

<b>Reference Number:</b> <i>UHB 200</i> <i>Hand Hygiene Infection Control Procedure</i> <b>Version Number:</b> 3	<b>Date of Next Review:</b> <i>March 2029</i> <b>Previous Trust/LHB Reference Number:</b> <i>UHBT/140, UHB 200</i>
<b>HAND HYGIENE INFECTION CONTROL PROCEDURE</b>	
<b>Introduction and Aim</b> <ul style="list-style-type: none"> <li>• The hands of health professionals are considered to be the primary source of cross infection in the health care setting.</li> <li>• Effective hand hygiene can significantly reduce the number of microorganisms on the hands and decrease the spread of hospital acquired infections.</li> <li>• The aim of this procedure is to provide appropriate advice to staff regarding the practice of effective hand hygiene across all UHB locations.</li> </ul>	
<b>Objectives</b> <ul style="list-style-type: none"> <li>• To provide advice on when hand hygiene is indicated.</li> <li>• To provide advice on the technique of hand hygiene appropriate to the procedure that the member of staff wishes to carry out or has just completed.</li> <li>• To provide advice on the use of hygiene agents in relevant UHB areas.</li> <li>• To provide advice on hand care.</li> </ul>	
<b>Scope</b> <p>This procedure applies to all staff in all locations including those with honorary contracts and students on placement at Cardiff and Vale UHB.</p> <p>Cardiff and Vale University Health Board accepts its responsibility under the Health and Safety at Work Act etc. 1974 and the Control of Substances Hazardous to Health Regulations 2002, to take all reasonable precautions to prevent exposure to an infectious disease in patients, staff and other persons working for or using its premises.</p> <p>To prevent the possible spread of infectious agents amongst patients and staff it is recognised that the UHB requires a procedural document on hand hygiene to ensure effective management of infection.</p>	
<b>Equality and Health Impact Assessment</b>	<i>An Equality and Health Impact Assessment (EHIA) has been completed and this found there to be no impact. Key actions have</i>

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	<i>been identified, and these can be found within this procedure</i>
<b>Documents to read alongside this Procedure</b>	<p>National Infection Prevention Control Manual (NIPCM)</p> <p><a href="#">NIPCM - Public Health Wales</a></p> <p><a href="#">Transmission Based Precautions</a></p> <p><a href="#">Standard Precautions Procedure</a></p> <p>Cardiff and Vale UHB Dress Code Policy</p> <p><a href="https://nhs.uk/sharing/365/sharepoint.com/sites/CAV_News/SiteAssets/Forms/AllItems.aspx?id=%2Fsites%2FCAV_News%2FSiteAssets%2FSitePages%2FPage%28102%29%2FCardiff-and-Vale-UHB-Dress-Code-Policy---May-2025%2Epdf&amp;parent=%2Fsites%2FCAV_News%2FSiteAssets%2FSitePages%2FPage%28102%29">nhs.uk/sharing/365/sharepoint.com/sites/CAV_News/SiteAssets/Forms/AllItems.aspx?id=%2Fsites%2FCAV_News%2FSiteAssets%2FSitePages%2FPage%28102%29%2FCardiff-and-Vale-UHB-Dress-Code-Policy---May-2025%2Epdf&amp;parent=%2Fsites%2FCAV_News%2FSiteAssets%2FSitePages%2FPage%28102%29</a></p>
<b>Approved by</b>	Infection Prevention Control Group

<b>Accountable Executive or Clinical Board Director</b>	<i>Jason Roberts, Executive Director of Nursing</i>
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**Disclaimer**

**If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the [Governance Directorate](#).**

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<b>Summary of reviews/amendments</b>			
<b>Version Number</b>	<b>Date of Review Approved</b>	<b>Date Published</b>	<b>Summary of Amendments</b>
3	10.03.26	26.03.26	<i>To review and replace previous version</i>
2	26.06.17	15.12.24	<i>Revised document Change of title from Hand Decontamination to Hand Hygiene Addition of Bare Below the Elbows. Revision of one plain band instead of one plain wedding ring can be worn.</i>
1	12.09.13	20.11.13	<i>To update and replace previous version</i>
<i>Ref UHB T/140</i>			<i>New procedure</i>

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## 1. SUMMARY

1.1 The hands of health professionals are considered to be the primary source of cross infection in the health care setting.

1.2 Effective hand hygiene can significantly reduce the number of microorganisms on the hands and decrease the spread of hospital acquired infections.

1.3 Hand hygiene refers to hand washing with soap and water and/or use of alcohol gel.

1.4 All staff present in a clinical environment MUST adhere to the following principles of Bare Below the Elbows to enable effective hand hygiene:

- Wear short sleeves (rolled up sleeves are acceptable), or elbow length sleeves.
- No wrist watches or bracelets to be worn.
- Keep nails short and clean.
- Artificial nails and nail varnish must not be worn.
- One plain band ring can be worn.
- Any cuts and abrasions on hands and arms should be covered with a non-permeable dressing.

1.5 Alcohol gel is an effective hand decontaminating agent on physically clean hands except in the case of patients with diarrhoea caused by Norovirus and *Clostridium difficile*. After any contact with a patient who has known diarrhoea hands should be washed with liquid soap and water.

1.6 Hands must be wet before applying soap and thoroughly rinsed and dried after washing.

1.7 The key time for general hand hygiene is at the point of care applying the 5 Moments for Hand Hygiene.

1.8 A surgical hand scrub is essential prior to all surgical procedures. It involves applying an antiseptic agent to the hands, wrists and forearms. The procedure takes longer and eliminates a greater number of resident bacteria.

1.9 Failure to comply with the Hand Hygiene procedure including failure to be “Bare Below the Elbows” when present in clinical areas is a breach of Cardiff and Vale UHB policies and procedures and may result in a staff member being subject to disciplinary procedures.

