

# University Health Network Policy & Procedure Manual Infection Prevention & Control: Hand Hygiene

## 1. Policy

[Hand hygiene](#) is the responsibility of all individuals involved in healthcare.

Alcohol-based hand rub (ABHR) is the preferred method for decontaminating hands and is recommended for use when hands are not visibly soiled. ABHR products must contain a minimum concentration of 70% alcohol.

Hand washing with soap and water must be performed when hands are visibly soiled and after providing care to a patient with confirmed or suspected *C. difficile*. If a hand hygiene sink is not immediately available, use of ABHR is sufficient.

Hand washing should be performed at a dedicated hand hygiene sink, and **not** be carried out at a patient sink in order to avoid re-contamination.

**Hand hygiene must be performed** in the following circumstances, in accordance with the 4 Moments for Hand Hygiene:

- **Moment 1:** BEFORE contact with the patient, client, or their environment.

Hands must be cleaned when entering a patient room or space, before touching a patient or any object or furniture in the patient's environment, **and** at any point during care when moving **between contact with the [healthcare environment](#) to contact with the [patient/client environment](#)**.

- **Moment 2:** BEFORE [aseptic procedures](#), including but not limited to:

- a. handling/inserting intravenous lines
- b. handling/inserting catheters
- c. providing wound, eye, or oral care
- d. administering injections
- e. preparing medications

- **Moment 3:** AFTER a procedure or bodily fluid exposure risk.

- **Moment 4:** AFTER contact with the patient, client, or their environment.

Hands must be cleaned upon leaving a patient room or space, after touching a patient or any object or furniture in the patient's environment, **and** at any point

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during care when moving **between contact with** the patient/client environment **to contact with** the healthcare environment.

Other opportunities to perform hand hygiene include:

- when hands are visibly soiled
- before donning and after doffing PPE, including gloves
- while providing care and moving from a non-sterile to a sterile site, or from a highly contaminated area to a lesser contaminated area (including during a physical examination maneuver)
- before and after [food handling](#)  
**Note: Exception for non-isolated patients:** When Nutrition Services are moving from room to room delivering or collecting meal trays without touching anything besides the meal tray, including curtains and door handles.
- before entering and after exiting isolation rooms for any purpose, including the delivery and collection of meal trays
- after collecting dirty meal trays from a soiled utility room, when applicable
- after touching environmental surfaces or objects (e.g. after touching reusable patient equipment, surfaces in patient rooms, door handles, etc.)  
**Note: Exception for non-isolated patients:** When Environmental Services are moving from room to room collecting the garbage or sweeping/mopping.
- after handling enclosed specimens
- after using the toilet
- after coughing, sneezing, or blowing the nose
- any other circumstance where deemed appropriate

**Glove use is not a replacement for hand hygiene.** When an indication for hand hygiene arises while wearing gloves, the gloves must be removed, hand hygiene should be performed, and a new pair should be donned (if still required for care).

## 1.1 Barriers to Hand Hygiene

Artificial nails and nail enhancements, rings, and wrist jewelry are considered barriers to effective hand hygiene. Hand and wrist jewelry, including watches, must be removed or pushed up above the wrist before performing hand hygiene. (Refer to [Artificial Nails](#) policy 4.20.012).

Staff unable to perform effective hand hygiene due to injuries, skin conditions, or any other reason must consult with their department manager and Health Services.

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## 1.2 Skin Integrity

Moisturizing products provided by UHN should be used as needed to prevent skin irritation associated with [hand hygiene](#).

**Note:** If there is a break down in skin integrity, go to Health Services for an assessment.

## 2. Definitions

**Aseptic procedure:** Practices intended to reduce transmission of infectious agents when performing procedures that expose a normally sterile site to potential contamination (e.g. insertion of central lines or catheters, injections, eye/oral care).

**Food handling:** Any manipulation of food products, including, but not limited to, preparing, storing, serving, feeding, eating, packaging, and transporting food intended for consumption.

**Hand hygiene:** Removing or killing microorganisms on the hands, as well as maintaining good skin integrity. Frequent and appropriate hand hygiene is the most important way of preventing the spread of hospital-acquired infections.

**Healthcare environment:** The environment beyond a patient's immediate area, and any items that are used or shared in a common space (e.g. objects, medical equipment, workstations, staff).

**Patient environment:** The patient's immediate area and any items used only by that patient. In a single-bed room, this includes everything inside the room, including the door/door handles. In a multi-bed room, this includes everything inside the curtain space, including the curtain. This also includes in-suite washrooms and any assigned equipment that resides outside of the patient's room used by a single patient, such as mobility devices. In ambulatory settings, this includes the area and equipment dedicated to the patient for the duration of their appointment.

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### 3. Procedures

#### 3.1 Using Waterless (Alcohol-based) Gel or Foam

**Note:** Alcohol-based gel or foam is the preferred method for decontaminating hands. Wash hands with soap and water if hands are visibly soiled.

1. Dispense one to two full pumps of sanitizer into the palm of a dry hand.
2. Rub hands together until dry (minimum 15 seconds), ensuring coverage between fingers, finger tips, around and under nails, on palms, back of hands, base of thumbs, and wrists.

#### 3.2 Using Soap and Warm Water

1. Remove all jewelry.
2. Turn on the tap and rinse hands under warm running water.
3. Apply soap and lather using friction (minimum 15 seconds), ensuring coverage between fingers, finger tips, around and under nails, back of hands, base of thumbs, and wrists.
4. Rinse hands under warm running water using a rubbing motion.
5. Pat hands dry with paper towels.
6. Turn off faucet using paper towel (if not electronic or foot/elbow operated).

#### 3.3 Moisturize Skin

1. Use the provided moisturizer as needed in order to protect the integrity of the skin.
2. If there is a break down in skin integrity, go to Health Services for an assessment.

### 4. References

1. Provincial Infectious Diseases Advisory Committee (PIDAC). (2014). *Best Practices for Hand Hygiene in All Health Care Settings, 4th edition*. Retrieved from: <https://www.publichealthontario.ca/-/media/documents/bp-hand-hygiene.pdf>

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