

Best Practice Guideline	Hand Hygiene Infrastructure	
Date	5 April 2023	
Reviewed Date		
Revised Date	24 October 2023	

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Site Applicability

All Vancouver Coastal Health owned, operated and contracted Long-term Care (LTC) and Assisted Living (AL) homes.

Scope of Practice

All healthcare providers, contractors, residents and visitors are responsible to perform hand hygiene at certain moments when in healthcare.

Purpose

To provide guidance on placement of products to support hand hygiene and glove use including wall mounted alcohol based hand Rub (ABHR) dispensers and wall mounted brackets holding a variety of glove sized use in LTC / AL settings to promote compliance with the required hand hygiene practices for resident, visitors and staff.

Background

Hands are a vehicle of transmission of microorganisms from both the environment and delivery of health care. Adherence to the 4 moments of hand hygiene by having hand hygiene product and gloves where staff, residents, and families need to perform hand hygiene is the single most important practice for preventing transmission of microorganisms and directly contributes to resident safety by reducing hospital acquired Infections (HAI). As dedicated hand hygiene sinks are not available in all locations, ABHR provides an alternate option for hand hygiene.

Hand Hygiene Infrastructure

Administrators, Managers and Frontline Leadership are responsible for ensuring that hand hygiene infrastructure supports hand hygiene requirements. Identified placement includes:

- At entrance to rooms
- Inside rooms to support point of care risk assessment
- Where PPE is donned and doffed
- At entrances and exits to and from the home and units
- Exits from stairwells
- Near Elevators
- Entrance to any communal space or care area
- Entrances to Clean Supply



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• Inside Soiled Utility Rooms

Glove Bracket

- At entrance to rooms
- Inside rooms to support point of care risk assessment

See Appendix A for placement

See Appendix B for order information for ABHR dispensers and Glove brackets

Installation

Contact maintenance for an infection Control Risk Assessment for installation of the dispensers or obtain assistance from distributors to install the dispensers free of charge.

Engaging Staff in Dispenser and Glove Bracket Placement

The placement of ABHR dispensers and glove brackets should reflect the workflow of staff so it is essential that staff, residents, and families provide input in placement. Have staff and your ICP involved in identifying ABHR placement and glove bracket locations by giving staff colored dots to identify where they would want dispensers/brackets. Allow time for the majority of staff to provide input. Place dispensers where the majority of most dots are. Time spent on assessing placement with staff will contribute to better compliance to hand hygiene.

- Appendix A provides a template to assist with planning ABHR dispenser and glove bracket placement throughout your home.
- Appendix B Table for placement
- Appendix B outlines the process to engage teams to plan ABHR dispenser and glove bracket placement through workflow analysis.
- Appendix C Product order information

Contact maintenance for an infection Control Risk Assessment (ICRA) for installation of the dispensers/brackets or obtain assistance from distributors to install the dispensers free of charge.

Managing Placement of Dispensers due to Consumption of ABHR

ABHR can pose a risk to certain residents resulting in intoxication. The <u>BC Best Practices for Hand Hygiene in All Healthcare Settings and Programs</u> does not endorse the use of non-alcohol based waterless antiseptic agent for hand hygiene in healthcare settings, as there is insufficient evidence for their efficacy. For areas that have residents with increased risks of ABHR ingestion, the development of an individualized care plan is required to reduce risks and ensure hand hygiene products are available.

Consider the following when developing the care plan

- Speak with the most responsible physician to assess the resident for alternate treatment options (i.e. Mental Health Consult).
- Remove ABHR bladder from the area and note "do not refill" on the dispenser





- Use foaming ABHR products, as they are generally more difficult to accumulate in quantities sufficient for intoxication.
- Provide staff with carry on your person ABHR bottles. Do not refill the ABHR bottles.
- ICP to consult with unit staff to ensure visitors have access to ABHR or a hand hygiene sink
- Use locked ABHR dispensers to avoid theft of the ABHR insert (a locking dispenser will not deter an individual from manually discharging the contents for ingestion).
- Consider camouflaging the ABHR dispenser to decrease visibility to residents (e.g. in memory care programs or special care units for individuals with cognitive impairment).





