Hand Hygiene

1. Introduction

Providence Health Care (PHC) is committed to creating and sustaining a culture of safety and is responsible for health promotion and disease prevention within all PHC facilities. A culture of safety values the safety of staff, patients, and residents, which are inseparably linked. By supporting safe and healthy staff, we support quality patient and resident care.

The importance of hand hygiene cannot be understated, as it is the single most effective way to prevent the spread of communicable diseases and infections.

Hand hygiene in the healthcare setting aims to ensure hands are visibly clean (no visible soil) and sanitized, (free from transient or infectious microorganisms known to cause healthcare-associated infection). Clean and sanitized hands are achieved by hand washing with soap and water (cleaning) or by rubbing hands with an alcohol hand rub (sanitizing).

1.1. Purpose

The purpose of this policy is to set the standard for hand hygiene practice by staff and volunteers within PHC.

1.2. Scope

This policy applies to all Staff working in any capacity within PHC.

1.3. Exceptions

Staff may be required to forego hand hygiene during emergent patient or resident situations, e.g., patient collapse. In emergency situations staff are encouraged to perform appropriate hand hygiene as soon as possible during care of the patient or resident or immediately after the event.

Staff who are unable to perform hand hygiene due to injury or skin conditions (e.g., eczema, psoriasis) must report to the Occupational Health Nurse immediately for consultation.

2. Policy

PHC expects all staff to clean their hands before and after touching a patient or resident and after touching any object that comes in contact with the patient or resident.

All staff are required to be familiar with correct techniques and procedures for carrying out hand hygiene and incorporate these hand hygiene techniques into their daily practice.

All staff are responsible to act as a role model for good hand hygiene.

All staff are required to perform hand hygiene according to the World Health Organization's My Five Moments of Hand Hygiene (Appendix A):

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- Before patient or resident contact
- Before an aseptic task, e.g. wound dressing
- After a body fluid exposure risk
- After a patient or resident contact
- After contact with the patient/resident environment

2.1. Methods for Hand Hygiene

Alcohol Based Hand Rub (ABHR) is the preferred method for performing hand hygiene in the healthcare setting (Appendix B).

Soap and water are used for hand hygiene when hands are visibly soiled and in exceptional situations, such as interacting with patients or residents with *Clostridioides difficile* or norovirus (Appendix C). If a sink is not immediately available, hand hygiene will be performed with ABHR immediately after care. Hand washing with soap and water will be performed as soon as possible after this.

Antimicrobial soap should be used when:

- Performing aseptic or invasive procedures;
- Providing care to immunocompromised patients/residents or patients/residents with invasive devices or open skin lesions;
- Dictated by transmission patterns of the microorganism; and
- Recommended by the Infection Prevention and Control (IPAC) team

2.2. Glove Use

The use of gloves is an integral component of routine practice. The use of gloves is not a substitute for performing hand hygiene. Gloves must be changed between each patient or resident contact and care procedure. Hand hygiene must be performed before and after using gloves.

Gloves should be worn when it can be reasonably anticipated that contact with blood or other potentially infectious materials, mucous membranes, or non-intact skin will occur.

- Remove gloves after caring for a patient or resident and clean hands;
- Do not wear the same pair of gloves for the care of more than one patient or resident;
- Gloves are single use and cannot be cleaned or sanitized between patients or residents

2.3. Special Considerations

Nails must be kept clean and short at all times. Long and/or chipped nails are known to harbour bacteria and interfere with effective hand hygiene.

Artificial nails and nail jewelry must not be worn by healthcare providers.

Hand/wrist jewelry should not be worn by healthcare providers. Jewelry hinders effective hand hygiene and harbors the growth of bacteria.

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2.4. Patient Hand Hygiene

All staff will promote, educate and assist patient and resident hand hygiene to assist in reducing the spread of infection. Staff will provide patients and residents with educational guidance and support to perform hand hygiene. Patients and residents who are immobile, bedbound and/or confused may require frequent support from staff to assist with hand hygiene.

2.5. Education

PHC staff and volunteers are expected to complete the Hand Hygiene module on-line every two years.

