Mary Lanning
HEALTHCARE

HAND HYGIENE

Policy: IP-223, **v.5** **Effective: 02/08/2024**
Category: Infection Prevention **Origination Date:** 02/15/2006

I. PURPOSE:

To prevent hospital acquired infections with effective hand hygiene.

II. POLICY:

A. Hand Hygiene should be completed with soap and water or alcohol-based hand sanitizer with at least 60% alcohol.

   a) Soap and water must be used when hands are visibly soiled or when caring for a patient with C difficile or norovirus followed by alcohol-based hand sanitizer.

   b) Alcohol-based hand sanitizer dispensers and soap will be readily available in all patient care areas.

B. Hand hygiene will be performed in the following clinical situations as recommended by the CDC and WHO:

   1. Upon entering and exiting patient room
   2. Immediately before and after touching patient or patient environment
   3. Before performing aseptic task or handling invasive medical devices
   4. Before moving from work on soiled body site to clean body site on same patient
   5. After contact with blood, body fluids, or contaminated surfaces
   6. Before handling food or medications
   7. After toileting patients or self
   8. After sneezing, coughing, or blowing nose
   9. After glove removal
   10. When visibly soiled

C. Maintenance of healthy skin and nails

   1. Hand lotion is available for staff members.
   2. Artificial nails are not permitted when providing direct patient care. Intact, unchipped, and uncracked nail polish or shellac is acceptable. (Refer to MLH policy HR 114 Dress Code/Professional Appearance)
   3. Hand splints or casts may prevent adequate hand hygiene. (Refer to MLH policy EH 490 Employee Exclusion from Work)

D. Hand hygiene compliance will be monitored by monthly audits completed by each patient care department and submitted to Infection Prevention.

III. DEFINITIONS:

NONE

IV. RESPONSIBILITIES:

All healthcare workers

V. PROCEDURE:

A. SOAP AND WATER

1. Wet hands, apply soap, and work into lather.
2. Wash all surfaces of hands with friction for at least 20 seconds, including palms, wrists, between fingers, under fingernails, and nail beds.
3. While keeping fingers pointed down, rinse hands and dry with paper towel.
4. Turn faucet off with paper towel to avoid recontamination of hands.

B. WATERLESS ANTISEPTIC AGENT

1. Apply alcohol-based sanitizer to hands and rub all surfaces of hands with friction for at least 20 seconds until hands are dry, including palms, wrists, between fingers, under fingernails, and nail beds.
2. Do not fan hands to dry.
3. Do not touch objects until hands are dry to avoid recontamination of clean hands.

C. AFTER CARE OF PATIENTS WITH C DIFF, NOROVIRUS, OR OTHER SPORE-FORMING PATHOGENS

a) Per World Health Organization recommendations, when caring for a patient with confirmed or suspected spore-forming pathogen, such as C. difficile or norovirus, hands should be washed with soap and water to physically remove spores with mechanical friction. After hands are thoroughly dried, perform hand hygiene with alcohol-based hand sanitizer to kill other pathogens.

VI. REFERENCES

A. Centers for Disease Control and Prevention Hand Hygiene Recommendations 2002

B. World Health Organization 2009

C. SHEA/IDSA/APIC Practice Recommendation: Strategies to prevent healthcare-associated infections through hand hygiene: 2022 Update.

D. HR 114 Dress Code / Professional Appearance policy

E. EH 490 Employee Exclusion From Work Policy

VII. COLLABORATED WITH:

A. Infection Prevention Committee

B. Employee Health

VIII. DISTRIBUTION:

All healthcare workers

IX. RESCISSIONS

A. Origination Date: 02/2006

B. Reviews/Revisions: 02/2010, 06/2014, 06/2017,10/2017, 8/2020, 2/2024

X. REVIEW AND REISSUE DATE:

A. Three (3) years from Effective Date

B. 02/2027

XI. FOLLOW-UP RESPONSIBILITY:

Infection Prevention Manager

XII. ATTACHMENTS:

None