Title: Hand Hygiene Policy		
Document #: 5678	**Issuing Authority:** VP Clinical Services & Chief Nursing Executive	
Last Revised Date: 4/17/2025		**Version Number:** 6.1 (Current)

PURPOSE:
To ensure that all employees, professional staff and volunteers prevent the spread of infection by reducing microbial contamination on the hands thus rendering them clean.

To provide clear guidance to healthcare providers and other staff in relation to expected hand hygiene standards and promote 100% compliance with hand hygiene.

To define the responsibilities and actions required for a high standard of hand hygiene.

POLICY STATEMENT:
Frequent and appropriate hand hygiene is the single most important factor in preventing the spread of infection.

Hand hygiene with alcohol-based hand rub (ABHR) is the preferred method of hand hygiene. When hands are not visibly soiled, ABHR is more effective than washing with soap and water. The routine use of antimicrobial soaps is not necessary. Antimicrobial soap or ABHR with residual activity should be used for surgical procedures.

Hands shall be cleaned at each of the 4 moments of hand hygiene:

1. BEFORE initial patient and/or patient environment contact
2. BEFORE an aseptic/clean procedure
3. AFTER body fluid exposure risk
4. AFTER patient and/or patient environment contact

All employees, professional staff and volunteers shall participate annually in the Hand Hygiene core competency module available through e-learning.

Hand hygiene stations will be available in convenient locations throughout the facility, including at all entrances and point of care. Where such stations are not appropriate, portable dispensers are available.

Hand hygiene educational reviews will be provided at orientation, and during safety week, staff meetings, and at other times throughout the year.

Hand hygiene audits will be performed and reported to the Ministry of Health and Long-Term Care as one of the mandatory safety performance indicators.

Health Care Providers will provide education to their patients on the importance of hand hygiene on a personal level (as part of their role in preventing infections) and for their caregivers, through written and verbal communication.

False Nails or Nail Extensions may not be worn by direct caregivers**.** They have been associated with the transfer of microorganisms and hospital outbreaks. Direct caregivers

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must ensure that their nails are short and clean. The nails should not show past the end of the finger.

Nail Polish, if used, must be intact, with no chipping.

Jewellery
One flat ring without projections or mounted stones and a wristwatch are the only hand adornments permitted for staff that are direct care providers. No jewellery or hand adornments are permitted in the OR Suite. Jewellery on the hands can retain dirt and contamination and act as a reservoir for microorganisms. It can also trap cleanser and moisture from hand hygiene, and cause irritation. Rings carry a risk of tearing gloves.

Hand Hygiene Dispensers
All soap and alcohol-based hand rub dispensers shall be routinely checked and refilled to ensure product availability by appropriate environmental service staff. Damaged, broken or missing dispensers shall be fixed or replaced by appropriate building services staff on initiation of a work order.

Hand hygiene product replacement
Refilling or “Topping Off” empty hand hygiene product containers by any hospital staff is strictly prohibited. Hand hygiene products may become contaminated or support the growth of microorganisms. These include alcohol-resistant microbes such as spores, as well as excessive evaporation of the alcohol, which may impact efficacy and aesthetics of the product.

Hand Lotion should be used to prevent dryness but can easily become contaminated. Use a hospital-approved hand lotion. Do not apply lotion immediately before putting on gloves or handling sterile materials.

Dermatitis or chapped hands can increase your risk for both picking up and transmitting infection. If your hands are chapped, or if you have dermatitis, consult Organizational Health Services.

Gloves
Hands shall be cleaned in accordance with the four moments; use of gloves will not replace the requirement of hand hygiene. Gloves must be removed immediately and discarded after the activity for which they were used and before exiting the patient environment. Hands shall be routinely cleaned before applying and after removing gloves whether they are visibly dirty or not. Bacteria, viruses and other microorganisms may be transferred from hands to glove boxes to hands.

