

# National Hand Hygiene Initiative compliance rate, 2012–

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# National Hand Hygiene Initiative compliance rate, 2012–

## Identifying and definitional attributes

<b>Metadata item type:</b>	Indicator
<b>Indicator type:</b>	Indicator
<b>Short name:</b>	Hand hygiene compliance rate
<b>METEOR identifier:</b>	727746
<b>Registration status:</b>	<a href="#">Health</a> , Standard 06/09/2023
<b>Description:</b>	Hand hygiene generally refers to the cleaning of hands by healthcare workers, using soap and water or alcohol-based hand rubs. Hand hygiene rates describe the number of <a href="#">compliant hand hygiene moments</a> observed in relation to the total number of <a href="#">hand hygiene moments</a> .
<b>Rationale:</b>	Substantial evidence indicates that hand hygiene reduces the transmission of infection in healthcare. Effective hand hygiene prevents the onward spread of disease to others, and also limits contamination of the healthcare environment. Effective hand hygiene is a fundamental infection prevention and control strategy and a core aspect of standard precautions.
<b>Data quality statement:</b>	<a href="#">National Hand Hygiene Data Collection, 2012-AIHW Data Quality Statements</a> , Standard 01/02/2023

## Collection and usage attributes

<b>Computation description:</b>	Hand hygiene rates are calculated by dividing the number of correct, observed hand hygiene moments by the total number of moments observed by auditors in a specified audit period.
<b>Computation:</b>	<p>Compliance rate:</p> $(\text{Numerator} \div \text{Denominator}) \times 100$ <p>Published against the agreed Australian Health Ministers' Advisory Council (AHMAC) benchmark.</p> <p>Confidence intervals:</p> <ul style="list-style-type: none"><li>Upper confidence interval = <math>((a + b) / c) \times 100</math></li><li>Lower confidence interval = <math>((a - b) / c) \times 100</math></li></ul> <p>where:</p> <ul style="list-style-type: none"><li><math>a = 2 \times \text{Denominator} \times p + z^2</math></li><li><math>b = z \times \text{SQRT}[z^2 + 4 \times (\text{Denominator} \times p \times q)]</math></li><li><math>c = 2 \times (\text{Denominator} + z^2)</math></li><li><math>z = 1.96</math></li><li><math>p = \text{Numerator} \div \text{Denominator}</math></li><li><math>q = 1 - p</math></li></ul>
<b>Numerator:</b>	Number of hand hygiene actions observed during a specified audit period

**Numerator data elements:**

**Data Element / Data Set**

[Establishment—number of compliant hand hygiene moments observed, total NN\[NNNN\]](#)

**Data Source**

[National Hand Hygiene Data Collection](#)

**NMDS / DSS**

[Hand hygiene NBEDS 2012–](#)

**Guide for use**

Data source type: Audit

**Denominator:**

Total number of hand hygiene moments observed during an audit period

**Denominator data elements:**

**Data Element / Data Set**

[Establishment—number of hand hygiene moments observed, total NN\[NNNN\]](#)

**Data Source**

[National Hand Hygiene Data Collection](#)

**NMDS / DSS**

[Hand hygiene NBEDS 2012–](#)

**Guide for use**

Data source type: Audit

**Disaggregation:****Facility/Hospital level:**

Number of observed moments and hand hygiene compliance rate (with confidence intervals), by:

- Organisation type
- Peer group

**National level:**

Number of observed moments and hand hygiene compliance rate (with confidence intervals), by:

- Hand hygiene moment:
  - Moment 1 — Before touching a patient
  - Moment 2 — Before a procedure
  - Moment 3 — After a procedure of body fluid exposure risk
  - Moment 4 — After touching a patient
  - Moment 5 — After touching a patient's surroundings
- Healthcare worker type:
  - Administrative and clerical staff
  - Allied health care worker
  - Ambulance
  - Dental assistant/dental nurse
  - Dental technicians/laboratory staff (no patient contact)
  - Dental therapists, dental hygienist, dental prosthetist and oral health therapists
  - Dentist, specialist dentists
  - Domestic
  - Invasive technician
  - Medical practitioner
  - Nurse/midwife
  - Personal care staff
  - Student allied health
  - Student dental technicians/laboratory staff (no patient contact)
  - Student dental assistant/dental nurse
  - Student dental therapists
  - Student dentist
  - Student doctor
  - Student nurse/midwife
  - Student personal care
  - Other — not categorised elsewhere

Some disaggregation may result in numbers too small for publication.

