

HAND HYGIENE PEER REVIEWER PROCESS

Interior Health would like to recognize and acknowledge the traditional, ancestral, and unceded territories of the Dākelh Dené, Ktunaxa, Nlaka'pamux, Secwépemc, St'át'imc, syilx, and Tšilhqot'in Nations where we live, learn, collaborate, and work together.

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Purpose

To assist in implementing the Hand Hygiene (HH) peer reviewer process across Interior Health (IH) by:

- Understanding the HH program and the changes that have occurred.
- Identifying the steps required for implementation of the program.
- Highlighting the roles and responsibility for those involved, in initiating the HH Peer Reviewer (HHPR) program in health care facilities.

Procedures

Background

- There is a provincially mandated HH program with standardized observation process.
- HH compliance rates are required to be publicly shared in acute care and long-term care facilities.

Changes

- Accreditation Canada has a new Hand Hygiene Required Organizational Practice (ROP), which states, "The organizational leaders are accountable to demonstrate improvement in hand hygiene practices as part of the organization's infection prevention and control program." (Accreditation Canada, 2024).
- No further funding for HH Co-op students who previously did HH audits across IH.

Implementation

- The implementation of the HHPR program is a complex process that will include leadership and front-line staff.
- Acute care and LTC facilities will be supported through this process by Infection Prevention and Control (IPAC) and health care leaders. Identifying the step-by-step process and the role expectation is the first step in this Quality Improvement (QI) initiative.

Step 1. Identification

Hand Hygiene Peer Reviewers

- Any interested frontline staff member should connect with their manager to review the program and role expectations.
- Enroll in the HHPR online education webinar once the HH Lead has emailed the welcome email with webinar links.

Unit Managers

- Unit managers are to identify two Hand Hygiene Peer Reviewers (HHPR) per unit. If there are no HHPR volunteers, the manager is responsible to assign 2 staff members. The manager can refer to this [Hand Hygiene Peer Reviewer Role Information](#) to better understand the requirements of the role. Additionally, refer to the manager's role discussed below.

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Note: the manager must be willing to provide 20 minutes each week for HH reviews to occur as part of the reviewers' regular work schedule.

- The unit manager will email the unit Infection Control Professional (ICP) or HH lead, the HHPRs names, manager, role, facility, unit, and mnemonic.

Hand Hygiene Lead

- The HH lead will add the HHPR to their master list of HHPRs.
- The HH lead will email the welcome email with [HHPR Pre-Reading Resources](#) and links/dates to the HHPR education webinars.
- The HH lead will register the HHPRs in the Clean Hands System.

Step 2. Preparation for Hand Hygiene Audits

Hand Hygiene Peer Reviewer

- The HHPR are responsible for reviewing the [HHPR Pre-Reading Resources.docx](#), provided via email prior to the education session.

Education

- Approximate education time:
 - 60 minutes of pre-reading for the online education session
 - 60 minutes for the initial online education session
 - 30–60-minute education/observation practice sessions on the unit. Additional education/observation sessions may need to be booked as needed until the HHPR feels confident doing HH audits.

Unit Managers

- Schedule time for the HHPR to complete the pre-reading resources.

Hand Hygiene Lead

- The HH lead will provide the initial online education webinar.
- HH lead will provide ongoing teams meeting sessions for education and support, two times/month.

Step 3. In-Person Education/Observation/Sign Off

Hand Hygiene Peer Reviewer

- Book approximately 30 minutes of time with the unit ICP for the in-person education/observation session, one to two weeks after the initial education.
 - HHPRs can practice audits during the one-two weeks prior to their booked time with the ICP but should not enter data into the clean hands system prior to signing off.
- Attend in-person education/observation sessions until the HHPR feels confident with HH audits and entering data/running reports from the clean hands system and is signed off.
- Are required to pass the HHPR test.

Unit Manager

- Schedule and support time with the ICP and HHPR for education/observation/sign off. Repeat the process until the HHPR is ready to do HH audits.

