Assure Adequate Hand Hygiene by Healthcare Workers

**Procedures/Policies/Methods**

1. If moving from a contaminated body site to a clean body site during patient care
2. Before inserting indwelling urinary catheters, peripheral vascular catheters or other invasive devices
3. After contact with inanimate objects in the immediate vicinity of patient
4. After contact with body fluids
5. After removing gloves
6. Adequate number/location/functionality of towel dispensers
7. Antimicrobial soaps for washing visibly soiled hands
8. Adequate training, monitoring and feedback for both NICU and non-NICU personnel entering NICU or caring for patients in areas outside the NICU
9. Adequate staffing levels to enable all recommended processes to be accomplished in the available time
10. Solicit parent involvement in monitoring staff compliance

**Materials**

1. Administrative leadership and encouragement
2. Administrative support and financial resources
3. Monitor the volume of alcohol-based hand rub used per 1000 days (may be difficult to do)
4. Monitor adherence to policies prohibiting wearing of artificial nails
5. Periodically assess the adequacy of HH practices

**Equipment**

1. Skills lab for demonstrating efficiency of individual hand hygiene technique (use of fluorescent agent/UV light)
2. Adequate number/location/functionality of towel dispensers
3. Antimicrobial soaps for washing visibly soiled hands

**Environment**

1. Skills lab for promoting effective HH technique, e.g., using fluorescent agents/UV lights
2. “Microsystem” assessment and multi-disciplinary development processes
3. Implement the National Fire Protection Agency rules for storing and locating alcohol-based rub dispensers in egress corridors and patient rooms
4. Signage to promote HH
5. Empower staff members to “Stop the Line” if they believe procedures are being compromised

**Miscellaneous**

1. Implement a continuous performance indicator monitoring system
2. Overt and covert observations
3. Periodically assess the adequacy of HH practices
4. Monitor the volume of alcohol-based hand rub used per 1000 days (may be difficult to do)
5. Implement the National Fire Protection Agency rules for storing and locating alcohol-based rub dispensers in egress corridors and patient rooms

**People**

1. Adequate monitoring and feedback
2. Adequate training, monitoring and feedback for both NICU and non-NICU personnel entering NICU or caring for patients in areas outside the NICU
3. Adequate staffing levels to enable all recommended processes to be accomplished in the available time
4. Solicit parent involvement in monitoring staff compliance