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## 2. INTRODUCTION

- 2.1 This procedure applies to all staff within Cardiff and Vale UHB.
- 2.2 The hands of health professionals are considered to be the primary source of cross infection in the health care setting.
- 2.3 Effective hand hygiene can significantly reduce the number of microorganisms on the hands and decrease the spread of hospital acquired infections.
- 2.4 If a staff member experiences any skin reactions to the hand hygiene products, they should seek advice from Occupational Health Department.
- 2.5 Microorganisms found on the skin are grouped into two categories: transient and resident. These microorganisms are part of the body's normal flora and natural defence mechanism and rarely cause infection in the healthy body unless they enter the body through an invasive procedure or surgery.
- 2.6 Hand hygiene refers to hand washing with soap and water and/or use of alcohol gel. For staff working in community settings where hand hygiene facilities are unavailable the use of detergent / sanitising wipes have been agreed for use (see appendix 1).

## 3. ROLES AND RESPONSIBILITIES

- 3.1 The Infection Prevention and Control Group is responsible for the approval of the Infection Prevention and Control Procedure for Hand Hygiene.
- 3.2 Clinical Board Directors and their management team will be responsible for the implementation and monitoring of compliance with this procedure.
- 3.3 Distribution of the procedure will be through the Health Board intranet site.

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## 4. BACKGROUND INFORMATION

4.1 All staff present in a clinical environment **MUST** adhere to the following principles of Bare Below the Elbows to enable effective hand hygiene:

- Wear short sleeves (rolled up sleeves are acceptable), or elbow length sleeves.
- No wrist watches or bracelets to be worn
- Keep nails short and clean
- Artificial nails and nail varnish must not be worn.
- One plain band only to be worn.
- Any cuts and abrasions on hands and arms should be covered with a non-permeable dressing.
- Bracelets or bangles worn for religious reasons such as the Kara should be pushed higher up the arm and secured in place.

4.2 Alcohol gel

Alcohol gel is an effective hand decontaminating agent on physically clean hands except in the case of patients with diarrhoea caused by Norovirus and *Clostridium difficile*. After any contact with a patient who has known diarrhoea or in the instance of an infectious incident/outbreak involving diarrhoea, hands should be washed with liquid soap and water. This will ensure the 'mechanical removal' of spores as the alcohol gel alone will not remove or kill them. In non-diarrhoeal situations, alcohol gel is ideal to use in between patients/activities as long as the hands are physically clean. Alcohol gel should be made available at the point-of-patient contact after a local risk assessment has been carried out, with the exception of paediatrics and mental health.

4.3 Skin Care

4.3.1 When skin is damaged bacterial counts increase. Microorganisms can harbour and multiply in any broken skin leading to a risk of infection to you and to others. Any broken skin must be covered with a non-permeable waterproof dressing.

4.3.2 Hands must be wet using warm tepid water before applying soap and thoroughly rinsed and dried after washing. This lessens the chance of contact dermatitis developing. Contact dermatitis is an inflammation of the skin that

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results from direct contact with certain substances, such as soap. The resulting red, itchy rash is not contagious or life-threatening, but it can be very uncomfortable and can increase bacterial carriage.

- 4.3.3 The application of hand cream can help protect the hands from damage, but communal jars/tubes of hand cream must not be used.
- 4.3.4 If a member of staff experiences any skin reactions to the hand hygiene products, they should seek advice from the Occupational Health Department.

#### 4.4 Transient and Resident Microorganisms

##### 4.4.1 Transient

These are superficial microorganisms that survive for less than 24 hours on skin and are not part of the normal body flora. They are termed transient because direct contact with other people (colonized or infected), equipment or the environment can result in the transfer of such organisms to and from the hands, but effective hand hygiene can easily remove them.

##### 4.4.2 Resident

These microorganisms are mostly located in superficial skin layers but 10 – 20% are found in deeper epidermis layers. These microorganisms are part of the body's normal flora and natural defence mechanism and rarely cause infection in the healthy body unless they enter the body through an invasive procedure or surgery. They will not cause infections in the fit and healthy but unwell patients are susceptible. Plain soap or detergents will not remove all resident microorganisms, only hand hygiene with appropriate antimicrobials can kill or inhibit organisms.

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## 5. LEVELS OF HAND HYGIENE

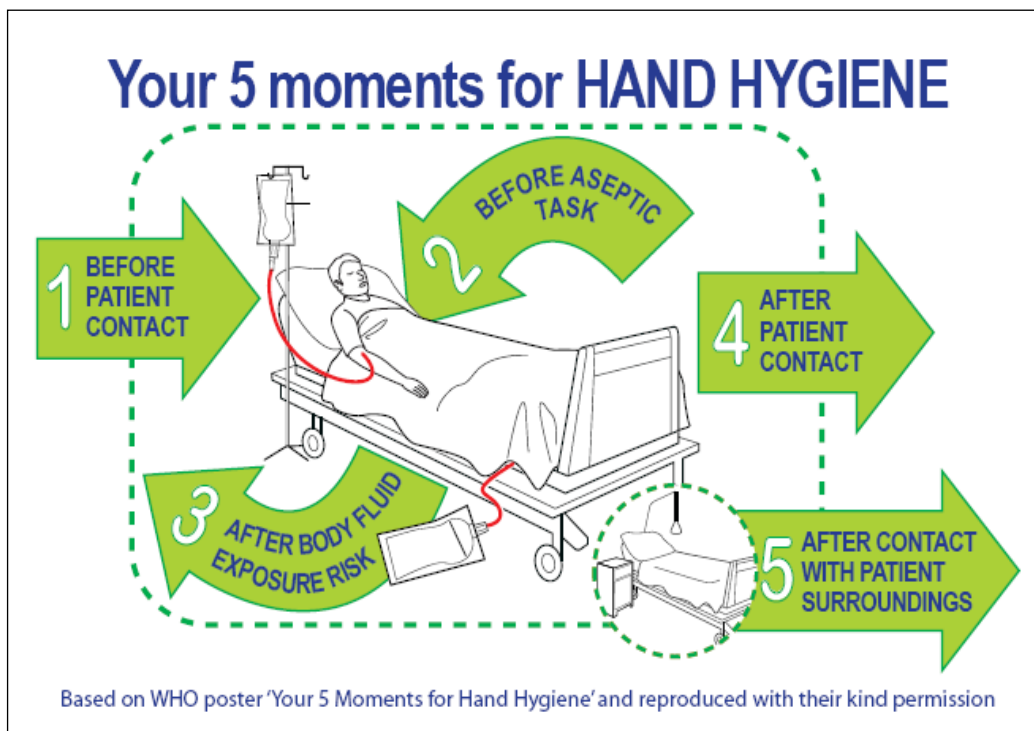
5.1 Hand hygiene is determined by actions; those completed and those intended to be performed.