**Disaggregation data elements:****Data Element / Data Set**

[Establishment—Australian state/territory identifier, code N](#)

**Data Source**

[National Hand Hygiene Data Collection](#)

**NMDS / DSS**

[Hand hygiene NBEDS 2012–](#)

**Guide for use**

Data source type: Audit

**Data Element / Data Set**

[Establishment—staffing categories, healthcare worker code N\[N\]](#)

**Data Source**

[National Hand Hygiene Data Collection](#)

**NMDS / DSS**

[Hand hygiene NBEDS 2012–](#)

**Guide for use**

Data source type: Audit

**Data Element / Data Set**

[Hand hygiene moment—hand hygiene moment type, code N](#)

**Data Source**

[National Hand Hygiene Data Collection](#)

**NMDS / DSS**

[Hand hygiene NBEDS 2012–](#)

**Guide for use**

Data source type: Audit

**Data Element / Data Set**

[Organisation—organisation type, healthcare code N](#)

**Data Source**

[National Hand Hygiene Data Collection](#)

**NMDS / DSS**

[Hand hygiene NBEDS 2012–](#)

**Guide for use**

Data source type: Audit

**Data Element / Data Set**

[Establishment—peer group, health code A\[X\]](#)

**Data Source**

[National Hand Hygiene Data Collection](#)

**NMDS / DSS**

[Hand hygiene NBEDS 2012–](#)

**Guide for use**

Data source type: Audit

**Data Element / Data Set**

[Establishment—peer group, health code NN](#)

**Data Source**

[National Hand Hygiene Data Collection](#)

**NMDS / DSS**

[Hand hygiene NBEDS 2012–](#)

**Guide for use**

Data source type: Audit

**Comments:****Suppression**

- Suppression Rule 1: If a facility/hospital reports having less than 25 beds at the end of an audit period, observed moments and compliance rate will be suppressed and will not be compared to the national benchmark.
- Suppression Rule 2: If a facility/hospital reports having less than 100 observed moments at the end of an audit period, the number of observed moments will be suppressed, and the compliance rate will not be compared to the national benchmark.

**Reporting**

Reporting of hospital- or facility-level data may result in numbers too small for publication.

## Representational attributes

<b>Representation class:</b>	Percentage
<b>Data type:</b>	Real
<b>Unit of measure:</b>	Service event
<b>Format:</b>	Observed moments: NN[NNN] Compliance rate: N[NN].N

## Data source attributes

**Data sources:****Data Source**

[National Hand Hygiene Data Collection](#)

**Frequency**

2 times a year (minimum)

**Data custodian**

Australian Commission on Safety and Quality in Health Care

## Accountability attributes

**Reporting requirements:** Reporting is in line with the audit periods, which is at a 3 months, 4 months and 5 months interval.

Audit periods are:

- Audit Period One (A1): 1 November to 31 March (5 months period)
- Audit Period Two (A2): 1 April to 30 June (3 months period)
- Audit Period Three (A3): 1 July to 31 October (4 months period)

**Organisation responsible for providing data:** Australian Commission on Safety and Quality in Health Care

**Accountability:** The Australian Commission on Safety and Quality in Health Care is responsible for the development, collection and initial reporting of hand hygiene data.

**Benchmark:** The national hand hygiene benchmark was set by the former Australian Health Ministers' Advisory Council (AHMAC).

In October 2015, AHMAC endorsed a revised national benchmark of 80% hand hygiene compliance, for the purposes of reporting.

AHMAC also endorsed reporting against this benchmark for all healthcare worker groups and for each of the five moments. The revised benchmark came into effect in 2017.

**Other issues caveats:** Data collection exemptions were made by the Australian Commission on Safety and Quality in Health Care in response to COVID-19:

[Advice 20/01](#): Hand hygiene data collection was not mandatory for Audit 2, 2020

[Advice 21/05](#): Hand hygiene data collection was not mandatory for Audit 3, 2021, Audit 1, 2022 and Audit 2, 2022.

**Release date:** 31/12/2012

## Source and reference attributes

**Submitting organisation:** Australian Institute of Health and Welfare

**Reference documents:** [Australian Commission on Safety and Quality in Health Care \(ACSQHC\) 2019. National Hand Hygiene Initiative. Sydney: ACSQHC. Viewed 26 March 2020](#)

[Australian Commission on Safety and Quality in Health Care \(ACSQHC\) 2019. National Hand Hygiene Initiative Manual. Sydney: ACSQHC](#)