Hand Hygiene		
For Policy Office Use Only		
Policy Type: Corporate Policy		**Policy Number: 10374**
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Scope/Impact: All CHEO staff, medical staff, trainees, agency staff, volunteers, patients/clients and visitors.		
Keywords: Hand washing, disinfection		

1. Purpose

To outline the indications and proper procedure for disinfecting hands

2. Policy

2.1. Background

2.1.1. Hand hygiene (disinfection) using either soap and water or an alcohol-based hand rub, must be practiced by all staff, physicians, trainees, agency staff, and volunteers as outlined below. All visitors, patients/clients and their families are encouraged to follow the same hand hygiene practices as staff.

2.1.2. Health care associated infections (HAI) are the most common serious complication of hospitalization. The most common route for transmission of microorganisms in a health care setting is on contaminated hands that transmit microorganisms to patients/clients and their environment (equipment, bedrails etc).

2.1.3. Hand hygiene adherence contributes to the reduction of health care associated infections.

2.1.4. To optimize Hand Hygiene, point-of-care products should be accessible to the health care provider without the provider leaving the patient environment, so they can be used at the required moment. Where it is safe to do so, alcohol-based hand rub will be placed at point-of-care.

2.1.5. CHEO will seek the input of staff as appropriate when selecting or changing hand hygiene products.

3. Procedure

3.1. Hand hygiene (disinfection) must be practiced at the following times, regardless of whether gloves are worn:

3.1.1. Any time hands are visibly soiled;

3.1.2. Before initial contact with a patient/client or their environment;

3.1.3. Before putting on gloves when performing an invasive/aseptic procedure;

3.1.4. Before preparing, handling, or serving food, or medications to a patient/client;

3.1.5. After care involving contact with the body fluids of a patient/client even if gloves are worn (e.g. assisting with blowing the nose, toileting, doing wound care, contact with secretions, excretions, blood, urine), after removing gloves and before moving on to another activity;

3.1.6. After contact with a patient/client or their environment when leaving, even if the patient/client has not been touched;

3.1.7. When moving from a contaminated body site to a clean body site during patient care;

3.1.8. During Personal Protective Equipment (PPE) removal (Reference Personal Protective Equipment Policy;

3.1.9. Hand disinfecting with a 70 – 90% alcohol-based hand rub is the preferred method (when hands are not visibly soiled) for cleaning hands. Either hand washing with soap and water, or use of an alcohol-based hand rub, is acceptable except as indicated below:

3.1.9.1. Soap and water must be used in the following instances (alcohol-based hand rub is not acceptable):
3.1.9.1.1. When hands are visibly soiled;
3.1.9.1.2. After using the washroom;
3.1.9.1.3. Before eating;
3.1.9.1.4. After removing gloves when caring for patients/clients with Clostridium difficile infection;
3.1.9.1.5. For suspected or proven Bacillus anthracis (anthrax) exposure.

3.1.9.2. If hands are visibly soiled and running water is not available, use a moistened towelette to remove the visible soil, followed by alcohol-based hand rub.

3.1.10. Hand Hygiene Using Soap and Water
3.1.10.1. Advance sufficient paper towel in dispenser for drying hands after procedure is complete, if required.
3.1.10.2. Turn on faucets and adjust temperature (warm) and flow of water, if required.
3.1.10.3. Wet hands.
3.1.10.4. Apply appropriate amount of soap to hands (i.e. one dispenser pump's worth).
3.1.10.5. Work up lather using vigorous friction for at least 15 seconds, covering all surfaces of hands and fingers. Include areas between fingers and around nail beds.
3.1.10.6. Rinse hands, holding hands downward.
3.1.10.7. Thoroughly pat hands dry using paper towel.
3.1.10.8. Turn off taps using paper towel used to dry hands and then discard paper towel.

3.1.11. Hand Hygiene Using Alcohol-Based Hand Rub
3.1.11.1. Hands must be dry and visibly clean.
3.1.11.2. Apply one to two pumps of disinfectant to palm of hand.
3.1.11.3. Work over hands including areas between fingers, thumbs and around nail beds until product is dry.
3.1.11.4. You must have enough product for it to last a minimum of 15 seconds. Hands must completely dry.