5.2 General hand hygiene (See pages 10-11 for technique)

5.2.1 The key time for general hand hygiene is at the point of care applying the 5 moments for hand hygiene:

- Before patient contact (and before entering an isolation room)
- Before a clean / aseptic task is undertaken.
- After body fluid exposure risk
- After patient contact
- After contact with the patient environment (and before leaving an isolation room)

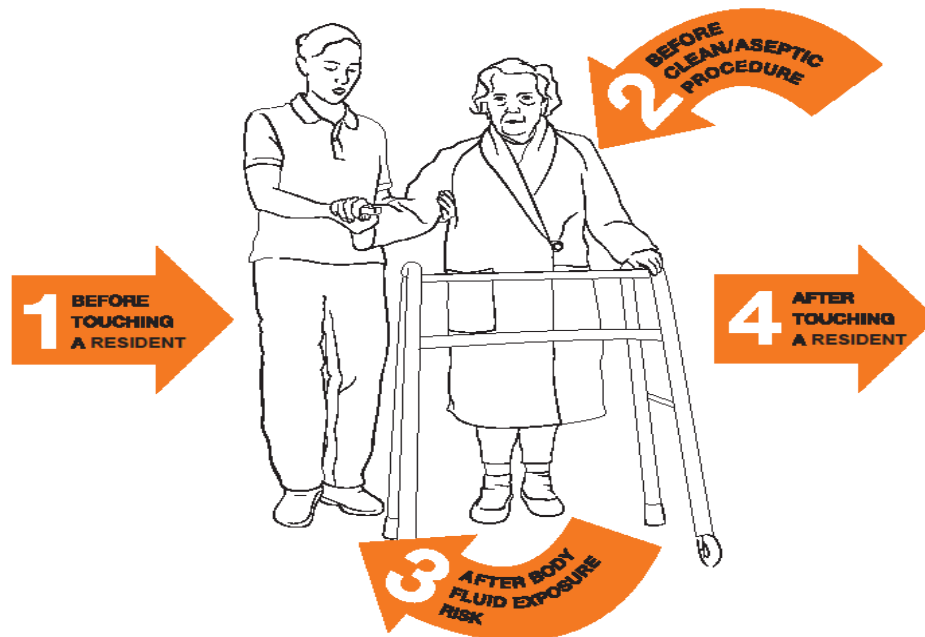
**Your 5 moments for hand hygiene can be applied to all care settings and not just acute hospital wards see diagrams from the NPSA.**



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# Your Moments for Hand Hygiene

## Health care in a residential home



<b>1</b> BEFORE TOUCHING A RESIDENT	<b>WHEN?</b> <b>WHY?</b>	Clean your hands before touching a resident. To protect the patient against harmful germs carried on your hands.
<b>2</b> BEFORE CLEAN/ ASEPTIC PROCEDURE	<b>WHEN?</b> <b>WHY?</b>	Clean your hands immediately before performing a clean/aseptic procedure. To protect the patient against harmful germs, including the resident's own, from entering his/her body.
<b>3</b> AFTER BODY FLUID EXPOSURE RISK	<b>WHEN?</b> <b>WHY?</b>	Clean your hands immediately after a procedure involving exposure risk to body fluids (and after glove removal). To protect yourself and the environment from harmful patient germs.
<b>4</b> AFTER TOUCHING A RESIDENT	<b>WHEN?</b> <b>WHY?</b>	Clean your hands after touching the resident at the end of the encounter or when the encounter is interrupted. To protect yourself and the environment from harmful patient germs.



**World Health Organization**

**SAVE LIVES  
Clean Your Hands**

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WHO acknowledges the Ministry of Health of Spain and the Hospital Universitario de Girona (Infection Control programme) for their active participation in developing this material.

March 2012

### 5.2.2 It is also important to decontaminate hands at other times, for example:

- Before starting and leaving work.
- Before handling medication.
- Before preparing, handling or eating food.
- Before entering/leaving laboratory area.
- After handling contaminated waste or laundry.
- After removing gloves.
- After decontamination of equipment/environment.
- After visiting the toilet
- Between tasks on the same patient if there is risk of contamination from one site to another.

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- Following handling of patient notes or equipment.

5.2.3 General hand hygiene consists of using liquid soap and an effective washing technique, and alcohol gel when indicated.

The sole use of alcohol gel must not be used if:

- Hands are visibly soiled
- The patient is experiencing vomiting and/or diarrhoea
- There is direct hand contact with any body fluids i.e. if gloves have not been worn.
- There is an outbreak of Norovirus, *Clostridiodes difficile* or other diarrhoeal illnesses (confirmed or suspected).