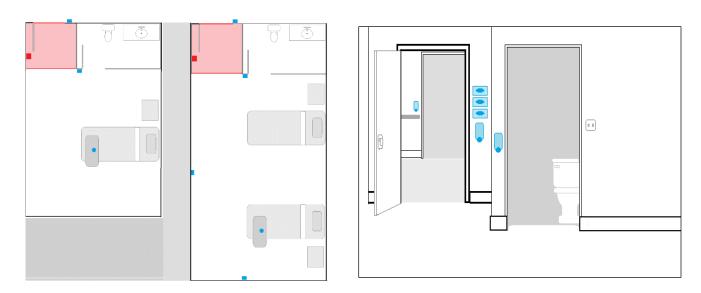
Appendix A

Examples of Dispenser Placement and Glove Brackets

Options for Placement of ABHR Dispensers and glove brackets in Single Bed and Semi-Private Bedrooms

- The blue squares represent dispensers and glove brackets
- The Red squares and pink floor space bordered by two red lines represent the temporary doffing zones
- Placement must support both the need to perform hand hygiene and available mounting locations. Installation must also consider electrical ignition, the floor space, bed position.

Figure 1.



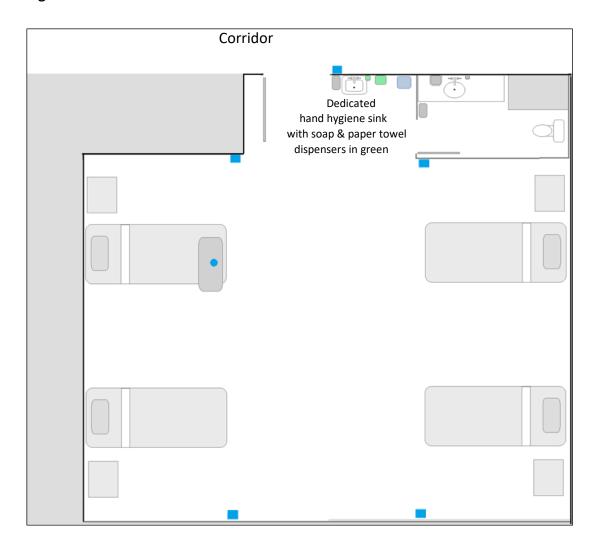
Options for Placement of ABHR Dispensers and Glove Brackets in a Multi-Bed Room

- The blue squares represent dispensers/brackets. Dispensers/brackets at the entrance to each bed space support access to ABHR and gloves when moving between residents.
- The blue dot on the over-bed table is an optional placement.
- Consider ABHR dispensers and glove brackets at point of care when providing care in resident bathrooms.





Figure 2.



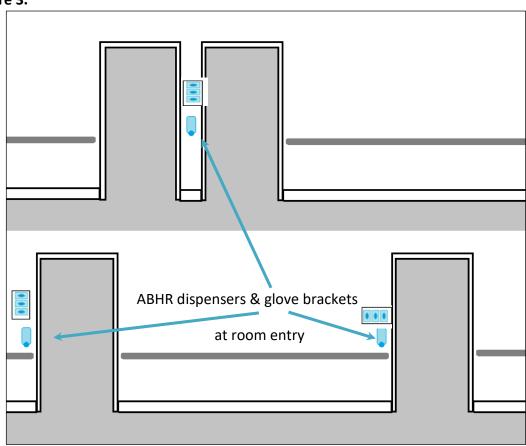




ABHR Dispenser and Glove Brackets Placement Corridors

In corridors, at the entrance to resident rooms, storage areas, clinic rooms, resident dining, and kitchen facilities, etc.

Figure 3.







