

Bare Below the Elbows

Version 1 – September 2013

What is Bare Below the Elbows

Bare Below the Elbows is an initiative aiming to improve the effectiveness of hand hygiene performed by health care workers.

Guide to Bare Below the Elbows Initiative

The effectiveness of hand hygiene is improved when: skin is intact, nails are natural, short and unvarnished; hands and forearms are free of jewellery; and sleeves are above the elbow. Staff having direct contact with patients or a patient's zone should comply with the steps outlined below:¹

- bracelets, wrist watches and rings with stones or ridges should not be worn when providing clinical care. A single flat ring/band may be worn but must not interfere with effective hand hygiene practice
- long sleeved clothing should be rolled up above the elbow so as not interfere with effective hand hygiene practice
- nails should be kept short and clean and nail polish should not be worn. Artificial nails (gel or acrylic) must not be worn by any Care Staff/Health Care Workers with direct patient contact
- any breached skin (cuts, dermatitis or abrasion) should be covered with a waterproof film dressing. Staff with dermatitis should report for evaluation as per local protocols.

Long ties and lanyards are also not recommended. Retractable (or similar) ID card holders are recommended in place of lanyards and should be cleaned regularly. If ties are worn they should be tucked in or secured.²

Why be Bare Below the Elbows?

Hand hygiene remains one of the most important measures in prevention of hospital acquired infections.

Some Hand Hygiene Culture Change Programs advocate a Bare Below the Elbows policy for all health care workers. Whilst the evidence to promote this as a formal policy is still developing, World Health Organisation (WHO) recommend that long sleeves be avoided. Long sleeves have been found to be contaminated with pathogens, and can impede appropriate hand hygiene.³

Research suggests wearing rings was associated with higher median skin organism counts; contamination with *Staphylococcus aureus*, gram-negative bacilli, or *Candida* species; and a stepwise increased risk of contamination with any transient organism as the number of rings worn increased.⁴ Other research suggests that a large proportion of health care workers' white coats may be contaminated with *S aureus*, including MRSA and that white coats may be an important vector for patient-to-patient transmission of *S aureus*. Although the wearing of white coats is not common in Queensland, other clothing which is also less regularly laundered such as jumpers, suit jackets etc. should be considered.⁵ Further evidence also suggests ties as a means of pathogenic transfer.⁶

Who should be Bare Below the Elbows?

All staff undertaking direct contact with patients or patient's environment.

When should staff be Bare Below the Elbows?

Whenever giving direct clinical care or in contact with patient's environment.

How can I be Bare Below the Elbows?

- remove bracelets, wrist watches and rings with stones or ridges when providing clinical care. A single flat ring/band may be worn but must not interfere with effective hand hygiene practice
- make sure clothing sleeves are above the elbow and do not interfere with effective hand hygiene practice
- keep nails short and clean and do not wear nail polish. Do not wear artificial nails (gel or acrylic) when having direct patient contact
- cover any breached skin (cuts, dermatitis or abrasion) with a waterproof film dressing. Staff with dermatitis should report for evaluation as per local protocols.
- avoid long ties and lanyards. Use the retractable (or similar) ID card holders which are recommended in place of lanyards and clean these regularly. If wearing ties ensure they are tucked in or secured.²

References

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