Unit Infection Control Professional

- Book approximately 30 minutes of time with the HHPR for the in-person education/observation session.
- Repeat sessions with HHPR until they feel confident with entering data and running reports from the clean hands system.
- The in-person education/observation session will include:
 - Answering questions
 - Provide education as needed.
 - Demonstrate a HH audit.
 - Observe the HHPR doing a HH audit.
 - Review how to enter the data and run monthly reports in the clean hands system.
 - HHPRs may need to book more than one education/observation session with the unit ICP until they feel confident doing HH audits.
- The unit ICP will sign off the HHPR when they demonstrate they are able to:
 - Observe HH according to the 4 moments of HH.
 - Document the observations properly (either on the clean hands app or on paper).
 - Enter the HH observations to the Clean Hands System if it was recorded on paper.
 - Learn how to use the reports in the Clean Hands System. The site ICP will assist the HHPR in running reports until the HHPR feels comfortable.
- The HHPR is required to pass the HHPR test.

Step 4. Hand Hygiene Audit**Hand Hygiene Peer Reviewer**

- Perform unit HH audits for 20 minutes each week.
- Record data into the clean hands system if recorded on paper or can use the clean hands app to do the HH audit.
- Run monthly HH reports.

Unit Manager

- Schedule time for the HHPR to complete the weekly HH audits.

Unit Infection Control Professional and Hand Hygiene Lead

- Support HHPR and Unit manager as needed.
- Assist with clean hands system and monthly reports.

Step 5. Feedback

Hand Hygiene Peer Reviewer

- Provide in the moment Feedback.
- Meet with unit manager and review reports/trends.

Unit Manager

- Meet with HHPR and Unit ICP monthly or as needed to review reports and trends.

Unit Infection Control Professional

- Meet with HHPR and unit manager monthly or as needed to review reports and trends.

Hand Hygiene Lead

- Support team as needed.

Step 6. Quality Improvement

Unit Managers and Hand Hygiene Peer Reviewer

- Managers will work with their HHPRs to explore unit specific QI initiatives that would promote HH and a positive safety culture, using resources such as:
 - [Hand Hygiene Quality Improvement Plan](#)
 - [Hand Hygiene Action Plan Toolkit](#)
- Explore questions such as:
 - How can we make HH easier?
 - How can we do HH better as a team?
 - How can we create a positive safety culture on our unit?
 - How can we involve our patients and other staff on our unit?
 - How can we implement HH celebrations, games and creative initiatives on our unit?
- View Reports: [Clean Hands Audit](#)
 - Review trends, previous quarters, challenges and things that are working well.

Unit Manager

- Managers will create a unit specific QI plan to meet Accreditation Canada's ROP through using the following resources and reports:
 - [Hand Hygiene Quality Improvement Plan](#)
 - [Hand Hygiene Action Plan Toolkit](#)
 - [Clean Hands Audit](#) reports
 - [Unit Level - Power BI](#) reports
- Connect with unit ICP, the quality portfolio and HH Lead as needed.

Roles

Hand Hygiene Peer Reviewer Role

Identification

- Any interested frontline staff member should connect with their manager to review the program and role expectations.
- Enroll in the HHPR online education webinar once the HH Lead has emailed the welcome email with webinar links.

Preparation for Hand Hygiene Audits

- Complete the [HHPR Pre-Reading Resources](#).
- Attend the online HHPR education session.

In-Person Education/Observation

- Book time with unit ICP for in person education, observation and sign off. Repeat this step until HHPR is ready to be independent with HH audits.
- Is required to pass the HHPR test.

Hand Hygiene Audits

Once the HHPR has been signed off and has passed their test, HHPR are responsible for the following:

- Complete 20 minutes of HH audits each week on their unit.
 - HHPRs and unit managers will communicate and schedule these 20 minutes for HH audits weekly and prioritize this time in their weekly work plan.
- Record data into the clean hands system: [Login | Clean Hands Audit Account Access](#)
- Run monthly reports from the clean hands system with assistance from the unit ICP and on their own once they are more experienced.
 - Schedule time to run the HH reports through the Clean Hands System each month.

Feedback

- HHPRs are to provide feedback:
 - To their peers, in the moment, while doing HH audits on the unit.
 - To their peers during meetings, huddles, and unit group discussions. The feedback and discussions would include:
 - Current HH audit findings and reports
 - Trends
 - What things are working well for HH on the unit?
 - What barriers or challenges are staff encountering for HH on the unit?
 - To the unit leadership once per month or at an agreed upon interval, regarding:
 - Current HH audit findings and reports
 - Trends
 - What is working well for HH on the unit?
 - What barriers or challenges are staff encountering for HH on the unit?

