



1. Purpose

This guideline outlines the requirement for Hand Hygiene at the Women's Parkville and Sandringham.

The Women's will promote hand hygiene as the most effective method in preventing Healthcare Associated Infections (HAIs). The Women's will reduce the risk of HAI's by staff performing the **5 Moments** of Hand Hygiene which incorporates the critical occasions when hand hygiene is required for patient care.

Hand Hygiene is a Key Performance Indicator (KPI) of the Department of Health and Human Services (DHHS) and the Women's Hospital. The DHHS requires a minimum compliance rate for Hand Hygiene. Auditing of Hand Hygiene compliance of all staff groups is compulsory and performed on an ongoing basis. The data is submitted three times per year and is available to the public via the My Hospitals website.

This guideline is related to the [Infection Prevention and Control Policy](#).

2. Definitions

Alcohol Based Hand Rub (ABHR): An alcohol-containing preparation designed for application to the hands in order to reduce the number of viable organisms with maximum efficacy and speed.

Antiseptic hand wash: solutions containing an antiseptic agent to reduce the number of microorganisms when hands are washed with this and water.

5 Moments for Hand Hygiene: A description of the critical occasions in health care when Hand Hygiene is required in order to prevent Healthcare Associated Infection. Created by World Health Organisation and adopted nationally in Australia.

Hand Hygiene (HH): A general term that applies to hand washing, antiseptic hand wash, antiseptic hand rub or surgical antiseptics.

Hand Hygiene Australia (HHA): Australia's national authority on Hand Hygiene in Healthcare

Hand washing: Washing hands with plain soap and water.

Healthcare Associated Infection (HAI): An infection that was not present or incubating prior to the patient being admitted to the hospital.

Medical Appliances: A collective term that includes supportive devices worn for medical purposes. These include but are not limited to: compression garments, finger guards or cots, hard casts (plaster or fiberglass) and hand wrist orthotics (splints or back slabs).

Patient Surroundings: An area dedicated to an individual patient for that patient's stay in hospital. It includes furniture, medical equipment, medical charts and personal belongings that are touched by the patient and health care workers.

Skin Conditions: A dermatological condition on a Health Care Workers' hands, wrists, forearms or finger nails.

3. Responsibilities

It is the responsibility of health care workers including any staff who have direct contact with patients and their surroundings to:

- Perform Hand Hygiene as specified in this guideline and all relevant PGPs to prevent HAIs.
- Inform all visitors to perform hand hygiene. All parents, patients and caregivers may also ask staff members: "Have you cleaned your hands?"
- Actively encourage or remind each other constructively to perform hand hygiene.
- Report any skin conditions or medical appliances that affect your ability to perform hand hygiene to your manager, Occupational Health and Safety, and Infection Prevention and Control.
- Abide by the Women's Dress Code for staff with direct patient contact keeping arms bare below the elbow.



4. Guideline

ALL staff who have direct contact with patients or their immediate environment must be able to:

- Wash their hands, wrists and forearms with both an *approved* plain soap and antiseptic solution.
- Decontaminate their hands, wrists and forearms with an *approved* Alcohol-Based Hand Rub (ABHR).
- Comply with the World Health Organisation (WHO) **5 Moments for Hand Hygiene** to the minimum rate set by the Victorian Department of Health and Human Services (DHHS).
- Use protective gloves correctly.
- Pass the RWH Hand Hygiene and Infection Prevention mandatory competency annually.
- Participate in the compulsory auditing of Hand Hygiene compliance rates, as required by DHHS.

Only Hand Hygiene products approved by Health Purchasing Victoria and Infection Prevention and Control may be used at the Women's. Substitutes are not permitted without prior approval from Infection Prevention and Control or Occupational Health and Safety.

4.1 Product Placement

Alcohol based hand rub (ABHR) (70% ethanol) should be available

- At entrance and exit of all patient care departments and patient care rooms
- At each patient's bed or treatment area and within the privacy curtains.
- On a wall near suction unit if this is routinely required
- At work stations of clinical staff
- On all clinical trolleys
- In medication rooms: within easy reach of the drug cupboards and work surface
- In utility rooms: near waste bins
- Near Linen trolleys

Plain hand wash soap should be available at every hand basin, excluding surgical scrub sinks

Clinical hand wash soap (2% Chlorhexidine) should be available at hand basins in clinical and procedure rooms (excluding surgical sinks)

Surgical hand wash (4% Chlorhexidine) should be available at scrub sinks outside theatre and procedural room.

4.2 Product Choice

Choice of ABHR, plain soap, clinical and surgical hand wash products will be guided by market place availability, best practice literature and staff choice in consultation with the Product Evaluation Committee and Occupational Health and Safety department.

ABHR (70% ethanol) kills 99.99% of micro-organisms on the hands, with some persistent antimicrobial activity. Used correctly it is more effective than hand washing with 2% chlorhexidine.

4.3 Hand Hygiene Technique

Refer to Appendix A.

4.4 Glove Use

- Use for procedure only and remove
- Never wash or apply solutions to gloves
- Discard immediately if contaminated

Hand Hygiene



- Always wash or disinfect hands before and after removal

4.5 Hand Hygiene and Management of Skin Conditions

Please contact Infection Prevention and Control to discuss any skin conditions that affect your ability to perform hand hygiene or may be infectious.

