

TeamTalk Session Guide

Session No: IPC09

Infection Prevention and Control

Effective Hand Hygiene

Session aim	To help staff understand when handwashing is needed, when alcohol hand rub may be appropriate, and why effective hand hygiene is essential to safe care.
Suggested session length	12 to 15 minutes
Session structure	<ul style="list-style-type: none"> • 2 to 3 mins: Play Part 1. • 3 to 4 mins: Discussion. • 1 to 2 mins: Play Part 2. • 3 mins: Discussion. • 1 to 2 mins: Play Part 3. • 3 to 4 mins: Final discussion and close.

Set the scene

This session looks at effective hand hygiene in everyday care practice. It uses a short combination of Vyond and live-action clips to help staff think about when hands should be washed, when alcohol hand rub may be used, and what can get in the way of good hand hygiene.

Discussion after Part 1

1. Who should wash their hands?

Suggested answers:

- Care workers.
- Curses.
- Managers.
- Agency staff.
- Visitors where appropriate.
- The people we support, where possible and appropriate.

2. When should hands be washed?

Suggested answers:

- Before and after personal care.
- Before handling food.
- After using the toilet.
- After contact with bodily fluids.
- After removing gloves.
- When hands are visibly dirty.
- When moving between tasks or people where there is a risk of contamination.

3. When should hands be washed rather than alcohol hand rub used?

Suggested answers:

- When hands are visibly dirty.
- After contact with bodily fluids.
- After using the toilet.
- When soap and water are required by local policy.

4. When might alcohol hand rub be appropriate?

Suggested answers:

- When hands are not visibly dirty.
- Between tasks where quick decontamination is needed.
- In line with local infection prevention guidance.

Discussion after Part 2

5. What did you notice about the handwashing technique?

Suggested answers:

- Thorough coverage of all parts of the hands.
- Enough time spent washing.
- Attention to fingers, thumbs, and between fingers.
- Proper rinsing and drying.

6. Why does technique matter, not just intention?

Suggested answers:

- Poor technique may leave contamination behind.
- Quick or rushed washing may not be effective.
- Good technique helps reduce the spread of infection.

Final discussion after Part 3

7. What are the barriers to washing hands properly?

Suggested answers:

- Being busy.
- Rushing between tasks.
- Poor access to sinks or supplies.
- Skin soreness.
- Forgetting.
- Seeing it as less important during busy periods.

8. When might staff be tempted not to wash or clean their hands properly?

Suggested answers:

- When under time pressure.
- When moving quickly between residents.
- When gloves are wrongly seen as a substitute.
- When the task seems low risk.

9. What can we do to help make sure hand hygiene still happens?

Suggested answers:

- Make supplies easy to access.
- Keep expectations clear.
- Role model good practice.
- Challenge poor habits appropriately.
- Build hand hygiene into routine practice.
- Make sure staff understand why it matters.

10. How can we encourage other people to wash their hands?

Suggested answers:

- Polite reminders.
- Clear signage.
- Role modelling.
- Making products easy to access.
- Normalising hand hygiene as part of safe care.

Key learning points

- Effective hand hygiene is everyone's responsibility.
- Knowing when to wash hands and when alcohol hand rub may be appropriate is essential.
- Good technique matters as much as remembering to do it.
- Busy environments can create barriers, but safe practice still matters.
- Strong hand hygiene helps protect staff and the people they support.

Reflective question

What gets in the way of good hand hygiene in our setting, and what could we do to improve it?

Further support

- Local infection prevention and control policy.
- Hand hygiene guidance used in your service.
- Relevant infection prevention training and refreshers.