

Clean Hands Count: Prevent and Control Infections Frequently Asked Questions

1. Why is this initiative important?

HH is the single most important practice to prevent healthcare acquired infection (HAIs) and HH non-compliance is among the most common findings on surveys. Infection control program HH policy and practice should be based on national standards or organizational guidelines. The Centers for Disease Control and Prevention (CDC) guidelines state that alcohol based hand rub (ABHR) is the preferred method of HH, and usage will lead to better HH practice because ABHR:

- Is more effective at killing potentially deadly germs on hands than soap
- Requires less time
- Is more accessible than handwashing sinks
- Produces reduced bacterial counts on hands, and
- Improves skin condition with less irritation and dryness than soap and water

To emphasize HH, Accrediting Organizations (AOs), State Survey Agencies (SSAs), The Centers for Medicare and Medicaid Services (CMS), and CDC are working together to raise awareness of ABHR. This level of transparency and collaboration is meant to influence healthcare staff behavior to improve HH practice, reduce the transmission of infections, and increase patient and resident safety.

2. Who is participating (which health care entities are surveyed)?

Association of Healthcare Facility Survey Agencies: (AHFSA, State Survey Agencies survey all CMS regulated health care entities), AAAHC: (ASCs), AAHHS/HFAP: (Hospitals, CAHs, ASCs), ACHC: (Home Health, Hospice, Dialysis), CIHQ: (Hospital), CHAP: (Home Health, Hospice), DNV: (Hospitals, CAH), IMQ: (ASCs), NDAC: (Dialysis), TCT: (Rural Health Clinics), TJC: (Hospitals, CAH, Psych Hospitals, ASCs, Home Health, Hospice)

3. Is this initiative a change in CMS policy?

There is no change in CMS policy. Effective HH is an expected practice for healthcare staff. We are raising awareness that ABHR is the preferred method of HH.

4. Will staff be cited if they wash their hands with soap and water instead of using ABHR?

No, hand washing is an acceptable form of HH.

5. Will healthcare staff be cited for using ABHR?

No, ABHR is the preferred method of HH unless hands are visibly soiled or the facility is experiencing an outbreak of norovirus or C. Diff.

6. How will ABHR accessibility be reviewed?

ABHR should be readily available for healthcare staff to practice effective HH.

7. Will HH policies be reviewed on every survey?

For some survey organizations, HH policy review is part of the survey process and for others, HH procedures will be reviewed if there are HH deficiencies noted during the survey process.

8. Will there be noticeable changes in AO and SSA surveys in regards to HH observations?

No, all surveyors will continue their current survey protocols.

9. Will there be changes in the way HH practices are documented on survey?

For AOs, surveyors will continue to follow their own survey protocol for documentation of HH non-compliance. For SSA documentation of non-compliance on the Statement of Deficiencies and Plan of Correction (CMS 2567), we are asking surveyors to use alcohol based hand rub or ABHR, as appropriate, to be able to word text search for this finding.