**Procedures/Policies/Methods**

For decontaminating hands:
1. If visibly soiled with proteinaceous or other material
2. Before donning sterile gloves
3. After contact with patient’s skin
4. After removing gloves
5. If moving from a contaminated body site to a clean body site during patient care
6. Prior to patient contact
7. After contact with patient’s skin
8. After contact with inanimate objects in the immediate vicinity of patient
9. After contact with body fluids

For washing hands with soap before eating and after using restroom

- Adequate number, location, and functionality of sinks

For using occasional water rinses to remove residue after serial use of alcohol-based agents

For prohibiting the wearing of artificial nails and having chipped nail polish

Skills lab for demonstrating efficiency of individual hand hygiene technique (use of fluorescent agent/UV light)

Adequate number/location/functionality of towel dispensers

**Assure Adequate Hand Hygiene by Healthcare Workers**

- Adequate number, location and functionality of sinks
- Adequate number/location and functionality of alcohol-based hand rub dispensers
- Adequate number/location and functionality of alcohol-based hand rub dispensers
- Adequate number/location and functionality of alcohol-based hand rub dispensers
- Adequate number/location and functionality of alcohol-based hand rub dispensers

**Materials**

- Type of sink and alcohol gel dispensers
- Antimicrobial soap/agent (select based on low irritancy potential)
- Alcohol-based hand rub agent
- Compatible emollient lotions
- Initial soap with or without antimicrobial agent
- Sterile gloves
- Non-sterile gloves
- Disposable paper towels
- Antimicrobial soaps for washing visibly soiled hands

**Equipment**

- Adequate monitoring and feedback
- Administrative leadership and encouragement
- Administrative support and financial resources
- Implement a continuous performance indicator monitoring system
- Monitor adherence to policies prohibiting wearing of artificial nails
- Periodically assess the adequacy of HH practices
- Overt and covert observations

**Environment**

- Monitor the volume of alcohol-based hand rub used per 1000 days (may be difficult to do)
- Implement the National Fire Protection Agency rules for storing and locating alcohol-based rub dispensers in egress corridors and patient rooms
- Signage to promote HH

**Miscellaneous**

- Skills lab for promoting effective HH technique, e.g. using fluorescent agents/UV lights
- # Hospitals that addressed issue prior to project
- # Hospitals that addressed issue during project
- # Hospitals addressing issue after presentations at collaborative meetings

**People**

- Solicit parent involvement in monitoring staff compliance
- Adequate staffing levels to enable all recommended processes to be accomplished in the available time

**Hand Hygiene**

- Adequate training, monitoring and feedback for both NICU and non-NICU personnel entering NICU or caring for patients in areas outside the NICU
- Adequate monitoring and feedback
- Administrative leadership and encouragement
- Administrative support and financial resources
- Empower staff members to “Stop the Line” if they believe procedures are being compromised
- Implement the “Microsystem” assessment and multi-disciplinary development processes
- Implement the National Fire Protection Agency rules for storing and locating alcohol-based rub dispensers in egress corridors and patient rooms
- Signage to promote HH
- Monitor adherence to policies prohibiting wearing of artificial nails
- Periodically assess the adequacy of HH practices
- Overt and covert observations

**Skills lab for promoting effective HH technique, e.g. using fluorescent agents/UV lights**

- Adequate number/location/functionality of alcohol-based hand rub dispensers
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