

Orientation Program for Infection Control Professionals



Module 4:
Hand Hygiene

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Module 4: Hand Hygiene

Objectives

- At the completion of this module the ICP will:
- Demonstrate a basic knowledge of Hand Hygiene by completing the exercises in this module
- Describe the anatomy and physiology pertaining to skin and hands
- Understand the relationship between Hand Hygiene and the reduction of Healthcare-Associated Infection (HAI) rates
- Identify the indications, methods, and techniques for performing Hand Hygiene
- Describe a Hand Hygiene program within the Infection Control Program of your facility using the key components of the Hand Hygiene program:
 - Purpose and objectives
 - Use of performance indicators (e.g., audit tools)
 - Staff Education and motivational programs
 - Policy
 - Strong commitment by all stakeholders
 - Communicating performance indicator results

Number of hours

- Key Concepts – 4 hours
- Methods - 4 hours

Required readings

- BC Provincial Hand Hygiene Guidelines (found on PICNet website and in appendix A)
- [CHICA-Canada Position Statement: Hand Hygiene](http://www.chica.org/pdf/handhygiene.pdf)
<http://www.chica.org/pdf/handhygiene.pdf>
- Accreditation Canada information at
<http://www.accreditation.ca/en/content.aspx?pageid=662&terms=hand+hygiene>

Required texts

- APIC Text of Infection Control & Epidemiology 2nd or 3rd Edition-Chapter 19
- Bennett JV & Brachman PS. Bennett & Brachman's Hospital Infections. 5th ed. Ed. William R Jarvis: Philadelphia, PA, 2007 – Chapter 3

Other readings

- World Health Organization: WHO Guidelines on Hand Hygiene in Health Care.

Overview

Hand hygiene has been identified as the most effective way of preventing the transmission of healthcare-associated infection to patients, staff and visitors in all healthcare settings. Hand hygiene represents a new term in the healthcare vocabulary thus it is critical that all infection control professionals become familiar with the new terminology and the heightened emphasis placed on hand hygiene in healthcare settings.

Key Concepts

Background and Evidence for Hand Hygiene

Describe the physiology of normal skin

--

Describe how healthcare-associated pathogens are transmitted from one patient to another

--

Why is adherence to hand hygiene is considered the single most important practice for preventing the transmission of pathogens in healthcare?

--

What is the correlation between hand hygiene and healthcare-associated infections?

--

Hand Hygiene

Hand Hygiene is considered the most important and most effective infection prevention and control measure to prevent the spread of healthcare-associated infections (HAIs). Despite this compliance with Hand Hygiene protocols by healthcare providers has been and continues to be low, ranging from 20-50 %.

Define hand hygiene

Describe the two correct methods for performing hand hygiene
1.
2.

Outline the factors to determine which method to use

What is the preferred method for hand hygiene in healthcare settings and why?

Indications for Hand Hygiene

List the <u>Before</u> and <u>After</u> moments in healthcare in which hand hygiene must be performed
1.
2.
3.
4.

List other recommended times hand hygiene should be preformed

Hand Hygiene Technique

Correct technique is a fundamental part of Hand Hygiene.

Key considerations for hand hygiene technique

List the keys points of consideration in relation to hand hygiene	
Adequate time	
Areas often missed	
Nail length	
Nail polish	
Artificial nails	
Rings/jewellery/ bracelets	
Clothing	

Compare techniques

There are two available methods for performing hand hygiene which have strengths and limitations. Complete the following exercise:

	Alcohol-based Hand Rub	Traditional Soap and Water
Strengths		
Limitations		

Other points to consider

No matter which method of hand hygiene performed, it is important to select the right products / agents.

List the key points of consideration with each of the following:
Concentration of alcohol in ABHR used in healthcare settings
Plain vs. antimicrobial soap for hand washing
Point of care staff involvement
Ease of use

Why doesn't the use of gloves replace the need for Hand Hygiene?

Methods

Review your facility's hand hygiene policy
Is there a written Hand Hygiene Policy? How often is it required to be revised/updated? Where is it located?
From the list below select all elements that are included in your facility's Hand Hygiene policy
<input type="checkbox"/> Indications for Hand Hygiene
<input type="checkbox"/> Selection of Hand Hygiene agent
<input type="checkbox"/> Management of soap containers
<input type="checkbox"/> Management of alcohol-based hand rub containers
<input type="checkbox"/> Hand lotion use
<input type="checkbox"/> Use of alcohol-based hand rubs
<input type="checkbox"/> Hand Hygiene monitoring and compliance audits
<input type="checkbox"/> Mandatory requirements for employees, if yes please describe
<input type="checkbox"/> Use of artificial nails, jewellery, length of nails, & nail polish
Do you have any suggestions on how your hand hygiene policy might be improved?

Your Hand Hygiene Education Program

Review your present education program

Hand Hygiene (HH) Education Program	Comments
Does the facility have an HH education program?	
Outline staff education, including when, to whom, and how often	
Is HH education mandatory?	
Review the education program and determine if the following topics are covered: <ul style="list-style-type: none"> <input type="checkbox"/> Importance of and indications for HH <input type="checkbox"/> Techniques for HH <input type="checkbox"/> Strategies to maintain healthy hands <input type="checkbox"/> Appropriate use of gloves <input type="checkbox"/> Healthcare workers' perceived barriers to HH <input type="checkbox"/> Use of artificial nails, nail polish, length of nails & jewellery 	
Who has responsibility for the delivery of the HH education?	

