AULTMAN	
TITLE: Hand Hygiene	ORIGINAL EFFECTIVE DATE: 04/01/1992
	REVISION DATE: 6: 6

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- I. **Policy:** Practitioners and all staff will utilize appropriate hand hygiene.
- II. **Purpose:** To provide guidance for appropriate hand hygiene to facilitate the reduction of disease transmission and prevent infection.

III. **Definitions:**

Hand hygiene: A general term that applies to handwashing, antiseptic hand rub, or surgical hand antisepsis. Hand hygiene is necessary, but not limited to:

- A. World Health Organization (WHO) Five Moments for Hand Hygiene: See Appendix
 - A WHO 5 Moments for Hand Hygiene
 - 1. Before touching a patient
 - 2. Before an aseptic or clean procedure
 - 3. After body fluid exposure or risk
 - 4. After touching the patient
 - 5. After touching the patient surroundings
- B. Additional Times for Performing Hand Hygiene:
 - 1. Between two procedures on the same patient
 - 2. Between a dirty portion and a clean portion of a procedure
 - 3. After removal of gloves- sterile or non-sterile
 - 4. Before and after handling medication or food, or before eating
 - 5. After coughing, sneezing, or use of a tissue

Handwashing (soap and water wash): the vigorous rubbing together of all surfaces of hands with soap and water for a period of at least 20 seconds, covering all surfaces to include wrist area.

- A. Handwashing is necessary when:
 - 1. Hands are visibly or physically soiled or contaminated with proteinaceous material
 - 2. Hands feel sticky/tacky
 - 3. After use of powdered gloves

- 4. To minimize occupational exposure after contamination with blood, body fluids, or other potentially infectious materials (OPIM)
- 5. During situations of suspect or diagnosed Norovirus
- 6. After any contact with spores (Clostridium *difficile*, Bacillus *anthracus*) as mechanical scrubbing as well as the dilution and wash-away effect of the running water is the best way to rid the hands of spores.
- 7. After using the restroom or assisting with toileting

Degerming (antiseptic hand rub): is a cleansing of the hands (when not visibly or physically soiled) by using an alcohol-based hand sanitizer. It reduces the bacterial count. A. Degerming is to be used when:

- 1. Hands are not visibly or physically soiled
- 2. After use of non-powdered gloves

Nail applications: items or materials to include, but not limited to, artificial nails, tips, extenders, wraps, appliques, acrylic gels, decals, charms and any additional items applied to the natural nail surface. 2025 Colleague Handbook

Staff: Includes, but is not limited to, employees, students, volunteers, contracted workers.

Practitioners: Includes, but is not limited to, physicians, advanced practice registered nurses, physician assistants

IV. **Equipment:** Running water, soap, disposable towel/s, alcohol-based hand sanitizer

V. Procedure:

A. Handwashing:

- Wet hands with water. Apply soap. Vigorously rub together all surfaces of hands for 20 seconds. Pay close attention to wrists, backs of hands, between fingers and area around fingernails. See Appendix B – Method for Handwashing.
- 2. Rinse hands with water. Avoid using hot water because repeated exposure may increase the risk of dermatitis.
- 3. Dry hands thoroughly with a disposable towel.
- 4. Use towel to turn off faucet.
- 5. Following a soap and water wash with alcohol-based sanitizer decreases the bacterial count. *Handwashing reduces spores but does not decrease the bacterial count.

B. Degerming:

1. Apply one pump of sanitizer in the palm of one hand and vigorously rub hands together, covering all surfaces of hands and fingers, until hands are dried. Pay close attention to wrist, backs of hands, between fingers, and the area around the fingernails. See Appendix C – Method for Degerming.

