**Covenant Health Hand Hygiene (HH) Policy 5/6/2019 FAQ**

* **Who does this apply to**: Applies to all COVHS and our family of organizations including caregivers; employed, credentialed, contracted, volunteers, students, and vendors. This policy is located: **X:\SITEData\LBKPublic/Hand Hygiene and Lucidoc.**
* **Why do we need a regional HH Policy:** To provide standardized evidence-based guidelines for effective and safe hand hygiene in the healthcare setting for all caregivers by:
	+ Reduce spread of transmission of disease and healthcare associated infections
	+ Comply with standardized guidelines from World Health Organization (WHO) and AORN
* **Hand Hygiene General Information :**
	+ Compliance with proper hand hygiene procedure before and after patient contact is expected of all healthcare disciplines
	+ Preferred method of hand hygiene for “most patient care settings is use of a waterless alcohol based hand rub/sanitizer.
	+ If hands are visibly soiled, soap and water will be necessary to remove organic matter.
	+ Waterless surgical hand antisepsis products require a prewash of hands and forearms with soap including cleaning the nails under running water at the beginning of the work shift. Skin is dried before applying the waterless antiseptic product.
* **Fingernails that are approved**
	+ Nail Grooming is essential for good hand hygiene and expected for all caregivers
	+ Fingernails should not extend beyond the fingertips
	+ Fresh nail polish that is easily removed with acetone nail polish remover is acceptable.
	+ Chipped nail polish promotes the growth of micro-organisms on fingers; therefore, nail polish should be in good condition with no chipping.
* **What is COVHS Definition of Artificial Nails:**
	+ Substances or devices applied or added to the natural nails to augment or enhance the wearer’s own nails. Any fingernail enhancement or resin bonding product including, but not limited to, fingernail extensions or tips, acrylic overlays, resin wraps, gels, powder dips, shellacs or acrylic fingernails.
* **Artificial Nail Policy:**
	+ Artificial nails have been proven to harbor micro-organisms and cannot be worn by caregivers who have direct contact with patients. This includes and is not limited to:
		- Exams, procedures, treatments, nursing care, surgery, or emergencies;
		- Preparing or dispensing medication or blood products for patient use;
		- Cleaning or preparing patient room
		- Preparing equipment or supplies for patient use (e.g. Central Stores); food, beverages, and serving food.
		- Operating room Staff (OR) and Sterile Processing Department (SPD) Staff
	+ The use of gloves does not affect the restriction on long or artificial nails.
* **Gloves – Proper Use :**
	+ Gloves are used as a protective barrier used with standard precautions
	+ Hand Hygiene should be used before placing gloves on hands.
	+ Gloves should never be reused or washed
	+ Gloves are removed when the need for protection no longer exists and hand hygiene should be used immediately after removal of gloves.
* **Compliance:**
	+ Hand Hygiene is monitored routinely in all patient care areas and reported monthly to leadership and caregivers for communication and improvement.
	+ Barriers to performing job duties which require hand hygiene will be evaluated on a case by case basis with Infection Prevention, caregiver health and HR. Ex: Caregiver wearing a brace, cast, splint or other device (Large open wounds not easily covered) which covers part or all of hand or wrist.
* **Who is responsible for Compliance with the policy:**
	+ Individual Caregiver and Direct Supervisor/Manager/Director
	+ Corrective action step process will be utilized for non-compliance.

I have read, understand and will comply with hand hygiene policy.

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