

Guide to Soaps, Hand Creams and Alcohol Based Hand Rub

Soaps

Use plain, non perfumed product as per national contract.

Effective handwashing requires at least 15 seconds.

Soaps are cleansers and in order to remove organic matter from the skin contain surfactants.

Handwashing **must** be undertaken when:

- hands look or feel dirty
 - after blood or body fluid exposure risk where gloves have been breached and blood or bodily fluids have made contact with the skin
- after handling chemicals
- before food handling / handling raw meat
- there is suspected or known diarrhoea in the clinical area

On all other occasions staff can use ABHRs if they are supplied and it is appropriate to their job role.

In clinical areas handwashing should be the **exception** rather than the rule.

In combination with water, soaps create a drying effect on the skin. The skin can take up to 2 hours to replenish its own natural oils and fats after one wash.

Repeated hand washing will exacerbate poor skin health.

Application Process

- Wet hands, warm water, **not** hot.
- Do not use more soap than needed, one pump should be sufficient.
- Follow '6 Steps Poster'
- Rinse well, pat dry **do not** rub.

Hand Creams

Use plain, non perfumed product as per national contract.

Staff **MUST NOT** use own hand cream during shift as some hand creams contain substances which can compromise the integrity of gloves and the efficacy of cleansing products.

However, if prescribed a particular product by Occupational Health, Dermatology or GP, then a risk assessment may be required to use the product at work.

Line Manager and Occupational Health **must** be made aware if prescribed any products by GP.

Hand creams should be used as often as it is practical to do so; at least before breaks and start/end of shift.

Apply to skin when it can be absorbed into the skin, never less than 20 mins prior to applying gloves.

Consider night time application with cotton liner gloves to increase the uptake of the emollient.

NOTE-FIRERISK

Staff **must** ensure that their hands have been washed clear of any hand creams, grease etc prior to handling gas cylinder

AlcoholBasedHandRub(ABHR)

ABHR *decontaminates* hands but doesnot *clean* hands.

An efficient rub of the skin with an ABHR will decontaminate and emolliate the skin.

ABHR applied to dry, cracked skin will sting. However repeated washing of skin with soap and water strips out natural oils and will exacerbate poor skin health. As long as skin isn't broken continue to use ABHR to build up the emollient effect.

BeforeUseofABHR

- Staff **must** have visibly clean hands
- Will **not** have had direct contact with blood/body fluids or
- Be in contact with patients with known/ suspected infective diarrhoea.

ApplicationProcess

- Use enough product to cover all surfaces of the skin
- Rub fully into skin using '6 Step' process, same as for hand washing. This will enable the user to gain the emollient effect from the product.
- **DO NOT** allow the product to air dry.
- Use sequentially as often as comfortable; when hands feel sticky - wash

Author:	Kay Hill	Approval Committee:	
Consultees:			
Location/s (Med Handbook):			
Location of source file:			
Access Level: (Public/University/School Staff)	Staff		
This document may/may not (delete as appropriate) be released under the Freedom of Information Act without prior discussion. (If may not is selected, please contact the Executive Administrator before release to the FOI office.)			

Version Control Record *(expand table as required)*

Date	Revision Description	Major Changes
07/08/2018	Published version	