

Placement Tool for Hand Hygiene Products

Related documents:

Your 4 Moments for Hand Hygiene – Training Presentation

Your 4 Moments for Hand Hygiene – Pocket Card

Hand Care Program – Product selection matters on page 2.

For more information, please contact handhygiene@oahpp.ca or visit publichealthontario.ca/JCYH



Overview:

There are two ways to clean your hands, alcohol-based hand rub (ABHR) or soap and water. A key requirement to improve hand hygiene compliance is to provide cleaning products where busy staff* can clean their hands without leaving the resident.

When hands are visibly soiled, soap and water is the only way to clean. Sinks make it easy to determine placement for soap dispensers. The *Just Clean Your Hands Hand Care Program* provides guidance on the right type of soap and the importance of good quality paper towels. However, sinks are not always convenient and are often not located close to where resident care is provided.

Cleaning hands using ABHR provides facilities with the ability to place a cleaning product directly at the point of care. Simply put, the point of care (POC) is where three elements are present at the same time:

- the resident
- the staff
- care involving contact is taking place

Providing ABHR at the point of care makes it easier for staff to clean their hands the right way at the right time. However, determining the “right place” for placement of ABHR rubs will differ by unit, resident population group and facility design. This tool will help you to identify the best locations for placement of ABHR.

*Staff: Anyone conducting activities in the home.



Placement Checklist

Check when completed:

1. **Form a point of care assessment team** which includes representation from the hand hygiene implementation committee, staff and content experts:

- **Occupational Health and Safety:** Address placement of dispensers in relation to staff safety, ergonomics, common workflow patterns and common injuries. Consider fire hazard and ignition concerns.
- **Risk Management/Quality and Resident Safety:** Address risks to residents and/or visitors with respect to injury, or ingestion of product. Consider fire hazard and ignition concerns.
- **Housekeeping:** Assess product leakage/spill issues and develop a maintenance process that involves monitoring, replenishing and cleaning the dispensers.
- **Environmental services/facilities:** Assess installation procedures and maintenance of dispensers.
- **Unit-based staff:** Consider the common workflow in the resident environment, and provide input on the most convenient location for ABHR. Front-line workers from the area where the installation will occur including:
 - nurses
 - physicians
 - other providers such as chiropodists, dental, ophthalmologists, opticians, speech pathologists, pharmacists, audiologists, oxygen providers, massage therapists, home care nurses
 - personal services such as respiratory therapists, hairdressers, barbers, wheelchair providers
- **Purchasing:** Source the best product selection to address identified needs.
- **Infection Control Professionals:** Consider workflow and product interactions with personal protective equipment.

Notes:

2. To prepare for workflow assessment, first review *Just Clean Your Hands Your 4 Moments for Hand Hygiene* training presentation and product selection component of the *Just Clean Your Hands Hand Care Program*.

Notes:

3. Verify local **fire regulations** regarding placement of ABHR. Consultation with the Fire Marshall may be required regarding placement and storage decisions related to alcohol-based hand rub.

Notes:

4. Conduct a **local risk assessment** related to placement of ABHR dispensers in resident care areas. Care should be taken to avoid direct access to ABHR for residents who are not of the mental capacity to realize the negative effects of ingestion or misuse of any kind. Consider:

- resident population
- dispensers protruding in a way that could cause injuries
- product leaking on surfaces causing falls or other injuries

Notes:

Personal carry is an option.

5. Identify **locations which will provide the best access to product at point of care** (e.g., within an arm's reach to where resident contact is taking place).

- Observe and discuss common workflow patterns of staff within resident care areas.
- List all of the places where “hands on care” is provided (e.g., resident room and areas such as the hallway, at entry to nursing station, in resident/visitor lounge, clinic areas, assessment and treatment rooms, diagnostic imaging).
- Consider workflow patterns in relation to:
 - glove placement
 - glove waste disposal
 - on which side of the bed most care is provided
 - access to product when the privacy curtain is pulled
- Ensure ABHR is not placed at or adjacent to sinks.
 - Washing hands with soap and water followed by immediate use of ABHR is not recommended.
- Prevent esthetic damage to surfaces surrounding the dispenser.

Notes:

6. Identify best location for **hand lotion** dispensers. Should be placed so that it is easily accessible to encourage frequent use.

Notes:

7. Verify **placement** recommendations of all hand care products (ABHR, lotions and soaps) **will meet the Occupational Health and Safety recommendations** such as:

- dispensers are easily visible
- within easy reach without unobstructed access
- placed at the optimal height
- easy to activate
- clearly labeled

Notes:

8. **Identify responsibilities for:**

- Procurement
- Installation of dispensers in identified places
- Ongoing functional maintenance of dispensers
- Ongoing cleaning of dispensers and replacing empty product in a timely manner. It is critical that dispensers are maintained so that they are functional and have product in them (e.g., could consider a system to indicate (flag) when the product requires replacement or a label identifying where to call for more product).

Notes:

9. **Testing phase to verify placement is correct.** A temporary means of securing the dispensers for the trial period to test the positioning to verify it is in the correct place. Secure the dispensers once the staff confirm that the placement is correct for workflow patterns.

Notes:

10. Develop **an ongoing verification** that the hand hygiene system is effective and maintained. Consider a method such as Occupational Health and Safety Audits to verify hand hygiene system is maintained to support healthy hands while improving compliance.

Notes: