

AHR NON-SPECIFIC HAND HYGIENE CREDENTIALING PACKAGE

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-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)

1 Generic Hand Hygiene/Alcohol Hand Rubs Credentialing Package *Questionnaire April 2006.*

MJ/mj Infection Prevention & Control Unit, Bendigo Health.

Bendigo Health would like to acknowledge Austin Health for providing large amounts of information used in this Generic Hand Hygiene learning package.

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Used for:

- Invasive/aseptic procedures
- When hands are visibly soiled
- VRE, MRSA, hVISA- colonised patients
- Alcohol/Chlorhexidine-based hand rub

Used for:

- 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: 70% Isopropyl Alcohol

The most rapid means of killing bugs.

Chlorhexidine:- 0.5% Chlorhexidine

Results in longer lasting effect than alcohol alone.

Emollient: Skin Softener

Stops your hands from drying.

How to apply Alcohol Hand Rubs.

2 Generic Hand Hygiene/Alcohol Hand Rubs Credentialing Package Questionnaire April 2006.

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- If you have applied an adequate amount of DeBug 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
- Don't forget areas around and under your fingernails.

If your hands are visibly soiled, wash with soap and water rather than DeBug.

DeBug is 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 DeBug 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
 - After glove use

Where can I find DeBug?

- 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 BHCG, i.e. outside lifts, outside entrances/exits to clinical areas.
- At the nurse's station, pan-room and treatment areas

Note: Avoid placing DeBug at eye level (i.e. head of the bed)

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The Soft Side

Hands that are chaffed and cracked can lead to increase bug carriage. DeBug contains an emollient, which keeps your hands soft. Additionally, we promote the use of a hospital-supplied hand moisturiser 3-4 times per day (e.g. Microshield). Testing has proven that the hand moisturiser used at Austin Health is compatible with DeBug and will not de-activate its anti-bacterial effects, unlike some home moisturisers.



- Soaps and detergents dry and damage skin when applied on a regular basis. This will not be the case with DeBug.
- Allergy to DeBug is very rare (no cases have been reported to date), but if you have concerns, contact Infection Control for further advice.
- Some health care workers with pre-existing dermatitis or eczema may occasionally experience burning with DeBug. 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 DeBug after removing or changing gloves.
- After removing powdered gloves wash hands with soap and water rather than DeBug.

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.

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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?

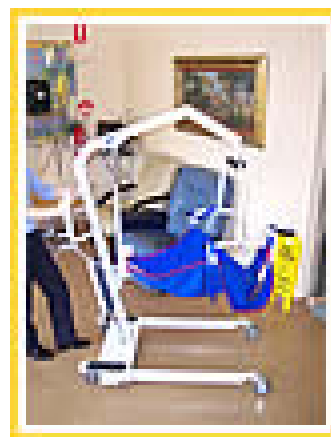
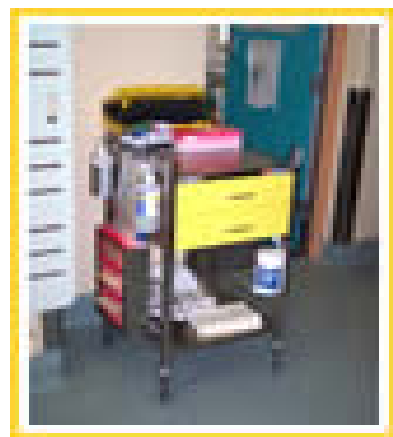
DeBug kills bugs on my hands, but what about those bugs on equipment?

Shared patient equipment - 'Clean Between' with alcohol wipes (e.g. Prowipes)

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

Don't use Prowipes if equipment looks grimy, 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.



**DeBug your hands before and after every patient contact.
Shared patient equipment:- clean between with an alcohol
wipe (Prowipes).**

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**Remember to also Prowipe shared computer mouse/
keyboards and telephones after use.**

