hand hygiene results, before patient contact, Pasqua Hospital, Short Stay, October 2014

Compliant: 67%  
Noncompliant: 33%

Hand hygiene results, after patient contact, Pasqua Hospital, Short Stay, October 2014

Compliant: 78%  
Noncompliant: 22%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Short Stay was 73%

For the Respiratory Therapy audit:

- 4 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Population and Public Health Services,
October 2014

Hand hygiene results, after patient contact,
Population and Public Health Services,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Population and Public Health Services was 73%

For the Population and Public Health Services audit:

- 3 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for the Regina Crossing Centre was 26%.

For the Regina Crossing Centre audit:

- 8 staff members did not conduct hand hygiene at all
- 1 staff member was observed with jewellery
- Artificial nails/nail polish was not observed
REGINA LUTHERAN HOME

Hand hygiene results, before patient contact, Regina Lutheran Home, October 2014

Hand hygiene results, after patient contact, Regina Lutheran Home, October 2014
REGINA LUTHERAN HOME

For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Regina Lutheran Home was 44%

For the Regina Lutheran Home audit:

- 6 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- 1 staff member was observed with artificial nails/nail polish
Hand hygiene results, before patient contact,
Regina Pioneer Village, 2 East,
October 2014

Hand hygiene results, after patient contact,
Regina Pioneer Village, 2 East,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 2 East was 46%

For the 2 East audit:

- 6 staff members did not conduct hand hygiene at all
- 3 staff members were observed with jewellery
- 1 staff member was observed with artificial nails/nail polish
Hand hygiene results, before patient contact, Regina Pioneer Village, 2 West, October 2014

- Compliant: 71%
- Noncompliant: 29%

Hand hygiene results, after patient contact, Regina Pioneer Village, 2 West, October 2014

- Compliant: 69%
- Noncompliant: 31%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 2 West was 70%

For the 2 West audit:

- 3 staff members did not conduct hand hygiene at all
- 1 staff member was observed with jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Regina Pioneer Village, 3 West,
October 2014

Hand hygiene results, after patient contact,
Regina Pioneer Village, 3 West,
October 2014
REGINA PIONEER VILLAGE 3 WEST

- For this analysis, the following definition of hand hygiene compliance was used:
  - Compliant:
    1) Hand gel or wash, AND
    2) A required time component of ≥ 15 seconds
  - Noncompliant:
    1) Gloves only,
    2) Missed hand hygiene opportunity,
    3) Hand gel or wash with a time component of < 15 seconds,
    4) Jewellery, and/or
    5) Artificial nails/nail polish

- Overall, hand hygiene compliance for 3 West was 60%

- For the 3 West audit:
  - 5 staff members did not conduct hand hygiene at all
  - 1 staff member was observed with jewellery
  - Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, Regina Pioneer Village, 4 East, October 2014

[Bar chart showing 100% noncompliant]

Hand hygiene results, after patient contact, Regina Pioneer Village, 4 East, October 2014

[Bar chart showing 27% compliant, 73% noncompliant]
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 4 East was 19%

For the 4 East audit:

- 13 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Regina Pioneer Village, 4 West,
October 2014

Hand hygiene results, after patient contact,
Regina Pioneer Village, 4 West,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- Compliant:
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds
- Noncompliant:
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 4 West was 30%

For the 4 West audit:

- 24 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
REGINA PIONEER VILLAGE HOSTEL

Hand hygiene results, before patient contact,
Regina Pioneer Village, Hostel,
October 2014

Hand hygiene results, after patient contact,
Regina Pioneer Village, Hostel,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Hostel was 32%

For the Hostel audit:

- 6 staff were observed with jewellery
- 8 staff were observed with artificial nails/nail polish
REGINA PIONEER VILLAGE MAIN WEST

Hand hygiene results, before patient contact,
Regina Pioneer Village, Main West,
October 2014

Hand hygiene results, after patient contact,
Regina Pioneer Village, Main West,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

- Overall, hand hygiene compliance for Main West was 33%

- For the Main West audit:
  - 10 staff members did not conduct hand hygiene at all
  - 1 staff member was observed with jewellery
  - Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, Regina General Hospital, 0D/1D, October 2014

