

Hand Hygiene

Hand hygiene is a general term referring to any action of hand cleaning that results in the physical removal of visible soil, and the removal or inactivation of transient microorganisms from the hands. It is the most important and effective infection prevention and control measure to prevent the spread of microorganisms.

Infection Risks

All humans carry transient (temporary) and resident (normal) bacteria on their skin. Transient bacteria are found in the top layers of the skin and are acquired during direct contact with clients, contaminated equipment and instruments, or from the environment. Resident bacteria are found deeper within the skin and are more difficult to remove. Unclean hands can spread microorganisms from one person to another, as well as to and from surfaces, equipment, and instruments. The two methods for hand hygiene include (1) rubbing hands with an alcohol-based hand rub (ABHR) when hands are not visibly soiled, and (2) washing hands with plain liquid soap and water when hands are visibly soiled.

Operators are to perform proper hand hygiene using ABHR or liquid soap and water whenever necessary in order to prevent the spread of microorganisms. Hands should be cleaned before touching clients, any instruments, equipment or the other supplies, after contact with a client's skin, mucous membranes or body fluids, and after contact with contaminated instruments or equipment. Hands are also to be cleaned in between procedures on the same client, before putting on and after removing gloves, and after performing any activity where hands may become contaminated (e.g., after using the washroom, coughing, sneezing, eating, drinking or smoking).

Additional Considerations

ABHR:

Rubbing hands with ABHR for 15 seconds is the preferred method for cleaning hands when they are not visibly soiled. The ABHR should preferably contain 70 - 90% alcohol, and should have a natural product number (NPN) from Health Canada.

To make it possible for workers in PSS to clean their hands at the right time, ABHR:

- Is to be available and within reach wherever personal services are provided (e.g., in the procedure or service room, or at the hairstyling or pedicure station) and in reprocessing areas, even if a hand washing sink is available;
- Is not to be placed at or near hand washing sinks to avoid confusion with liquid hand soap;
- Is not to be used beyond its expiry date (discard expired ABHRs); and

- Is not be installed over or directly adjacent to ignition sources, such as electrical outlets or switches, or over carpeted areas, due to risk of combustion.

ABHRs can become contaminated, particularly if containers are reused. ABHRs are to be dispensed from disposable containers and these are not to be "topped up" (i.e., do not add new ABHR to an old container).

Hand washing using soap and water:

As per the *Personal Service Settings* regulation (2018), every PSS is to have at least one dedicated hand washing sink that is conveniently located to the work area, accessible at all times, and appropriately supplied with potable water, liquid soap in a dispenser and an approved means of hand drying (e.g., using single-service products or a hot air dryer).

Plain liquid soaps are sufficient for hand washing in PSS. Antimicrobial hand soaps are generally only considered for use in critical care health care settings and are not recommended in PSS.

- Liquid soaps may become contaminated; they are to be dispensed from single-use containers that are discarded when empty.
- If reusable liquid hand soap containers are used, these are to be emptied, cleaned, disinfected, rinsed, and dried before being refilled.
- Liquid soap containers are never to be topped up.
- Expired liquid soap products are to be discarded and are not to be used.
- Bar soaps are not to be used as these can become contaminated with microorganisms.
- Single-use disposable paper towel dispensers are to be mounted such that access to them is unobstructed and splashing or dripping onto adjacent walls and floor surfaces is minimized.

Other:

- Operators are to avoid wearing nail polish, artificial nails/nail enhancements, rings, wrist watches or other jewellery or clothing that may interfere with hand hygiene.
- Clients are to be encouraged to perform hand hygiene prior to receiving nail services.
- Single-use cloth towels are to be laundered after each use, and a receptacle provided for used linens awaiting laundering.
- If the PSS is supplied by a well, the well water is to be tested in accordance with applicable water regulations.
- Clean and/or sterile instruments and equipment are to be stored at least one metre (three feet) away from the sink, unless these are able to be stored in a closed cupboard or similar, where it is unlikely for instruments and equipment to become contaminated by splashes.

Sources

1. Ontario Agency for Health Protection and Promotion (Public Health Ontario). [Guide to infection prevention and control in personal service settings](#). 3rd ed. Toronto, ON: Queen's Printer for Ontario; 2018
2. Health Protection and Promotion Act, R.S.O. 1990, c.H.7; O. Reg. 136/18: Personal Service Settings.

This fact sheet is based on PSS best practice recommendations, current reprocessing standards and legislation. It is not an inclusive list of all requirements. Operators are responsible to ensure that all services are offered according to local requirements, best practices and legislation.