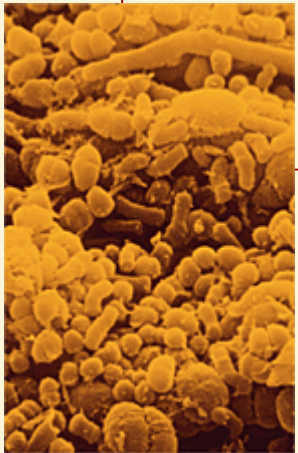


Hand Hygiene and Resident Care: Why is it so important?

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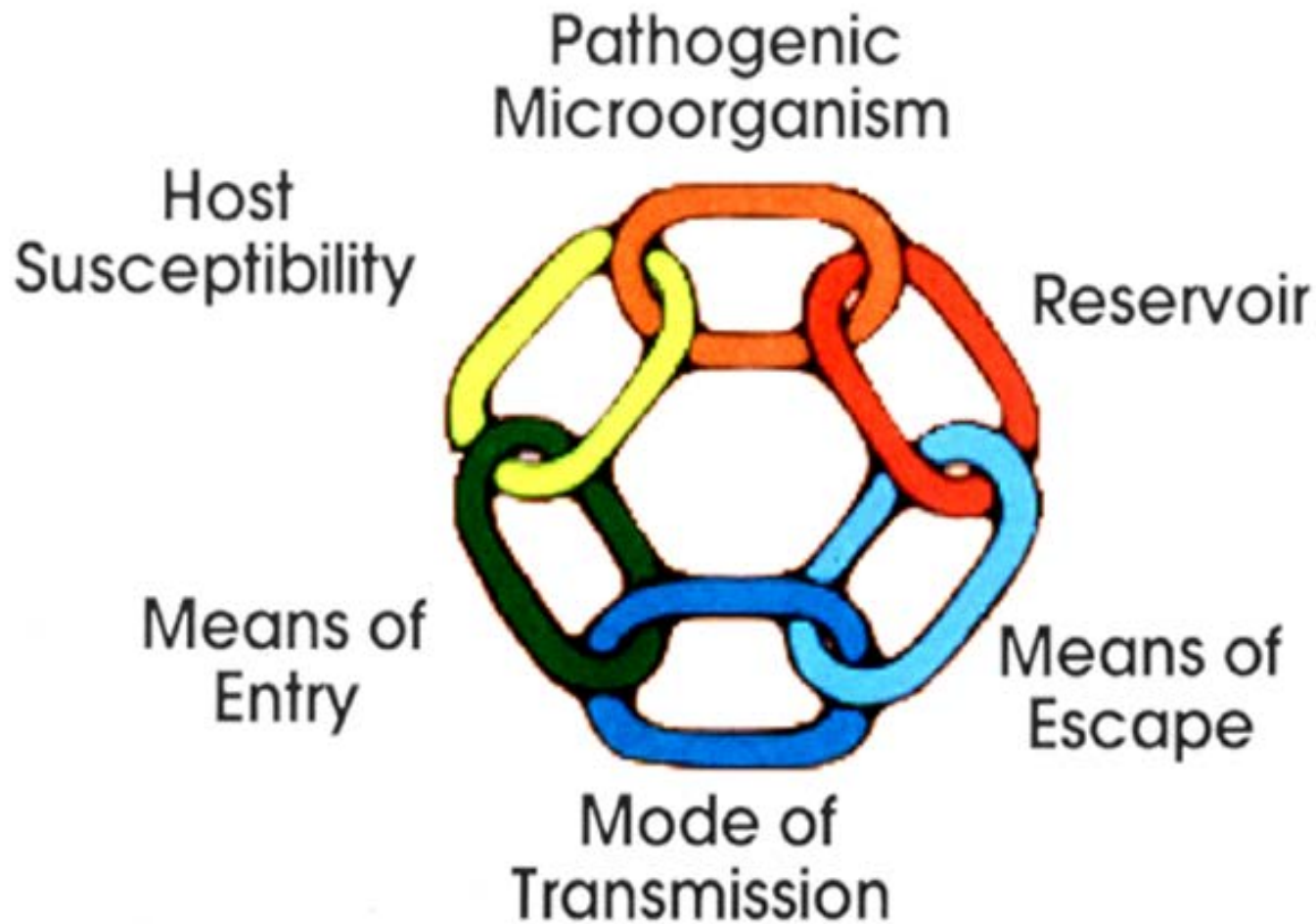
Why are we doing this education?

- To promote good handwashing
- To promote an understanding of how handwashing is important to your job
- To understand how careful handwashing can prevent the transmission of disease from the nurse's or GNA's hands to the next patient or to himself or herself.

