

Hand Hygiene for Clinical Staff

Volunteer Annual Review 2017

Why All the Fuss About Hand Hygiene?

*Most common mode of transmission
of pathogens is via hands!*

What is Hand Hygiene?

- Hand Hygiene means cleaning your hands by using either handwashing (with soap and water), antiseptic hand wash, antiseptic hand rub (i.e. alcohol-based hand sanitizer including foam or gel), or surgical hand antisepsis.

Why Practice Hand Hygiene?

- Cleaning your hands reduces:
 - The spread of potentially deadly germs to patients
 - The risk of healthcare provider colonization or infection caused by germs acquired from the patient

Colonized or Infected:

What is the difference?

- People who carry bacteria without evidence of infection (fever, increased white blood cell count) are colonized.
- If an infection develops, it is usually from bacteria that colonize patients.
- Bacteria that colonize patients can be transmitted from one patient to another by the hands of healthcare workers.

Bacteria can be transmitted even if the patient is not infected!

Two Methods for Hand Hygiene:

Alcohol-Based Hand Sanitizer vs. Washing with Soap and Water

- Alcohol-based hand sanitizers are the most effective products for reducing the number of germs on the hands of healthcare providers. Antiseptic soaps and detergents are the next most effective and non-antimicrobial soaps are the least effective.
- When hands are not visibly dirty, alcohol-based hand sanitizers are the preferred method for cleaning your hands in the healthcare setting.
- Soap and water are recommended for cleaning visibly dirty hands

Wash with Soap and Water

- When hands are visibly dirty
- After known or suspected exposure to *Clostridium difficile*
- After known or suspected exposure to patients with infectious diarrhea during *norovirus* outbreaks
- If exposure to *Bacillus anthracis* is suspected or proven
- Before eating
- After using a restroom

Use an Alcohol-Based Hand Sanitizer

- For everything else

When to Perform Hand Hygiene

Clean your hands:

- Before eating
- Before and after having direct contact with a patient's intact skin (taking a pulse or blood pressure, performing physical examinations, lifting the patient in bed)
- After contact with blood, body fluids or excretions, mucous membranes, non-intact skin, or wound dressings
- After contact with inanimate objects (including medical equipment) in the immediate vicinity of the patient
- If hands will be moving from a contaminated-body site to a clean-body site during patient care
- After glove removal
- After using a restroom

Hand Hygiene Options

at Hospice & Community Care



Wet hands, apply soap and rub for 20 seconds. Rinse, dry, & turn off faucet with paper towel.

Apply to palm and rub hands until dry.



*Use soap & water for visibly soiled hands.
Do not wash off alcohol hand sanitizer.*

Techniques for Washing Hands with Soap and Water

- The CDC recommends:
 - When cleaning your hands with soap and water, wet your hands first with water, apply the amount of product recommended by the manufacturer to your hands, and rub your hands together vigorously for at least 15 seconds, covering all surfaces of the hands and fingers.
 - Rinse your hands with water and use disposable towels to dry. Use towel to turn off the faucet.
 - Avoid using hot water, to prevent drying of skin.
- Other entities have recommended that cleaning your hands with soap and water should take around 20 seconds.
- Either time is acceptable. *The focus should be on cleaning your hands at the right times.*

Techniques for Using Alcohol-Based Hand Sanitizer

When using alcohol-based hand sanitizer:

- Put product on hands and rub hands together
- Cover all surfaces until hands feel dry
- This should take around 20 seconds

When to Wear Gloves

- Wearing gloves is not a substitute for hand hygiene. Dirty gloves can soil hands.
- Always clean your hands after removing gloves.

How to Wear Gloves

Steps for Glove Use:

- Choose the right size and type of gloves for the task
- Put on gloves before touching a patient's non-intact skin, open wounds or mucous membranes, such as the mouth, nose, and eyes
- Change gloves during patient care if the hands will move from a contaminated body-site (e.g., perineal area) to a clean body-site (e.g., face)
- Remove gloves after contact with a patient and/or the surrounding environment (including medical equipment) using proper technique to prevent hand contamination
 - Failure to remove gloves after caring for a patient may lead to the spread of potentially deadly germs from one patient to another
- Do not wear the same pair of gloves for the care of more than one patient

Fingernail Care and Jewelry

- Germs can live under artificial fingernails both before and after using an alcohol-based hand sanitizer and handwashing
- It is recommended that healthcare providers do not wear artificial fingernails or extensions when having direct contact with patients at high risk
- Keep natural nail tips less than ¼ inch long
- Some studies have shown that skin underneath rings contains more germs than comparable areas of skin on fingers without rings

Hospice & Community Care Policy...

- Clinical staff may not wear artificial nails as it is a violation of safety codes
- Artificial nails include, but are not limited to acrylics, gels, tips, wraps or extenders
- Fingernails are trimmed to be no longer than $\frac{1}{4}$ inch beyond the fingertips
- Nail polish may be worn but must be intact, without chips

References

- Clean Hands Count for Healthcare Providers. Centers for Disease Control and Prevention. Date Published: April 28, 2016
<https://www.cdc.gov/handhygiene/providers/index.html>
- Handwashing: Clean Hands Save Lives, Centers for Disease Control and Prevention Hand Hygiene in Healthcare Settings. Published January 27, 2016
https://www.cdc.gov/HandHygiene/download/hand_hygiene_core.pdf
- Hospice & Community Care 2017 Clinical Procedure Manual, Infection Control Guidelines.
- Hospice & Community Care 2017 Exposure Control Manual, Methods of Prevention and Control Precautions.