TITLE: HAND HYGIENE GUIDELINES

PURPOSE: To prevent the transmission of infection to patients and healthcare workers.

POLICY STATEMENT:

Harris Health System (Harris Health) implements these hand hygiene guidelines to reduce the transmission of infectious agents to patients and healthcare workers.

POLICY ELABORATIONS:

I. DEFINITIONS:

A. **ALCOHOL-BASED HAND RUB:** An alcohol-containing preparation designed for application to the hands for reducing the number of viable microorganisms on the hands. In the United States, such preparations usually contain sixty to ninety-five percent (60%–95%) ethanol or isopropanol.

B. **ALCOHOL-BASED ANTISEPTIC SURGICAL HAND RUB:** A surgical hand antisepsis or an alcohol-based antiseptic surgical hand rub with documented persistent and cumulative activity that has met United States Food and Drug Administration (FDA) regulatory requirements for surgical hand antisepsis is acceptable.

C. **ARTIFICIAL NAILS:** Fake or false nails, fashion nails, nail enhancements, or nail extensions, are coverings placed over fingernails as fashion accessories, shall include but is not limited to:

1. Acrylic Nails;
2. Shaliac Nail Polish;
3. Gel Nails; and
4. Gel Overlay.

D. **HAND HYGIENE:** A general term that applies to hand washing, antiseptic hand wash, antiseptic hand rub, or surgical hand antisepsis:

1. Non-Surgical Hand Hygiene using:
a. Soap and water,
b. Antiseptic and water, or
c. Antiseptic hand rub if visible soil is not present; or

2. Surgical Hand Scrub using:

   a. Waterless brushless surgical antiseptics, or
   b. Traditional surgical hand scrub using a sponge.

E. **HEALTH CARE PERSONNEL (HCP):** All paid and unpaid persons providing direct patient care and/or services or having direct patient contact in health-care settings at Harris Health facilities who have the potential for exposure to patients and/or to infectious materials, including body substances, contaminated medical supplies and equipment, contaminated environmental surfaces, or contaminated air.

F. **OTHER POTENTIALLY INFECTIOUS MATERIALS (OPIM):** Refers to:

   1. The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any bodily fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids;
   2. Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and
   3. Human Immunodeficiency Virus (HIV) containing cell or tissue cultures, organ cultures, and HIV or Hepatitis B Virus (HBV)-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

II. **GENERAL PROVISIONS:**

   A. Hand washing stations shall be maintained with appropriate supplies and conveniently located throughout the hospital or healthcare center.
### POLICY AND REGULATIONS MANUAL

**B.** Hands must be cared for by washing with soap and water for fifteen to twenty (15-20) seconds as follows:

1. When visibly dirty or contaminated with OPIMs;
2. If exposure to potential spore-forming organisms is strongly suspected or proven;
3. After using the restroom;
4. Prior to starting work; and
5. Hands must be washed with soap and water after using alcohol based hand sanitizer six to nine (6-9) times or if there is a residue after use.

**C.** Use an alcohol-based hand rub for routine hand antisepsis in all other clinical situations unless washing hands with soap and water is indicated.

1. Perform hand hygiene:
   a. Before and after patient contact;
   b. After contact with a source of microorganisms (bodily fluids and substances, mucous membranes, non-intact skin, or wound dressing),
   c. After contact with inanimate objects that are likely to be contaminated, (including medical equipment) in the immediate vicinity of the patient
   d. If moving from a contaminated body site to a clean body site during patient care
   e. After removing gloves;
   f. Before performing invasive procedures;
   g. Before handling medication;
   h. Before preparing food; and
   i. Throughout the surgical suite as provided in Appendix A

**D.** Areas that do not have immediate access to hand washing stations must have readily available an alcohol-based waterless antiseptic agent.

**E.** In the event of interruption of water supply, alternative agents such as detergent containing towelettes and alcohol-based hand rubs will be available.

**F.** Communal bar soap is not used in any Harris Health facility.
G. Wall mounted hand lotions or creams should be available for healthcare workers to minimize the occurrence of irritant contact dermatitis.

H. Healthcare workers:
   1. Finger nails must be kept short and nail polish must not be chipped and;
   2. Keep natural nails less than a fourth (¼) of an inch long.

I. Do not wear artificial fingernails or extenders when having direct contact with patients.

J. Rings and jewelry must be kept to a minimum. In patient areas, ornamental jewelry such as bracelets should not be worn.

III. OTHER ASPECTS OF HAND CARE AND PROTECTION:

Gloves:
A. Gloves should be used for hand-contaminating activities, but not as a substitute for hand washing.

B. Wear gloves when it can be reasonably anticipated that contact with blood or other potentially infectious materials, mucous membranes, and non-intact skin will occur.

C. Decontaminate hands before donning sterile gloves when inserting a central intravascular catheter, urinary catheter or other invasive devices that do not require a surgical procedure.

