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# **Acacium Group**

## **Hand Washing**

**Procedure Reference | SOP INF CONT 03**

**Version | V4.0**

<b>Procedure Name</b>	Hand Washing
<b>Purpose of Document</b>	To ensure that the correct preparation, procedure & outcome are achieved by implementing a consistent and systematic approach to the procedure of hand washing.
<b>Target Audience</b>	All Healthcare professionals & appropriately trained Carers
<b>Version</b>	V4.0
<b>Author</b>	Karen Matthews-Shard
<b>Date of Approval</b>	November 2010
<b>Published Date</b>	November 2010
<b>Lead Director</b>	Karen Matthews-Shard
<b>Review Frequency</b>	November 2022
<b>Last Reviewed</b>	3 yearly or when clinical or operation guidelines change
<b>Next Review Date</b>	November 2025
<b>Equality Impact Assessment (EIA) Form</b>	Acacium Group is committed to Equality, Diversity and Inclusion and in line with our values, we strive to ensure that everyone that is part of the Acacium community is not disadvantaged or discriminated against given their individual need or characteristics. To support this, an Equality Impact Assessment has been undertaken on this policy/procedure. This information is held centrally and can be requested from the Clinical Governance Team.
<b>About Acacium Group</b>	Details of all Acacium Group trading companies that this policy applies to are detailed within Appendix A

Document History			
Version	Date	Changes made/comments	By whom
V1	Dec 2016	Implementation of document history page	KNF/SJ
V2	Nov 2019	3 Yearly Review	Clinical Advisory Group
V2.1	Nov 2020	Rebrand	CC
V2.2	Jan 2021	Rebrand 2	CC
V2.3	Apr 2021	Added CHS brand	CC
V3	Dec 2022	Reviewed and updated	Clinical Advisory Group
V4	Jan 2024	Rebrand	Clinical Advisory Group

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## 1. Introduction

The association between effective hand washing and the prevention of cross infection is well established. Hand washing is known to be the single most effective way to reduce cross infection.

This procedure details in picture format the correct method of hand washing and details the hand preparation before hand washing.

## 2. Aim

To promote optimal client/patient health by reducing the risk of cross contamination from other clients/patients and staff by effective hand washing.

## 3. Who needs to be aware of this procedure

All Acacium Group staff at the point of providing care for each new contact attended and at the end of each contact attended. Hand washing must be done thoroughly when about to provide any personal, clean or sterile care and at the end of each procedure or intervention.

## 4. Equipment

- Hand washing facilities
- Hand towels or clean towel
- Liquid soap and/or antibacterial hand gel

## 5. Procedure

	Action	Rationale
1.	Remove rings (plain band rings are allowed), bracelets, and wristwatch.	Jewellery inhibits good hand washing. Dirt and bacteria can remain beneath jewellery after hand washing.
2.	Roll up sleeves.	Long sleeves prevent washing of wrists. Short sleeves should be worn whenever possible.
3.	Cover cuts and abrasions on hands with waterproof dressing.	Cuts and abrasions can become contaminated with bacteria and cannot be easily cleaned. Repeated hand washing can increase the injury.
4.	Remove nail varnish, gel varnish and artificial nails prior to your shift. Nails must also be short and clean.	Long nails and false nails may be a source of infection by harbouring dirt and bacteria. Workers should not attend work with false nails, nail varnish etc in place. Nail varnish can become cracked, which could lead to contamination if the nail polish fell into a client's wound. Nail polish can also inhibit effective hand washing by potentially harbouring bacteria in microscopic imperfections of nail varnish.
5.	Hands that are visibly or potentially soiled or contaminated with dirt or organic material	Liquid soap is very effective in removing dirt, organic material and any loosely adherent