5.2.4 Patients also need to be encouraged to use general hand hygiene before eating meals and after using the toilet (especially if having diarrhoea and vomiting).

5.2.5 Staff must ensure that hand washing equipment is provided at the bedside e.g. bowl of water, soap and hand towels if patients are unable to access a sink.

5.3 Surgical Decontamination (See page 11 for technique)

5.3.1 A surgical hand scrub is essential prior to all surgical procedures. It is a longer procedure than general hand hygiene with the aim to eliminate more residency bacteria.

## TECHNIQUE FOR GENERAL HAND HYGIENE

6.1 Technique (see flow chart – page 11)

- If a ring is worn, either remove it or ensure that the area underneath is washed.
- Turn on taps. Adjust water temperature and flow to desired settings
- Wet hands under running water.
- Apply soap to hands utilise the technique illustrated on the hand washing posters and shown on page 11.
- Ensure all areas of the hands are covered, including the wrists and forearms if applicable.
- Pay particular attention to fingertips, nails, thumbs and the area between the fingers.

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- All areas of the hands and wrists should be vigorously rubbed. Rinse hands under running water.
- Dry hands with disposable paper towels. Use a used or new paper towel to turn off the running water then discard.
- Dispose of the paper towels using the foot pedal on the bin, ensuring that hands are not re-contaminated in the process.

Then

- If indicated apply alcohol gel (for example on certain units additional hand hygiene with alcohol is required at all times).
- Utilise the technique illustrated on the hand washing posters and shown on page 11.
- This process should take 20 – 30 seconds.
- Ensure it is rubbed into all area of the hands.
- Pay particular attention to fingertips, nails, thumbs and the area between the fingers.
- Allow alcohol to evaporate fully so that hands are completely dry.

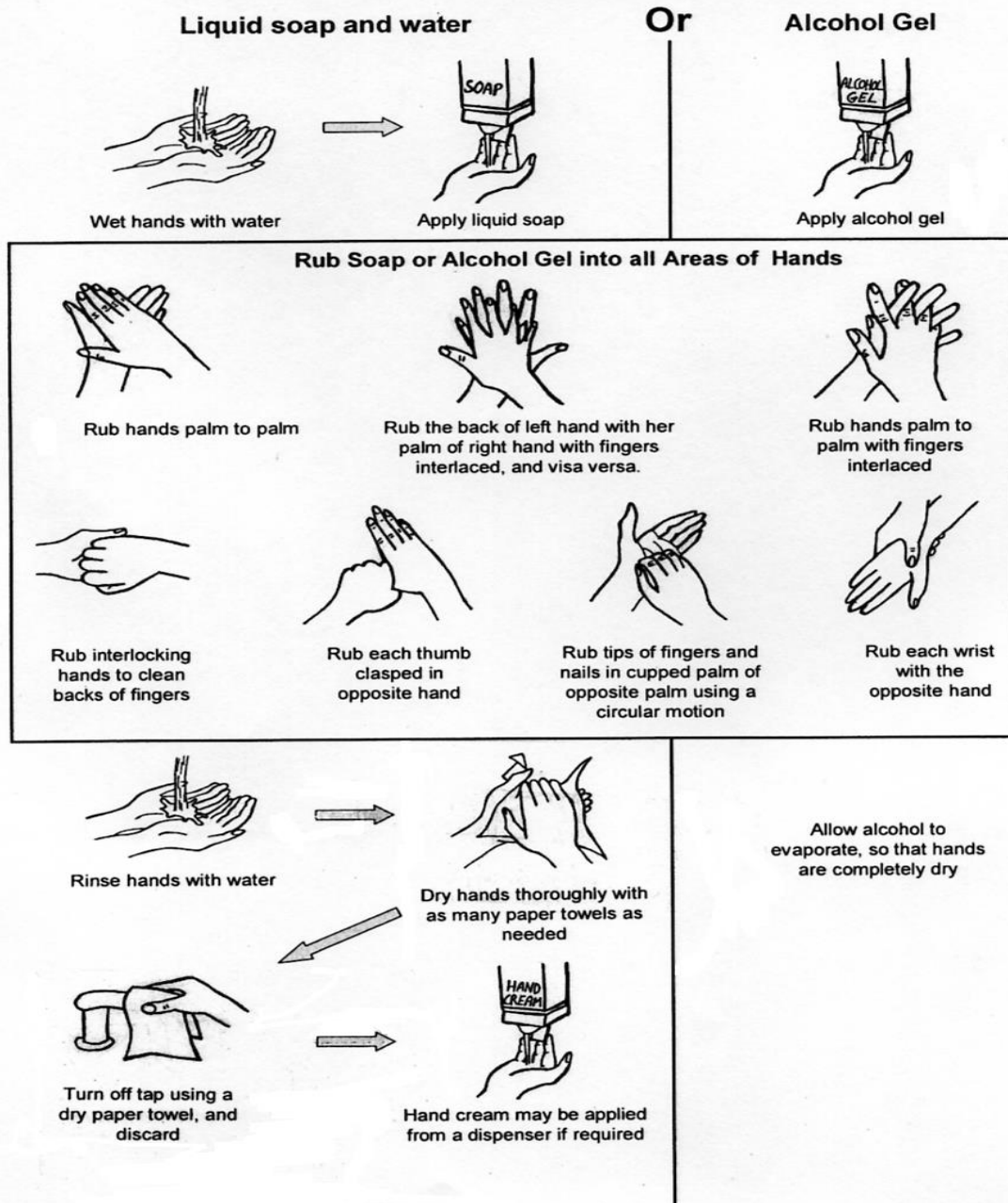
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## 7. SURGICAL DECONTAMINATION

7

### TECHNIQUE/FLOW CHART

#### General Hand Decontamination Technique



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## SURGICAL DECONTAMINATION

Applies to persons undertaking some invasive and surgical procedures, prior to donning sterile garments.