D. Gloves should be removed and hands washed when procedure/task completed.

E. Change gloves during patient care if moving from a contaminated body site to a clean body site.
IV. PROCEDURES:

The procedures that shall be used in the implementation of this policy may be found in Appendix “A” attached.
REFERENCES/BIBLIOGRAPHY:


Harris Health System Policy and Procedure 6.10 Dress Code and Personal Appearance.

OFFICE OF PRIMARY RESPONSIBILITY:

Harris Health System Infection Prevention
## REVIEW/REVISION HISTORY:

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APPENDIX A - PROCEDURES

A. Hand Hygiene Techniques: Soap & Water:

1. *Turn On Water.* Keep water running continuously throughout hand washing procedure. Adjust water to a temperature comfortable to hands. Extremely hot or cold water tends to dry skin.

2. *Wet Hands and Wrists with Water.* If long sleeves are worn, raise sleeves before washing hands. Hold hands down toward sink. Water should drain from wrists to finger tips and carry away bacteria.

3. Apply sufficient amount of liquid soap or antiseptic agent sufficient to form a good lather and thoroughly distribute over hands.

4. Wash palms, wrists and the back of each hand. Interlace hands, rub and massage in a rotary (circular) motion. Vigorously rub hands together for fifteen (15) seconds covering all surfaces of the hands and fingers.

5. Hold hands slanted downward and rinse well under running water. Running water should flow from wrists down to fingers, thus carrying suds and germs down the drain.

6. Dry wrists then hands with paper towel, and turn off faucets with paper towel and discard towels in wastebasket. Use of paper towels prevents contamination of clean hands by touching of faucet. All faucets must be considered contaminated.

7. Paper towels should be within easy reach of the sink, but beyond splash contamination.

8. Lever-operated towel dispensers should be activated before beginning hand washing.

B. Hand Hygiene Techniques: Waterless Product:

1. Apply product to palm of one hand; and

2. Interlace hands and rub hands together covering all surfaces of hands and fingers, until hands are dry.

C. Hand Hygiene Techniques Surgical Hand Scrub:

1. *Surgical Hand Hygiene:*

   a. Surgical hand antisepsis using either an antimicrobial soap or an alcohol-based hand rub with persistent activity is required before donning gloves when performing surgical procedures.
b. In surgical/perioperative areas, hands should be washed:
   
i. Upon entering the perioperative setting,
   
ii. Before and after every patient contact (contact in this situation is interpreted as an Exposure to a patient and not each time you touch a patient),
   
iii. Before putting on or after removing gloves or other personal protective equipment,
   
iv. Any time there has been contact with blood or other potentially infectious materials,
   
v. Before and after eating,
   
vi. Before and after using the restroom,
   
vii. Before leaving the health care facility, and
   
viii. When hands are visibly soiled
   
   c. A surgical hand scrub should be performed by health care personnel before donning sterile gloves for surgical or other invasive procedures. Use of either an antimicrobial surgical scrub agent or an alcohol-based antiseptic surgical hand rub is acceptable.
   
d. Surgical hand hygiene should be performed in all areas prior to a surgical procedure. This includes areas such as the Operating Room, Cardiac Cath Lab, Vascular Radiology, and Labor and Delivery. If surgical procedures are performed in other areas (i.e., intensive care units), mechanisms for this level of hand hygiene must be provided.
   
e. If a 2-minute hand wash is selected, 2% chlorhexidine solution is preferred. A traditional “brush” can be used but only the soft foam side should be used. Brushing the skin may bring skin flora to the surface as well as disrupt the skin of the hands.
   
f. If an Alcohol-Based Antiseptic Surgical Hand Rub is used, hands must be thoroughly washed and completely dried prior to the initial use of the agent to remove any soil from the hands and arms. After this first hand wash, the waterless product can be used throughout the remainder of the day. When using this waterless agent, enough product should be dispensed into the hands so the complete hands and forearms can come into contact with the product.
   
g. Step by step procedures involved in a surgical hand hygiene process should be available in the respective departmental procedure manual.
   
h. Care must be given to cleaning the nails during this surgical scrub process.

2. Surgical Hand Scrub:

   The procedure for surgical hand scrub for the OR suite and special procedure areas performing diagnostic/invasive procedures should include the following steps:
   
a. Remove rings, watches, and bracelets before beginning surgical hand preparation;
   
b. Wash hand and forearms thoroughly. Clean under nails with a nail cleaner – rinse thoroughly -
c. For the scrub including a brush, Apply antimicrobial agent to wet hands and forearms with friction for the length of time recommended by the manufacturer or at least two to six minutes (2-6) minutes – rinse thoroughly and dry hands prior to donning gloves; rinse thoroughly and dry hands prior to donning gloves;

d. Initial surgical hand scrub should be used prior to the first case of the day;

e. For subsequent cases, a brushless scrub product may be used for hand disinfection.