
TITLE: HAND HYGIENE

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APPLICABILITY: All Northern Health Care Providers including contracted services personnel

RELATED POLICIES: 5-3-1-060: Dress Code and Personal Hygiene
1-11-1-3-070: Routine Practices

DEFINITIONS: Refer to [end of document](#)

DOCUMENT QUICK LINKS

- BC Ministry of Health Policy Communique: Hand Hygiene
- OurNH Hand Hygiene Webpage
- [Canadian Patient Safety Institute Hand Hygiene Toolkit](#)
- WHO How to Hand Rub and Hand Wash (10-414-6023)
- Your 4 Moments for Hand Hygiene Poster (10-200-4041)

KEY POINTS

- Hand hygiene is the single most effective way to prevent the spread of communicable diseases and infections. The Northern Health (NH) Board of Directors expects every health care professional to clean their hands before and after touching any patient or touching any object that comes in contact with the patient.
- NH is committed to health promotion and disease prevention:
 - NH is responsible for health promotion and disease prevention within the Northern Health region.
- NH is committed to creating and sustaining a Culture of Safety.
 - A culture of safety equally values the safety of staff and patients.
 - Patient safety and staff safety are inseparably linked. By supporting safe and healthy staff, we support quality patient care.
 - NH is committed to a safety culture of open communication of workplace and patient concerns, near misses, and events, which are resolved in a blame-free respectful environment.

- The importance of hand hygiene cannot be understated as it is the very foundation of staff and patient safety and quality care.

POLICY

All health care providers including physicians, contracted employees and students will perform hand hygiene before and after touching any patient and/or touching any object that comes in contact with the patient. **The expectation is that all staff will be in compliance 100% of the time in non-emergency situations.**

Specifically:

- **Before**
 - Eating
 - Touching a patient
 - Touching any object or furniture in the patient's immediate environment
 - Putting on gloves
 - Performing any aseptic procedure
 - Handling medication and food
 - Exposure risk to blood/body fluids
- **After**
 - Touching a patient
 - Touching any object or furniture in the patient's immediate environment
 - Removing gloves
 - Performing any aseptic procedure
 - Handling medication or food
 - Exposure to blood/body fluids
 - Using the bathroom

NH will follow the BC Ministry of Health policy for the support of hand hygiene as outlined in their policy communique that states: "All health authorities shall ensure appropriate infrastructure is in place to support hand hygiene programming. In addition, health authorities are expected to follow Canadian Standards Association (CSA) standards (Z8000) and Guidelines for Design and Construction of Health Care Facilities (Facility Guidelines Institute) when constructing new builds or renovating existing health care facilities."

Northern Health will follow the Best Practices for hand hygiene in all health care settings.

Northern Health will follow accreditation standards for hand hygiene.

Hand hygiene products will be available at point of care. Point of care products will be accessible to the health care provider, within arm's reach, without the provider leaving the zone of care.

Provide alcohol based hand rubs in each of the following locations:

- At all entrances to and exits from the facility;
 - On the external wall immediately adjacent to the entrance to every inpatient room;
 - On walls immediately adjacent to the entrances to any patient care areas of any sort;
 - Adjacent to all points-of-care in all situations, except where the presence of alcohol would compromise patient safety;
 - In any location where personal protective equipment is donned or removed;
 - At all entrances to Dirty and Clean Service Rooms; and
 - In any additional location where its use is required to comply with routine hygiene practices.

Special Considerations

- Keep nails clean and short at all times. Long and/or chipped nails are known to harbour bacteria and interfere with effective hand hygiene.
- Do not wear artificial nails, nail polish and nail jewellery.
- Do not wear hand/wrist jewellery. A plain band and watch may be worn. Jewellery hinders effective hand hygiene and harbours the growth of bacteria.

Patient Hand Hygiene

All staff will promote patient hand hygiene to assist in reducing the spread of infection. Staff will provide patients, residents, and clients with educational guidance and support to perform hand hygiene. Patients who are immobile, bed bound, and/or confused may require frequent support from staff to assist with hand hygiene either with soap and water, a disposable towelette, or alcohol based hand rub.

