

CLEAN HANDS. CLEAN SURFACES.

Clean Hands, Clean Surfaces is a program created to make the public aware of the need for proper hand washing, cleaning and surface disinfection. Each and every day, individuals become sick from poor hand washing and poor surface disinfection. Jani-King, who provides surface disinfection to all types of facilities, hopes to help the public protect themselves and make facilities safer places to work, visit and stay.

Below you'll find a quick overview of the *Clean Hands, Clean Surfaces* program. For more information and to show your support, please visit www.cleanhandscleansurfaces.com.

Q: What is Clean Hands, Clean Surfaces?

A: *It is a commitment by an organization to proper hand washing and surface disinfection. With the increase in healthcare acquired infections and community acquired illnesses, Clean Hands, Clean Surfaces will provide front line awareness and protection to communities and facilities alike.*

Q: Why Clean Hands, Clean Surfaces?

A: *Any type of facility such as a hospital, school, office building or cruise ship requires proper hand washing and surface disinfection to protect staff and visitors. For example, the U.S. government reports there are two million hospital-acquired infections annually, which result in 90,000 deaths and cost \$4.5 billion.*

In addition, the CDC reports 164 million school days lost per year. Teacher absences averaged 5.3 days per year, costing schools time and money in acquiring substitute teachers. Students averaged 4.5 absences per year, resulting in lost workdays for parents.

With a proactive program like Clean Hands, Clean Surfaces, some of these illnesses may be prevented, reducing time lost.

Q: What can my organization do to promote Clean Hands, Clean Surfaces?

A: *Everyone in the organization should be made aware of proper hand washing, surface cleaning and disinfecting techniques. Also, insuring that the housekeeping staff is providing proper surface cleaning and disinfecting to high contact surfaces is a must. Lastly, create a culture within your organization that reduces illnesses and infections and makes the environment safer.*

CLEAN HANDS.

Appropriate hand washing can minimize micro-organisms acquired on the hands by contact with body fluids and contaminated surfaces. Hand washing breaks the chain of infection transmission and reduces person-to-person transmission. This program is not only for healthcare workers; it's also key in schools, food service and the hospitality industry.

Purpose

Hand washing helps to remove micro-organisms that might cause disease.

- Washing with soap and water kills many transient micro-organisms and allows them to be mechanically removed by rinsing.
- Washing with antimicrobial products kills or inhibits the growth of micro-organisms in deep layers of the skin.

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Steps in Hand Washing

- Remove jewelry (*rings, bracelets and watches*) before washing hands.
- Ensure that the fingernails are clipped short (*do not wear artificial nails*).
- Roll the sleeves up to the elbow.
- Wet the hands and wrists, keeping hands and wrists lower than the elbows.
- Apply soap (*plain or antimicrobial*) and lather thoroughly.
- Use firm, circular motions to wash the hands and arms up to the wrists.
- Rub hands for a minimum of 10-15 seconds.
- Repeat the process if the hands are very soiled.
- Clean under the fingernails.
- Rinse hands thoroughly, keeping the hands lower than the forearms.
- Dry hands thoroughly with disposable paper towel or, air-dry them.
- Discard the towel, if used, in an appropriate container without touching the bin lids with hand.
- Use a paper towel, clean towel or your elbow/foot to turn off the faucet to prevent recontamination.



Types of hand washing

1. Hand washing (*most common procedure*).

Hand washing is usually limited to hands and wrists; the hands are washed for a minimum of 10 – 15 seconds with soap (*plain or antimicrobial*) and water.

2. Hand antiseptics/decontamination

Hand antiseptics removes or destroys transient micro-organisms and confers a prolonged effect. It may be carried out in one of the following two ways:

- Wash hands and forearms with antimicrobial soap and water, for 15-30 seconds. (*Follow manufacturer's instructions*)
- Decontaminate hands with a waterless, alcohol-based hand gel or hand rub for 15-30 seconds. This is appropriate for hands that are not soiled with protein matter or fat. (*Immersion of hands in bowls of antiseptics is not recommended.*)

Surgical hand antiseptics

Surgical hand antiseptics removes or destroys transient micro-organisms and confers a prolonged effect. The hands and forearms are washed thoroughly with an antiseptic soap for a minimum of 2-3 minutes. The hands are dried using a sterile towel.

Surgical hand antiseptics is required before performing invasive procedures.

CLEAN SURFACES.

Cleaning and disinfecting surfaces in healthcare facilities is critical to reducing the potential contribution of those surfaces to the incidence of healthcare-associated infections (*HAI's*), according to the Centers for Disease Control and Prevention (*CDC*). These same procedures also reduce community acquired illnesses such as rotaviruses, Nora virus and other viruses that cause illnesses.

Cleaning is also the necessary first step of any disinfection process, according to the CDC's "Guidelines for Environmental Infection Control in Health Care Facilities." Cleaning renders surfaces safe, to handle or use by removing organic matter, salts and visible soils, all of which interfere with microbial inactivation. The physical action of scrubbing with detergents and surfactants and rinsing with water removes a large number of microorganisms from surfaces.

Optimizing each step within the disinfection procedure is key to creating the optimal opportunity for complete disinfecting to be achieved and maintained. An important step in the process is the mixing and application of the disinfectant. To be effective, the disinfectant should be mixed and applied to the surface uniformly, according to the directions, and the surface should remain wet for the length of time recommended by the manufacturer.

The selection and use of chemical germicides is another important step. Selection is largely a matter of judgment, and should be based on the germicide characteristics and the job it is expected to do. A number of disinfectants are currently used in health care facilities including alcohols, hypochlorites, chlorohexidine, iodophors, hydrogen peroxide, phenolics, and quaternary amines compounds. Large numbers of healthcare facilities are currently using quaternary amines to destroy, inhibit, or prevent the growth of microbes on surfaces in patient rooms.

The key to clean surfaces is to ensure that high touch points such as hand and bed rails, toilets, door knobs and switches receive more attention. The increase of cleaning and disinfecting these surfaces reduces the likelihood of cross transmission and serves alongside hand washing as the best front line defense to reducing infections or illnesses.



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Surface Disinfection

Surface disinfection is a two-step process. First clean, and then disinfect the contaminated surface. A fast and efficient program of surface disinfection incorporates the following steps:



1. Select a hospital-grade, EPA-registered, disinfectant/cleaner, spray or microfiber cloth.
2. Spray surface or wipe with microfiber cloth. Wipe away all gross contamination with a microfiber cloth, or coarse brush if necessary.
3. Spray or wipe the surface again, this time leaving it wet for the time specified on the label, then wipe dry. It is during this dwell time that the germs are killed.

Disinfection Levels:

1. High-level disinfection destroys all micro-organisms except some bacterial spores (especially if there is heavy contamination).
2. Intermediate disinfection inactivates Mycobacterium tuberculosis vegetative bacteria, most viruses and most fungi, but does not always kill bacterial spores.
3. Low-level disinfection can kill most bacteria, some viruses and some fungi, but cannot be relied on to kill more resistant bacteria such as M. tuberculosis or bacterial spores.