

## Clean Care is Safer Care: The Need for Improved Compliance with Hand Hygiene Standards



A recent study in the March 2012 issue of *Home Healthcare Nurse* determined

that overall compliance with hand hygiene practices by home health nurses was poor. According to the study, home health nurses performed hand hygiene actions a mere 61 times out of 103 hand hygiene opportunities. The researchers concluded that the hygiene practices of the home health nurses studied were not consistent with contemporary hand hygiene standards or infection prevention and control guidelines. The researchers theorized that the hand hygiene habits of the nurses were determined by lack of education of best practices, convenience, personal preference, and environmental factors in the patient's home.

This new research suggests that home healthcare agencies should adopt policies and procedures to promote compliance with hand hygiene best practices. Infection control is instrumental for quality and safety in healthcare. Hand hygiene is the single greatest infection prevention and control strategy.

In order to improve compliance with hand hygiene best practices, home health agencies should adopt policies and procedures to educate nurses on best practices, as well as incorporate solutions to overcome environmental obstacles in the home. For instance, an agency should determine its own level of compliance by performing the World Health Organization's "Hand Hygiene Self Assessment." The agency should also provide continuous in-service education to its nurses on the World Health Organization's "Five Moments for Hand Hygiene." In addition, hand hygiene products, including alcohol pads, liquid alcohol hand solution, and clean paper towels, should be added into the agency's portable wound cleaning kits in order to promote convenience for the nurse since many patient homes do not have the necessary home hygiene equipment.

Indeed, Medicare payments in the future could be impacted by compliance with hand hygiene best practices. It is no secret that CMS would like to implement outcome based payments. In fact, CMS has already implemented a Home Health Pay-for-Performance demonstration project to determine if incentive payments to home health providers have any impact on the number of positive outcomes. While CMS collects the data, it has been speculated that positive outcomes are likely to be measured by increased savings due to lower incidence of acute care hospitalization and emergency care, improvement in select activities of daily living, and improvement in the status of wounds. All of these metrics are linked to the absence of infection, the risk of which can be reduced substantially by compliance with hand hygiene best practices.

Every home health provider can improve patient care by increasing compliance with hand hygiene best practices. However, the day-to-day practices of nurses will not be changed until the agency's leadership assesses current habits for a problem, educates staff on hand hygiene best practices, provides the tools to change current behaviors, and continually follows up on the issue. It is best to address these issues in your policies and

procedures now, before your payment in the future depends on it.

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