Hand hygiene (HH) is the process of removing debris and germs from the hands. Hand hygiene is an important measure to protect healthcare workers and residents from infection.

Place wall dispensers outside of resident rooms. If wall dispensers are not currently

Hand hygiene is performed by using either plain soap and water, or with an alcohol-based hand rub (ABHR) commonly referred to as hand sanitizer.

# **Making Hand Hygiene Easier**

To make it easy access to Alcohol-based Hand Rubs (ABHR), assess and modify the environment to make it easy to perform hand hygiene. Some measures to consider:



	available, consider placing ABHR pump bottles outside of each resident doorway.		
	Place ABHR on medication and treatment carts so that it is easy readily available between		
	resident medication administration.		
	Install ABHR dispensers above eye level to provide for safer use in memory care settings.		
	Provide pocket-sized individual dispensers for care providers in areas where wall dispensers		
	are a risk for patient safety.		
	Keep ABHR at food and beverage service areas with visual reminders to perform hand		
	hygiene before use.		
	Install ABHR sanitizing stations at the entry to dining areas, individual units and the facility		
	entrance.		
	Place ABHR near high touch surfaces such as elevators and at the top and bottom of		
	stairways.		
	stan ways.		
Encourage Hand Hygiene in the following ways:			
П	Continue to provide education and frequent reminders for staff to perform hand hygiene.		
	Visual reminders can be very helpful.		
	·		
	Consider a formal monitoring program to assess staff for compliance with hand hygiene.		
	Include residents in hand hygiene opportunities. Remind and support residents to wash		
	hands with soap and water after toileting.		
	Remind residents to perform ABHR when they enter dining areas. Offer ABHR opportunities		
	to residents when entering common areas and before participating in group activities.		
	During an outbreak consider hand hygiene reminders targeting those who have contact		
	with multiple residents such as med techs, physical therapy, and dietary personnel.		
	Post hand hygiene flyer reminders where hand hygiene should occur.		
	rust nanu nygjene nyel tenimuets where hand nygjene should occur.		

# **Healthcare Skin and Nail Care**

The following tips can reduce the bacteria and virus contamination of the hands.

Na	ils			
		Keep natural nails less than ¼ inch in length		
		Avoid wearing rings, especially those with stones or ridging as these can be difficult to clean effectively		
		Artificial nails should not be worn by healthcare providers as they can continue to hold germs after hand hygiene with either ABHR or soap and water.		
Ski	nca			
		The use of hand lotions can prevent skin dryness and cracking from frequent hand hygiene.		
Hand Washing with Soap and Water				
		Hands should be washed with soap and water after using the toilet and before handling food.		
		Avoid using soaps that are labeled 'antibacterial' as they can cause germs to become resistant and may increase skin irritation.		
		Plain liquid soap and water are best for soap and water hand washing.		
		Avoid using bar soap as germs can remain on the bar between users.		
		Water temperature for hand washing may be warm or cold. Both are equally effective at removing germs.		
		Use clean towels or paper towels to turn off the faucet and dry hands.		
Hand Hygiene with Alcohol Based Hand Rub (ABHR)				
ABHR is commonly used in healthcare situations when hands are not visibly dirty. ABHR can be easier on the skin of the hands as they often contain emollients to soothe and hydrate the skin.				
ABHR is preferred for health care workers because it is:				
		Easier to use than soap and water		
		Very effective at killing germs on hands		
	Ш	Less irritating to skin irritation than soap and water hand washing		
Alc	oho	ol Content in ABHR		
		ABHR should contain more than 60 % (61-95%) alcohol (ethanol, ethyl alcohol, alcohol)		
		for effective germ killing. Check the product label for the active ingredient and concentration before purchasing or using.		
Spe	ecia	l Considerations When Using ABHR		
		ABHR can be flammable, avoid storing large amounts in small locations.		
		Don't place ABHR in environments where it could be swallowed by patients or residents		
		as ARHRs can cause noisoning		

	When providing ABHR for behavioral health or memory care populations, consider installing dispensers above eye level or providing pocket-sized containers.
ABHR	in Settings Where Dispenser Installation is a Risk
	High risk settings where consumption of ABHR could be a hazard could include
	behavioral health units, pediatric settings, and substance treatment programs.
	Consider allowing staff to carry a pocket dispenser of ABHR for personal use.
	Consider strategic and staff monitored placement of ABHR dispensers.
	Increase access to soap and water hand hygiene.

#### **How to Clean Your Hands**

#### **ABHR / Hand Sanitizer**

□ Put product on hands. Usually one pump will be enough. Rub your hands together, ensuring that you cover all surfaces (palms, finger tips, between fingers, around nails, and tops of hands) until the hands feel dry. This usually takes around 20 seconds.

#### **Soap and Water**

□ Turn on the water and wet hands, put soap on hands. Usually one pump will be enough. Rub your hands together, covering all surfaces of the hands and fingers for at least 20 seconds. Be sure to lather palms, between each finger, around nails, and the top of hands. Rinse hands well. Use a clean towel or paper towel to dry. Use the towel to turn off the faucet.

# When to use Hand Hygiene

#### Hand Sanitizer or Soap and Water Can be Used Wash Hands with Soap and Water Only Before contact with residents. Before eating. After using the restroom. Before performing certain care tasks such as placing or handling and IV or indwelling When hands are visibly soiled. urinary catheter, and doing oral care. When caring for a person who is incontinent When caring for a resident and moving or has diarrhea. from providing care on a soiled body site After providing care to a resident known or (such as a urine, bowel, or wound care) to suspected to have C. difficile related diarrhea a clean body site (such as a device or oral care). After touching the resident or their environment. After contact with blood, body fluids, or contaminated items. After removing gloves. Before putting on clean gloves







### Resources

CDC Hand Hygiene in Healthcare Settings <a href="https://www.cdc.gov/handwashing/handwashing-healthcare.html">https://www.cdc.gov/handwashing/handwashing-healthcare.html</a>

CDC Posters, factsheets, videos, brochures, infographics for promoting hand hygiene <a href="https://www.cdc.gov/handhygiene/campaign/index.html">https://www.cdc.gov/handhygiene/campaign/index.html</a>

CDC Show me the Science <a href="https://www.cdc.gov/handhygiene/science/index.html">https://www.cdc.gov/handhygiene/science/index.html</a>