Compliant: 78%
Noncompliant: 22%

Hand hygiene results, after patient contact, Regina General Hospital, 0D/1D, October 2014

Compliant: 61%
Noncompliant: 39%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 0D/1D was 62%

For the 0D/1D audit:

- 5 staff members did not conduct hand hygiene at all
- 1 staff member was observed with jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Regina General Hospital, 3B,
October 2014

Hand hygiene results, after patient contact,
Regina General Hospital, 3B,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds
- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 3B was 36%

For the 3B audit:

- 17 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Regina General Hospital, 3F,
October 2014

Hand hygiene results, after patient contact,
Regina General Hospital, 3F,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds
- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 3F was 46%.

For the 3F audit:

- 11 staff members did not conduct hand hygiene at all
- 2 staff members were observed with jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, Regina General Hospital, 4F, October 2014

Hand hygiene results, after patient contact, Regina General Hospital, 4F, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 4F was 60%

For the 4F audit:

- 9 staff members did not conduct hand hygiene at all
- 2 staff members were observed with jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Regina General Hospital, 5A,
October 2014

71% Compliant
29% Noncompliant

Hand hygiene results, after patient contact,
Regina General Hospital, 5A,
October 2014

69% Compliant
31% Noncompliant
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 5A was 70%

For the 5A audit:

- 8 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
RGH 6A

Hand hygiene results, before patient contact, Regina General Hospital, 6A, October 2014

Hand hygiene results, after patient contact, Regina General Hospital, 6A, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 6A was 78%.

For the 6A audit:

- 3 staff did not conduct hand hygiene at all
- Jewellery was not observed
- 1 staff member was observed with artificial nails/nail polish
Hand hygiene results, before patient contact, Regina General Hospital, 6F, October 2014

Compliant: 75%
Noncompliant: 25%

Hand hygiene results, after patient contact, Regina General Hospital, 6F, October 2014

Compliant: 53%
Noncompliant: 47%
For this analysis, the following definition of hand hygiene compliance was used:

- Compliant:
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- Noncompliant:
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 6F was 59%

For the 6F audit:

- 2 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
RGH AMBULATORY CARE

Hand hygiene results, before patient contact,
Regina General Hospital, Ambulatory Care,
October 2014

- Compliant: 85%
- Noncompliant: 15%

Hand hygiene results, after patient contact,
Regina General Hospital, Ambulatory Care,
October 2014

- Compliant: 86%
- Noncompliant: 14%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

- Overall, hand hygiene compliance for Ambulatory Care was 85%

- For the Ambulatory Care audit:
  - 3 staff members did not conduct hand hygiene at all
  - 1 staff member was observed with jewellery
  - Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, Regina General Hospital, Cardiac Cath Lab, October 2014

Hand hygiene results, after patient contact, Regina General Hospital, Cardiac Cath Lab, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1. Hand gel or wash, AND
  2. A required time component of ≥ 15 seconds

- **Noncompliant:**
  1. Gloves only,
  2. Missed hand hygiene opportunity,
  3. Hand gel or wash with a time component of < 15 seconds,
  4. Jewellery, and/or
  5. Artificial nails/nail polish

Overall, hand hygiene compliance for the Cardiac Cath Lab was 50%

For the Cardiac Cath Lab audit:

- 4 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
RGH CCU

Hand hygiene results, before patient contact,
Regina General Hospital, CCU,
October 2014

Hand hygiene results, after patient contact,
Regina General Hospital, CCU,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- Compliant:
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- Noncompliant:
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for CCU was 89%

For the CCU audit:

- 2 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Regina General Hospital, CSU,
October 2014

Hand hygiene results, after patient contact,
Regina General Hospital, CSU,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for CSU was 44%.

