WHERE CAN I GET MORE INFORMATION?

For more information about hand hygiene contact your hospital's hand hygiene programme coordinator, infection control team, or visit

www.handhygiene.org.nz







CLEAN HANDS SAVE LIVES Ringa Mā, Hunga Ora



WHY IS HAND HYGIENE IMPORTANT?

The most common way that micro-organisms (germs), particularly bacteria, are spread and cause infection is by being carried on people's hands.

Hand hygiene is the most important measure to avoid the spread of harmful germs and to prevent health care associated infections.

Regular and thorough hand hygiene is always important when working in an environment or organisation where health care is provided.

Having clean hands helps to protect patients, particularly the most vulnerable, as well as yourself and others.

WHAT ARE CLEAN HANDS?

Clean hands are hands that have been washed and/or treated with an alcohol-based hand product.

WHEN SHOULD I CLEAN MY HANDS?

There are five key moments when hand hygiene must be performed, including before touching a patient and after touching patient surroundings. Please refer to the 'five moments of hand hygiene' diagram on page 8 for a more detailed account of when you are required to clean your hands.

HAND CARE

To keep your hands in good condition follow the points below as recommended by the World Health Organization (WHO):

- Take care of your hands by regularly using a hospital supplied protective hand care cream or lotion at least daily.
- Do not routinely wash hands with soap and water immediately before or after using an alcohol-based hand product ('hand rubbing').
- Do not use hot water to rinse your hands.
- After hand rubbing or hand washing, let your hands dry completely before putting on gloves.

If you develop dermatitis, skin allergies or infected lesions on your arms or hands please contact your Occupational Health and Safety representative to discuss it with them.

HOW DO I CLEAN MY HANDS PROPERLY?

Remove jewellery before cleaning hands. If you want to keep your wedding band on make sure you don't miss the area underneath it.

If your hands look physically clean, alcohol-based hand product can be applied. The product is rubbed over all parts of your hands until the product dries in, using the steps as shown in the 'how to hand rub' diagram on page 6.

If your hands are visibly soiled, then use the hand washing technique as described in the 'how to hand wash' diagram on page 4.



WASH HANDS ONLY WHEN VISIBLY SOILED. OTHERWISE, USE HANDRUB.



Duration of the entire procedure: about 40-60 sec.



Wet hands with water and apply enough soap to cover all hand surfaces.



Rub hands palm to palm, up to and including wrists.



Right palm over back of left with linked fingers and vice versa.



Palm to palm with fingers linked.



Backs of fingers to opposing palms with fingers interlocked.



Rotational rubbing of left thumb held in right palm and vice versa.



Rotational rubbing firmly, with closed fingers of right hand in left palm and vice versa.



9.

Rinse hands well with water.



Dry hands with a paper towel.



USE HANDRUB TO CLEAN HANDS. WASH HANDS ONLY WHEN VISIBLY SOILED.



Duration of the entire procedure: about 20-30 sec.



of handrub in a cupped hand.



Right palm over back of left with linked fingers and vice versa.

Palm to palm with fingers linked.



4

YOUR 5 MOMENTS FOR HAND HYGIENE



1 Before Patient Contact

- **WHEN?** Clean your hands before touching a patient when approaching him/her.
- **WHY?** To protect the patient against harmful germs carried on your hands.

EXAMPLES:

- Courtesy and comfort gestures: shaking hands, stroking an arm.
- Direct physical contact: helping a patient to move around, to get washed, giving a massage.
- Clinical examination: taking pulse, blood pressure, chest auscultation, abdominal palpation.

2 Before Procedure

WHEN? Clean your hands immediately before any procedure.

WHY? To protect the patient against harmful germs, including the patient's own, from entering his/her body.

EXAMPLES:

- Contact with mucous membranes: giving eye drops, secretion aspiration.
- Contact with non-intact skin: skin lesion care, wound dressing, any type of infection.
- Contact with medical devices: catheter insertion, opening a vascular access system or a draining system.
- Preparation of food, medications, dressing sets.

3 After Procedure or Body Fluid Exposure Risk

- WHEN? Clean your hands immediately after an exposure risk to body fluids (and after glove removal).
- **WHY?** To protect yourself and the health-care environment from harmful patient germs.

EXAMPLES:

- Contact with mucous membranes and with non-intact skin, as detailed in the indication "before procedure".
- Contact with medical devices or clinical samples: drawing and manipulating any fluid sample, opening a draining system, endotracheal tube insertion and removal.
- Clearing up urine, faeces, vomit.
- Handling waste (bandages, napkin, incontinence pads), cleaning of contaminated and visibly soiled material or areas (lavatories, medical instruments).

4 After Patient Contact

- **WHEN?** Clean your hands after touching a patient and her/his immediate surroundings, when leaving the patient's side.
- **WHY?** To protect yourself and the health-care environment from harmful patient germs.

EXAMPLES:

- Courtesy and comfort gestures: shaking hands, stroking an arm.
- Direct physical contact: helping a patient to move around, to get washed, giving a massage.
- Clinical examination: taking pulse, blood pressure, chest auscultation, abdominal palpation.

5 After Contact with Patient Surroundings

- WHEN? Clean your hands after touching any object of furniture in the patient's immediate surroundings, when leaving even if the patient has not been touched.
- **WHY?** To protect yourself and the health-care environment from harmful patient germs.

EXAMPLES:

- Changing bed linen, perfusion speed adjustment, monitoring alarm, holding a bed rail, cleaning the night table.

WHAT ELSE IS BEING DONE REGARDING HAND HYGIENE?

As part of the hand hygiene project a range of national resources have been developed to raise awareness of the importance of hand hygiene among healthcare workers. To view these resources visit www.handhygiene.org.nz.

Formal monitoring of hand hygiene compliance within hospital wards will be carried out every four months. Monthly rates of staphylococcus aureus disease and bacteraemia will also be monitored. This monitoring data will be fed back locally and submitted to a national data coordinator to enable national benchmarking.