



ROYAL COLLEGE OF
PHYSICIANS OF IRELAND



Version 1.1

National Specification for Alcohol-based Hand Hygiene Products December 2013

The following specification was developed by a sub-group of the RCPI Hand Hygiene Group. It was approved by the RCPI Hand hygiene Group and the RCPI Healthcare-associated Infection/Antimicrobial Resistance Clinical Advisory Group.

Efficacy of alcohol-based hand hygiene products

All Alcohol based hand hygiene products (AHR) except those used for surgical hand preparation must have full documented compliance with:

- EN 1500: Hygienic Hand Rub (World Health Organization (WHO), 2009)
- EN14476: In view of the burden of Norovirus outbreaks in the Irish Healthcare settings (HPSC 2013)

AHR for surgical hand preparation must be compliant with

- EN 12791 Surgical hand rubbing in acute settings (WHO, 2009)
- See Appendix 1- Table EN Norms

All claims to product efficacy (e.g. effective against viruses) must be supported by the relevant laboratory test report; this will be reviewed by a nominated Microbiologist.

These requirements may be reviewed at anytime based on updated evidence from the WHO.

AHR must:

- Be greater than or equal to 70-85% alcohol by volume ethanol, iso-propanol, or n-propanol, or a combination of these products
- Have an added emollient
- Be non-perfumed
- Be a registered biocide
- Be available in either a gel/foam/rub formulation
- Have a low viscosity

Cost comparisons should only be made for products that meet requirements for efficacy, skin tolerance, and acceptability.

Dispensers ((Page 134 to 138 -WHO, 2009)

AHRs must be available in different forms of dispensing systems which:

- Can be easily cleaned
- Do not facilitate topping up
- Can dispense a palmful of product. It is acceptable if more than one pump of the dispenser is required to deliver a palmful of product
- Labelled with a flammable sticker which is clearly visible

Wall mounted dispensers

- Cartridges should not be refillable but of a disposable single-cartridge design
- Should allow use by contact with clean body part (e.g. elbow dispenser, pump on a bottle operated by a clean wrist)
- The dispenser should be designed to allow easy visual identification of empty/near empty cartridges. Wall mounted dispensers should be lockable in particular for public areas
- Dispensers of surgical handrub should have an elbow operated bracket.
- An option of an automated “non touch” wall mounted dispenser can be considered , consideration should be given to maintenance.

Table top (pump) dispensers

- Pump dispensers should be in a holder or frame that can be mounted securely on different equipment such as trolley/bedside frame/table/cot
- Should not be refillable

Pocket or clip on dispensers

- Leakage free pocket bottles with a capacity of no more than 100mls
- Should not be refillable

Signage/Education

- Accompanying signage in various formats promoting the product and outlining product use should reflect the national recommendations including the WHO 5 Moments and which is tailored to the target audience
- Content of signage and education and training should be agreed with the local infection prevention and control team
- Signage and training/education must be regularly updated and included within the tender costs
- Dispensers should be appropriately labelled indicating alcohol product

Supply, installation and maintenance of dispensers

The company should:

- Carry out a site survey to determine the most appropriate (e.g. point of care) and ergonomically placement of dispensers
- Supply, install and maintain dispensers

- Have readily available and continual supply of product for the purposes of trial and installation

The company must provide a method statement outlining:

- How existing dispensers will be removed and how necessary wall repairs will be made
- How and where dispensers are to be installed including dust control measures
- How dispensers will be maintained
- The method statement must be agreed with the local infection prevention and control team prior to installation/maintenance works

The company should undertake six monthly audits which include:

- The number of dispensers in working order compared with the total number of dispensers in a unit
- The number of dispensers adequately filled in a unit compared with the total number of dispensers available
- The proportion of patient and treatment rooms with dispensers present at the point of care

Packaging

The supplier should provide instructions on appropriate disposal of used empty AHR reservoirs (wall mounted, table top pump containers and personal bottles). These instructions should include:

- Necessity for rinsing to reduce the risk of fire, if appropriate
- Appropriate disposal in either recycling or domestic waste

Reference

World health Organisation: Guidelines on Hand Hygiene in Healthcare 2009
<http://www.who.int/gpsc/5may/tools/9789241597906/en/>

Health Protection Surveillance Centre: Surveillance of Infectious Intestinal (IID), Zoonotic and Vectorborne Disease, and Outbreaks of Infectious Disease Quarterly Reports. 2013 <http://www.hpsc.ie/hpsc/A-Z/Gastroenteric/GastroenteritisorIID/Publications/IIDandZoonoticDiseaseQuarterlyReports/> Accessed 10/01/2014

Appendix 1 Table EN Norms

Requirement	Test Type
EN1500	Bactericidal
EN14476	Virucidal for several types
EN1276	Bactericidal activity
EN13727	Bactericidal activity
EN1275	Yeasticidal activity
EN14348	TB
EN 12791	Surgical hand rubbing in acute settings