



## Acceptable Practices of Using Alcohol-Based Hand Rub

**Standard LS.02.01.30, EP 25** requires:

The organization meets all other Life Safety Code fire and smoke protection requirements related to NFPA 101-2000: 18/19.3.

and....

**Standard LS.03.01.30, EP 20** requires:

The organization meets all other Life Safety Code fire and smoke protection requirements related to NFPA 101-2000: 20/219.3.

### Background

Accredited Organizations are required by the National Patient Safety Goal NPSG.07.01.01 to comply World Health Organization (WHO) hand hygiene guidelines or Centers for Disease Control and Prevention (CDC) hand hygiene guidelines.

According to hand hygiene guidelines, when hands have no visible soil, they may be disinfected with either an alcohol-based hand rub (ABHR) or soap and water; however, when visible soiling is evident, soap and water must be used. Staff is encouraged to use ABHR when no soiling is present and hand hygiene guidelines recommend that all health care organizations make ABHR available for staff.

Several studies have confirmed the efficacy of ABHR and have demonstrated higher levels of compliance with hand hygiene guidelines when ABHR dispensers are located just outside of patients' rooms. In most organizations, accommodation of this kind would result in placement of dispensers in egress corridors. This is acceptable to The Centers for Medicare & Medicaid Services (CMS) and the National Fire Protection Association (NFPA).

### Acceptable Practices

The Joint Commission allows ABHR dispensers in corridors, provided the following conditions are met:

- Use of alcohol-based hand rub dispensers does not conflict with any State or local codes that prohibit or otherwise restrict the placement of alcohol-based hand rub dispensers in health care facilities.
- The dispensers are installed in a manner that minimizes leaks and spills that could lead to falls.
- The dispensers are installed in a manner that adequately protects against inappropriate access.
- The corridor width is 6 feet or greater and dispensers are at least 4 feet apart.
- The dispensers are maintained in accordance with dispenser manufacturer guidelines.
- The dispensers are not installed over or directly adjacent to an ignition source such as an electrical outlet or switch. Adjacent is defined as at least 6 inches from the center of the dispenser to an ignition source.
- In locations with carpeted floor coverings, dispensers installed directly over carpeted surfaces are permitted only in sprinklered smoke compartments.

### **ABHR Gel: Permissible Volume in a Single smoke Compartment**

Permissible volumes of an ABHR gel are as follows:

- Each smoke compartment may contain a maximum aggregate of 10 gallons (37.8 liters) of ABHR gel in dispensers and a maximum of 5 gallons (18.9 liters) in storage.
- The maximum individual dispenser fluid capacity is 0.3 gallons (1.2 liters) for dispensers in rooms, corridors, and areas open to corridors.
- The maximum size for individual dispensers in areas designated as suites of rooms is 0.5 gallons (2.0 liters).

### **ABHR Foam: Permissible Location and Volume**

Industry experts have indicated that small-quantity ABHR foam dispensers may be equivalent to ABHR gel. Therefore, pending further review, The Joint Commission will allow any ABHR foam installation that meets the location criteria stated above for ABHR gel. Volumes of ABHR foam are based on suppliers' recommendations and in no case exceed the permissible volumes for ABHR gel as defined above. In the event that subsequent testing demonstrates a safety concern relating to foam dispensers in egress corridors, The Joint Commission reserves the right to modify its position on the acceptability of such installations. In that event, previously installed dispensers would be subject to the newer restrictions; that is, they would not be "grandfathered," and noncompliant installations would have to be removed.

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