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Save Lives: Clean Your Hands - WHO Hand Hygiene Day - 5th May

Background

May 5th is designated by the WHO as Hand Hygiene Day. Hand hygiene is the single most effective measure that healthcare workers (HCWs) can undertake to prevent healthcare-associated infection (HCAI) and colonisation from multi-drug resistant organisms.

HCWs compliance with hand hygiene has been reported with very variable results; the WHO calculating an average compliance rate of 37% from a large range of studies.

The WHO First Global Patient Safety Challenge 'Clean Care is Safer Care' was launched in 2005, with the primary objective of raising awareness of, and to mobilise countries worldwide to address, HCAI as a patient safety issue. In 2009, a global campaign 'Save Lives: Clean Your Hands' was launched by the WHO as a major component of the 'Clean Care is Safer Care' challenge.

Save Lives: Clean Your Hands

The 'Save Lives: Clean Your Hands' campaign provides healthcare facilities (HCF) with a wide range of resources to improve hand hygiene compliance including:

- Hand hygiene guidelines¹
- Multi-model hand hygiene improvement strategy which provides HCF with practical tools and resources for:
 - System/culture change
 - Education and training
 - Evaluation and training
 - Hand hygiene promotion
 - Institutional safety climate

These tools and resources can be accessed [here](#). To ensure that all of the tools and resources are available, contact your IT department to allow access to the WHO videos demonstrating the 5 moments of hand hygiene.

How to sign up

If your facility has not yet signed up for the 'Save lives: Clean Your Hands' campaign sign up this year [here](#).

When should healthcare workers perform hand hygiene?

Traditionally HCWs were advised to undertake hand hygiene before or after a number of tasks or procedures

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including: before and after each patient contact, after moving from a contaminated to a clean area during care of an individual patient, after removing gloves and after handling soiled equipment, materials or environment.² While these indications remain valid and are evidence-based, defining precisely when a HCW should perform hand hygiene during patient care was not clear (e.g., during a single episode of care with one patient involving multiple contacts with the patient and the environment).

The '5 moments for hand hygiene' concept, developed by the WHO, gives HCWs specific indications for hand hygiene while undertaking patient care or interacting with the patient's environment. The concept introduces two virtual geographical areas; the patient zone and the healthcare area (Figure 1).³



Figure 1: Healthcare area and patient zone

The patient zone

The patient zone includes the patient and some surfaces and items that are temporarily and exclusively dedicated to him or her, such as all inanimate surfaces that are touched by or in direct physical contact with the patient (e.g., bed rails, bedside table, bed linen, chairs, infusion tubing, monitors, knobs and buttons, and other medical equipment). The concept is based on the finding that the patient zone is rapidly contaminated with the patient's bacterial flora, and assumes that all surfaces in the zone are cleaned after the patient is discharged.

In the patient zone, *critical sites* are either; body sites or medical devices that must be protected against micro-organisms (endogenous or exogenous) to prevent HCAI or body fluid exposure sites, where hands may be contaminated with body fluids and blood borne pathogens. Both types of critical sites may co-exist; inserting a urinary catheter for example exposes the HCW to body fluids and the patient to the risk of a HCAI.³

The healthcare area

The healthcare area is defined as all surfaces in the health-care setting outside the patient zone of patient X. It includes: other patients and their patient zones and the wider health-care facility environment. The healthcare area is characterized by the presence of various and numerous microbial species, including multi-resistant germs.

The '5 moments of hand hygiene'

The '5 moments of hand hygiene' are evidenced-based indications to undertake hand hygiene (Figure 2 and Table 1).¹

- Moment 1 (before touching a patient) occurs as the HCW enters the patient zone and before touching the patient
- Moment 2 (before clean/aseptic procedure) and Moment 3 (after body fluid exposure risk) occur within the patient zone
- Moment 4 (after touching a patient) and Moment 5 (after touching the patient surroundings) occur as the HCW leaves the patient zone

