



## 2016 e newsletter # 3 - April

### Your Hand Hygiene Policy

In each of the 10 e newsletters for 2016, I am previewing a policy template - how do yours compare? Each of the 14 policy templates includes: procedures, resources, contacts, references and further notes and is available for purchase.

#### 1. PREAMBLE

- 1.1 Evidence is strong hand hygiene reduces the transmission of infection. Alcohol based handrub (ABHR) is best practice as it is more effective than plain liquid soap and less damaging to the skin than soap based products

#### 2. POLICY

- 2.1 Staff including reception and cleaner, receive training in hand hygiene including hand care at induction. .... e.g. Practice Nurse provides this to new staff.
- 2.2 Annual competency checking in hand hygiene is performed by ..... e.g. Practice Nurse.
- 2.3 Ongoing education and updates include correct use of products, gloves, requirements for wound care and surgery are provided regularly to all staff by ..... e.g Practice Nurse and /or ..... e.g. external provider
- 2.4 Health care activities requiring hand hygiene include before and after patient procedures and contact including during home visits, cleaning of clinical surfaces and performing a glucose test. Some procedures also require use of gloves.
- 2.5 ABHR is preferred to hand washing for almost all clinical contact except surgery where an approved surgical handwash is used. Plain liquid soap is used in food/drink and toilet areas. Hand care is an essential part of hand hygiene. Nails and jewellery issues are addressed.
- 2.6 Hand hygiene and hand care products of suitable quality for all staff are provided. ABHR containing 70% alcohol is placed at point of care (not sinks) for maximum compliance e.g. GP and nurses' desks, dressing trolleys and reception (separate pumps for staff and patients); plain liquid soap is supplied at all hand washing sinks including staff and patient toilets; 4% chlorhexidine wash is supplied at the treatment room sink for use prior to surgery: hand cream is supplied for convenience in the staff room.
- 2.7 Gloves of the following types are provided: Examination gloves both latex & latex free and sterile low latex and latex free gloves.
- 2.8 Gloves are worn when anticipating contact with body fluids, mucous membranes and non intact skin – examination gloves are generally adequate for dressings. Gloves are worn when taking blood, performing glucose tests and if performing venipuncture.
- 2.9 Sterile gloves are worn when performing procedures that involve contact with sterile tissue e.g. suturing, lesion removal and when touching wounds directly. The use of sterile gloves may be indicted for wound care for very immunosuppressed patients

*To then give your policy life, follow with protocols for various techniques etc*