

<b>POLICY</b> VI-10	<b>Hand Hygiene</b>	<b>DOMAIN</b> Quality of Care
<b>SLT Sponsor:</b> Chief Quality and Privacy Officer  <b>Policy Lead(s):</b> Corporate Director, Infection Prevention and Control		<b>Date Approved:</b> October 29, 2024
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NOTE: The first appearance of terms in bold in the body of this document (except titles) are defined terms – please refer to the Definition section

### Policy Statement:

Covenant Health Infection Prevention & Control (IPC) is committed to **staff, patient, designated family/support persons**, and visitor safety at all levels of the organization by supporting and promoting an environment that encourages best hand hygiene practices.

### Purpose Statement:

To outline the minimum standard for **hand hygiene** practice within Covenant Health to prevent the transmission of microorganisms, thereby reducing healthcare-associated infections, and promoting the health and safety of staff, patients, designated family/support persons and visitors.

### Applicability:

Proper hand hygiene is the single most important practice in reducing transmission of microorganisms. All Covenant Health employees, members of the medical and midwifery staff, volunteers, students, and other persons acting on behalf of or in conjunction with Covenant Health, including contracted service providers shall perform proper hand hygiene with **alcohol-based hand rub** (ABHR) or soap and water in accordance with the four moments of hand hygiene and other indicated circumstances as outlined in this policy and the Covenant Health hand hygiene procedure.

### Responsibility:

Hand hygiene is a shared responsibility. Staff shall be supported to encourage one another to perform hand hygiene, using the appropriate technique, at the right moments as set out by this policy and the Covenant Health hand hygiene procedure.

**Managers** are responsible to address non-compliance with all provisions of this policy.

### Principles:

Hand hygiene aligns with Covenant Health’s mission, vision, and values. Elements required to fulfill the mission, vision, and values:

1. Hand Hygiene Moments, Monitoring, and Feedback
  - 1.1 **Hand hygiene compliance** is monitored by trained observers biannually, at minimum, throughout Covenant Health using an IPC-approved audit tool.
  - 1.2 Compliance measurements are based on the four moments for hand hygiene:

Moment 1) Before contact with patient/**patient environment** such as entering a patient's environment and providing patient care.

Moment 2) Before clean or **aseptic procedures**.

Moment 3) After **bodily fluid exposure risk**, even if gloves are worn.

Moment 4) After contact with patient/patient environment.

- 1.3 Hand hygiene compliance rates/reports will be disseminated in a timely manner following scheduled Covenant Health hand hygiene audit periods as per organizational surveillance data reporting structures.
- 1.4 Hand hygiene compliance results shall be shared to inform staff, patients, and families/visitors (e.g., posting current rates in public locations).
- 1.5 Hand hygiene compliance results should be used to guide ongoing hand hygiene compliance improvement.
- 1.6 Staff, patients, and visitors are encouraged to remind one another to perform proper hand hygiene in the applicable moments/circumstances outlined in this policy as per the Covenant Health hand hygiene procedure.

## 2. Hand Hygiene Education & Training

- 2.1 Staff shall receive standardized Covenant Health education and training on hand hygiene and Covenant Health's hand hygiene policy and procedure at initial orientation, on an annual/regular basis, and as needed using education materials developed and/or reviewed and approved by Covenant Health IPC.
- 2.2 Staff who provide direct patient care or perform other tasks that require hand hygiene shall demonstrate understanding of proper hand hygiene technique/procedures.
- 2.3 Education regarding the importance of hand hygiene must be provided to the patient. Healthcare providers are to teach the patients and their families/visitors how to perform hand hygiene and assist those who cannot perform hand hygiene independently.
  - 2.3.1 All education provided to the patient/family/visitors must be documented in the patient record.
- 2.4 Managers shall ensure the procedures for how to use ABHR and perform **hand washing** with soap and water are available to staff where applicable.

**Definitions:**

**Alcohol-based hand rub (ABHR)** – means an approved Alberta Health Services/Covenant Health liquid, gel, or foam formulation containing alcohol (60-90%) which is applied to the hands to reduce the number of transient microorganisms.

**Aseptic Procedure** - for the purpose of this policy, is the process of preventing transmission of organisms to a person, object, or an area in a healthcare setting while providing care. This process can be either clean (medical asepsis) or sterile (surgical asepsis). The purpose of asepsis is to protect the patient against harmful germs, including the patient's own germs, entering his/her body.

**Bodily Fluid Exposure Risk** - for the purpose of this policy, when the healthcare provider has engaged in a care activity involving actual bodily fluid contact or risk of bodily fluid exposure (e.g., contact with blood or blood products, emptying urinal/catheter bag, contact with mucosa, suctioning oral/nasal secretions, contact with non-intact skin, contact with inanimate objects that are likely to be contaminated). The healthcare provider must clean their hands prior to touching any other surface including the patient and/or patient environment.