For the CSU audit:

- 9 staff members did not conduct hand hygiene at all
- 1 staff member was observed with jewellery
- Artificial nails/nail polish was not observed
RGH DAY SURGERY

Hand hygiene results, before patient contact, Regina General Hospital, Day Surgery, October 2014

- Compliant: 80%
- Noncompliant: 20%

Hand hygiene results, after patient contact, Regina General Hospital, Day Surgery, October 2014

- Compliant: 88%
- Noncompliant: 12%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Day Surgery was 85%

For the Day Surgery audit:

- 4 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Regina General Hospital, Endoscopy,
October 2014

Hand hygiene results, after patient contact,
Regina General Hospital, Endoscopy,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

- Overall, hand hygiene compliance for Endoscopy was 56%

- For the Endoscopy audit:
  - 2 staff members did not conduct hand hygiene at all
  - Jewellery was not observed
  - Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, Regina General Hospital, FAU, October 2014

Hand hygiene results, after patient contact, Regina General Hospital, FAU, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for FAU was 83%

For the FAU audit:

- 1 staff member did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Regina General Hospital,
Food and Nutrition Services,
October 2014

- Compliant: 38%
- Noncompliant: 62%

Hand hygiene results, after patient contact,
Regina General Hospital,
Food and Nutrition Services,
October 2014

- Compliant: 30%
- Noncompliant: 70%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Food and Nutrition Services was 35%

For the Food and Nutrition Services audit:

- 9 staff members did not conduct hand hygiene at all
- 1 staff member wore jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Regina General Hospital,
Interventional Cardiology EP Lab,
October 2014

Hand hygiene results, after patient contact,
Regina General Hospital,
Interventional Cardiology EP Lab,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for the EP Lab was 44%

For the EP Lab audit:

- 4 staff members did not conduct hand hygiene at all
- 2 staff members were observed with jewellery
- 2 staff members were observed with artificial nails/nail polish
Hand hygiene results, before patient contact, Regina General Hospital, Interventional Cardiology Pacer Clinic, October 2014

Hand hygiene results, after patient contact, Regina General Hospital, Interventional Cardiology Pacer Clinic, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for the Pacer Clinic was 33%

For the Pacer Clinic audit:

- 6 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
RGH LAB

Hand hygiene results, before patient contact,
Regina General Hospital, Lab,
October 2014

Compliant: 75%
Noncompliant: 25%

Hand hygiene results, after patient contact,
Regina General Hospital, Lab,
October 2014

Compliant: 100%
Noncompliant: 0%
For this analysis, the following definition of hand hygiene compliance was used:

- Compliant:
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- Noncompliant:
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for the Lab was 96%

For the Lab audit:

- 1 staff member did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
RGH MBU

Hand hygiene results, before patient contact, Regina General Hospital, MBU, October 2014

Hand hygiene results, after patient contact, Regina General Hospital, MBU, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds
- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for MBU was 36%

For the MBU audit:

- 9 staff members did not conduct hand hygiene at all
- 1 staff members were observed with jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Regina General Hospital,
Medical Imaging MDRU,
October 2014

Hand hygiene results, after patient contact,
Regina General Hospital,
Medical Imaging MDRU,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds
- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for MDRU was 4%

For the MDRU audit:

- 7 staff members did not conduct hand hygiene at all
- 20 staff members were observed with jewellery
- Artificial nails/nail polish was not observed
RGH NICU

Hand hygiene results, before patient contact, Regina General Hospital, NICU, October 2014

67%

Hand hygiene results, after patient contact, Regina General Hospital, NICU, October 2014

50%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for NICU was 56%.

For the NICU audit:

- 5 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, Regina General Hospital, Pediatric OP, October 2014

Hand hygiene results, after patient contact, Regina General Hospital, Pediatric OP, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- Compliant:
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- Noncompliant:
  1) Gloves only, 
  2) Missed hand hygiene opportunity, 
  3) Hand gel or wash with a time component of < 15 seconds, 
  4) Jewellery, and/or 
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Pediatric OP was 96%

For the Pediatric OP audit:

- 1 staff member did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
**RGH PULMONARY FUNCTION**

Hand hygiene results, before patient contact, Regina General Hospital, Pulmonary Function, October 2014

![Bar chart showing hand hygiene compliance before patient contact. 87% compliant, 33% noncompliant.]

Hand hygiene results, after patient contact, Regina General Hospital, Pulmonary Function, October 2014

![Bar chart showing hand hygiene compliance after patient contact. 57% compliant, 43% noncompliant.]
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Pulmonary Function was 60%.