What tasks in resident care could cause a transfer of germs ?

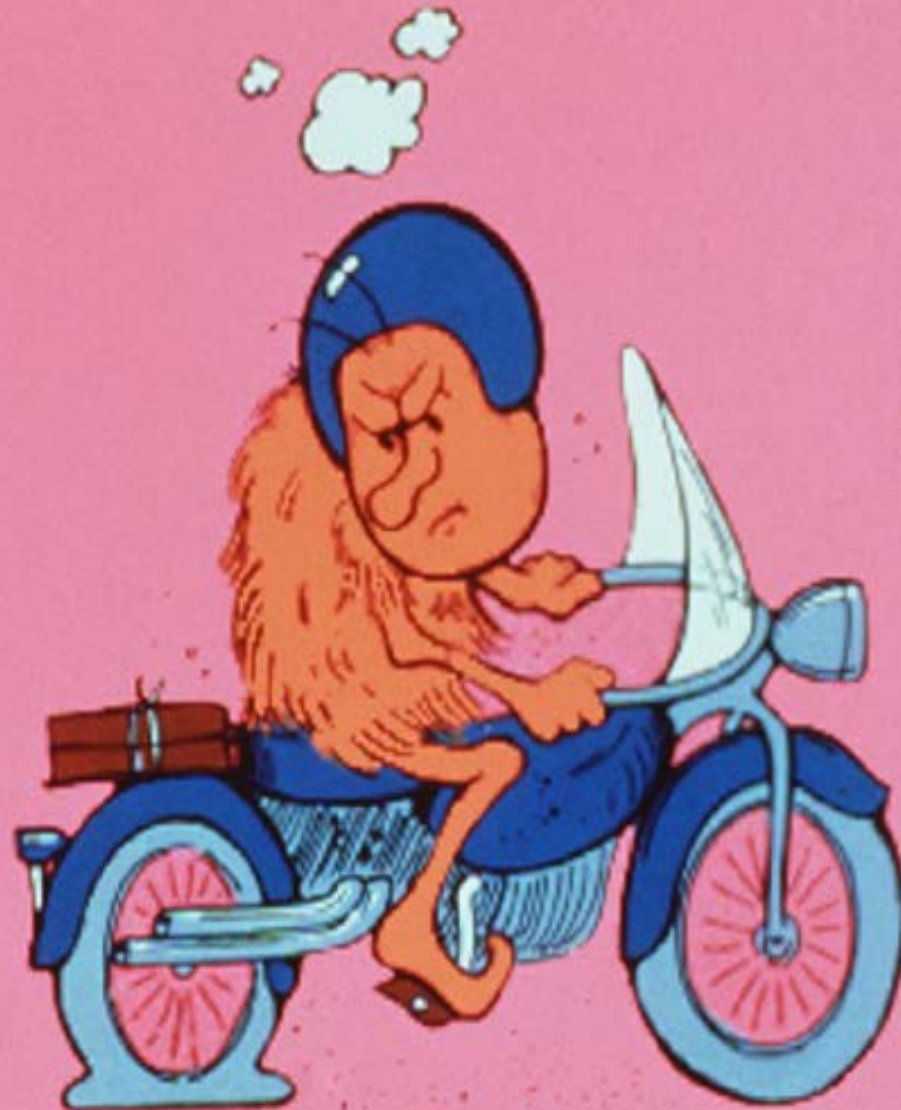
- Direct resident care
 - Bathing
 - Dressing
 - Feeding
 - Changing briefs/diapers
 - Transferring and transporting
 - Giving medications

Infectious Disease Process





Mode of
Transmission



What is a resident care intervention that will prevent a hospital-acquired infection or HAI?

- HANDWASHING!!!!
- The hands can be a vehicle for the transmission of infection – or carrying a germ from one patient to the next patient
- What if you wear gloves?

You wear gloves, so your hands are really “clean” when you remove them

- WRONG...resident flora as well as transient flora can be on your hands, underneath the gloves, doubling every 20 minutes!
- There is variability in the integrity of gloves
- Latex glove leakage can range from 3%-52% depending on the study
- Vinyl glove leakage can range from 4%-64% depending on the study
- Gloves are not foolproof barriers to transmission!

How do you determine when to wash your hands?

- The intensity of contact with patients or fomites
 - Fomite=an inanimate object or surface that can be contaminated with microorganisms
- The degree of contamination that is likely to occur with that contact
- The susceptibility of the patient
- The procedure to be performed

What is on your hands?