### 7.1 Remove all hand/wrist jewellery.

- Turn on taps. Adjust water temperature and flow to desired settings.
- Wet hands and arms to the elbow.
- Dispense at least 5ml of selected licenced liquid soap solution onto hand (once you have selected a solution you must continue to use the same one throughout the scrub, and subsequent scrubs during the same session).
- Lather arms and hands, down to elbows with selected solution for one minute - social wash. Keep hands upright and arms away from the body.
- Rinse off lather thoroughly keeping hands above elbow level at all times to allow water to run from hands to elbow.
- Using elbow, dispense fresh solution and re-lather hands and arms for a further one minute.
- Licensed single use Soft nonabrasive sponges can be used to apply antimicrobial liquid soap.
- Single use nail picks can be used if nails are visibly soiled. Nail brushes should not be used.  
Leaving solution on arms, obtain a sterile disposable nail brush and scrub fingernails only for one minute.
- Brushes are single use only and must be discarded in an appropriate container.
- Rinse hands and arms thoroughly keeping arms upright.
- Dispense further solution onto hands, lather and wash hands and only three quarters of the way down the arm for one minute.
- Rinse hands only, allowing solution on arms to remain undisturbed
- Take fresh solution and re-lather hands only (do not touch arms) for one minute.
- Rinse hands and arms thoroughly.
- Turn off taps using elbows and holding hands up and away from clothing move to gown trolley.
- Pick up a sterile towel from the trolley, using one towel to dry each arm, dry each finger individually and thoroughly using a circular movement. Continue the circular movement from hand to elbow ensuring bare hand does not touch arm.
- On reaching elbow towel must be discarded straight into bin without being handled.


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- Licensed alcohol-based hand rubs can be used between surgical procedures and glove changes. If you have used a soap solution (rather than an antimicrobial) you must dispense sufficient alcohol gel onto the hand and rub into arms and hands ensuring no areas are missed. Allow alcohol gel to evaporate prior to donning gloves and gown.

## **Best Practice: Appendix 3 - Surgical Scrubbing: surgical hand preparation**

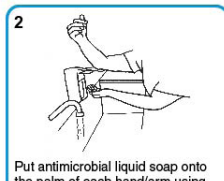
### **technique using antimicrobial soap - step by step images**

**1**




Wet hands and forearms\*

**2**



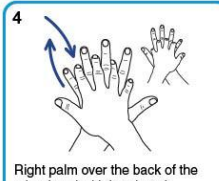
Put antimicrobial liquid soap onto the palm of each hand/arm using the elbow of your other arm to operate the dispenser

**3**




Rub hands palm to palm. Steps 3 - 8 should take a minimum of 2 minutes

**4**



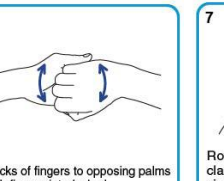
Right palm over the back of the other hand with interlaced fingers and vice versa.

**5**



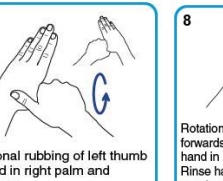
Palm to palm with fingers interlaced.

**6**



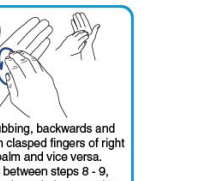
Backs of fingers to opposing palms with fingers interlocked.

**7**




Rotational rubbing of left thumb clasped in right palm and vice versa.

**8**



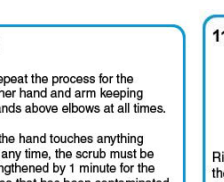
Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa. Rinse hands between steps 8 - 9, passing them through the water in one direction only.

**9**



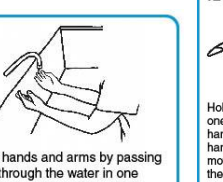
Put antimicrobial liquid soap onto the palm of your left hand using the elbow of your other arm to operate the dispenser. Use this to scrub the right arm for 1 minute using a rotational method keeping the hand higher than the arm at all times.

**10**



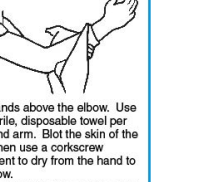
Repeat the process for the other hand and arm keeping hands above elbows at all times. If the hand touches anything at any time, the scrub must be lengthened by 1 minute for the area that has been contaminated.

**11**



Rinse hands and arms by passing them through the water in one direction only, from fingertips to elbow. Do not move the arm back and forth through the water.

**12**



Hold hands above the elbow. Use one sterile, disposable towel per hand and arm. Blot the skin of the hand, then use a corkscrew movement to dry from the hand to the elbow. The towel must not be returned to the hand once the arm has been dried and must be discarded immediately.

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## 8. RESOURCES

- 8.1 The necessary resources for the management, training, risk assessments, monitoring and auditing of hand hygiene are already in place and the implementation of this procedure will not entail additional expenditure.

## 9. TRAINING

- 9.1 Mandatory Infection and Prevention and Control training updated every three years. Available on ESR
- 9.2 Further departmental based training as identified by training needs analysis.

## 10. IMPLEMENTATION

- 10.1 The document will be available on the UHB intranet site and the Infection Prevention and Control clinical portal. Individual Directorates will be responsible for the implementation of the procedure document in clinical areas.
- 10.2 **Failure to comply with the Hand Hygiene procedure including failure to be “Bare Below the Elbows” when present in clinical areas is a breach of Cardiff and Vale UHB policies and procedures and may result in a staff member being subject to disciplinary procedures.**

## FURTHER INFORMATION

- 11.1 Infection Control page on the UHB Intranet site at:  
[Infection Prevention and Control - Home](#)

## 12. EQUALITY

- 12.1 This procedure has had an equality impact assessment and has shown there has been no adverse effect or discrimination made on any particular or individual group.