For the Pulmonary Function audit:

- 10 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
RGH RENAL - HEMODIALYSIS

Hand hygiene results, before patient contact, Regina General Hospital, Renal-Hemodialysis, October 2014

Hand hygiene results, after patient contact, Regina General Hospital, Renal-Hemodialysis, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Renal - Hemodialysis was 56%

For the Renal - Hemodialysis audit:

- 11 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- 1 staff member was observed with artificial nails/nail polish
Hand hygiene results, before patient contact, Regina General Hospital, Respiratory Therapy, October 2014

Hand hygiene results, after patient contact, Regina General Hospital, Respiratory Therapy, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Respiratory Therapy was 81%

For the Respiratory Therapy audit:

- 5 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
RGH SHORT STAY

Hand hygiene results, before patient contact, Regina General Hospital, Short Stay, October 2014

Hand hygiene results, after patient contact, Regina General Hospital, Short Stay, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1. Hand gel or wash, AND
  2. A required time component of ≥ 15 seconds

- **Noncompliant:**
  1. Gloves only,
  2. Missed hand hygiene opportunity,
  3. Hand gel or wash with a time component of < 15 seconds,
  4. Jewellery, and/or
  5. Artificial nails/nail polish

Overall, hand hygiene compliance for Short Stay was 59%

For the Short Stay audit:

- 6 staff members did not conduct hand hygiene at all
- 2 staff members were observed with jewellery
- Artificial nails/nail polish was not observed
RGH SICU

Hand hygiene results, before patient contact,
Regina General Hospital, SICU,
October 2014

![Bar chart showing hand hygiene compliance before patient contact. 54% compliant, 46% non-compliant.]

Hand hygiene results, after patient contact,
Regina General Hospital, SICU,
October 2014

![Bar chart showing hand hygiene compliance after patient contact. 87% compliant, 13% non-compliant.]
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for the SICU was 71%

For the SICU audit:

- 4 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Regina General Hospital,
Sleep Disorder Centre,
October 2014

54% 46%
Compliant Noncompliant

Hand hygiene results, after patient contact,
Regina General Hospital,
Sleep Disorder Centre,
October 2014

53% 47%
Compliant Noncompliant
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

- Overall, hand hygiene compliance for the Sleep Disorder Centre was 53%

- For the Sleep Disorder Centre audit:
  - 14 staff members did not conduct hand hygiene at all
  - Jewellery was not observed
  - 1 staff member was observed with artificial nails/nail polish
Hand hygiene results, before patient contact,
Regina General Hospital,
Women's Health Centre,
October 2014

Hand hygiene results, after patient contact,
Regina General Hospital,
Women's Health Centre,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, **AND**
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

**Overall, hand hygiene compliance for the Women’s Health Center was 63%**

**For the Women’s Health Centre audit:**

- 5 staff members did not conduct hand hygiene at all
- 1 staff member was observed with jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Santa Maria, 2nd Floor,
October 2014

Hand hygiene results, after patient contact,
Santa Maria, 2nd Floor,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

**Overall, hand hygiene compliance for the 2\textsuperscript{nd} Floor was 83\%**

**For the 2\textsuperscript{nd} Floor audit:**

- 1 staff member did not conduct hand hygiene at all
- 1 staff member was observed with jewellery
- 1 staff member was observed with artificial nails/nail polish
Hand hygiene results, before patient contact,
Santa Maria, 3rd Floor,
October 2014

Hand hygiene results, after patient contact,
Santa Maria, 3rd Floor,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq$ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for the 3rd Floor was 67%

For the 3rd Floor audit:

- 3 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- 1 staff member was observed with artificial nails/nail polish
Hand hygiene results, Santa Maria, 4th Floor, October 2014

- Compliant: 56%
- Noncompliant: 44%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

For the 4th Floor audit:

- 2 staff members were observed with jewellery
- 1 staff member was observed with artificial nails/nail polish
Hand hygiene results, before patient contact,
Santa Maria, Food and Nutrition Services,
October 2014

Hand hygiene results, after patient contact,
Santa Maria, Food and Nutrition Services,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1. Hand gel or wash, AND
  2. A required time component of ≥ 15 seconds

- **Noncompliant:**
  1. Gloves only,
  2. Missed hand hygiene opportunity,
  3. Hand gel or wash with a time component of < 15 seconds,
  4. Jewellery, and/or
  5. Artificial nails/nail polish

Overall, hand hygiene compliance for the Food and Nutrition Services was 100%

For the Food and Nutrition Services audit:

- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, Santa Maria, Recreation Therapy, October 2014

Hand hygiene results, after patient contact, Santa Maria, Recreation Therapy, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- Compliant:
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- Noncompliant:
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for the Recreation Therapy was 89%.