- Resident flora-or “normal skin flora”
 - Lives in the upper hair follicles and dead epithelial cells of your hand
 - Coagulase-negative Staphylococci and micrococci
- Transient flora-just “traveling through”-can be picked up from doorknobs, sink taps, direct touching of another person
 - On the surface
 - Easily removed by mechanical means
 - Can be infectious-such as Staph.aureus, MRSA, beta-hemolytic Streptococci



What factors related to personal hygiene relate to handwashing?

- Artificial nails-increase the number of germs under the nails, especially Gram-negative rods – can harbor infectious organisms
- Long nails can make gloves tear-recommendation is ¼ inch and no longer
- Lots of jewelry can mean more bacteria

When should we wash our hands?

- Between patients
- Before and after going to the bathroom
- After removing gloves
- Before and after working with food
- Between tasks on the same patient
 - Remember to work from cleaner tasks to dirtier tasks when possible

Hand hygiene can be accomplished by the following:

- Handwashing at the sink
 - Soap and water
 - Antimicrobial soap and water
 - Always use this technique with Norovirus and C.difficile patients
- Alcohol-based hand rubs (ABHR)
 - 60-70% alcohol
 - Foams, rinses, or gels
 - Dispenser outside every room

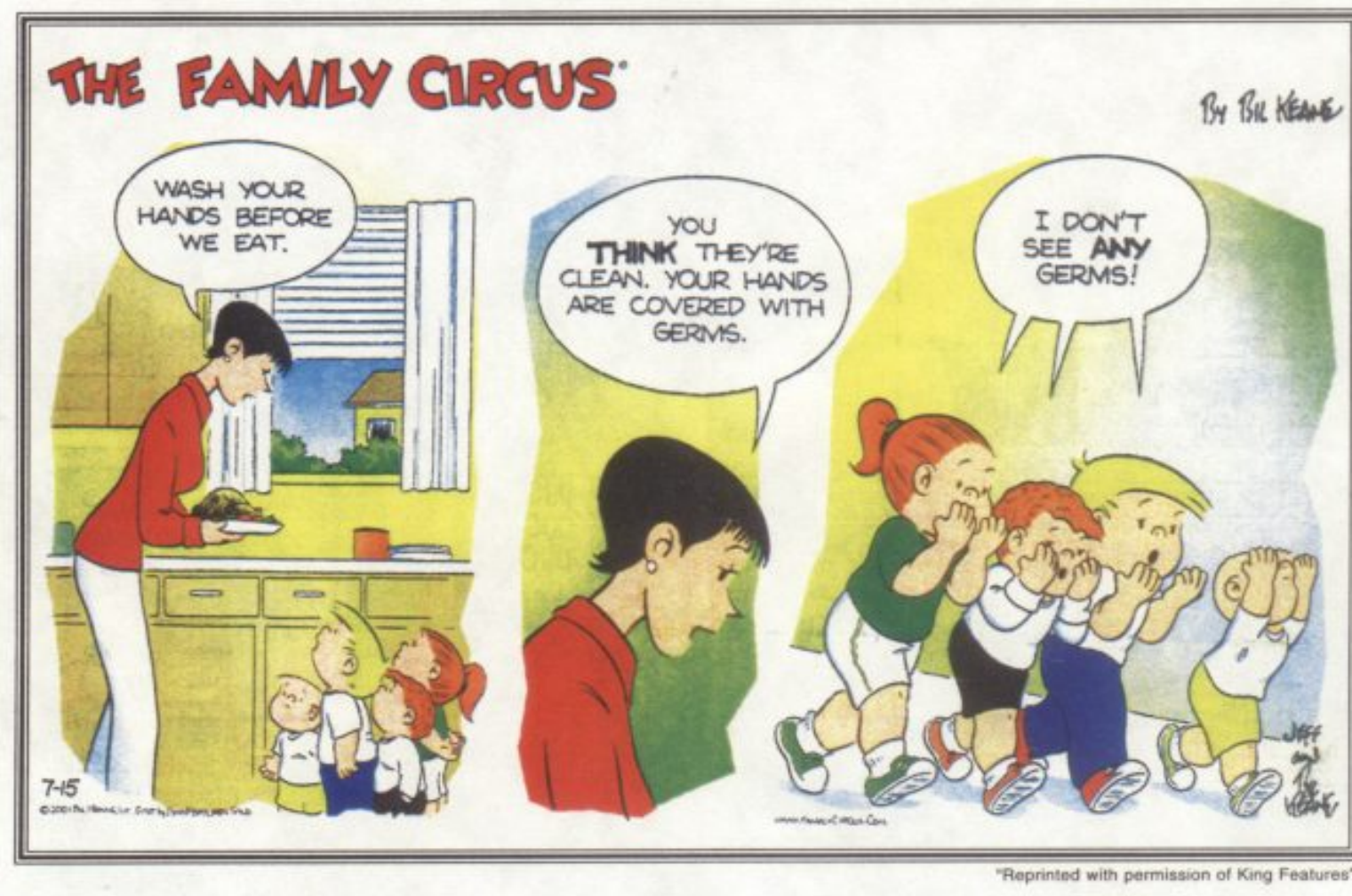


Handwashing works!

