

Caution advised when interpreting *MyHospitals* data

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Dear Editor

I wish to advise caution when interpreting hand hygiene compliance data reported on the *MyHospitals* website.¹ An interim national benchmark for compliance has been set at 70%. A hospital's hand hygiene compliance rate is rated as higher, similar or lower than the benchmark. This rating is displayed as a three speed dial gauge image, and also noted in text.

Naturally, it is assumed that a hospital demonstrating a compliance rate higher than the national benchmark is performing well, and among other things, implies that it has a good hand hygiene program. On the other hand, a hospital with a compliance rate lower than national benchmark may be assumed to have a poor hand hygiene program.

To support this assumption, we need to be certain of two factors: that hospitals collected and submitted the appropriate amount of data, and that data was collected using similar sampling methods. Unfortunately, at this stage we cannot be certain about either of these. First, a quick scan through the various hospital pages on the *MyHospitals* website clearly demonstrates that hospitals of similar sizes are collecting and submitting varying amounts of data (several just a fraction of the required amount according to Hand Hygiene Australia recommendations²). Second, the description of the ward selection methodology on the website clearly indicates the large variation in sampling methods.

The unfortunate outcome of this is that hospitals may be unjustly applauded for demonstrating high compliance rates, masking the fact they might not have a particularly good hand hygiene program. Conversely, those with low rates may be unfairly labelled (often by the media and the public) as failures

despite extensive efforts to improve compliance and collect the correct data.

The release of hand hygiene compliance data on the *MyHospitals* website was preceded by the disclosure of hospital *Staphylococcus aureus* bloodstream infection rates, which has recently been criticised for being misleading.³ Before the inevitable increase in the amount of data publicly released, every effort should be made to identify processes for presenting the most meaningful information to the public.

I strongly agree with Worth and colleagues' call for a larger discussion with stakeholders to discuss these issues, and now is the time to do it.

Declarations

The author is the National Project Manager for Hand Hygiene Australia (HHA). Hand hygiene compliance data posted on the *MyHospitals* website has previously been submitted to HHA as part of the National Hand Hygiene Initiative. No funding was received in relation to the development or submission of this letter.

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