Quality Improvement

- HHPRs meet with unit managers once a month to discuss HH successes, challenges, and trends. HHPRs will also share the monthly report with the managers, help identify common themes and assist in unit-specific quality improvement (QI) plans. The following QI documents will be used to guide their work:
 - [Hand Hygiene Quality Improvement Plan](#)
 - [Hand Hygiene Action Plan Toolkit](#)
- They will explore questions such as:
 - How can we make HH easier?
 - How can we do HH better?
 - How can we create a positive safety culture on our unit?
 - How can we involve our patients and other staff on our unit?
 - How can we implement HH celebrations, games, and creative initiatives on our unit?

Health Care Leader Role: Executive Director, Director & Manager

- Health care leaders have an essential role in supporting this QI initiative. Identifying HH as a priority in patient safety and health care acquired disease prevention is an important first step in this process.
- Accreditation Canada's update to the Required Organizational Practice (ROP) is one of the drivers of the HH peer reviewer program. The ROP statement identifies "Organizational leaders are accountable to demonstrate improvement in hand hygiene practices as part of the organizations' infection prevention and control program" (Accreditation Canada, 2024).
 - Accreditation Canada revised the hand hygiene ROP in 2024 from the requirement for education, training, and measurement of compliance to improving HH practice, which still encompasses the need to monitor compliance.
 - These updates have shifted the focus to the organizational leaders to be accountable to demonstrate awareness of compliance rates, quality improvement action plans and initiatives to increase and sustain HH compliance.
 - Accreditation Canada has created a test for compliance and guidelines for organizational leaders.
 - **Organizational Leaders:**
 - Define an aim for HH practices.
 - Invest in resources to improve and support HH.
 - Ensure that HH QI improvement plan is developed.
 - Monitor HH improvement activities.
 - Ensures IPAC is informed on HH learnings and activities (Accreditation Canada, 2024)
- The HHPR model helps meet these compliance guidelines.

Manager Role

Managers play a pivotal role in implementing the HHPR program on their units. They are essential in promoting HH and a positive safety culture. Managers are responsible for the following:

Identification

- Identify two staff members to be the unit HHPRs:
 - HHPRs can be staff in any discipline that hold a regular position on your unit.
 - The peer reviewer should not be in a high turnover position and must plan to work in their position, for the foreseeable future.
 - Managers are to ask their unit staff if there is any interest in taking on a QI role as a HHPR. This role should appeal to those interested in:
 - Moving their careers into a leadership role (someone who takes initiative and shows interest in professional growth).
 - Developing communication skills and experience in delivering adult education.
 - Someone who is interested in working on a QI initiative that promotes a positive safety culture.
 - If there are no volunteers, managers will need to assign two staff members to be HHPRs. Ideally if someone is assigned, it should be someone who you foresee accepting responsibility and accountability to fulfill the role.
 - If HHPRs leave their job on the unit, repeat the process in identifying a HHPR.
- Email the unit ICP or HH lead the HHPRs names, manager, role, facility, unit, and mnemonic.
- Discuss the role expectations with the HHPR.

Preparation for Hand Hygiene Audits

- Schedule time for the HHPR to do pre-reading education and attend the online education sessions.

In-Person Education/Observation

- Schedule time for the HHPR to complete the in-person education, observation and sign off until the HHPR feels confident doing HH audits on their own.

Hand Hygiene Audits

- Schedule 20 minutes per week for HH audits.
- Meet and communicate with the HHPR monthly to discuss HH successes, challenges, and trends.
- HHPR will share the monthly report with the managers and help identify common themes.
- Communicate with HHPR:
 - Schedule routine meetings with HHPRs in calendars.
 - Determine preferred communication format outside scheduled meetings.
 - Assess peers comfort level with providing feedback.

- Address and support successes or challenges the HHPR experiences with providing feedback.

Feedback

- Review and support the feedback process with HHPR.
- Meet with HHPR and Unit ICP monthly to review reports/trends.

Quality Improvement

- Meet with the HHPR monthly or as needed, to review the HH monthly reports, trends, successes, challenges, and unit specific QI initiatives.

They will explore questions such as:

- How can we make HH easier?
- How can we do HH better?
- How can we create a positive safety culture on our unit?
- How can we involve our patients and other staff on our unit?
- How can we implement HH celebrations, games, and creative initiatives on our unit?
- Managers will create a unit specific QI plan to meet Accreditation Canada's ROP through using the following resources and reports:
 - [Hand Hygiene Quality Improvement Plan](#)
 - [Hand Hygiene Action Plan Toolkit](#)
 - [Clean Hands Audit](#) reports
 - [Unit Level - Power BI](#) reports
 - Feedback from the HHPR
- For QI support, managers will connect with unit ICP, the quality portfolio and HH Lead as needed.