- Reduces organisms 10,000 fold
- Reduces
 - Overall HAI (hospital-acquired infection) rate
 - Incidence of certain organisms
 - Certain infections
 - Mortality



Handwashing Video Now!



Problems with Handwashing

- Duration
 - Nobody washes their hands for long enough
 - Average handwashing episode in healthcare is 6-8 seconds when 15-20 seconds is recommended
- Barriers to Compliance
 - No time
 - Think it is not that important- “I wore gloves!”
 - Not a rewarded behavior
 - Poor access to sinks
 - Poor access to ABHR-not enough dispensers or dispenser is empty
 - Skin dryness and irritation
 - Not high tech enough

What works?

- Alcohol based handrubs (ABHRs) are fast and require no sink, paper towels, and no possible recontamination of sink handles
- HAI rates have been shown to be lower using ABHRs
- Use them..., help prevent infection and more work for you with your residents as well as preventing your own illness in the process

Handwashing Compliance

- Physicians: 10-59%
- Nurses: 25-66%
- GNA's: 13-55%



Ideas to improve handwashing compliance on your unit?

- Increase dispensers of ABHR and have a regular fill schedule
- Give education on why it is so important
- Publicize great hand hygiene units
- Get positive feedback when you wash your hands
- Look at your unit's HAI rate-is it above 3%? Did your handwashing practice contribute to it in a favorable or unfavorable way?

Let's have a brief review of some of our nursing policies with staff and how you want these situations handled:

- Handling clean laundry properly
- Handling dirty laundry properly
- Disposing of briefs
- What to do when the resident has soiled their clothing

Points to remember about handling clean laundry

- Clean laundry cart should not be kept in the stairwell
- The clean laundry cart needs to be kept **closed**-with the flaps down
- Wash hands when planning on getting clean laundry.
- When removing clean laundry, hold it away from your body (the front of you is probably not clean)
- The only “clean” places to put it down in the resident’s room are the TOP of the chair or the BOTTOM of the bed
- NEVER PUT CLEAN LINEN ON THE FLOOR-if you do by mistake, discard it appropriately
- After making the bed, wash your hands again!

Points to remember about handling dirty laundry

- Wash your hands then put on gloves
- Take off dirty bed linens carefully and minimize any shaking of the linens
- Place corners in the center and carefully roll up the dirty linens-if they are soiled with feces or urine they may need to be rinsed first in the dirty utility room or bathroom
- Place the dirty linens in a bag right next to the bed, remove extra air, then close tightly.
- Place the bag in the dirty linen receptacle.
- Remove gloves and wash your hands!

Points to remember about disposing of soiled briefs:

- Wash your hands, put on gloves
- Change the resident and dispose of any formed feces in the toilet.
- Carefully fold up the brief and place into a plastic bag, remove excess air, and close it tightly.
- Dispose of the bag in the dirty linen receptacle
- Dispose of gloves and wash your hands!

What to do when the resident has soiled their clothing:

- Wash your hands then put on gloves
- Remove the soiled clothing
- Shake any solid fecal matter into the toilet
- Place the soiled clothing in a plastic bag and secure the top loosely
- Go to the soiled utility room and rinse the clothing in the sink
- Throw the dirty bag in the trash
- Place the rinsed clothing into a clean plastic bag and secure the top loosely
- Place the bagged clothing into the resident's personal hamper
- Remove gloves and wash your hands

When gastrointestinal illnesses circulate around our environment:

- Remember that transfer of these germs is by mouth, that is ingestion
- What often goes in our mouth?
- OUR HANDS!!!!
- How do we prevent GI illness transmission?
- HANDWASHING!!!!!!!

When respiratory illnesses circulate around our environment:

- Remember that transfer of these germs is through the air and into the nose, mouth and eventually the lungs
- How do we prevent respiratory illness transmission?
- Cover your nose and mouth with kleenex when you sneeze or cough-i.e. practice good respiratory etiquette
- Wear a mask if you are actively coughing

What did we learn today?

- How important we are and how are practices can affect the resident's health and our unit's HAI rate
- How important it is to wash our hands frequently during our workday
- To encourage co-workers to wash their hands

“Handwashing is the single most important means of preventing the spread of infection.”

- Centers for Disease Control and Prevention, 2003