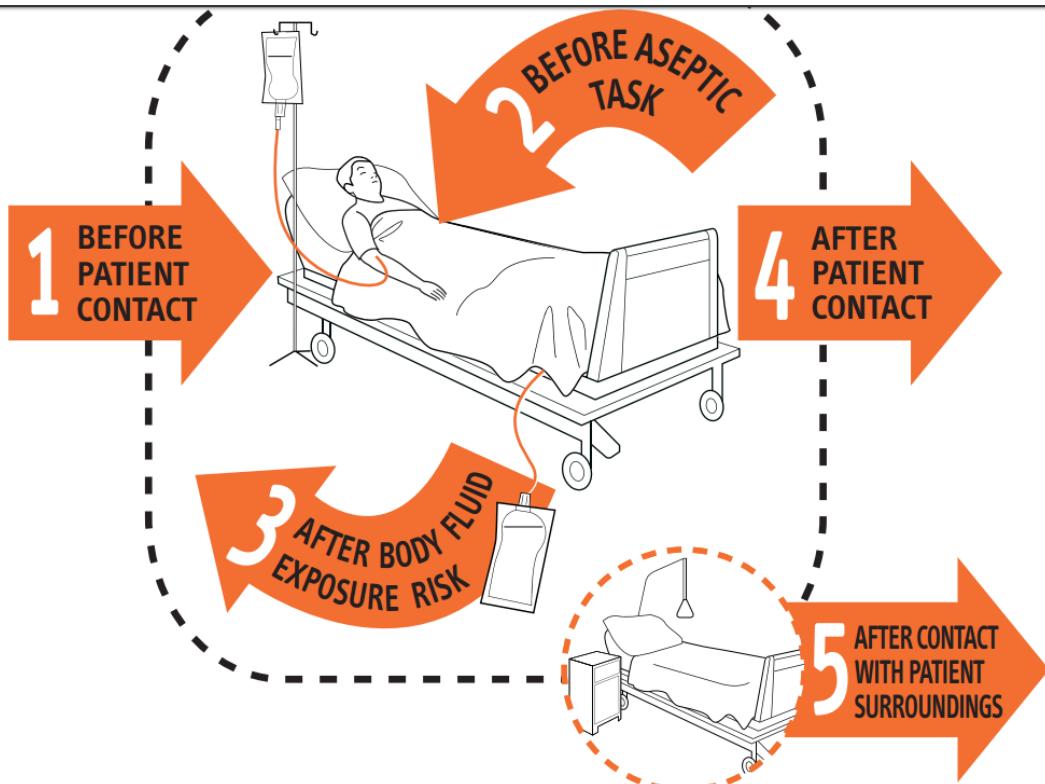
	<p>should be washed with liquid soap from a dispenser and running hand-hot water.</p> <ol style="list-style-type: none"> <li>a) Turn on the taps</li> <li>b) Run the water until hand hot</li> <li>c) Wet the surface of hands and wrists</li> <li>d) Apply liquid soap and water to all surfaces of the hands</li> <li>e) Rub hands together for a minimum of 40-60 seconds, with particular attention to between the fingers and the tips of fingers and thumbs</li> <li>f) Nail brushes should not be used unless working in theatres</li> <li>g) Rinse soap thoroughly off hands</li> <li>h) Care must be taken not to contaminate the taps, sink or nozzle of the soap dispenser with dirt or organic material that is washed off hands. Use the paper towel to turn off the faucet/tap.</li> <li>i) Dry hands thoroughly with a good-quality disposable paper towel dispenser or clean towel if paper towels not available.</li> <li>j) Dispose of used paper towels.</li> </ol> <p>In the community setting if there is not adequate facilities to wash your hands please raise with your line manager.</p>	<p>transient flora, but has little antimicrobial activity.</p> <p>Liquid soap must be used as tablets of soap can become contaminated and harbor bacteria.</p> <p>Hand-hot water is used to ensure that the skin of hands is not damaged by cold water. Water that is too hot could cause scalding.</p> <p>Soap is more effective in breaking down dirt and organic matter when used with hand-hot water.</p> <p>Soap applied directly onto dry hands may damage the skin.</p> <p>To ensure all surfaces of hands are cleaned. Areas that are missed can be a source of cross-infection.</p> <p>Nail brushes may damage the skin and result in increased shedding of bacteria from the hands (Winnefeld et al. 2000).</p> <p>A residue of soap can lead to irritation and damage to the skin. Damaged skin does not provide a barrier to infection for the health care worker and can become colonised with potentially pathogenic bacteria, leading to cross-infection.</p> <p>Contamination of the nozzle of the soap dispenser can result in contamination of the liquid soap, leading to cross-infection.</p> <p>Damp hands encourage the multiplication of bacteria and can potentially become sore.</p> <p>Any issues with skin integrity and allergies should be reported to your line manager or occupational health.</p>
6.	<p>Hands that are visibly clean and not soiled or contaminated with dirt, organic material or toxic substances can be cleaned using an alcoholic hand rub.</p> <p>(a) Follow the manufacturer's instructions for the amount of hand rub to be used.</p> <p>Rub an alcoholic hand rub into ALL areas of the hands until the hands for 20-30 seconds and allow to dry thoroughly.</p>	<p>The antimicrobial activity of alcohol is due to its ability to denature proteins. Alcoholic hand rub solutions are a quick convenient method of cleansing clean hands of Gram-negative, Gram-positive vegetative bacteria, tuberculosis and a variety of fungi, but have poor activity against bacterial spores and cannot remove dirt, organic material or toxic substances such as drugs or radioactivity.</p>

