**Hand Hygiene and Use of Clinical Personal Protective Equipment Policy**

**Updated November 2016**

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| Owner | JB |

GDoc’s policy is that staff should follow NICE guidance on hand hygiene and the use of gloves and other protective equipment (see below). In addition, staff working at other sites, such as GP practices and MIUs should familiarise themselves with the policies at those sites.

Proper hand hygiene and protective equipment should be available at all GDoc sites. If staff have difficulty accessing gloves, hand rubs etc, please contact the GDoc office immediately and we will ensure this is rectified.

**Healthcare-associated infections: prevention and control in primary and community care**

**From Clinical guideline [CG139] Published date: March 2012**

Hand decontamination

 Hands must be decontaminated in all of the following circumstances:

* immediately before every episode of direct patient contact or care, including aseptic procedures
* immediately after every episode of direct patient contact or care
* immediately after any exposure to body fluids
* immediately after any other activity or contact with a patient's surroundings that could potentially result in hands becoming contaminated
* immediately after removal of gloves.

 Decontaminate hands preferably with a handrub (conforming to current British standards[7]), except in the following circumstances, when liquid soap and water must be used:

* when hands are visibly soiled or potentially contaminated with body fluids or
* in clinical situations where there is potential for the spread of alcohol-resistant organisms (such as Clostridium difficile or other organisms that cause diarrhoeal illness).

Technique

**An effective handwashing technique involves three stages: preparation, washing and rinsing, and drying. Preparation requires wetting hands under tepid running water before applying liquid soap or an antimicrobial preparation. The handwash solution must come into contact with all of the surfaces of the hand. The hands must be rubbed together vigorously for a minimum of 10–15 seconds, paying particular attention to the tips of the fingers, the thumbs and the areas between the fingers. Hands should be rinsed thoroughly before drying with good quality paper towels.**

**When decontaminating hands using an alcohol handrub, hands should be free from dirt and organic material. The handrub solution must come into contact with all surfaces of the hand. The hands must be rubbed together vigorously, paying particular attention to the tips of the fingers, the thumbs and the areas between the fingers, until the solution has evaporated and the hands are dry.**

An emollient hand cream should be applied regularly to protect skin from the drying effects of regular hand decontamination. If a particular soap, antimicrobial hand wash or alcohol product causes skin irritation an occupational health team should be consulted.

Use of personal protective equipment

Selection of protective equipment must be based on an assessment of the risk of transmission of microorganisms to the patient, and the risk of contamination of the healthcare worker's clothing and skin by patients' blood, body fluids, secretions or excretions.

Gloves used for direct patient care:

* must conform to current EU legislation (CE marked as medical gloves for single use) and
* should be appropriate for the task.

Gloves must be worn for invasive procedures, contact with sterile sites and non-intact skin or mucous membranes, and all activities that have been assessed as carrying a risk of exposure to blood, body fluids, secretions or excretions, or to sharp or contaminated instruments.

Gloves must be worn as single-use items. They must be put on immediately before an episode of patient contact or treatment and removed as soon as the activity is completed. Gloves must be changed between caring for different patients, and between different care or treatment activities for the same patient.

Ensure that gloves used for direct patient care that have been exposed to body fluids are disposed of correctly.

When delivering direct patient care:

* wear a disposable plastic apron if there is a risk that clothing may be exposed to blood, body fluids, secretions or excretions or
* wear a long-sleeved fluid-repellent gown if there is a risk of extensive splashing of blood, body fluids, secretions or excretions onto skin or clothing.

When using disposable plastic aprons or gowns:

* use them as single-use items, for one procedure or one episode of direct patient care and
* ensure they are disposed of correctly

Face masks and eye protection must be worn where there is a risk of blood, body fluids, secretions or excretions splashing into the face and eyes.