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### 13. AUDIT

- 13.1 Audit of compliance with this procedure, will be carried out by the local ward staff supported by the Infection Prevention and Control Department, as part of their procedure audit programme.

### 14. REVIEW

- 14.1 This procedure will be reviewed every three years or sooner if any new guidelines are published.

### 15. REFERENCES

- 15.1 All Wales NHS Dress Code, Welsh Government. Crown Copyright October 2010.

[all-wales-nhs-dress-code-free-to-lead-free-to-care.pdf](#)

- 15.2 National infection Prevention Control Manual, PHW, May 2012

[NIPCM - Public Health Wales](#)

- 15.3 R. J Pratt, C. M. Pellowe, J. A. Wilson *et al.* (2007) epic2: National evidence based guidelines for preventing healthcare associated infections in NHS hospitals in England. *Journal of Hospital Infection* 65S; S1-S64.

- 15.4 Cardiff and Vale UHB Dress Code policy

[nhs.wales365.sharepoint.com/sites/CAV\\_News/SiteAssets/Forms/AllItems.aspx?id=%2Fsites%2FCAV\\_News%2FSiteAssets%2FSitePages%2FPage%28102%29%2FCardiff-and-Vale-UHB-Dress-Code-Policy---May-2025%2Epdf&parent=%2Fsites%2FCAV\\_News%2FSiteAssets%2FSitePages%2FPage%28102%29](https://nhs.wales365.sharepoint.com/sites/CAV_News/SiteAssets/Forms/AllItems.aspx?id=%2Fsites%2FCAV_News%2FSiteAssets%2FSitePages%2FPage%28102%29%2FCardiff-and-Vale-UHB-Dress-Code-Policy---May-2025%2Epdf&parent=%2Fsites%2FCAV_News%2FSiteAssets%2FSitePages%2FPage%28102%29)

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## **APPENDIX 1:**

### **PROCEDURE TO FOLLOW WHEN APPROPRIATE HAND HYGIENE FACILITIES ARE NOT AVAILABLE**

1. Ensure you are bare below the elbow.
2. Use detergent wipes provided by the Health Board to clean your hands according to the 5 moments of Hand hygiene.
3. Ensure all areas of the hands are wiped with the wipe including the wrists.
4. Once the hands are dry, use alcohol gel ensuring all areas of the hands and wrists are covered

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## Equality & Health Impact Assessment for

### *Hand Hygiene Infection Control Procedure*

### Please read the Guidance Notes in Appendix 1 prior to commencing this Assessment

**Please note:**

- The completed Equality & Health Impact Assessment (EHIA) must be
  - Included as an appendix with the cover report when the strategy, policy, plan, procedure and/or service change is submitted for approval
  - Published on the UHB intranet and internet pages as part of the consultation (if applicable) and once agreed.
- Formal consultation must be undertaken, as required<sup>1</sup>
- Appendices 1-3 must be deleted prior to submission for approval

Please answer all questions: -

<b>1.</b>	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	Hand Hygiene Infection Control Procedure UHB 200
<b>2.</b>	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	Corporate Directorate Vince Saunders CNS for IP&C Ext: 26261
<b>3.</b>	Objectives of strategy/ policy/ plan/ procedure/ service	The procedure describes and demonstrates how and when hand hygiene should be carried out in the clinical environment to prevent the spread of infection.  Aims/Objectives: To describe the actions required to ensure appropriate hand hygiene is carried out in the clinical area. To provide an understanding of the importance of appropriate hand hygiene. To outline the Five Moments of Hand Hygiene and guide when hand hygiene must be performed in the clinical area. To describe the principles of Bare Below the Elbow

<sup>1</sup>[http://nww.cardiffandvale.wales.nhs.uk/portal/page?\\_pageid=253,73860407,253\\_73860411&\\_dad=portal&\\_schema=PORTAL](http://nww.cardiffandvale.wales.nhs.uk/portal/page?_pageid=253,73860407,253_73860411&_dad=portal&_schema=PORTAL)

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		and the actions that must be taken to ensure that it is adhered to.
4.	<p>Evidence and background information considered. For example,</p> <ul style="list-style-type: none"> <li>• population data</li> <li>• staff and service users' data, as applicable</li> <li>• needs assessment</li> <li>• engagement and involvement findings</li> <li>• research</li> <li>• good practice guidelines</li> <li>• participant knowledge</li> <li>• list of stakeholders and how stakeholders have engaged in the development stages</li> <li>• comments from those involved in the designing and development stages</li> </ul> <p>Population pyramids are available from Public Health Wales Observatory<sup>2</sup> and the UHB's 'Shaping Our Future Wellbeing' Strategy provides an overview of health need<sup>3</sup>.</p>	<p>Cardiff and Vale University Health Board accepts its responsibility under the Health and Safety at Work Act 1974 and the Control of Substances Hazardous to Health Regulations 2002, to take all reasonable precautions to prevent exposure to an infectious disease in patients, staff and other persons working at or using its premises.</p> <p>To prevent the possible spread of infection amongst patients and staff it is recognised that the UHB requires procedural documents to ensure effective management of infection.</p> <p>The procedure is supported by the Welsh Government document AMR (Antimicrobial Resistance Goals) and HCAI (Healthcare Associated Infections) improvement goals for 2024 to 2025</p> <p>Please be advised that all the below lists and links are not an exhaustive list of the available evidence and information but provides an indicative summary of the evidence and information applicable to this procedure An internet search was conducted on 06/08/25 using the following search terms in combination "Hand Hygiene", "Hand Decontamination", "Procedure", "Policy" and "Equality Impact". The search revealed several equality impact assessments. Examples can be found by following the links below:</p> <p>Sherwood Forest Hospitals NHS Foundation Trust 'Hand Hygiene Policy' (2021) <a href="#">Hand hygiene policy</a></p> <p>Leicestershire Partnership NHS Trust 'Hand Hygiene Policy including Bare Below the Elbow (2022) <a href="#">Hand-Hygiene-Policy-inc-bare-below-the-elbows.pdf</a></p> <p>University Hospital Bristol and Weston NHS Foundation Trust 'Hand Hygiene Policy' (2022) <a href="#">Hand Hygiene Policy</a></p>