**Designated family/support person(s)** - means one or more individuals identified by the patient as an essential support, and who the patient wishes to be included in any encounters with the health care system, including, but not limited to, family, relatives, friends, and informal or hired caregivers.

**Direct Patient Care** – means, for the purpose of this policy, physical contact with a patient or interacting with the patient's environment, their belongings, and their washroom.

**Hand Hygiene** – proper practices which remove microorganisms with or without soil from the hands (refers to the application of alcohol-based hand rub or hand washing with soap and water).

**Hand Hygiene Compliance** – a measurement of staff adherence to hand hygiene at appropriate times according to the four moments for hand hygiene as per this policy. Hand hygiene compliance is calculated by dividing the number of compliant opportunities by the total number of opportunities observed by a trained Covenant Health hand hygiene auditor.

**Hand Washing** – means the use of running water and plain/antimicrobial soap to physically remove soil and transient microorganisms from the hands with mechanical friction.

**Manager** – means the individual(s) who have the delegated human resources authority for directly planning, monitoring, and supervising direct (employee) reports.

**Patient** – means an adult or child who receives or has requested healthcare or services from Covenant Health and its staff, medical staff, volunteers, or individuals authorized to act on behalf of Covenant Health. This term is inclusive of residents, clients, and outpatients.

**Patient Environment** - for the purpose of this policy, means the areas immediately surrounding the patient that contains flora (germs) from a single patient.

**Staff** – all Covenant Health employees, members of the medical and midwifery staff, volunteers, students, and other persons acting on behalf of or in conjunction with Covenant Health, including contracted service providers.

**Relevant Covenant Health Policy and Policy Support Documents:**

<b>A.</b>	<b>Policies:</b>
<b>B.</b>	<b>Procedures:</b> VI-10.PROC.1 <a href="#">Hand Hygiene Procedures</a>
<b>C.</b>	<b>Guidelines:</b>
<b>D.</b>	<b>Job aids:</b> <ul style="list-style-type: none"> <li>• <a href="#">Essential Education Infection Prevention &amp; Control Module</a></li> <li>• <a href="#">Hand Hygiene Education Module</a></li> <li>• Covenant Health - Infection Prevention and Control Resources: <a href="#">Hand Hygiene Resources</a></li> </ul>
<b>E.</b>	<b>Standards:</b>
<b>Keywords:</b> Hand hygiene, hand washing, hands, ABHR, alcohol-based hand rub, soap and water, compliance, moments	
<b>References:</b> <p>Alberta Health</p> <ul style="list-style-type: none"> <li>• <a href="#">Infection Prevention and Control Resources</a></li> </ul> <p>Alberta Health Services - Infection Prevention and Control Resources:</p> <ul style="list-style-type: none"> <li>• <a href="#">Hand Hygiene Resources</a></li> <li>• <a href="#">Glove Use and Selection Best Practice Recommendation</a></li> <li>• <a href="#">Proper Glove Use as Part of Personal Protective Equipment</a></li> </ul> <p>Accreditation Canada Quantum Program Standards (2024, May) Infection Prevention and Control Standards, retrieved July 24, 2024 from <a href="#">Accreditation Canada Standards   CompassionNET   Covenant Health</a></p> <p>Alberta Health. (2015). <i>Alberta infection prevention and control strategy</i>. <a href="https://open.alberta.ca/publications/9781460125687">https://open.alberta.ca/publications/9781460125687</a></p> <p>British Columbia Ministry of Health. (2012, July). <i>Best practices for hand hygiene in all healthcare settings and programs</i>. <a href="https://www.health.gov.bc.ca/library/publications/year/2012/best-practice-guidelines-handhygiene.pdf">https://www.health.gov.bc.ca/library/publications/year/2012/best-practice-guidelines-handhygiene.pdf</a></p> <p>Centers for Disease Control and Prevention. (2002, October 25). <i>Guidelines for hand hygiene in health-care settings</i>. <a href="http://www.cdc.gov/mmwr/PDF/rr/rr5116.pdf">http://www.cdc.gov/mmwr/PDF/rr/rr5116.pdf</a></p> <p>Infection Prevention and Control Canada. (2022, October). <i>Hand hygiene in health care settings</i>. <a href="https://ipac-canada.org/photos/custom/Members/pdf/22Nov11_Hand%20Hygiene_Practice%20Recommendation.pdf">https://ipac-canada.org/photos/custom/Members/pdf/22Nov11_Hand%20Hygiene_Practice%20Recommendation.pdf</a></p>	

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World Health Organization. (2009). *WHO guidelines on hand hygiene in health care*. [http://whqlibdoc.who.int/publications/2009/9789241597906\\_eng.pdf](http://whqlibdoc.who.int/publications/2009/9789241597906_eng.pdf)

**Past Revisions:**

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