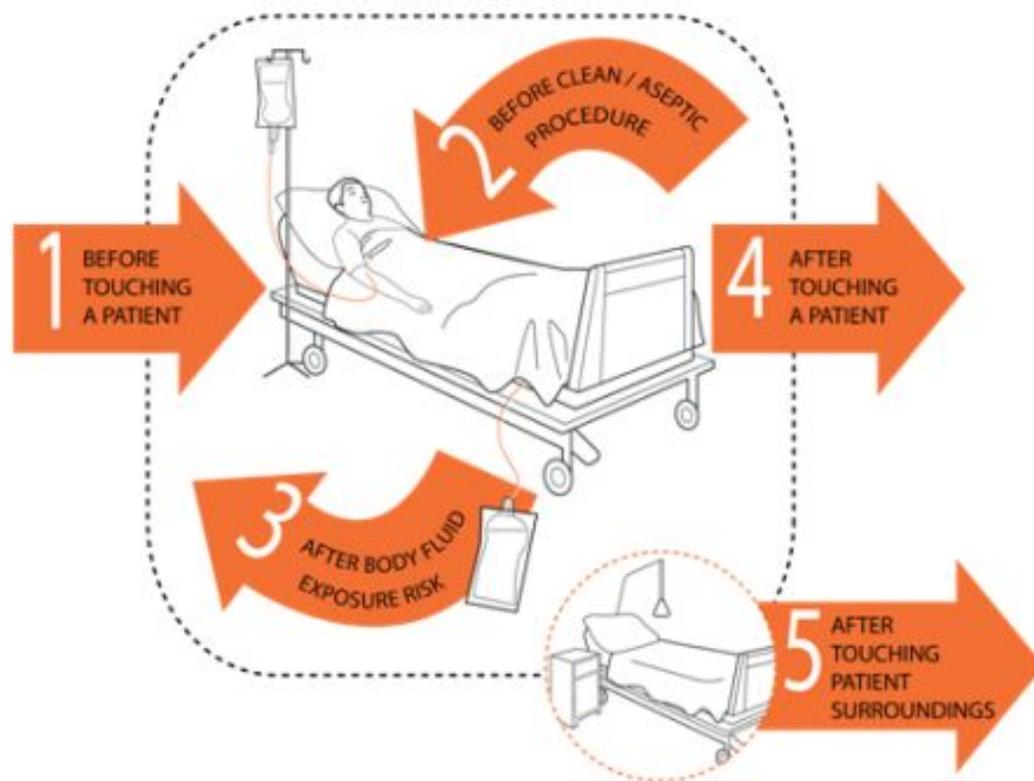


Figure 2: The '5 moments of hand hygiene'. The black and red broken lines represent the patient zone.

Table 1: The rationale and practical examples of the 5 moments of hand hygiene

| The 5 Moments | Why? | When? | Examples |
|--|---|---|--|
| 1. Before patient contact | To protect the patient against microorganisms carried on your hands | On entering the patient zone and before touching the patient | <ul style="list-style-type: none"> • Touching a patient in any way (e.g., shaking hands) • Any personal care activities (e.g., bathing, dressing) • Any non-invasive observations (e.g., taking a pulse/ blood pressure) • Any non-invasive treatment (e.g., applying oxygen mask) |
| 2. Before an clean/aseptic procedure | To protect the patient against microorganisms (including the patient's own normal flora) entering his or her body | Before undertaking a clean /aseptic procedure whether or not gloves (sterile or non- sterile) are worn | <ul style="list-style-type: none"> • Brushing the patient's teeth, instilling eye drops • Skin lesion care, wound dressing, subcutaneous injection • Catheter insertion, opening a vascular access system or a draining system, secretion aspiration • Preparation of food, medication, pharmaceutical Products or sterile material |
| 3. After body fluid exposure (and after removing gloves) | To protect yourself and the healthcare environment from the patients' microorganisms | Immediately after: <ul style="list-style-type: none"> • Moment 2 whether or not gloves are worn • After removing gloves | Immediately after the following (whether or not gloves are worn): <ul style="list-style-type: none"> • Brushing the patient's teeth, instilling eye drops, secretion aspiration • Skin lesion care, wound dressing • Drawing and manipulating any fluid sample, opening a draining system, endotracheal tube insertion and removal • Clearing up urines, faeces, vomit, handling waste (bandages, napkin, incontinence pads), cleaning of contaminated and visibly soiled material or areas (soiled bed linen lavatories, urinal, bedpan, medical instruments) |
| 4. After patient contact | | On leaving the patient zone after patient contact | Following patient contact such as: <ul style="list-style-type: none"> • Shaking hands, stroking a child forehead • Helping a patient to move around, get washed applying oxygen mask, giving physiotherapy • Taking pulse, blood pressure, chest auscultation, • Abdominal palpation, recording ECG |
| 5. After touching the patient's surroundings (even without touching the patient) | | On leaving the patient zone | <ul style="list-style-type: none"> • Changing bed linen, with the patient out of the bed • Perfusion speed adjustment • Monitoring alarm • Holding a bed rail, leaning against a bed, a night table • Clearing the bedside table |

Further information

www.hpsc.ie

Sign up for free webinar training sessions on the WHO 5 moments of hand hygiene and infection control issues [here](#).

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