C. Fingernails:

1. In addition to the stipulations stated in the Human Resource Employee Handbook 2025 Colleague Handbook all staff, care/service providers,

volunteers and contract staff having direct patient contact, and/or those who contact the patient's environment, to include food service staff and those who prepare, package, or handle patient care products, the following applies:

- a. Nail applications of any type, to include but not limited to, artificial nails, tips extenders, wraps, appliques, acrylic gels, decals, charms and any additional items applied to the natural nail surface are not permitted, with the exception of nail polish that is not chipped, cracked, or lifting.
- b. Nail polish must not be chipped, cracked, or lifting.
- c. Regrowth of nails with a gap at the base of the nail bed may create a potential for infection and is not permitted.
- d. Existing policies forbidding rings, etc., in such areas as NICU, and Surgery still apply.
- D. Skin moisturizer
 - a. After hand hygiene, hospital approved skin moisturizer may be applied
 - b. Use hospital approved skin moisturizer only as use of other moisturizers may interfere with effectiveness of antimicrobial cleansers and gloves.
- VI. Surveillance and Measurement of Hand Hygiene Compliance
 - A. Surveillance of staff compliance with hand hygiene will be conducted on a monthly basis.
 - B. Hand hygiene compliance data will be reported periodically to key stakeholders.

Sources:

CDC Hand Hygiene Guidelines, October 25, 2002/Vol. 5/ No. RR-16. Retrieved January 2017. http://www.cdc.gov/handhygiene/Guidelines.html

The Joint Commission (2009). Measuring Hand Hygiene Adherence: Overcoming the Challenges. The Joint Commission. Oakbrook Terrace, Il. Retrieved January 2017. www.cdc.gov/Handhygiene/

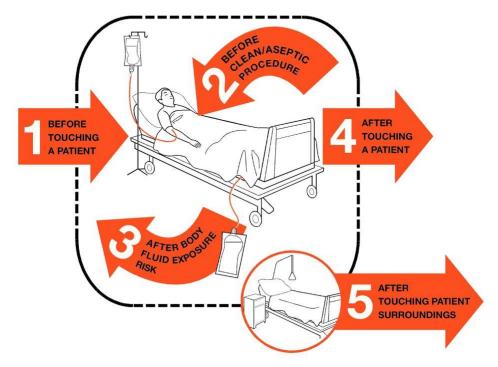
WHO Guidelines on Hand Hygiene in Health Care 2009. Retrieved January 2017. http://www.who.int/gpsc/5may/tools/9789241597906/en/

Related References:

Lawson Item Order # 106998 moisturizing lotion

Appendix A:

Your 5 Moments for Hand Hygiene



	BEFORE TOUCHING A PATIENT	WHEN? WHY?	Clean your hands before touching a patient when approaching him/her. To protect the patient against harmful germs carried on your hands.
2	BEFORE CLEAN/ ASEPTIC PROCEDURE	WHEN? WHY?	Clean your hands immediately before performing a clean/aseptic procedure. To protect the patient against harmful germs, including the patient's own, from entering his/her body.
3	AFTER BODY FLUID EXPOSURE RISK	WHEN? WHY?	Clean your hands immediately after an exposure risk to body fluids (and after glove removal). To protect yourself and the health-care environment from harmful patient germs.
4	AFTER TOUCHING A PATIENT	WHEN? WHY?	Clean your hands after touching a patient and her/his immediate surroundings, when leaving the patient's side. 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. To protect yourself and the health-care environment from harmful patient germs.



May 2009

How to handwash?

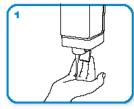
WASH HANDS ONLY WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB!



Duration of the entire procedure: 40-60 sec.



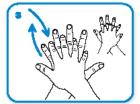
Wet hands with water



apply enough soap to cover all hand surfaces.



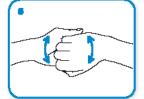
Rub hands paim to paim



right paim over left dorsum with Interlaced fingers and vice versa



paim to paim with fingers Interlaced



backs of fingers to opposing paims 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 paim and vice versa.



Rinse hands with water



dry thoroughly with a single use towel



use towel to turn off faucet



...and your hands are safe.



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

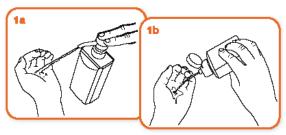


How to handrub?

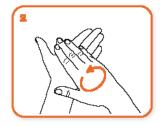
RUB HANDS FOR HAND HYGIENE! WASH HANDS ONLY WHEN VISIBLY SOILED!



Duration of the entire procedure: 20-30 sec.



Apply a paimful of the product in a cupped hand and cover all surfaces.



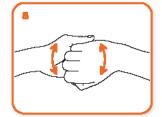
Rub hands paim to paim



right palm over left dorsum with interlaced fingers and vice



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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