2.6. Hand Care

Intact skin and good skin care are the best natural barrier to organisms, chemicals and environmental conditions. It is important to understand what substances or conditions aggravate the skin, what helps the skin and strengthens it, and how to protect skin.

- ABHR is the recommended hand hygiene choice over soap and water
- Use a mild plain soap; use antibiotic soap only when required
- Use warm water
- Avoid excess soap and use a dime size amount
- Pat your hands dry instead of rubbing them with the paper towel
- Use a moisturizing lotion each time after you wash or sanitize your hands

3. Responsibilities

3.1 All Staff

All staff are responsible for ensuring they practice correct hand hygiene and encouraging others delivering care to do so by:

- Offering instruction, encouragement and reassurance to patients/residents and visitors on precautions being taken, hand hygiene methods and available hand hygiene resources
- Advising the patients/residents, visitors of any infection control requirements such as hand hygiene
- Reporting to leaders any deficits in knowledge and hand hygiene in particular including facilities/equipment or incidents that may have resulted in cross contamination
- Attending any mandatory infection control education sessions

3.2 Leaders

Ensure that all staff have instruction/education on the principles of hand hygiene.

Ensure that adequate hand hygiene resources and equipment are in place to allow for the recommended infection control measures for all to use, including visitors and contractors. This includes liaison with the maintenance, housekeeping and logistics staff in relation to hand hygiene facilities such as sinks, paper towels, soap and alcohol rub dispenser and hand cream dispensers.

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Support staff in any corrective action or interventions if an incident occurs that may have resulted in cross transmission.

3.3 Infection Control Practitioners

Ensure posters featuring when to perform hand hygiene with soap and water or alcohol hand rub and the steps included in the hand hygiene processes are displayed in relevant, prominent areas to support infection control (Appendices A, B, and C). Provide education for all staff on this policy.

Act as a resource for guidance and support when advice on hand hygiene is required.

Actively support the monitoring, auditing, reporting and interventions for hand hygiene compliance.

4. Compliance

All staff are expected to be compliant with this policy. Exceptions to compliance are described in 1.3.

5. Supporting Documents

5.1 PHC Connect Intranet

- IPAC Hand Hygiene page
- Occupational Health and Safety Hand Care

5.2 Learning Hub Courses

- Infection Prevention and Control Practices for Direct/Professional Clinical Care Providers
- Infection Prevention and Control Practices for Health Care Personnel Not Involved in Direct Clinical Care
- Provincial Hand Hygiene Basics - PICNet

6. Definitions

"Staff" means all employees (including leadership and management), Medical Healthcare Providers including physicians, midwives, dentists, nurse practitioners, residents, fellow and trainees, students, volunteers, contractors and other service providers engaged by PHC having direct contact with patients/residents or their immediate environment.

7. References

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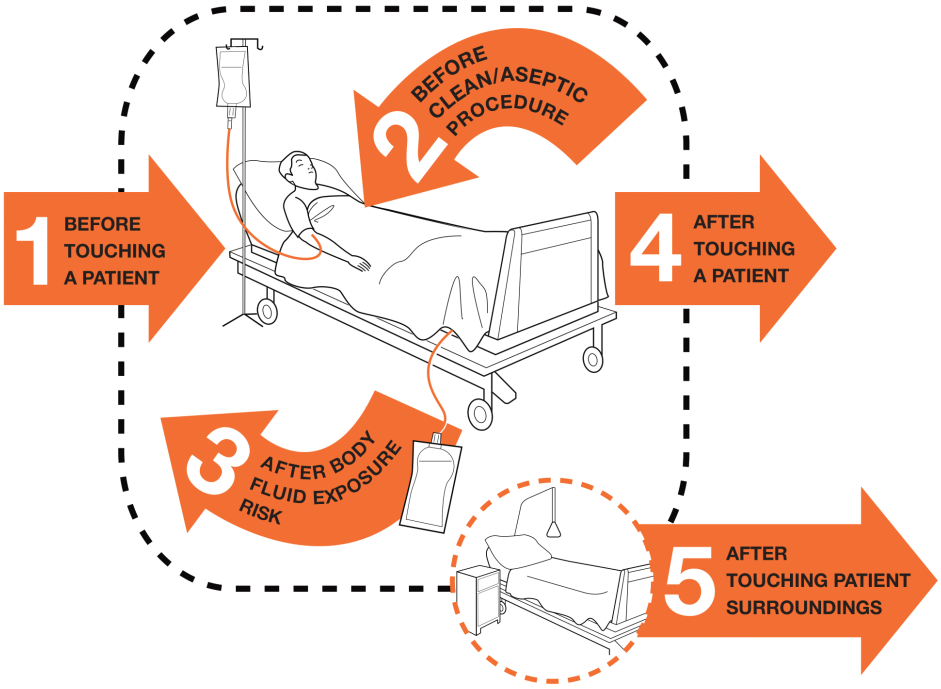
8. Appendices

