



WA Hand Hygiene Program

Auditing requirements

The National Safety and Quality Health Service Standards require health services to have a hand hygiene program in place that is consistent with the current National Hand Hygiene Initiative (NHHI) and jurisdictional requirements¹.

Compliance data must be submitted electronically three (3) times per year to the NHHI in accordance with their Guidelines: [Guidelines for Data Submission to NHHI – Hospitals](#).

Reporting dates for the NHHI:

- March 31
- June 30
- October 31

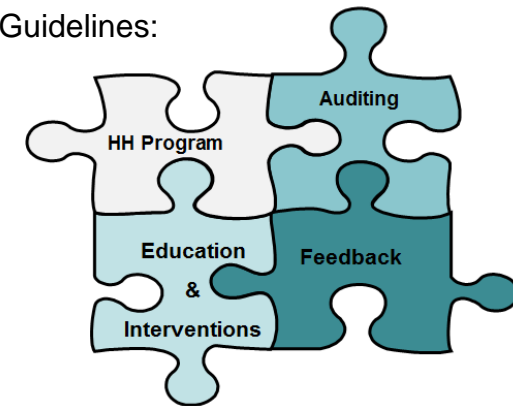
Exemptions for compliance auditing in WA:

Small hospitals (less than 25 acute beds), **mental health services** and **ambulatory care settings** (e.g. School clinics, community midwifery centres) are exempt from the routine compliance auditing component of the NHHI, as meaningful data is unlikely to be obtained; however, the remaining key elements of the program are required to be implemented.

If the health service does choose to audit compliance, it is recommend that auditing takes place where there is high activity and risk to patients (e.g. ECT centres, immunisation clinics, and treatment or procedure rooms).

Rationale:

Auditing in low risk settings results in a small number of 'Moments' being observed and resources required to undertake auditing may be better utilised measuring other aspects of a hand hygiene program e.g. product placement, education etc. In addition, when data is used for comparison, it is important to note that a higher number of 'Moments' audited will generate a more reliable compliance rate.



¹ Australian Commission on Safety and Quality in Health Care. National Safety and Quality Health Service Standards. 2nd ed. Sydney: ACSQHC; 2017