<sup>2</sup> <http://nww2.nphs.wales.nhs.uk:8080/PubHObservatoryProjDocs.nsf>

<sup>3</sup> <http://www.cardiffandvaleuhb.wales.nhs.uk/the-challenges-we-face>

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		Mersey and West Lancashire Teaching Hospital NHS Trust 'Hand Hygiene Policy' (2024) <a href="https://www.merseyandwestlancashire.nhs.uk/~/media/00000000-0000-0000-0000-000000000000/2021-61c077b5322ee1.74384034.pdf">2021-61c077b5322ee1.74384034.pdf</a>
5.	Who will be affected by the strategy/ policy/ plan/ procedure/ service	<p>This procedure applies to all staff in all locations including those with honorary contracts and students on placement at Cardiff and Vale UHB.</p> <p>Patients, their visitors and UHB staff will benefit from compliance with the procedure in that the risk of transmission of infection will be reduced by ensuring they carry out hand hygiene in the clinical environment</p> <p>The UHB will benefit organisationally and financially from reducing the impact and cost of the transmission of infection and ensure best outcomes and safety for patients and staff</p>

**6. EQIA / How will the strategy, policy, plan, procedure and/or service impact on people?**

Questions in this section relate to the impact on people on the basis of their 'protected characteristics'. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
<b>6.1 Age</b> For most purposes, the main categories are: <ul style="list-style-type: none"> <li>• under 18;</li> <li>• between 18 and 65; and</li> <li>• over 65</li> </ul>	No evidence to suggest that there would be any impact, positive or negative, on any age group.		
<b>6.2 Persons with a disability as defined</b>	For instances of staff requiring	Individual risk assessments will be	For IP&C to be made aware.

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<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts</b>	<b>Recommendations for improvement/ mitigation</b>	<b>Action taken by Clinical Board / Corporate Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate
<b>in the Equality Act 2010</b> Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes	lymphoedema sleeves, splints or other temporary but potentially long-term arm/wrist support there could be an impact due to the potential of adequate hand hygiene and bare below the elbow being hindered	required	For referral to Occupational Health.  For an individual risk assessment to be undertaken
<b>6.3 People of different genders:</b> Consider men, women, people undergoing gender reassignment  <b>NB</b> Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Sometimes referred to as Trans or Transgender	No evidence to suggest that there would be any impact, positive or negative		

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<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts</b>	<b>Recommendations for improvement/ mitigation</b>	<b>Action taken by Clinical Board / Corporate Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate
<b>6.4 People who are married or who have a civil partner.</b>	There may be a negative impact- staff wearing nonstandard wedding/civil partnership rings will be requested to remove them due to the increased risk of infection they present to patients.	Ensure compliance with the procedure  The wearing of a single, plain ring/ band is permitted in accordance with bare below the elbows.	Ensure that all staff across clinical boards are fully compliant.
<b>6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding.</b> They are protected for 26 weeks after having a baby whether or not they are on maternity leave.	No evidence to suggest that there would be any impact, positive or negative		
<b>6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers</b>	No evidence to suggest that there would be any impact, positive or negative		

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<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts</b>	<b>Recommendations for improvement/ mitigation</b>	<b>Action taken by Clinical Board / Corporate Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate
<b>6.7 People with a religion or belief or with no religion or belief.</b> The term 'religion' includes a religious or philosophical belief	There will be no impact for Sikhs as an individual Kara band is permitted (as long as it regularly cleaned and raised up the forearm to aid effective hand hygiene). As long sleeves are not permitted in line with bare below the elbow, Muslims, for example could be affected by the procedure if they are required to cover their forearms.	To discuss with IP&C.	To discuss with IP&C.
<b>6.8 People who are attracted to other people of:</b> <ul style="list-style-type: none"> <li>• the opposite sex (heterosexual);</li> <li>• the same sex (lesbian or gay);</li> <li>• both sexes (bisexual)</li> </ul>	No evidence to suggest that there would be any impact positive or negative		
<b>6.9 People who communicate using the Welsh language in terms of correspondence, information leaflets, or service plans and</b>	No evidence to suggest that there would be any impact, positive  The procedure will		

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<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts</b>	<b>Recommendations for improvement/mitigation</b>	<b>Action taken by Clinical Board / Corporate Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate
<b>design</b>  Well-being Goal – A Wales of vibrant culture and thriving Welsh language	be available in Welsh and English		
<b>6.10 People according to their income related group:</b> Consider people on low income, economically inactive, unemployed/workless, people who are unable to work due to ill-health	No evidence to suggest that there would be any impact, positive or negative		
<b>6.11 People according to where they live:</b> Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities	No evidence to suggest that there would be any impact, positive or negative		
<b>6.12 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or</b>	No evidence to suggest that there would be any impact, positive or negative		

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<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts</b>	<b>Recommendations for improvement/mitigation</b>	<b>Action taken by Clinical Board / Corporate Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate
<b>service</b>			