		<p>The instructions must be followed so that the correct amount of hand rub is used to ensure effective hand cleaning. Too much will leave hands sticky, too little will not clean hands adequately.</p> <p>To ensure all areas of the hands are cleaned. Alcohol is a rapid-acting disinfectant, with the added advantage that it evaporates, leaving the hands dry. This prevents contamination of equipment, whilst facilitating the application of unpowdered gloves.</p>
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## 6. Hand washing procedure

# Your 5 moments for HAND HYGIENE

Design: monogramm's network



<b>1 BEFORE PATIENT CONTACT</b>	<b>WHEN?</b> Clean your hands before touching a patient when approaching him or her <b>WHY?</b> To protect the patient against harmful germs carried on your hands
<b>2 BEFORE AN ASEPTIC TASK</b>	<b>WHEN?</b> Clean your hands immediately before any aseptic task <b>WHY?</b> To protect the patient against harmful germs, including the patient's own germs, entering his or her body
<b>3 AFTER BODY FLUID EXPOSURE RISK</b>	<b>WHEN?</b> Clean your hands immediately after an exposure risk to body fluids (and after glove removal) <b>WHY?</b> To protect yourself and the health-care environment from harmful patient germs
<b>4 AFTER PATIENT CONTACT</b>	<b>WHEN?</b> Clean your hands after touching a patient and his or her immediate surroundings when leaving <b>WHY?</b> To protect yourself and the health-care environment from harmful patient germs
<b>5 AFTER CONTACT WITH PATIENT SURROUNDINGS</b>	<b>WHEN?</b> Clean your hands after touching any object or furniture in the patient's immediate surroundings, when leaving - even without touching the patient <b>WHY?</b> To protect yourself and the health-care environment from harmful patient germs

# How to handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

⌚ Duration of the entire procedure: 20-30 seconds

1a



Apply a palmful of the product in a cupped hand, covering all surfaces;

1b



2



Rub hands palm to palm;

3



Right palm over left dorsum with interlaced fingers and vice versa;

4



Palm to palm with fingers interlaced;

5



Backs of fingers to opposing palms with fingers interlocked;

6



Rotational rubbing of left thumb clasped in right palm and vice versa;

7



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;

