

# Hand Hygiene in Healthcare Settings

## New Jersey Department of Health



Hand hygiene is a tenant of public health and infection prevention, and often cited as the most important measure to prevent transmission of harmful microbes in the healthcare setting. The purpose of this Infection Control Assessment and Response (ICAR) resource is to promote the use of alcohol-based hand rubs (ABHR) by addressing misconceptions regarding its safety, use, and efficacy in health care settings, including long-term care facilities. The New Jersey Department of Health encourages facilities to:

- Evaluate the availability of ABHR at readily accessible points of direct care
- Update policies and procedures to reflect current national guidelines
- Include a competency-based training program for hand hygiene in infection prevention education plans

Healthcare providers should clean their hands as many as 100 times per 12-hour shift, dependent upon the number of patients/residents and intensity of care.<sup>1</sup> ABHR is the preferred method over soap and water because it<sup>1,2</sup>:

- Increases compliance among healthcare workers
- More effective at killing microbes
- Requires less time
- More accessible than handwashing sinks
- Produces reduced bacterial counts on hands
- Improves skin condition with less irritation and dryness than soap and water

### Frequently Asked Questions about ABHR

#### What is hand hygiene?

[Hand hygiene](#) simply means cleaning your hands! This could be achieved through handwashing with soap and water or an antiseptic hand wash, antiseptic hand rub (i.e. ABHR including foam or gel), or surgical hand antiseptics.<sup>3</sup>

#### Where can I find information on competency-based training?

CDC [definitions](#) have been developed to assist with the implementation of competency-based training, auditing, and feedback elements of an Infection Prevention and Control program.<sup>4</sup> Refer to the appropriate setting-specific [CDC Infection Control Assessment Tool](#) for more information.

#### Where should ABHR be available in healthcare facilities?

ABHR should be readily accessible and placed in appropriate locations. The CDC recommends that the following locations improve hand hygiene adherence by healthcare personnel<sup>2,5</sup>:

- Entrances to patient/resident rooms,
- At the bedside (as appropriate for patient/resident population),
- Handy, pocket-sized containers for healthcare personnel,
- Staff workstations, and
- Other convenient locations

#### How do I protect vulnerable patients/residents who could ingest ABHR?

Each facility will need to determine which patients/residents are at risk for ABHR ingestion. But don't let that stop you from maintaining readily accessible ABHR for staff—Infections are important to prevent, too! In secured units, one option is for HCWs to carry individual pocket-sized containers of ABHR on their person.<sup>6</sup>

## How many times can staff use ABHR?

There is no limit to the number of times that ABHR can be used. If hands feel uncomfortable from the ABHR, handwashing can be used, as well.<sup>2</sup>

## Will overuse of ABHR cause microorganism resistance?

No! According to the World Health Organization, there is no reported resistance to ABHR in any microorganism. Appropriate use of ABHR can reduce the spread of antibiotic resistant bacteria.<sup>6</sup>

## Are there certain situations in which hand washing should be used instead of ABHR?

Yes. Washing with soap and water should be done in these situations<sup>3</sup>:

- When hands are visibly dirty,
- Before eating,
- After using a restroom,
- After caring for a person with known or suspected infectious diarrhea, and
- After known or suspected exposure to spores (e.g., *B. anthracis*, *C. difficile* outbreaks).

## What are the safety requirements for ABHR?

Adherence to the National Fire Protection Association Life Safety Code 101 was adopted by CMS as a minimum fire safety requirement for facilities that receive Medicaid or Medicare reimbursement. The Life Safety Code contains national standards for the storage of ABHR, as well as placement and function of dispensers. The CDC addresses safety requirements on the [Hand Hygiene in Healthcare Settings webpage](#)<sup>7</sup>

Please direct any further questions to the ICAR team email at [CDS.ICAR@doh.nj.gov](mailto:CDS.ICAR@doh.nj.gov), or via phone at 609-826-5964.

## Acknowledgment:

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## References

<sup>1</sup>Centers for Disease Control and Prevention (2019, November 24). Show Me the Science. Retrieved July 20, 2020, from <https://www.cdc.gov/handhygiene/science/index.html>

<sup>2</sup>Centers for Disease Control and Prevention (2020, January 20). Hand Hygiene Guidance. Retrieved July 20, 2020, from <https://www.cdc.gov/handhygiene/providers/guideline.html>

<sup>3</sup>Centers for Disease Control and Prevention (2020, January 31). Clean Hands Count for Healthcare Providers. Retrieved July 20, 2020, 2019, from <https://www.cdc.gov/handhygiene/providers/index.html>

<sup>4</sup>Centers for Disease Control and Prevention (2019, October 15). Infection Control Assessment Tools. Retrieved July 20, 2020, from <https://www.cdc.gov/hai/prevent/infection-control-assessment-tools.html>

<sup>5</sup>Centers for Medicaid and Medicare Services (2020, May 15). Nursing Homes. Retrieved July 20, 2020, from <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Nursing-Homes>. Refer to *LTC Survey Pathways*.

<sup>6</sup>World Health Organization (2011, June 08). FAQs: Hand Hygiene in Health Care. Retrieved July 20, 2020, from <https://www.who.int/gpsc/tools/faqs/about/en/>. Refer to *Alcohol-based Handrub Risks or Hazards*.

<sup>7</sup>Centers for Disease Control and Prevention (2019, April 29). Fire Safety and Alcohol-Based Hand Sanitizer. Retrieved July 20, 2020 from <https://www.cdc.gov/handhygiene/firesafety/index.html>.