**7. HIA / How will the strategy, policy, plan, procedure and/or service impact on the health and well-being of our population and help address inequalities in health?**

Questions in this section relate to the impact on the overall health of individual people and on the impact on our population. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts and any particular groups affected</b>	<b>Recommendations for improvement/mitigation</b>	<b>Action taken by Clinical Board / Corporate Directorate</b> Make reference to where the mitigation is included in the document, as appropriate
<b>7.1 People being able to access the service offered:</b> Consider access for those living in areas of deprivation and/or those experiencing health inequalities  Well-being Goal - A more equal Wales	No evidence to suggest that there would be any impact, positive or negative		
<b>7.2 People being able to improve /maintain healthy lifestyles:</b> Consider the impact on healthy lifestyles, including healthy	Appropriate hand hygiene and the compliance of Bare Below the Elbows would go towards the prevention of Hospital Acquired	Ensuring full compliance with the 'Five Moments of Hand Hygiene' and Bare Below the Elbows as per procedure.	Ensure that all staff across clinical boards are fully compliant.

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<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts and any particular groups affected</b>	<b>Recommendations for improvement/mitigation</b>	<b>Action taken by Clinical Board / Corporate Directorate</b> Make reference to where the mitigation is included in the document, as appropriate
<p>eating, being active, no smoking /smoking cessation, reducing the harm caused by alcohol and /or non-prescribed drugs plus access to services that support disease prevention (eg immunisation and vaccination, falls prevention). Also consider impact on access to supportive services including smoking cessation services, weight management services etc</p> <p>Well-being Goal – A healthier Wales</p>	<p>Infections amongst the service users (patients) and ensure the safety and wellbeing of healthcare staff</p>		
<p><b>7.3 People in terms of their income and employment status:</b> Consider the impact on the availability and accessibility of work, paid/ unpaid employment, wage levels, job security, working conditions</p> <p>Well-being Goal – A prosperous Wales</p>	<p>No evidence to suggest that there would be any positive or negative impact</p>		
<p><b>7.4 People in terms of their use of the</b></p>	<p>No evidence to suggest that there</p>		

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<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts and any particular groups affected</b>	<b>Recommendations for improvement/mitigation</b>	<b>Action taken by Clinical Board / Corporate Directorate</b> Make reference to where the mitigation is included in the document, as appropriate
<p><b>physical environment:</b> Consider the impact on the availability and accessibility of transport, healthy food, leisure activities, green spaces; of the design of the built environment on the physical and mental health of patients, staff and visitors; on air quality, exposure to pollutants; safety of neighbourhoods, exposure to crime; road safety and preventing injuries/accidents; quality and safety of play areas and open spaces</p> <p>Well-being Goal – A resilient Wales</p>	<p>would be any positive or negative impact</p>		
<p><b>7.5 People in terms of social and community influences on their health:</b> Consider the impact on family organisation and roles; social support and social networks; neighbourliness and sense of belonging; social isolation; peer</p>	<p>No evidence to suggest that there would be any positive or negative impact</p>		

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pressure; community identity; cultural and spiritual ethos  Well-being Goal – A Wales of cohesive communities			
<b>7.6 People in terms of macro-economic, environmental and sustainability factors:</b> Consider the impact of government policies; gross domestic product; economic development; biological diversity; climate  Well-being Goal – A globally responsible Wales	No evidence to suggest that there would be any positive or negative impact		

**Please answer question 8.1 following the completion of the EHIA and complete the action plan**

<b>8.1 Please summarise the potential positive and/or negative impacts of the strategy, policy, plan or service</b>	The Procedure will ensure that hand hygiene in the clinical area is correctly adhered to; for example, providing staff with a comprehensive guide to the Five Moments of Hand Hygiene and the correct implementation of Bare Below the Elbows. The procedure also supports other infection prevention
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	and control policies and procedures in supporting the UHB to ensure best outcomes for patients by reducing Healthcare Acquired Infections
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### Action Plan for Mitigation / Improvement and Implementation

	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
<b>8.2 What are the key actions identified as a result of completing the EHIA?</b>	<p>IP&amp;C&amp;C/Occ Health to be made aware of any long-term splints, cuffs or sleeves that need to be worn by staff in terms of a long-term health problem/disability.</p> <p>If a staff member wishes to wear long sleeves for religious reasons, IP&amp;C to be informed and a discussion to take place.</p>	Occ Health, Clinical Board, IP&C	Ongoing	To ensure that IP&C and Occ Health are made aware of any instances of splints, cuffs or sleeves being required for a staff member to inform a risk assessment and discussion with the individual
<b>8.3 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment required?</b>	Limited impact identified so a further EQIA will not be required.			
<p>This means thinking about relevance and proportionality to the Equality Act and asking: is the impact significant enough that a more formal and full consultation is required?</p>				

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	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
<p><b>8.4 What are the next steps?</b></p> <p>Some suggestions:-</p> <ul style="list-style-type: none"> <li>• Decide whether the strategy, policy, plan, procedure and/or service proposal: <ul style="list-style-type: none"> <li>○ continues unchanged as there are no significant negative impacts</li> <li>○ adjusts to account for the negative impacts</li> <li>○ continues despite potential for adverse impact or missed opportunities to advance equality (set out the justifications for doing so)</li> <li>○ stops.</li> </ul> </li> <li>• Have your strategy, policy, plan, procedure and/or service proposal approved</li> <li>• Publish your report of this impact assessment</li> <li>• Monitor and review</li> </ul>	<p>This procedure will be reviewed in 3 years' time and a further EQIA completed.</p>	IP&C	3 years	<p>To ensure that comments for the updated hand hygiene procedure are given as guided without for consultation To alert IP&amp;C to any issues that could have an impact on compliance with the procedure.</p>