

<b>Best Practice Guideline</b>	<b>Hand Hygiene in Home &amp; Community Care</b>
<b>Date</b>	June 2018
<b>Reviewed Date</b>	
<b>Revised Date</b>	<b>April 1, 2022</b>

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## Site Applicability

All community and home care sites.

## Purpose

To provide guidance on special considerations for hand hygiene in home & community care.

## Background

- [Alcohol-based hand rub \(ABHR\)](#) is the most effective method of hand hygiene. If hands are visibly soiled, or the client has diarrhea or vomiting, [soap and water](#) should be used.
- The [VCH Hand Hygiene policy](#) applies to all healthcare settings, including home and community care.
- Home and community settings present a challenge in applying the [Four Moments for Hand Hygiene](#) as the client environment varies depending on the services provided.
- The home care environment may challenge traditional hand hygiene recommendations, in which case, alternate means are advised.

## Procedure

1. Differentiate between the **healthcare environment** and the **client care environment** to identify when hand hygiene moments are indicated in your setting.

## Home Care

- The entire home is the client care environment. Hand hygiene is needed on entry to, and exit from, the home as well as according to the Four Moments of Hand Hygiene (i.e., before an aseptic procedure and after blood and body fluid contact).



- The professional supply bag is a part of the health care environment as it contains clean supplies and will move from home to home. Always use hand hygiene before and after contact with the supply bag.

## Community & Ambulatory Care

- The client care environment includes the immediate space around a client that may be touched by the client and may also be touched by the health care provider when providing care.
- Assess each care area to determine what is included in the client environment and when hand hygiene moments are indicated.

## Unsafe and/or unpredictable environments (includes urgency of care, presence of physical danger or extreme environmental conditions)

- There may be occasions, especially in pre-hospital environments, when a 'life over limb' emergency is encountered. Omitting hand hygiene is never recommended. However, if it is not possible to perform hand hygiene, ensure the use of gloves. Remove gloves and perform hand hygiene at first opportunity.

## 2. Special Considerations in Home Care

### If sinks are excessively soiled or clean sinks are inaccessible:

- Use ABHR if hands are not visibly soiled.
- If hands are visibly soiled, use a pre-moistened towelette to remove visible soil. Discard the towelette and follow with ABHR. Staff should not routinely use pre-moistened towelettes for hand hygiene.

### If no ABHR dispensers are available:

- Carry a personal-size, VCH-approved ABHR. To avoid the risk of a client ingesting the contents, personal-size containers must stay with the health care worker and never be left unattended.

### If no VCH-approved soap or lotion dispensers are available:

- Carry personal-size, [VCH-approved hand hygiene soap and lotion](#).
- Never use a client's bar soap or other hand hygiene products, including pump dispensers, found in the client's home.



**If there is a current Boil Water Advisory in effect:**

- Use ABHR if hands are not visibly soiled
- If hands are visibly soiled, use a pre-moistened hand towelette to remove visible soil. Discard the towelette and proceed with ABHR.

## References

BC Ministry of Health. (2012). Best Practices for Hand Hygiene in all Healthcare Settings and Programs. Retrieved from: <http://www.health.gov.bc.ca/library/publications/year/2012/best-practice-guidelines-handhygiene.pdf>