For the Food and Nutrition Services audit:

- 1 staff member did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, Santa Maria, Support Services, October 2014

Compliant: 22%
Noncompliant: 78%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

For the Support Services audit:

- 1 staff member did not conduct hand hygiene at all
- 3 staff members were observed with jewellery
- 3 staff members were observed with artificial nails/nail polish
SILVER HEIGHTS SPECIAL CARE HOME

Hand hygiene results, before patient contact, Silver Heights Special Care Home, October 2014

- Compliant: 82%
- Noncompliant: 18%

Hand hygiene results, after patient contact, Silver Heights Special Care Home, October 2014

- Compliant: 69%
- Noncompliant: 31%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

- Overall, hand hygiene compliance for Silver Heights Special Care Home was 74%

- For the Silver Heights Special Care Home audit:
  - 3 staff members did not conduct hand hygiene at all
  - 2 staff members were observed with jewellery
  - 1 staff member was observed with artificial nails/nail polish
Hand hygiene results, before patient contact,
SEICC/Moosomin, Acute,
October 2014

Hand hygiene results, after patient contact,
SEICC/Moosomin, Acute,
October 2014
SEICC/MOOSOMIN ACUTE

- For this analysis, the following definition of hand hygiene compliance was used:
  - Compliant:
    1) Hand gel or wash, AND
    2) A required time component of ≥ 15 seconds
  - Noncompliant:
    1) Gloves only,
    2) Missed hand hygiene opportunity,
    3) Hand gel or wash with a time component of < 15 seconds,
    4) Jewellery, and/or
    5) Artificial nails/nail polish

- Overall, hand hygiene compliance for SEICC/Moosomin Acute was 90%

- For the SEICC/Moosomin Acute audit:
  - 2 staff members did not conduct hand hygiene at all
  - Jewellery was not observed
  - Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, SEICC/Moosomin, Lab, October 2014

Hand hygiene results, after patient contact, SEICC/Moosomin, Lab, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- Compliant:
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- Noncompliant:
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for SEICC/Moosomin Lab was 0%

For the SEICC/Moosomin Lab audit:

- 9 staff members did not conduct hand hygiene at all
- 7 staff members were observed with jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, SEICC/Moosomin, LTC, October 2014

- 30% Compliant
- 70% Noncompliant

Hand hygiene results, after patient contact, SEICC/Moosomin, LTC, October 2014

- 71% Compliant
- 29% Noncompliant
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for SEICC/Moosomin LTC was 56%.

For the SEICC/Moosomin LTC audit:

- 8 staff members did not conduct hand hygiene at all
- 5 staff members were observed with jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, St. Joseph's Integrated Care Centre, October 2014

Hand hygiene results, after patient contact, St. Joseph's Integrated Care Centre, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for St. Joseph’s Integrated Care Centre was 93%

For the St Joseph’s Integrated Care Centre audit:

- 2 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, Whitewood Community Health Centre, October 2014

Hand hygiene results, after patient contact, Whitewood Community Health Centre, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Whitewood Community Health Centre was 62%

For the Whitewood Community Health Centre audit:

- 6 staff members did not conduct hand hygiene at all
- 4 staff members were observed with jewellery
- 2 staff members were observed with artificial nails/nail polish
WILLIAM BOOTH SPECIAL CARE HOME

Hand hygiene results, before patient contact,
William Booth Special Care Home,
October 2014

33% Compliant
87% Noncompliant

Hand hygiene results, after patient contact,
William Booth Special Care Home,
October 2014

50% Compliant
50% Noncompliant
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for William Booth Special Care Home was 41%.

