

**VQC HAND HYGIENE  
PROGRAM  
REGIONAL ROLLOUT.**

**HAND HYGIENE  
LEARNING PACKAGE  
(GENERIC):  
ALCOHOL HAND RUBS.**

**Loddon-Mallee Regional Co-ordinating Centre-  
Bendigo Health- Infection Prevention & Control Unit.**

## Purpose of the Package

A challenge to any Hand Hygiene program is sustainability. Due to staff turnover, relocations and other factors, some problems have been encountered ensuring all health care workers are adequately educated about the use of Alcohol Hand Rubs /Alcohol-Chlorhexidine Hand Rubs and other aspects of infection prevention. In response to this challenge this learning package is now available for staff to use.

It is intended that this Learning Package be used when completing the Hand Hygiene questionnaire.

## *Preventing Infections*

Studies have proven that the most **common** reason patients develop infections in hospital is due to **poor Hand Hygiene** practices by health care workers. Poor Hand Hygiene practices increase the rates of patient-to-patient transmission of bugs.

**Hand Hygiene = decontaminating or washing your hands**

**Hand Hygiene: the corner stone of Infection Prevention**

**You need to protect your patients as beware, beware...**

### **Bugs are everywhere!**

And they love to move around!

You can spread us by simply touching:

- Patients
- Shared patient equipment
- IV lines and devices
- Bed linen and patient furniture
- Etc....

***Effective Hand Hygiene will minimise your patient's risk of developing infections in hospital.***

### **What can I use for Hand Hygiene?**

- **Non-antimicrobial soap and water. (Skin Cleanser)**  
Used for:
  - Non-invasive procedures
  - When hands are visibly soiled
- **Antimicrobial soap and water (4% Chlorhexidine gluconate)**  
Used for:
  - Invasive/aseptic procedures
  - When hands are visibly soiled
  - VRE, MRSA, hVISA- colonised patients
- **Alcohol/Chlorhexidine-based hand rub**  
Used for:

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**VQC HAND HYGIENE PROGRAM. .GENERIC ALCOHOL HAND RUB Learning Package April 2006 MJ/mj 2**

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- Decontaminating hands before and after every patient contact
- VRE, MRSA, hVISA- colonised patients

## A major advance

The Victorian Quality Council (VQC) Hand Hygiene Project promotes the use of **ALCOHOL HAND RUBS**. Studies have shown that the **fastest and most effective** way to decontaminate your hands is to use an alcohol-based hand rub.

(Centre for Diseases Control & Prevention, 2002)

## Why use Alcohol Based Hand Rubs?

The evidence is that the **busier** health care workers are, **the less** likely they are to perform Hand Hygiene. **ALCOHOL HAND RUBS** improves Hand Hygiene practice because they are:

- Quick and easy compared to traditional soap and water
- More accessible than sinks
- Self drying

## Vital Statistics

**ALCOHOL HAND RUBS** may contain a combination of the following ingredients:

**Alcohols:** May contain either isopropanol, ethanol, n-propanol, or a combination of two of these products. The antimicrobial activity of alcohols can be attributed to their ability to denature proteins. Alcohols are not appropriate for use when hands are visibly soiled. **or**

**The most rapid means of killing bugs is with the use of alcohols.**

**May contain: Chlorhexidine:- 0.5% Chlorhexidine**

**This results in longer lasting effect than alcohol alone.**

**Emollient: Skin Softener**

**Stops your hands from drying.**

## How to apply ALCOHOL HAND RUBS.



- If you have applied an adequate amount of the ALCOHOL HAND RUB to all surfaces of your hands, it should take at least 15 seconds to dry.
- If it takes less than 15 seconds, an insufficient volume was applied

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**VQC HAND HYGIENE PROGRAM. .GENERIC ALCOHOL HAND RUB Learning Package April 2006 MJ/mj 3**

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- Don't forget areas around and under your fingernails.

If your hands are visibly soiled, wash with soap and water rather than use the **ALCOHOL HAND RUBS**.

**ALCOHOL HAND RUBS** are better than other Hand Hygiene agents as it:

- Improves hand hygiene compliance
- Kills bacteria on hands more readily
- Causes less skin irritations and dryness
- Decreases patient infection rates when used before and after every patient contact

**It's easy to protect your patients.**

Use **ALCOHOL HAND RUBS** to decontaminate your hands:

- Before and after every patient contact and.....
- Between each care activity (e.g. wound to IV site)
- After touching equipment in the patient area
- Before and after glove use

**Where should I find ALCOHOL HAND RUBS ?**

- On the foot of all patient's beds
- In the ward corridor areas, outside patient's rooms and work areas
- On patient observation trolleys and equipment trolleys
- In common areas throughout facility, i.e. outside lifts, outside entrances/exits to clinical areas.
- At the nurse's station, at the entrance of the pan-room and treatment areas

**Note: Avoid placing the **ALCOHOL HAND RUBS** at eye level (i.e. head of the bed)**

### **The Soft Side**

Hands that are chaffed and cracked can lead to increase bug carriage. The new generation of **ALCOHOL HAND RUBS** contain an emollient, which keeps your hands soft.

