**DLC Clean Wave Campaign**

**“Let’s Give a Clean Wave to Hand Hygiene”**



**Clean Wave Auditing Process:**

**Informal Observation (Optional):** Clean Wave performed on each other September 16, 2019 - March 4, 2020

* Focusing on the WRHA **4 Moments** of Hand Hygiene
* Auditing each Moment for a defined period of time i.e. 6 weeks
* Providing a supply Audit Tools for each Moment
* Providing a Ballot Box for submitting the Audits
* Organizing Team Huddle(s) to communicate and encourge auditing of each other to enhance Hand Hygiene Awareness and improve Hand Hygiene Practice
* Observing each other perform Hand Hygiene at Point of Care
* Using a visual cue to alert each other of a missed opportunity for Hand Hygiene i.e.Clean Wave (hand wave)
* Providing “On the Spot Feedback” to each other to improve Hand Hygiene Practice
* Collecting and Reviewing the Audits on a weekly basis
* Reporting the Audit numbers on a weekly basis i.e.Total Audits = **3088**
* Monitoring performance will enable opportunities to improve Hand Hygiene Practice and Compliance
* Communicating and posting the Audit participation results for each Moment i.e Team Huddles at the Quality Board
* Recoginizing and rewarding participation in the Clean Wave Campaign i.e.Gift Card Draw every 3 weeks i.e. Moment 1 Draw - Oct. 9 & 30, 2019
* Communicating the Audit participation results and the name of the Gift Card Winner for each Moment i.e. DLC Weekly COO Update
* Assigning responsibility / accountability to improve Hand Hygiene
* Increasing particpation and sustaining employee engagement
* Achieving the DLC Hand Hygiene Performance Target for FY 2019-20 i.e. 80%
* Raising the DLC Hand Hygiene Rates with a **CLEAN WAVE**

**Formal Auditing** **(Not-Optional):** Quarterly Hand Hygiene Audits performed as per the request of the WRHA Infection Prevention & Control Program

* Focusing on the WRHA **4 Moments** of Hand Hygiene
* Providing WRHA Infection Prevention & Control Program Hand Hygiene Training for employees prior to performimg Hand Hygiene Audits
* Providing the Hand Hygiene Auditors with a standardized Hand Hygiene Observation Tool (Adopted from Hand Hygiene Resource Centre & Stop Clean Your Hands Campaign, 2014) to perform Hand Hygiene Audits
* Establishing the number of Hand Hygiene Audits for the Auditors to complete for each Quarter i.e. Q1, Q2, Q3, Q4
* Scheduling time for the Auditor to perform the Quarterly Hand Hygiene Audits
* Providing Post- Audit Feedback in a Timely Manner
* Providing the Hand Hygiene Audits to the Infection Prevention & Control Program for data entry and analysis
* Reviewing the Quarterly Hand Hygiene Reports from the Infection Prevention & Control Program; drilling the data down, identifying areas &/or disciplines requiring improvement, offering engagement conversations to improve Hand Hygiene Practice and Compliance
* Measuring performance will enable opportunities to improve Hand Hygiene Practice and Compliance
* Communicating and posting the Quarterly Hand Hygiene Results
* Working together will improve Hand Hygiene Practice at the Point of Care
* Assigning responsibility / accountability to improve Hand Hygiene
* Celebrating Hand Hygiene Successes
* Achieving the revised WRHA Hand Hygiene Performance Target for FY 2020-21 i.e. 100%
* Collaborating with the Team to increase Hand Hygiene Rates
* Improving Hand Hygiene is a **Team Responsibility**

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