Compliance

- Any person(*) found in violation of this policy may be subject to remedial or disciplinary action up to and including termination of employment, cancellation of contract and/or revocation of privileges pursuant to applicable health authority processes.
- Any staff member, including contracted services employees, may report persistent violations of compliance to their supervisor and/or complete a PSLS form. No person

will be subject to retaliation for reporting in good faith, breaches of this hand hygiene policy.

- Visitors, patients, and clients will be provided with educational guidance and support to adhere to the hand hygiene policy.

***Person refers to all staff, contractors, physicians, students and volunteers across NH.**

HAND HYGIENE TECHNIQUES AND EXCEPTIONS

General

Perform hand hygiene procedures using one or more of the following options for guidance:

- WHO How to Hand Rub and Hand Wash
- Your 4 Moments for Hand Hygiene Poster

Emergency Situations

Assist and stabilize patient, client or resident. Perform hand hygiene procedures using one of the methods presented above as soon as possible.

Glove Use

The use of gloves is an integral component of Routine Practices. Refer to Clinical Practice Standard: Routine Practices.

NOTE: The use of gloves is not a substitute for performing hand hygiene. Gloves must be changed between each patient contact and care procedure (e.g., bathing and mouth care on the same patient). **Hand hygiene must be performed before and after using gloves.**

Equipment and Supplies

- Alcohol based hand rub is the preferred method for performing hand hygiene in health care settings.
- Soap and water must be used for hand hygiene when hands are visibly soiled and in exceptional situations.

Patient/Client/Resident Education

In accordance with provincial policy, all persons within the scope of this policy must have appropriate hand hygiene education, training, and competency assessment. The requirements to complete education/training are as follows:

- **Physicians:** At the time of initial credentialing and every three years.
- **Direct Patient Care Staff:** Unspecified. Education will be linked to performance rates of the unit. Staff working on units with compliance less

than 59% will be required to complete the provincial hand hygiene education module.

- **New Hires:** At the time of their standard orientation program.
 - **Students:** At the time of their standard orientation program.
- Targeted¹ education and training will be provided on an ongoing basis.

EXCEPTIONS

- Staff may be required to forgo hand hygiene during emergent patient situations (e.g., patient collapse). In emergency situations encourage staff to perform appropriate hand hygiene as soon as possible after the patient, client or resident has been stabilized.
- Staff that are unable to perform hand hygiene due to an injury or skin conditions (e.g., eczema, psoriasis) that may require exemption from this policy must immediately report to their supervisor and provide documentation

Clostridium difficile

- Hand hygiene with either alcohol based hand rub or hand washing are acceptable and becomes an important part of controlling the spread of infection in health care facilities.
- If hands are visibly soiled, hand washing with soap and water is preferred.
- Hand hygiene must be performed with an Alcohol based hand rub immediately after patient care.
- Alcohol based hand rub is effective against “vegetative” forms of Cdiff. Use of an alcohol based hand rub is advised at the point of care, hand washing must be completed immediately after this.

Norovirus

The current recommendation is that the healthcare provider performs hand hygiene at the point of care using an alcohol based hand rub immediately after patient care. Hand washing is recommended after this.

DEFINITIONS

Point of care: The place where three elements occur together; the patient, the healthcare provider and care of treatment involving patient contact

Northern health care providers: Includes all clinicians, physicians, volunteers and other individuals having direct contact with patients/clients/residents or their immediate environment.

¹ Targeted education refers to education that is provided in relation to a particular national or local campaign initiative such as (but not limited to) Hand Hygiene Week, Infection Control Week or CPSI's *Safer Healthcare Now!* Program.

Person(s): Includes all employees (excluded and unionized), students, medical staff, dentists, researchers, physicians, residents, fellows, volunteers, executives, contractors, visitors, clients, and patients.

Hand hygiene: Hand hygiene generally refers to any action of hand cleansing (e.g., hand washing and surgical hand preparation). Hand hygiene relates to the removal of visible soil and removal or killing of transient microorganisms from the hands.

REFERENCES

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KEYWORDS

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Contact policiesstandards@northernhealth.ca if further information is required.			
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