Infection Prevention and Control Role

The site ICP will support the HHPR and unit managers throughout the entire process.

- ICP will connect with unit manager prior to starting the HHPR process to answer any questions and review the program.

Identification

- Once the unit manager emails the HHPRs name to the unit ICP, the ICP will forward the HHPR name to the HH lead.

In-Person Education/Observation

- Within 1-2 weeks after the HHPR has completed the initial online education, the unit ICP will book 30-60 minutes of education/observation time with the HHPR.
 - The ICP will advise HHPRs that they can practice audits during the 1-2 weeks prior to their booked time with the ICP but should not enter data into the clean hands system prior to signing off.

- The ICP in person education/observation on the unit will include:
 - Answering questions.
 - Provide education as needed.
 - Demonstrate a HH audit.
 - Observe the HHPR doing a HH audit.
 - Review how to enter the data and run monthly reports into the clean hands system.
- The unit ICPs may need to book more than one education/observation session with the HHPR until they feel confident doing HH audits.
- To sign off a HHPR, the ICP will need to observe:
 - HH according to the 4 moments of HH.
 - The ability to document the observations properly (either on the clean hands app or on paper).
 - The HHPR can enter the HH observations to the Clean Hands System if it was recorded on paper.
 - The peer reviewer begins to learn and understand how to use the reports in the Clean Hands System. The site ICP will assist the peer reviewer with the Clean Hands System until they feel comfortable.
- The unit ICP will provide the HHPR with a test which they will need to pass in order to be signed off.

Hand Hygiene Audit

- The unit ICP will support the HHPR, and unit manager as needed.
- The unit ICP will assist with clean hands system and monthly reports.

Feedback and Quality Improvement

- The unit ICP will connect with or meet the unit manager and HHPR monthly or as needed, to help review the HH monthly reports, explore trends, successes, challenges, and QI initiatives. They will provide resources, attend huddles as required and support HHPRs and manager as needed.

Hand Hygiene Lead Role

The HH lead will support the HHPR program through all steps of the process.

Identification

- Once the unit manager or unit ICP emails the HH lead with the peer reviewer's name, the HH lead will:
 - Add the HHPR to a site list.
 - Email the HHPR the welcome email which includes webinar dates and links for the HHPR to register for and pre-reading resources to read prior to the webinar.
 - Update the HHPR's online education completion and when they are signed off.
- Register the HH Peer reviewers to the Clean Hands System.

Preparation for Hand Hygiene Audits

- Schedule and facilitate the initial online HHPR education across IH.
- Provide education and support to local ICP's on challenges or site-specific concerns.

Hand Hygiene Audits

- Support the HHPR and unit manager throughout the audit process.
- Assist with the clean hand system and monthly reports as needed.

Feedback and Quality Improvement

- Support teams as needed.

Program Support

- Provide education and support to executive directors, directors, and managers across IH.
- Provide education and support via teams or email to HH peer reviewers.
- Provide email HH updates monthly or more frequently as needed.
- Hold sessions for education and support two times/month via teams for HHPRs and managers.
- Create and update standardized education, standard operating procedures, and documents on HH and for HHPR program.
- Attend leadership meetings and discussions on HH and the HHPR program.
- Attend provincial HH meetings and discussions.

Definitions

Hand Hygiene (HH)

A general term referring to any action of hand cleaning. Hand hygiene relates to the removal of visible soil and removal or killing of transient microorganisms from the hands. Hand hygiene may be accomplished using soap and running water or an alcohol-based hand rub. Hand hygiene includes surgical hand antisepsis.

Hand Hygiene Peer Reviewer (HHPR)

Unit staff who have volunteered or are chosen by their managers, to do hand hygiene audits, HH reports and support QI initiatives, on the units that they work on.

References

1. [4 Moments of Hand Hygiene](#)
2. [Hand Hygiene Guideline](#)
3. [Hand Hygiene | Infection Prevention and Control | IH](#)
4. [Hand Hygiene Action Plan Toolkit](#)
5. [Hand Hygiene Observations FAQ](#)
6. [Hand Hygiene Observation Tool](#)
7. [Hand Hygiene Policy](#)
8. [Hand Hygiene Quality Improvement Plan](#)
9. [On the Spot Feedback Tool](#)

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