- Appendix A: Five Moments for Hand Hygiene
- Appendix B: How to use Alcohol Hand Rub
- Appendix C: How to Wash Hands with Soap and Water

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Appendix A: Five Moments for Hand Hygiene

Your 5 Moments for Hand Hygiene



1	BEFORE TOUCHING A PATIENT	WHEN?	Clean your hands before touching a patient when approaching him/her.
		WHY?	To protect the patient against harmful germs carried on your hands.
2	BEFORE CLEAN/ ASEPTIC PROCEDURE	WHEN?	Clean your hands immediately before performing a clean/aseptic procedure.
		WHY?	To protect the patient against harmful germs, including the patient's own, from entering his/her body.
3	AFTER BODY FLUID EXPOSURE RISK	WHEN?	Clean your hands immediately after an exposure risk to body fluids (and after glove removal).
		WHY?	To protect yourself and the health-care environment from harmful patient germs.
4	AFTER TOUCHING A PATIENT	WHEN?	Clean your hands after touching a patient and her/his immediate surroundings, when leaving the patient's side.
		WHY?	To protect yourself and the health-care environment from harmful patient germs.
5	AFTER TOUCHING PATIENT SURROUNDINGS	WHEN?	Clean your hands after touching any object or furniture in the patient's immediate surroundings, when leaving – even if the patient has not been touched.
		WHY?	To protect yourself and the health-care environment from harmful patient germs.

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WHO acknowledges the Hôpitaux Universitaires de Genève (HUG), in particular the members of the Infection Control Programme, for their active participation in developing this material.

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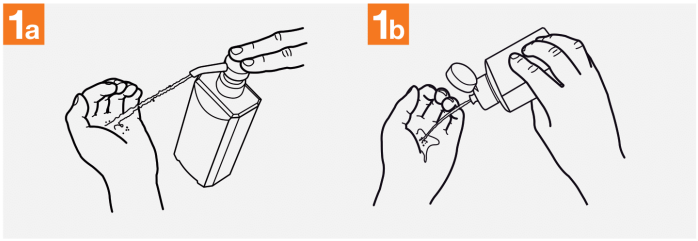
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Appendix B: How to use Alcohol Hand Rub

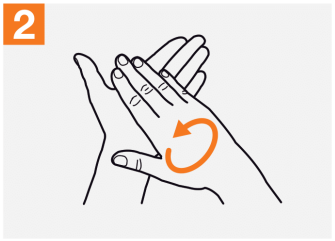
How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

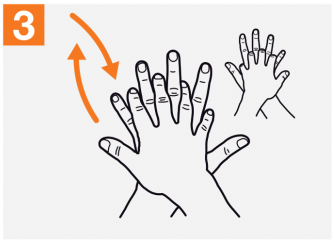
Duration of the entire procedure: 20-30 seconds



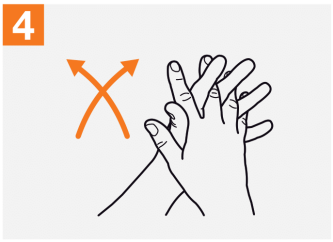
Apply a palmful of the product in a cupped hand, covering all surfaces;



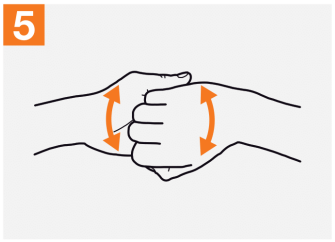
Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



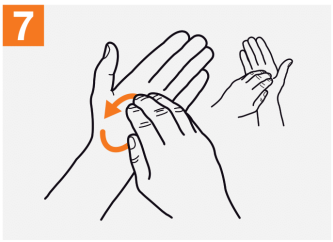
Palm to palm with fingers interlaced;



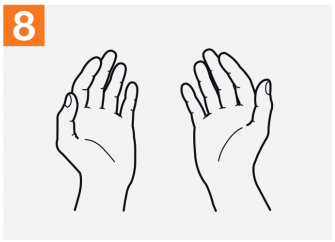
Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Once dry, your hands are safe.

