

# Sullivan County Department of Public Health

<p><b><u>Title:</u></b> Hand Hygiene</p> <p><b><u>Number:</u></b> CP- 01</p> <p><b><u>Page Number:</u></b> 1 of 2</p>	<p>Original Approval: 1989</p> <p>Reviewed/ Revised: 9/99, 9/12, 11/18, 8/19, 9/19, 2/24</p>
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**Statement/ Purpose:**

To provide guidelines for the prevention of cross-contamination of potential infectious material through consistent hand hygiene.

**Authority:**

CHAP IPC.1.D.M1, IPC.3.I, MMWR 2002; vol 51, no. RR-16, CoP 484.70

**Application:**

All staff providing direct patient care.

**Terminology:**

*Alcohol-based hand rub:* an alcohol-containing preparation designed for application the hands for reducing the number of viable microorganisms on the hands. Such preparations usually contain 60%-95% ethanol or isopropanol.

*Antimicrobial soap:* Soap containing an antiseptic agent.

*Hand Hygiene:* includes both handwashing with either plain or antiseptic-containing soap and water, and use of alcohol-based products (gels, rinses, foams) that do not require the use of water.

*Visibly Soiled Hands:* Hands showing visibly contaminated with proteinaceous material, blood or other body fluids (e.g., fecal material or urine).

*Waterless antiseptic agent:* An antiseptic agent that does not require use of exogenous water. After applying such an agent, the hands are rubbed together until the agent has dried.

**Responsible Party:**

Training and Quality Improvement Coordinator

**Cross-Reference:**

**Procedure:**

1. Field staff carry soap or hand sanitizer and paper towels for hand hygiene use.
2. Hand Hygiene- should be performed at a minimum:
  - a. Before contact with patient
  - b. Before donning gloves
  - c. Before performing an aseptic task (insertion of IV, preparing an injection, performing wound care)
  - d. After contact with the patient or objects in the immediate vicinity of the patient
  - e. After contact with blood, body fluids or contaminated surfaces
  - f. Moving from a contaminated body site to a clean body site during patient care

## Sullivan County Department of Public Health

- g. After removal of PPE.
3. Hand hygiene is performed in accordance with the following:
- a. With soap and water
    - i. Wet hands with water.
    - ii. Apply the amount of product recommended by the manufacturer to the hands, and rub the hands together vigorously for at least 15 seconds, covering all surfaces of the hands and fingers.
    - iii. Rinse the hands with water and use a disposable towel to dry. Use a towel to turn off the faucet.
  - b. With an alcohol-based hand rub:
    - i. Apply the amount of product recommended by the manufacturer to the palm of one hand, and rub the hands together vigorously, covering all surfaces of the hands and fingers, until the hands are dry.
    - ii. When performing hand hygiene with an alcohol-based hand rub product, if the hands are dry in less than 20 seconds a sufficient quantity may not have been applied to the hands.
    - iii. It is acceptable and preferred to use an alcohol-based hand rub routinely for performing hand hygiene throughout the home visit except when hands are visibly soiled or when caring for a patient known or suspected to have a *Clostridium Difficile* infection.
4. Hand hygiene will be assessed periodically as part of the Supervisory Home Visit Tool.
- a. Results will be reported to the Training and Quality Improvement Coordinator and reported out at monthly staff meetings.
  - b. Any employee that demonstrates less than 90% compliance will be required to review the Hand Hygiene Policy and will be reevaluated within 7 days.
5. Nails should be kept short and neat. Artificial nails are prohibited.