3.2. Surgical Hand Antisepsis: Refer to Hand Antisepsis Policy.

3.3. Use of Hand Moisturizers

3.3.1. Intact skin is the first line of defense against infection, therefore careful attention to skin care is important.
3.3.2. Alcohol based hand rub contains emollients to moisturize hands. However, moisturizing lotion supplied by the hospital should be used if hands become dry.
3.3.3. Signs of skin irritation should be brought to the attention of Occupational Health and Safety.
3.3.4. Other moisturizers may interact with the persistent effect of hand disinfection and / or reduce the effectiveness of gloves used for patient/client-care activities. Use only moisturizers provided by the hospital.

3.4. Nails, Jewelry and Clothing

3.4.1. Nails should be kept short and clean.
3.4.2. For those with direct contact with patients/clients (except in the NICU):
3.4.2.1. Artificial nails, gel polish and nail enhancements are not to be worn;
3.4.2.2. Nail polish may be worn if freshly applied (<4 days) and in good condition – chipped nail polish should be removed;
3.4.2.3. Hand and/or arm jewelry should be limited to a smooth ring without projections or mounted stones and/or a watch if necessary.

3.4.3. In the NICU setting for all persons upon entry:
3.4.3.1. Arms should be bare below the elbows (e.g. no bracelets, rings, watches, wrist studs).
3.4.3.2. No nail polish or nail enhancements are to be worn.
If long sleeved clothing is worn, push sleeves back when performing hand hygiene and patient care.

4. Responsibilities

4.1. Hand hygiene (disinfection) using either soap and water or an alcohol-based hand rub, must be practiced by all staff, physicians, trainees, agency staff, and volunteers as outlined below (Section 4.1). All visitors, patients/clients and their families are encouraged to follow the same hand hygiene practices as staff

5. Cross-References

5.1. Selection of Skin Antiseptics Policy
5.2. Personal Protective Equipment (PPE) - General Policy

6. References

- Boyce JM, Pittet D; Healthcare Infection Control Practices Advisory Committee; HICPAC/SHEA/APIC/IDSA Hand Hygiene Task Force. Guideline for Hand Hygiene in Health-Care Settings. Recommendations of the Healthcare Infection Control Practices Advisory Committee and the HICPAC/SHEA/APIC/IDSA Hand Hygiene Task Force. Society for Healthcare Epidemiology of America/Association for Professionals in Infection Control/Infectious Diseases Society of America. MMWR Recomm Rep. 2002 Oct 25;51(RR-16):1-45, quiz CE1-4. PMID: 12418624.

- Ontario Agency for Health Protection and Promotion (Public Health Ontario), Provincial Infectious Diseases Advisory Committee. Best Practices for Hand Hygiene in All Health Care Settings. 4th ed. Toronto, ON: Queen's Printer for Ontario; January 2014.

- Ministry of Health and Long Term Care. Just Clean Your Hands Program. Updated: January 12, 2018 (26271-2-Eng-exec summary.indd (publichealthontario.ca))

- Ontario Agency for Health Protection and Promotion (Public Health Ontario), Provincial Infectious Diseases Advisory Committee. Best practices for infection prevention and control in perinatology, in all health care settings that provide obstetrical and newborn care. 1 st revision, February 2015. Toronto, ON: Queen's Printer for Ontario; 2015.

7. Version History:

Date	Type of revisions	List of revisions
Jan 1, 2018	Minor Revisions	Harmonized with IPAC Policy 2-1 In NICU: No nail polish or nail enhancements are to be worn. All visitors, patients/clients and their families are encouraged to follow the same hand hygiene practices as staff.
Oct 10, 2023	Minor Revisions	Updated template Updated formatting Removed suggestion for use of blow dryers to dry hands References updated
June 17, 2024	Minor Revisions	In NICU, all persons entering environment must be bare below the elbows with no nail polish or nail enhancements, regardless of the task they are performing. This policy extended to patient caregivers and parents.