

Capital Regional Medical Center	Policy Number: CRMC-QUAL-311
Department: Infection Control	Effective Date: 2/23/09; 08/25/2011
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	Page Number: 1 Of: 2

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PURPOSE: Reduce the risk of health care-associated infections; Improve hand hygiene practices of health care personnel; reduce transmission of pathogenic microorganisms to patients and personnel in health care settings.

Note: Staff will not wear personal protective equipment, (PPE), including gloves, outside the patient room. It is recommended that when transferring patients, staff carry a set of clean gloves in the event of unexpected contact with bodily fluids.

POLICY:

A. Hand Washing:

1. Wash hands with soap/antimicrobial soap and water when hands are visibly dirty or contaminated with proteinaceous material or visibly soiled with blood or other body fluids and after removing gloves.
2. Wash hands with soap/antimicrobial soap before & after caring for patients with known or suspected *Clostridium difficile* as alcohol, chlorhexidine and other antiseptic agents have poor activity against spores.
3. When washing hands with soap/antimicrobial soap, wet hands first with warm water, apply 3-5 ml of soap to hands and rub hands together vigorously for at least 15 – 20 seconds, covering all surfaces of the hands and fingers. Rinse hands with warm water and dry thoroughly with a disposable towel. Use towel turn to turn off the faucet.

B. Decontamination with alcohol – based antiseptic:

1. If hands are not visibly soiled, use alcohol-based waterless antiseptic for routinely decontaminating hands in all other clinical situations. Alcohol foam is located in holders mounted on wall inside patient rooms and other designated areas.
2. Decontaminate hands – wash hands or use alcohol GEL on hands:
 - a. Before and after any patient contact
 - b. After removing gloves
3. When applying alcohol GEL, apply to palm of hand and rub hands together, covering hands to ½ inch above the wrist and all fingers. Rub vigorously until dry (about 15-25 seconds).

C. Fingernails:

Health care workers with direct patient care responsibilities (or the potential for direct patient care) and those workers who have responsibilities in the patient’s environment (such as CSS, Environmental Services, and Food Services) will maintain short (one-quarter inch past the tip of the finger) natural fingernails; artificial nails and extenders are not to be worn. Natural nails will be clean and without sharp edges. Polish if worn should be transparent enough to observe whether nails are clean. Chipped polish is not allowed. Employees providing

direct patient care must be free of decorations or adornment on the nail. Department Directors will be responsible to monitor their employees for compliance.

D. Hand Hygiene surveillance:

All patient care departments will be required to do monthly hand hygiene surveillance and submit to Infection Control for inclusion in quarterly Patient Safety/Infection Control reports.

E. Passing Trays:

Dietary staff will pass trays to patients in non-isolation rooms only. Patient Care unit staff will be responsible for distributing trays into isolation rooms.

F. Soiled Linen:

Soiled linen is to be collected in a clean linen bag and deposited in a nearby linen hamper. See Mosby's on line reference link "Changing an Occupied Bed" for instruction on changing an occupied bed and handling linens.

References:

1. CDC Guideline for Hand Hygiene in Health-care Settings; Mosby's on line reference link at CRMC intranet website.