



A Whittington Hospital Clinical Management Guideline

HAND HYGIENE POLICY

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Author: Dr Caroline Mitchell, Infection Control Practitioner
 Dr Michael Kelsey, Consultant Microbiologist
Speciality: Microbiology
Directorate: Medicine & Clinical Services

Hands are a major vehicle in the transmission of infection within hospitals. Hand hygiene is therefore the single most important measure in Infection Control

For hand hygiene to be effective:

- Finger nails must be kept short and clean with no nail varnish
- Jewellery must be kept to a minimum e.g. a single plain banded ring
- No wristwatch, bracelets or bangles are to be worn
- Sleeves should be rolled up to the elbow
- Cuts and abrasions on the hand must be covered with a waterproof dressing

Levels of Hand Hygiene

| | Social Hand Wash | Antiseptic Hand Wash | Decontamination with Alcohol rub | Surgical hand wash |
|------------------------|--|--|--|--|
| Cleansing agent | Liquid soap | Antiseptic solution | Alcohol based Rub or gel | Antiseptic solution and sterile towels |
| | <ul style="list-style-type: none"> • Before and after a shift or span of duty • Before and after having social contact with a patient • Before handling food and drink • Before dispensing patient medication • After toilet use • After handling equipment or linen | <ul style="list-style-type: none"> • Before undertaking aseptic procedures • Before contact with a patient's wounds, drain sites, catheters, feeding tubes etc. • After contact with patients requiring transmission based precautions • After contact with blood, body fluids, secretions and excretions • After handling contaminated equipment or laundry • After removal of protective clothing including gloves, aprons and masks | <p>As effective as the social handwash if used on clean hands. A preliminary wash is always needed for physically soiled hands</p> <ul style="list-style-type: none"> • Between patients on a ward or drugs round • After leaving an isolation room • After opening dressing packs • Before starting a non aseptic procedure | <ul style="list-style-type: none"> • This is performed for all surgical procedures, including those carried out in areas other than the operating theatre e.g. prior to lumbar puncture, insertion of central lines, etc. |

How to wash your hands – The social and antiseptic hand wash

- Hands must be washed under continuous running water, preferably using hot or warm water to promote a lather
- Wet hands before applying soap or antiseptic skin cleanser to the skin
- Lather all surfaces vigorously including the fingertips, thumbs, palms, backs of the hands, wrists, and between the fingers applying friction
- Rinse hands thoroughly
- Turn off elbow taps with the elbow. If ordinary taps are used, dry hands thoroughly, then use a paper towel to turn off the taps
- Dry hands thoroughly using paper towels
- Dispose of paper towels using the foot pedal of the waste bin
- Skin cream is supplied by pharmacy and may be used after hand washing
- Liquid soap and Chlorhexidine dispensers with disposable cartridges are used and are wall mounted
- The plungers should be replaced after the container is empty (from pharmacy)
- Cleaning of liquid soap and Chlorhexidine dispensers should be part of the domestic cleaning schedules

Alcohol based hand rubs

It is recommended that hand rub be placed in the following places:-hand hygiene stations, outside side rooms, on the drugs trolley, on dinamap machines, on medical notes trolley, by all infected patients, on the nurses station and office desks, in the clean utility areas and on the wards.

- Use only on clean hands i.e. unsoiled with organic matter
- Ensure the solution covers all the hand
- The hand rub must be vigorously applied to all surfaces of the hands including the fingertips, thumbs, palms, the backs of the hands and between the fingers until they are dry

How to wash your hands – The surgical hand wash

- A defined technique is more important than the aseptic solution used
- An antiseptic detergent is applied to the hands and wrists
- The length of time employed for the scrub is a minimum of 2 minutes
- A sterile brush may be used for the first application of the day but repetitive use may damage the skin resulting in microbial colonisation
- The forearms must be included in the scrub

The use of gloves

- Gloves do not always provide a complete impermeable barrier, but they may reduce the transfer of microorganisms to and from the wearer's hand
- Change gloves between patients
- The same gloves must not be worn between clean and dirty procedures even on the same patient
- Hands must always be washed after removing gloves and before sterile gloves are worn
- Gloved hands must not be washed or cleaned with alcohol hand rubs, gels or wipes

Hand Care

If hands become sore or a skin condition such as dermatitis occurs, advice is to be sought from the Occupational Health department. Soreness can be minimised by rinsing and drying hands thoroughly and periodic application of a hand cream. Hand creams should be obtained only from the pharmacy department and should be in dispensers or tubes. Do not use nailbrushes as they damage the skin and may become contaminated and act as vehicle for cross-infection

Miscellaneous

Plungers and dispensers for Chlorhexidine and Betadine solutions as well as alcohol based hand rubs should be replaced with each new container. These items are available from the pharmacy department and can be included in ward pharmacy top-up lists. It is the responsibility of the Facilities Service Assistant (FSA's) to replace the alcohol rub containers when they are nearly empty, e.g. 1-2cm left in the bottle