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Compliance
Care processes should be designed to permit compliance with the 4 moments for hand hygiene. The expectation is that healthcare providers and staff will challenge noncompliant hand hygiene practice if they see it. Staff are to expect to be challenged if they undertake noncompliant hand hygiene practice.

Auditing
Hand hygiene shall be audited, and feedback shall be provided to clinical areas on a regular basis. All clinical areas are expected to achieve or exceed the set hand hygiene compliance targets.

DEFINITION(S):
Alcohol based hand rub (ABHR)
Waterless hand hygiene product that is available as a rinse, gel, or foam and consists of a minimum of 70% alcohol. ABHR is the preferred method for sanitizing hands when hands are not visibly soiled. The effectiveness of alcohol is inhibited by the presence of organic matter. These products are more effective and less time consuming to use than washing with soap and water for non-soiled hands.

Aseptic/Clean Procedure
Method used during patient care to prevent microbial contamination. Procedure may be clean (medical asepsis) or sterile (surgical asepsis). Examples of aseptic/clean procedures are venipuncture, oral care, wound care, preparing medication, insertion or disconnecting invasive devices and giving medication such as eye drops or injections.

Hand Hygiene
A general term referring to any action of hand cleaning. Hand hygiene relates to the removal of visible soil and removal or killing of transient microorganisms from the hands. Hand hygiene may be accomplished using an alcohol-based hand rub or soap and running water. Hand hygiene includes surgical hand antisepsis.

Hand Hygiene Station
A dispensing location for waterless, alcohol-based hand rub (ABHR) product that is applied to reduce the number of microorganisms present on hands.

Patient Environment
The immediate space around a patient that may be touched by the patient and may also be touched by the health care provider when providing care. In a single room, the patient environment is the room. In a multi-bedroom, the patient environment is the area inside the individual's curtain. In an ambulatory setting, the patient environment is the area that within their cubicle. In a nursery/neonatal setting, the patient environment includes the

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inside of the bassinette or incubator, as well as the equipment outside the bassinette or incubator used for that infant (e.g., ventilator, monitor).

PROCEDURE:

1. **Alcohol Based Hand Rub (ABHR)**
   - **1.1** Wear watch snugly above the wrist and remove clothing or other items that impede frequent and effective hand hygiene. No other items that impede hand hygiene shall be worn.
   - **1.2** Apply 1 or 2 pumps of product (about the size of a loonie) into hands. If ABHR dries before 15 seconds of rubbing, not enough product was applied.
   - **1.3** Rub vigorously applying friction covering all skin surfaces paying particular attention to fingertips, webbing between fingers, palms, back of hands, nail beds and each finger.
   - **1.4** Rub for a minimum of 15 seconds until product is dry before touching the patient or the care environment/equipment. This ensures that the ABHR is effective and eliminates the extremely rare risk of flammability in the presence of an oxygen rich environment.
   - **1.5** When hands are visibly soiled, hand wash with soap and water. If soap and water is not available, use ABHR and then go to a hand washing sink as soon as possible.

2. **Soap and Water**
   - **2.1** Wear watch snugly above the wrist and remove clothing or other items that impede frequent and effective hand hygiene.
   - **2.2** Select lukewarm water temperature.
   - **2.3** Wet hands and wrists.
   - **2.4** Apply approved liquid or foam soap.
   - **2.5** Vigorously lather all surfaces of the hands for a minimum of 15 seconds to remove transient or acquired bacteria, paying particular attention to fingertips, webbing between fingers, palms, back of hands, nail beds and each finger and base of thumbs.
   - **2.6** Use a rubbing motion under running lukewarm water to thoroughly rinse soap from hands.
   - **2.7** Dry hands thoroughly by blotting gently with paper towel.
   - **2.8** Turn taps off with paper towel to avoid recontamination of hands.

3. **Hand Hygiene Education for Patients**
   - **3.1** Educate patients on opportunities to clean their hands, especially after using the bathroom and before meals.
   - **3.2** Educate patients on proper hand hygiene techniques.