8

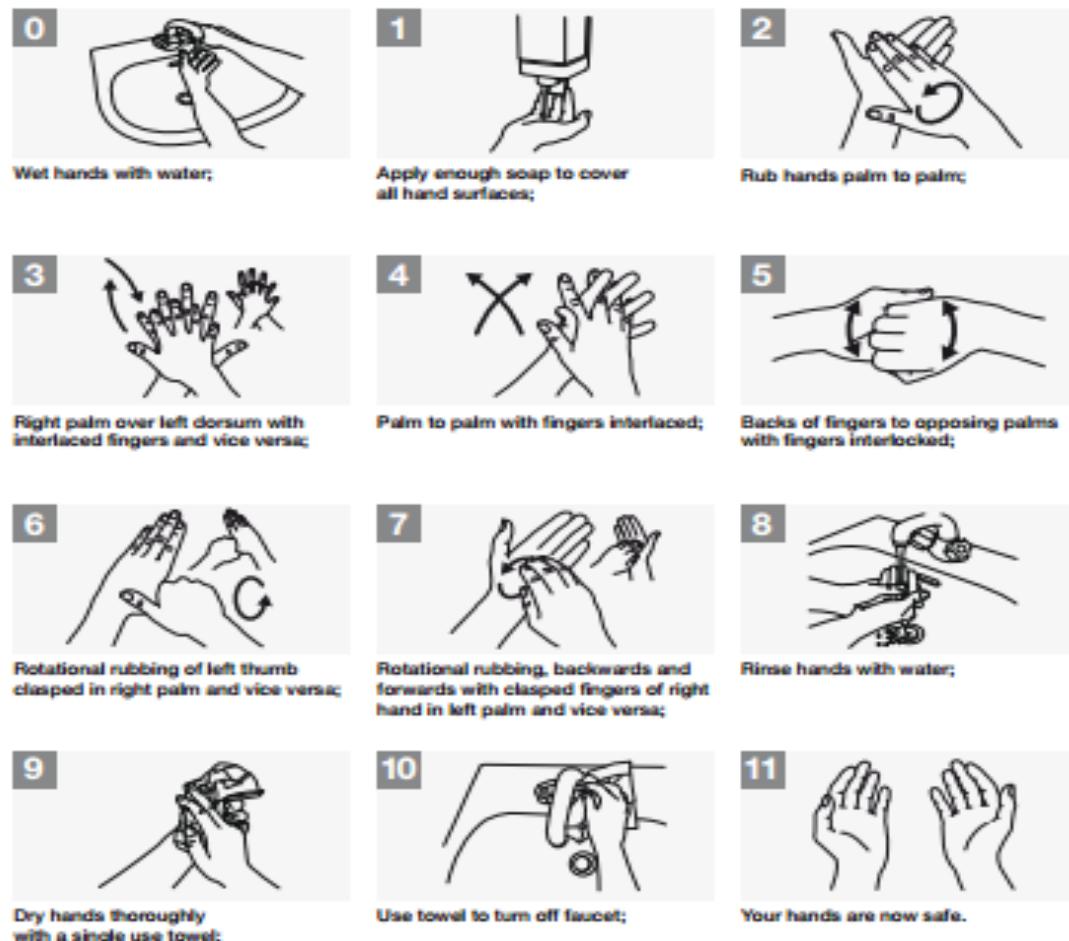


Once dry, your hands are safe.

# How to handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

 **Duration of the entire procedure: 40-60 seconds**



## 7. Associated Policies / SOPs

### Policies

CLIN 07 Infection Prevention Policy

### SOPs

SOP INF CONTROL 01 Aseptic technique

SOP INF CONTROL 02 Standard Precautions

## 8. References

- The Royal Marsden Manual of Clinical Nursing Procedures. 10th ed. london: Wiley-Blackwell.Sara Lister (Editor), Justine Hofland (Editor), Hayley Grafton (Editor). (2020).
- World Health Organisation – 5 Moments for Hand Hygiene - 2016
- NICE Infection Prevention & Control Hand Decontamination; April 2014
- NICE Healthcare-Associated Infections, Prevention & Control in Primary & Community Care. NICE Guideline CG139 updated 2017
- Changing the culture – Infection Control and Nursing in Northern Ireland; 2006/2009
- The Northern Ireland Regional Infection Prevention & Control Manual
- NHS Standard Infection Control Precautions: National Hand Hygiene & Personal Protective Equipment Policy, March 2019
- Health Act – Code of Practice for the Prevention & Control of Health Care Associated Infection

## Appendix A: About Acacium Group

Acacium Group consists of a number of trading companies, each providing services within core niche areas of the health and social care industries. Therefore, as this document is a Group Policy, the Policy herein applies to all trading companies detailed below:

 Part of Acacium Group	 Part of Acacium Group	 Proclinical Part of Acacium Group
		 multistaffing   one solution
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