Additionally, we promote the use of a hospital-supplied hand moisturiser 3-4 times per day.

Do not use perfumed hand moisturisers, as they may be inactivate the **ALCOHOL HAND RUBS** and cause the hands to become dry. Only use moisturisers supplied by your hospital.

- Soaps and detergents dry and damage skin when applied on a



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regular basis, but this does not appear to be the case with the new generation of **ALCOHOL HAND RUBS**.

•Allergy to **ALCOHOL HAND RUBS** is very rare (no cases have been reported to date), but if you have concerns, contact your local Infection Control Consultant for further advice.

•Some health care workers with pre-existing dermatitis or eczema may occasionally experience burning with **ALCOHOL HAND RUBS**. In such cases intensive use of skin moisturisers and occasionally dermatology opinion may be required.

### A (G)love story.

Gloves **are not** a substitute for good Hand Hygiene

#### **The facts:**

Some studies have shown that many health care workers do not change their gloves between patients and therefore may spread disease.

#### **The rules on gloves:**

- Gloves are single use items.
- Change gloves between handling "dirty" and "clean" body sites.
- They should not be washed with soap and water or decontaminated with DeBug.
- Always disinfect hand with **ALCOHOL HAND RUB** after removing or changing gloves.
- After removing powdered gloves wash hands with soap and water rather than **ALCOHOL HAND RUBS**. This enables the powder to be flushed from the skin surface.

### **The Glamour Gang**

#### **The facts:**

- Artificial nails and chipped nail polish pose an infection risk since they result in increased hand contamination.
- Rings of any type are associated with a 10-fold increase in the number of bugs on health care worker's hands.
- The more rings, the higher the bug carriage!

#### **The rules on glamour:**

- Avoid wearing artificial nails and nail polish to work
- Remove rings prior to work
- Keep nail neatly clipped

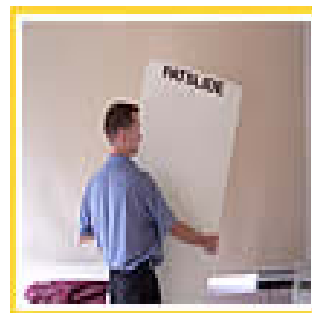
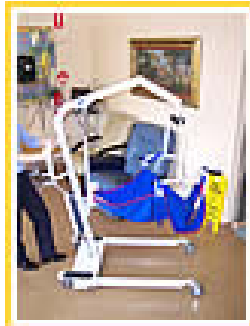
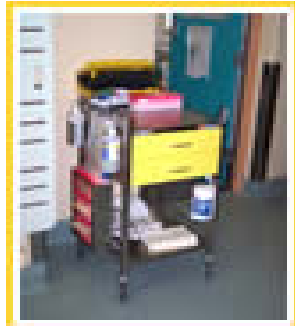
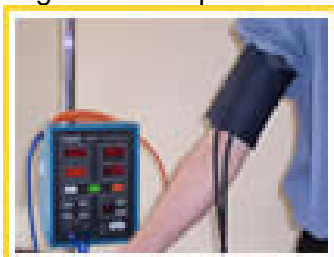
## **What about shared equipment? How do we stop cross infection?**

**ALCOHOL HAND RUBS** kill bugs on my hands, but what about those bugs on equipment?  
Shared patient equipment - 'Clean Between' with alcohol wipes (e.g. Prowipes, Isowipes)

**Alcohol wipes are quick and easy - they stop bugs dead.**

Don't use Alcohol Wipes on equipment which is visibly grimy or dirty, it needs a scrubbing with HC90 detergent.

The following are examples of frequently used "shared patient equipment" that can lead to transmission of bugs from one patient to another.



**Disinfect your hands with ALCOHOL HAND RUBS before and after every patient contact.**

**Shared patient equipment:- clean between patient use with an alcohol wipe.(eg. Isowipe or Prowipe).**

**Remember to also clean shared computer mouse/ keyboards and telephones before after use with an alcohol wipe.**

**This will help to protect both other staff members and yourself from infection risk.**

