Six Step Technique

- Remove all jewellery (flat band allowed).
- Wet hands under running water (using elbow taps if available).
- Dispense one application of liquid soap/antiseptic solution into cupped hand.
- Thoroughly lather all hands' surfaces for recommended duration, paying special attention to the thumbs, fingertips and between the fingers (see 6 step technique outlined below).
- · Rinse hands thoroughly under running water.
- Pat hands dry with disposable paper towel.



1. Rub palm to palm



2. Rub backs of both hands



3. Rub palm to palm with fingers interlaced



4. Rub backs of fingers (interlocked)



5. Rub both thumbs

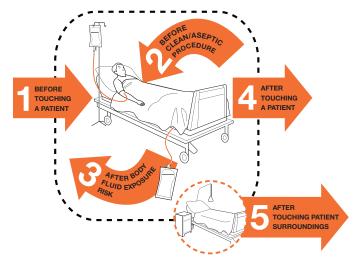


6. Rub both palms with fingertips and rub both wrists

Rinse hands under running water and pat hands dry thoroughly using disposable paper towel.

This handwashing technique is based on procedure described by G.A.J. Ayliffe et al. J. Clin. Path. 1978, 31:923
We gratefully acknowledge ICI Pharmaceuticals UK for providing guide drawings. © H.G. Wallace Ltd. 1991

WHO - World Health Organisation **5 Moments for Hand Hygiene**



Based on the 'My 5 moments for Hand Hygiene', URL: http://www.who.int/gpsc/5may/background/5moments/en/index.html © World Health Organization 2009. All rights reserved.

- Where residents are cared for in a dedicated space with dedicated equipment, the 5 Moments for Hand Hygiene apply at the point of care.
- The 5 Moments for Hand Hygiene recommendations do not cover social contacts with or among long term care residents unrelated to healthcare.

For further information contact:

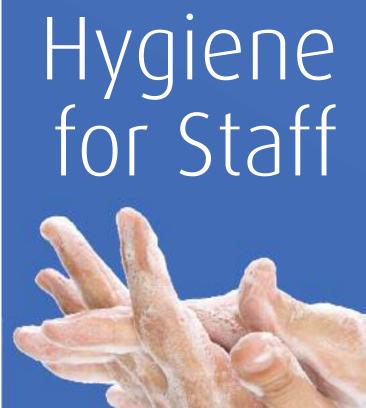
Cork / Kerry Disability Services Tel 021 4923148 Mobile 086 7872179

St Finbarr's Hospital, Cork Mobile 086 7871393 Cork Community Services Tel 021 4923148 Mobile 087 6299567

Kerry Community Services
Mobile 086 7871397









Long Term Care and Community Services

Revision 1 - Jan 2014

Hand Hygiene

Hand Hygiene is a simple and very effective method of helping to prevent the spread of healthcare associated infection.

Healthcare associated infections can have significant consequences for the resident leading to increased morbidity and mortality, extended bed stay, extra treatment and psychological stress.

Do you know?

People, who are either ill and/or in residential care, have an increased risk of acquiring an infection. Minor infections for some people, may be very serious for others. Hand Hygiene is the single most important method of controlling infection.

Who needs to carry out hand hygiene?

Most care activities involve the use of our hands. All disciplines of staff have responsibility to their residents, clients and to themselves to carry out effective hand hygiene. Hands are the principal route by which cross infection occurs.

Why?

Hands normally have a 'resident' population of microorganisms.

These are:

- Deep seated
- · Difficult to remove
- · Part of the body's natural defence mechanism

They can be associated with infection following surgery, invasive procedures or in immunocompromised residents.

Other microorganisms are picked up during every day activities and these are termed 'transient' microorganisms:

These are:

- Superficial and easily transferred to and from the hands
- An important source of infection
- Easily removed with good hand hygiene

Many infections are caused by transient microorganisms. Effective hand hygiene will remove these transient microorganisms before they are transferred to:

- surfaces
- · other residents or
- · susceptible sites on the same resident

What to use for hand hygiene?

Good technique covering all surfaces is more important than the product used or the length of time taken.

Good quality liquid soap and water is effective for social hand hygiene. Paper towels must be available for hand drying.

Alcohol Hand Rubs

Alcohol hand rubs are recommended and are preferable in the healthcare setting for social and antiseptic hand hygiene.

When using an Alcohol hand rub the preparation should be

- · Dispensed as per manufacturers instructions.
- Rubbed into all areas of the hands using the six step technique (see diagram).
- · Rubbed in until hands are dry.
- · Used only on visibly clean hands.

Exceptions to using Alcohol Hand Rubs

- · Alcohol hand rubs should not be used on visibly soiled hands.
- Alcohol hand rubs should not be used after caring for residents with diarrhoeal illnesses including Clostridium difficile.

When to carry out hand hygiene?

There is no set frequency for hand hygiene. It depends on the actions taken or intended.

Social hand hygiene using plain liquid soap and warm water or an alcohol hand rub for a duration of 20-30secs should be carried out:

- Before/after all care activities
- Before a clean procedure
- · After a dirty procedure even if gloves were worn
- Between care episodes for one resident
- Between different residents
- After removal of gloves
- · Before preparing, handling or eating food
- · Before assisting a resident with their food
- After visiting the toilet

Antiseptic hand hygiene using an antiseptic hand wash solution or an alcohol hand rub on visibly clean hands for a duration of 30 seconds should be carried out before:

- Invasive procedures
- Aseptic technique

Good Practice when carrying out hand hygiene

- Keep nails short, clean and cut smoothly
- Do not wear false or gel nails
- Remove all nail polish
- Restrict jewellery to a flat ring/wedding band
- Move ring to wash and dry underneath
- Remove wrist jewellery
- Shirts should have short sleeves or turned up sleeves

Caring for your hands

- Care for your hands by using a moisturiser
- Do not wear gloves unnecessarily
- Any rashes, dermatitis or glove usage problems should be referred to the Occupational Health Department for advice and follow up

Think.....

- What have you just done?
- What are you about to do?
- What type of hand hygiene procedure is needed?

