

Criticare UK Ambulance Service



Independent Service Provider

Policy Document

Hand Hygiene and Care v1.2

Written: February 2013
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Approved: Board of Directors

1. Introduction

This policy has been developed as part of Criticare UK Ambulance Service's ongoing commitment to promoting high standards of infection prevention and control throughout the Company.

Healthcare related infections are costly in both human and financial terms. Body secretions and skin surfaces of all healthcare workers can carry bacteria, viruses and fungi that are potentially infectious to themselves and others.

Effective hand hygiene is the most important procedure for significantly reducing/preventing infection.

Scope of the Policy

This policy applies to all services directly provided by the Company and all staff should familiarise themselves with the Policy.

The Company expects contractors to apply the principles of this policy as minimum standards within their services.

Aims and Objectives

The aim of this document is to set out best practice for achieving effective hand hygiene to minimise the risk of cross infection to both patients and staff.

This policy has a number of key objectives:

- To improve the quality of care by ensuring the Company complies with national hand hygiene guidelines
- To work in partnership with other healthcare providers to control the spread of infection
- To improve the behaviour and personal responsibility of all staff in hand hygiene standards by ensuring that best practice is promoted

2. Definitions

Healthcare Associated Infection (HCAI) – any infection by an infectious agent acquired as a consequence of a person's treatment or care, or which is acquired by a care worker in the course of their duties.

3. Arrangements

The Company will ensure that adequate resources are available for effective prevention and control of HCAs. The appropriate hand hygiene facilities and supplies will be made available in all locations.

Information showing approved hand washing techniques will be displayed on posters situated above every hand washing facility.



The Company will always give consideration to appropriate hand washing facilities when planning any new construction or refurbishment work involving a clinical area.

4. Responsibilities

The responsibility for ensuring that this policy is enforced lies with the Board of Directors.

Operations Managers and Supervisors are responsible for ensuring that this policy is being routinely applied by all staff and that suitable and necessary facilities for hand hygiene are readily available in all Company settings.

Effective hand hygiene and correct use of facilities is the responsibility of all employees of the Company.

5. Competence

In accordance with local and national best practice, all appropriate staff will receive information and regular training in relation to hand hygiene and care.

6. Monitoring

Operational Team Leaders will carry out regular infection control audits and inspections of all Company locations and vehicles. These audits and inspections will monitor that this policy is being routinely applied by all staff and that suitable facilities for hand hygiene are readily available in all Company settings.

Clinical Team Leaders will monitor individual compliance by observing clinical skills during contact sessions and appraisals. This will ensure that any training requirements are identified.

7. Audit and Review

The Board of Directors will receive the results of any audits which are carried out to ensure that this policy is being adhered to.

This policy is reviewed on an annual basis.