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3.3 When possible, allow the patient to see you performing hand hygiene and explain what you are doing. This has three purposes:

- Reassures the patient that staff are competent and minimizing risk to the patient.
- Demonstrates the importance of frequent hand hygiene, especially in the hospital environment.
- Provides an excellent opening to discuss the patient's own hand hygiene and that of their caregivers/family at home.

RELATED PRACTICES AND / OR LEGISLATIONS:

Dress Code Policy
Routine Practices Policy
Standard Operating Procedure Hand Hygiene

REFERENCES:

Ontario. Provincial Infectious Diseases Advisory Committee. Best Practices for Hand Hygiene in All Health Care Settings. April 2014. https://www.publichealthontario.ca/-/media/documents/B/2014/bp-hand-hygiene.pdf

Public Health Agency of Canada. Hand Hygiene Practices in Healthcare Settings. 2012 https://www.canada.ca/en/public-health/services/infectious-diseases/nosocomial-occupational-infections/hand-hygiene-practices-healthcare-settings.html

APPENDICES:

Appendix A - Your 4 Moments for Hand Hygiene Poster
Appendix B - How to become a Hand Hygiene Auditor

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Appendix A - Your 4 Moments for Hand Hygiene Poster

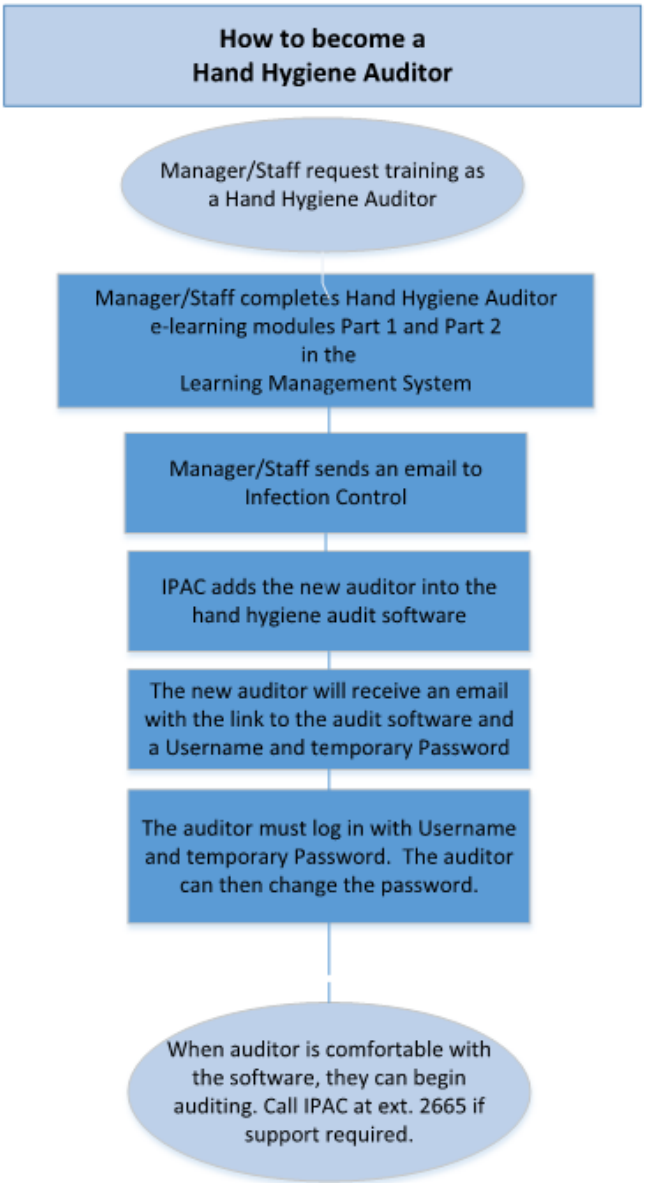


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Appendix B - How to become a Hand Hygiene Auditor

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