Education tools

Complete the Provincial Hand Hygiene Education Module found on the PICNet website.

After completing the module, answer the following:	
Does your organization have a Hand Hygiene education module available for the healthcare workers? If so, how often are staff required to complete the module, and is it mandatory?	

Teaching aids

Teaching aids such as the Glo-Germ have been used to reinforce technique and compliance with Hand Hygiene.

List any teaching aids available in your institution for hand hygiene education	

Posters and other visual cues

Review the posters available to promote hand hygiene in your facility	
How long have they been used?	
Is there a process to change them at certain intervals?	

Hand Hygiene exercise

Demonstrate hand hygiene technique to your mentor	
Method	Comments
ABHR	
Soap and water	

Hand Hygiene Compliance

Factors affecting compliance with hand hygiene	
List the factors that reduce compliance with hand hygiene	
What are some ways to increase compliance with hand hygiene?	

Occupational Health

Hand Care	
Does a strategy exist for hand care to promote healthy skin?	

Hand Care	
Which department is involved in the hand care strategy?	
What is the process when a healthcare worker presents with breaks in skin integrity?	
List actions to promote hand care	

Hand Hygiene Agents

Review the hand hygiene agents in use in your facility	
Is the IPC staff involved with the tendering process for the hand hygiene agents?	
Soap <input type="checkbox"/> Type used <input type="checkbox"/> Bar soap use in your facility (patients personal use only)	
ABHR <input type="checkbox"/> Alcohol concentration <input type="checkbox"/> Formulation (gel, liquid or rinses) <input type="checkbox"/> Safety consideration <input type="checkbox"/> Placement of dispensers	
Antimicrobial soap <input type="checkbox"/> Indications for use	
Surgical hand antisepsis product (for use in OR only)	

Hand Hygiene Monitoring

Review the Hand Hygiene audit process	
Is there a hand hygiene audit process for your facility?	
Who conducts the audits?	
Is there an education session for persons conducting the audit?	
Identify the methods used for collecting data to evaluate compliance?	
Who analyzes the data from the audits?	
How are the audits reported?	

Review the Hand Hygiene audit process	
Are staff provided with feedback from the audits?	
Who is responsible for implementing any changes recommended by the audits?	

Hand Hygiene Program

Although hand washing with soap and water has been a part personal hygiene rituals for centuries the link between hand washing and the spread of disease was only established about two hundred years ago. However during the past few years there has been great emphasis placed on hand hygiene in healthcare. Hand hygiene has been promoted as a critical indicator of an institutions commitment to patient safety. Some of the programs which have been advocated include:

- Clean Care is Safer Care – World Health Organization
- STOP! Clean Your Hands – Canadian Patient Safety Institute – Safer Healthcare Now!
- Just Clean Your Hands – Ontario Ministry of Health & Long Term Care
- Cleanyourhands – England and Wales

The BC Provincial Hand Hygiene Working Group and the Provincial Infectious Diseases Advisory Committee (PIDAC) in Ontario have advocated the following as key components of an effective Hand Hygiene Program.



Hand Hygiene Program	
Review the “Hand Hygiene Program” or Hand Hygiene strategies in your facility and determine if it has the following components:	
Leadership support	
<ul style="list-style-type: none"> • Policies & Procedures 	
Education	
<ul style="list-style-type: none"> • Formal staff education • Posters 	
Champions and Role Models	
<ul style="list-style-type: none"> • Administrative • Employee 	
Patient Engagement	
<ul style="list-style-type: none"> • Strategies to engage patients • Posters 	

Hand Hygiene Program	
Environmental Controls <ul style="list-style-type: none"> • Point of care ABHR • User input into the product and placement of product 	
Ongoing Monitoring <ul style="list-style-type: none"> • Audits • Re-audits 	

Documentation and Reporting

One of the steps to a successful audit is the post audit stage which includes: completing the summary score sheet, determining recommendations, meeting with stakeholders to discuss these findings and recommendations and preparing a final report including all recommendations. These recommendations must be distributed to the “appropriate person(s)”.

Documentation and Reporting	
If your facility completes audits of Hand Hygiene initiatives, complete the following:	
Does IPC meet with the stakeholders regarding the results of audit?	
Is a final report prepared for the stakeholders based on feedback from this meeting?	
Who receives the final report?	
Are items prioritized for action?	
Are there time lines as to when the items will be actioned?	
Is there a date set for a re-audit?	

Other Issues

Campaigns

Many institutions have used campaigns to promote Hand Hygiene in their facilities. This may include internal and external campaigns and the utilization of multimedia processes.

Determine if your facility uses Hand Hygiene Campaigns	
When is it held? For example during IPC week? Or on World Hand Hygiene Day – May 5	
What are the components of the campaign?	
Any suggestions for improvements?	

Appendix A: Best Practices for Hand Hygiene in All Healthcare Settings and Programs

The Provincial Hand Hygiene Working Group (PHHWG) of British Columbia will be releasing a Hand Hygiene Best Practices document in July/August 2012. Once this document is finalized, it will be attached to this module as an Appendix.

Until then, please refer to the Ontario Ministry of Health and Long-Term Care's document "Best Practices for Hand Hygiene in All Health Care Settings," upon which the PHHWG document is based.

Link to PDF:

<http://www.oahpp.ca/resources/documents/pidac/2010-12%20BP%20Hand%20Hygiene.pdf>

PICNet welcomes your comments and feedback on these modules.
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