Appendix B

Considerations	Specifications for ABHR Dispensers	Glove brackets
Locations	At entrances and exits from facility Exits from stairwells (not inside stairwell) Near Elevators Near resident room entrances Entrance to any communal space or care area Entrances to Clean Supply Inside Soiled Utility Rooms Shall not be placed over beds	Near resident room entrances Where PPE is Donned and doffed Inside Soiled Utility Rooms
Distance from the Floor	Approximately 1 meter from the floor	At arm's reach for staff
Distance between Dispensers	At least 48 inches between mounted dispensers	
Maximum Volume	Up to 2 liters per room Per corridor – maximum 37.8 liters	
Distance from ignition source (fire safety regulation)	Do not install ABHR dispensers directly over, or within 150mm of a source of ignition such as an electrical outlet, light switch or battery pack.	
Storage	Any room storing a quantity of 5 or more liters of ABHR, shall not have heat sources present, including battery stations, and have a fire extinguisher located inside or immediately adjacent to the storage rooms.	
Product	70-90% alcohol concentration. Select products that contain alcohol as the active ingredient. Refer to Health Canada's Hard-surface disinfectants and hand sanitizers (COVID-19) https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/hand-sanitizer.html Do not use non-alcohol based hand sanitizers.	

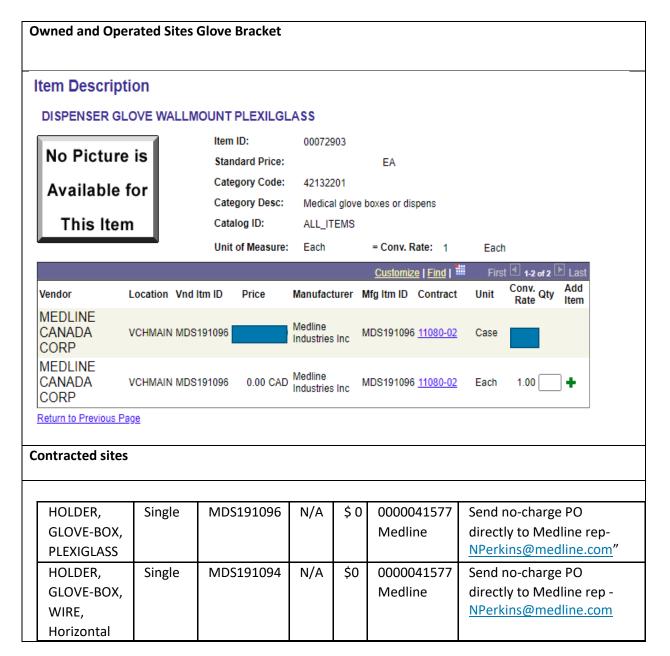


Appendix C

Product	ePro order # (O&O)	Contracted Sites	Picture
Alcohol based hand rub (ABHR) dispensers	ePro#00052685 No charge item		
Sanitizer Hand Foam Waterless Microsan 1L	ePro#00077133		Internation The Control of the Cont
Soap Dispenser (white button)	ePro#00052686 No charge item		
Point of care Handi Bracket (red)	ePRO#00086489		T
Table mount (red) *bracket and mount ordered separately	ePRO#00114958		
Hand cream Dispenser (green button)	ePro#00089252 No charge item		
1L Stainless Steel Dispenser with Stainless Steel Lock	Deb Code SSD1LDS lead time = 8-10 weeks "minimum" Minimum order = 1 case (10 dispensers per case)		







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Appendix D

Activity - Sticker placement

Purpose

The purpose is to engage staff, residents and family in deciding the placement of wall-mounted alcohol based hand rub (ABHR) and glove dispensers in the care homes.

Necessary Supplies

Stickers for placement of ABHR and glove dispensers.

Activity

Include nurses, health care providers, companions, volunteers, housekeeping staff, recreational therapists, occupational therapists, residents, and families if applicable. Use stickers to identify places where they would like to see ABHR dispensers located in their workflow. Staff, residents, and families can go about their day as usual and while doing so, each time they would like to clean their hands and ABHR is unavailable, mark the location where they would like a dispenser installed with a sticker.

Duration

Approximately 7 days

Procedure

Step 1 Sticker placement

- Attend the morning and afternoon huddles to cover day and evening staff
- Post this document and the stickers in the nursing station
- Encourage staff to take a sheet of stickers with them to use during the day
- Staff will have a week to identify places for ABHR dispensers

Step 2 Discussion

- Attend another huddle session to discuss the locations that have been identified
- Discuss the rationale behind each location to ensure that it is optimal
- Determine and finalize the location where each dispenser should be installed, ICP and or site leadership to indicate placement