4.6 Hand Hygiene – Medical Appliances on Hands, Wrists and Forearms

Please contact Infection Prevention and Control if you are required to don a medical device that will affect your ability to perform hand hygiene.

5. Evaluation, monitoring and reporting of compliance to this guideline

Compliance to this guideline or procedure will be monitored, evaluated and reported through:

- Audits to determine compliance to hospital policy/procedure and national and international standards will be conducted and feedback will be provided both informally (at the time) and formally as monthly area updates.
- Targeted hand hygiene compliance surveillance audits reported to DHHS as a required KPI for the Women's Hospital
- Staff education program
- Hand Hygiene annual mandatory competency.

6. References

1. Australian Guidelines for the Prevention and Control of Infection in Healthcare. Australian Commission on Safety and Quality in Health care 2010. <http://www.nhmrc.gov.au/guidelines/publications/cd33>
2. Hand Hygiene Australia 2013, Australia, accessed 11 October 2016, <http://www.hha.org.au/>
3. The Australian College of Operating Room Nurses Ltd (2014). ACORN Standards for Perioperative Nursing 2014-2015. Adelaide South Australia: Australian College of Operating Room Nurses Ltd, 2014

7. Legislation/Regulations related to this guideline

Not applicable.

8. Appendices

Appendix A: [Hand Hygiene Technique](#)

PGP Disclaimer Statement

The Royal Women's Hospital Clinical Guidelines present statements of 'Best Practice' based on thorough evaluation of evidence and are intended for health professionals only. For practitioners outside the Women's this material is made available in good faith as a resource for use by health professionals to draw on in developing their own protocols, guided by published medical evidence. In doing so, practitioners should themselves be familiar with the literature and make their own interpretations of it.

Whilst appreciable care has been taken in the preparation of clinical guidelines which appear on this web page, the Royal Women's Hospital provides these as a service only and does not warrant the accuracy of these guidelines. Any representation implied or expressed concerning the efficacy, appropriateness or suitability of any treatment or product is expressly negated

In view of the possibility of human error and / or advances in medical knowledge, the Royal Women's Hospital cannot and does not warrant that the information contained in the guidelines is in every respect accurate or complete. Accordingly, the Royal Women's Hospital will not be held responsible or liable for any errors or omissions that may be found in any of the information at this site.

Hand Hygiene



You are encouraged to consult other sources in order to confirm the information contained in any of the guidelines and, in the event that medical treatment is required, to take professional, expert advice from a legally qualified and appropriately experienced medical practitioner.

NOTE: Care should be taken when printing any clinical guideline from this site. Updates to these guidelines will take place as necessary. It is therefore advised that regular visits to this site will be needed to access the most current version of these guidelines.

Appendix A

Hand Hygiene Technique



	Plain Cleansing Agent	Antiseptic Cleansing Agents		
Type of Hand Hygiene	Social Hand Wash	Alcohol Based Hand Rub (ABHR)	Clinical Hand Wash	Surgical Hand Wash
Product Name	Hand wash pH 7	Antimicrobial Hand Gel N.B: Only for use on visibly clean hands. Used correctly, it is more effective than hand washing.	2% Chlorhexidine	4% Chlorhexidine PVP - Povidone Iodine
Colour	White	Clear, Blue or White	Green	Pink or Brown
Purpose	<ul style="list-style-type: none"> • After using toilet • If hands are visibly soiled • Before and after meal breaks 	Before and after: <ul style="list-style-type: none"> • Patient contact • Glove use • Clinical procedure Before: <ul style="list-style-type: none"> • Preparing & dispensing medication • Touching clean communal equipment & linen Between touching a contaminated and clean body site After touching equipment in a patient's allocated space NEVER to be used before surgical procedures	Procedures: May be used prior to any aseptic procedure (NB: ABHR is superior to a 30 second clinical hand wash with 2% chlorhexidine soap)	Surgery
Duration of Washing	15 seconds	15 seconds	30 Seconds	5 minutes shall be undertaken for the first scrub of the day. Subsequent scrubs shall be 3 minutes. (ACORN Standards; S21 standard statement 3.1 & 3.2)

Hand Hygiene Technique



<p>Technique</p>	<p>See Clinical/Surgical Hand Wash</p>	<ul style="list-style-type: none"> • To the palm of one hand, apply enough ABHR to cover all surfaces of hands, fingers and up to and above wrists • Rub surfaces for 15 seconds until product evaporates. <p>NEVER shake hands to "air dry" or hasten drying</p>	<ul style="list-style-type: none"> • Wet hands thoroughly with warm running water. Water must not be hot. • Apply 1-2 pumps of the appropriate hand washing liquid <ul style="list-style-type: none"> • Social/ VRE / C.Diff / Gastro outbreak: Plain handwash • Clinical: 2% Chlorhexidine wash • Surgical : 4% Chlorhexidine or Povidone Iodine wash • Lather all surfaces of your hands and wrists thoroughly & vigorously. • Rinse hands thoroughly under running water. <p>Pat hands dry gently & thoroughly using paper towels; do not rub</p>
-------------------------	--	--	--