For the William Booth Special Care Home audit:

- 12 staff members did not conduct hand hygiene at all
- 1 staff member was observed with jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
Wolseley Memorial Hospital,
October 2014

Hand hygiene results, after patient contact,
Wolseley Memorial Hospital,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Wolseley Memorial Hospital was 7%

For the Wolseley Memorial Hospital audit:

- 11 staff members did not conduct hand hygiene at all
- 1 staff member was observed with jewellery
- 2 staff members were observed with artificial nails/nail polish
Hand hygiene results, before patient contact,
WRC, 2-5,
October 2014

Compliant: 75%
Noncompliant: 25%

Hand hygiene results, after patient contact,
WRC, 2-5,
October 2014

Compliant: 71%
Noncompliant: 29%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant**: 
  1) Hand gel or wash, AND 
  2) A required time component of ≥ 15 seconds

- **Noncompliant**: 
  1) Gloves only, 
  2) Missed hand hygiene opportunity, 
  3) Hand gel or wash with a time component of < 15 seconds, 
  4) Jewellery, and/or 
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 2-5 was 74%.

For the 2-5 audit:

- 4 staff members did not conduct hand hygiene at all
- 1 staff member was observed with jewellery
- 2 staff members were observed with artificial nails/nail polish
Hand hygiene results, before patient contact, WRC, 3-5, October 2014

Hand hygiene results, after patient contact, WRC, 3-5, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of \( \geq 15 \) seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of \(< 15 \) seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for 3-5 was 77%

For the 3-5 audit:

- 2 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
WRC, 3-6,
October 2014

43% Compliant
57% Noncompliant

Hand hygiene results, after patient contact,
WRC, 3-6,
October 2014

50% Compliant
50% Noncompliant
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

- Overall, hand hygiene compliance for 3-6 was 46%

- For the 3-6 audit:
  - 5 staff members did not conduct hand hygiene at all
  - Jewellery was not observed
  - Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
WRC, Adult OT,
October 2014

Hand hygiene results, after patient contact,
WRC, Adult OT,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Adult OT was 7%

For the Adult OT audit:

- 2 staff members did not conduct hand hygiene at all
- 3 staff members were observed with jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
WRC, Children's Program,
October 2014

Hand hygiene results, after patient contact,
WRC, Children's Program,
October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

- Overall, hand hygiene compliance for the Children’s Program was 57%

- For the Children’s Program audit:
  - 12 staff members did not conduct hand hygiene at all
  - 3 staff members were observed with jewellery
  - 1 staff member was observed with artificial nails/nail polish
WRC FOOD AND NUTRITION SERVICES

Hand hygiene results, before patient contact,
WRC, Food and Nutrition Services,
October 2014

47% 53%
Compliant Noncompliant

Hand hygiene results, after patient contact,
WRC, Food and Nutrition Services,
October 2014

31% 69%
Compliant Noncompliant
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Food and Nutrition Services was 41%

For the Food and Nutrition Services audit:

- 12 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, WRC, FRP, October 2014

- Compliant: 80%
- Noncompliant: 20%

Hand hygiene results, after patient contact, WRC, FRP, October 2014

- Compliant: 83%
- Noncompliant: 17%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for FRP was 82%

For the FRP audit:

- 2 staff members did not conduct hand hygiene at all
- 3 staff members were observed with jewellery
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact, WRC, Main 5, October 2014

Hand hygiene results, after patient contact, WRC, Main 5, October 2014
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of ≥ 15 seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of < 15 seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Main 5 was 63%.

For the Main 5 audit:

- 10 staff members did not conduct hand hygiene at all
- Jewellery was not observed
- Artificial nails/nail polish was not observed
Hand hygiene results, before patient contact,
WRC, Main 6,
October 2014

Compliant: 40%
Noncompliant: 60%

Hand hygiene results, after patient contact,
WRC, Main 6,
October 2014

Compliant: 67%
Noncompliant: 33%
For this analysis, the following definition of hand hygiene compliance was used:

- **Compliant:**
  1) Hand gel or wash, AND
  2) A required time component of $\geq 15$ seconds

- **Noncompliant:**
  1) Gloves only,
  2) Missed hand hygiene opportunity,
  3) Hand gel or wash with a time component of $< 15$ seconds,
  4) Jewellery, and/or
  5) Artificial nails/nail polish

Overall, hand hygiene compliance for Main 6 was 52%

For the Main 6 audit:

- 8 staff members did not conduct hand hygiene at all
- 3 staff members were observed with jewellery
- 2 staff members were observed with artificial nails/nail polish