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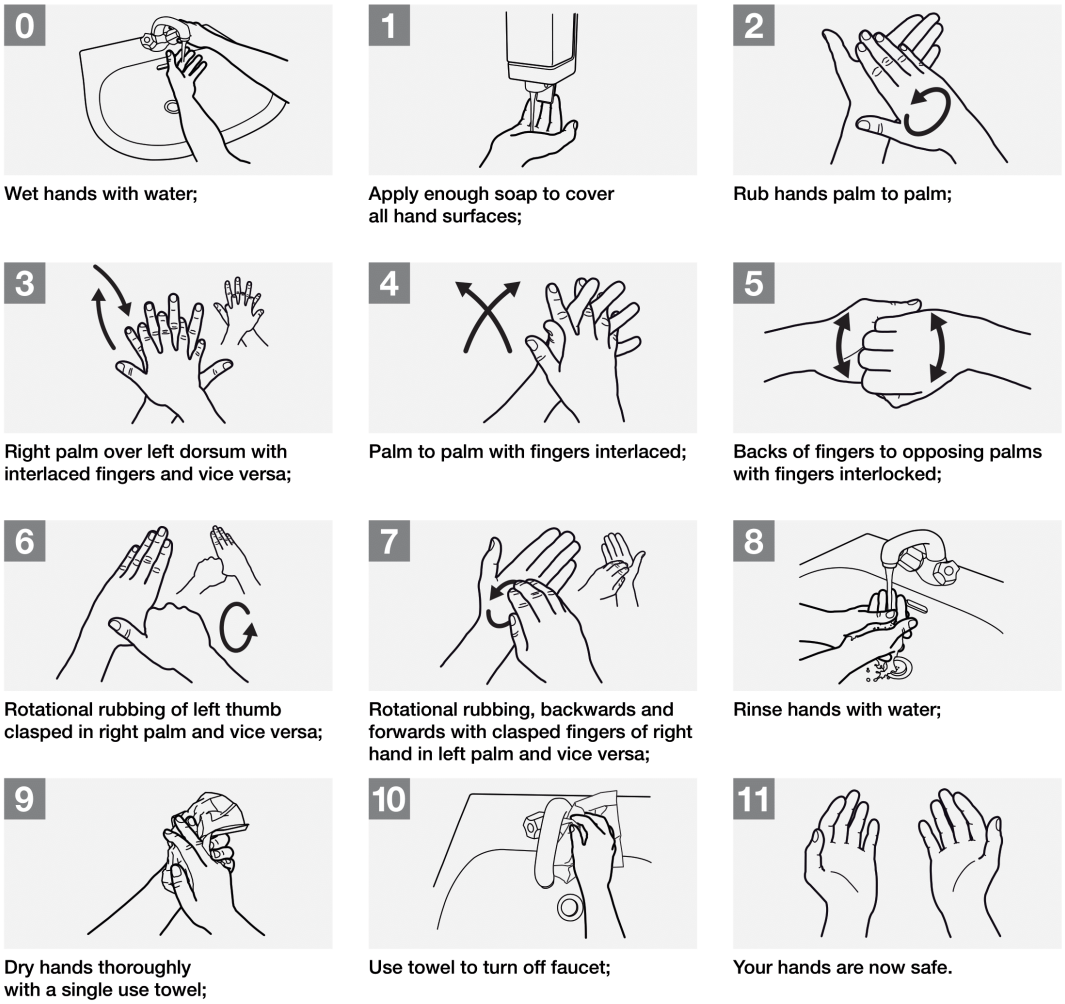
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Appendix C: How to Wash Hands with Soap and Water

How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

Duration of the entire procedure: 40-60 seconds



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