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World Hand Hygiene Day

Hand disinfectant availability at the point of care



hand hygiene

within your reach

we protect lives
worldwide

Smart placement, safe hands: dispenser and holder solutions for every need at the point of care

Exceptional hand hygiene in patient care starts with compliant hand disinfection practices.

But what key factors do studies identify as essential for ensuring reliable hand disinfectant use among healthcare professionals?

Visibility

According to a survey among nursing and medical staff, a dispenser is used more frequently when it is right **in the line of sight**.¹ Participants shared insights like, 'You walk inside and then you don't look behind you to see if there's a dispenser hanging there,' and, 'You automatically use the dispenser when you see it.' These responses underscore how crucial strategic placement of hand disinfectant dispensers is for ensuring compliance.

Number of hand disinfectant dispensers

A national Swiss study examined hospitals of various sizes to analyze the relationship between hand disinfectant consumption and the number of dispensers per patient bed. And the findings revealed a significant correlation, particularly in hospitals with more than 500 beds: **a sufficient number of dispensers clearly improves usage frequency**.²

To ensure basic dispenser availability, Aktion Saubere Hände (German Clean Hands Campaign) recommends **at least one dispenser per patient bed**.³



Smooth process, strong performance: hand hygiene made easy



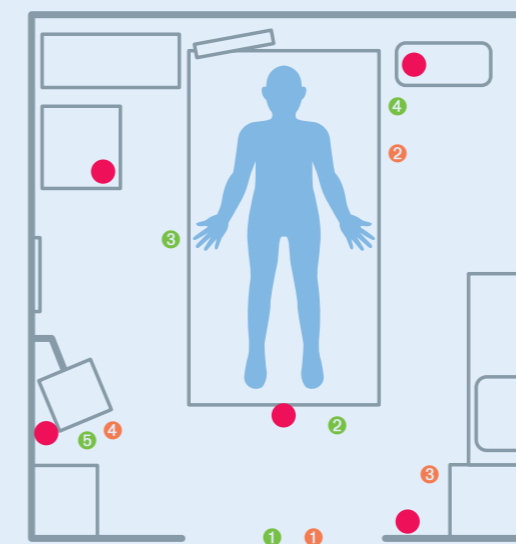
Placement in the workflow

Dispensers that **ergonomically integrate into daily routines** are used more frequently than those placed outside of direct work paths.¹ This is why the WHO (World Health Organization) recommends an **arm's length** as the optimal distance for **point-of-care placement**.⁴ An important factor in this context: the

workflows of physicians and nursing staff differ, as do the paths they take throughout their shifts.¹

For seamless workflow integration, task analysis should guide the **optimal placement of hand disinfectant dispensers along the work process**.

Different tasks—different routes



An observational study¹ reveals that the workflows of nursing and medical staff differ—not only in tasks but also in the routes they take. The following illustration depicts two exemplary movement patterns based on key navigational zones within a patient room:

A caregiver moves from the door (1) to the foot of the bed (2), then along the left side (3), to the right head end (4), to the computer (5), and then leaves the room.

A physician moves from the door (1) to the right side of the bed (2), then to a shelf (3), followed by the computer (4), and then exits the room.

The hand disinfectants have been strategically positioned as prime examples, perfectly aligned with these diverse workflows.

Reliability of placement

A crucial factor for ensuring reliable hand disinfectant use, according to a study, is that **dispensers are located where they are expected**.¹

When dispensers are placed in unconventional or hard-to-reach spots (e.g. behind the door), their usage drops significantly.





For the moments that matter: protection during aseptic tasks

Close to the bed— the placement most frequently used before aseptic procedures

Hand disinfection before aseptic tasks is the most crucial of WHO's five Moments for protecting patients, yet it has the lowest compliance rate.⁵ A study examined which dispenser placements are most commonly used before aseptic procedures.

The result: hand disinfectants placed close to the bed are the most frequently used for this essential hand hygiene moment.³

This finding highlights the importance of **distinguishing between different tasks** in the healthcare environment and providing tailored equipment with **optimally placed dispensers** and hand disinfectant bottles—ensuring both workflow ergonomics and protection for all healthcare professionals.

Practical tip:

Promoting compliance through process training and workflow placement

Harness the power of practical process training to seamlessly embed proper hand hygiene into patient care and treatment routines.

With targeted guidance—such as for aseptic dressing changes or handling peripheral venous catheters—you can train staff to adopt correct hand hygiene through everyday tasks. Complementing this, strategically placed hand disinfectants in alignment with the workflow ensure a more intuitive and effective approach to hand hygiene.

Sources

¹ Boog, M. C., Erasmus, V., de Graaf, J. M., van Beeck, E. A., Melles, M., van Beeck, E. F. (2013). Assessing the optimal location for alcohol-based hand rub dispensers in a patient room in an intensive care unit. *BMC Infectious Diseases*, 13, 510. <https://doi.org/10.1186/1471-2334-13-510>

² Kuster, S., Roth, J. A., Frei, R., Meier, C. A., Dangel, M., Widmer, A. F. (2021). Handrub dispensers per acute care hospital bed: a study to develop a new minimum standard. *Antimicrobial Resistance & Infection Control*, 10(1), 93. <https://doi.org/10.1186/s13756-021-00949-0>

³ Positionspapier der Aktion Saubere Hände; „Händedesinfektionsmittelspender – noch näher an die Patientinnen und Patienten“ (2023)

⁴ WHO Guidelines on Hand Hygiene in Health Care: First Global Patient Safety Challenge Clean Care Is Safer Care. Geneva: World Health Organization (2009)

⁵ Nationales Referenzzentrum, HD-Compliance-Referenzdaten 2023

Use disinfectants safely. Always read the label and the product information before use.

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