

NATIONAL AMBULANCE SERVICE
INFECTION PREVENTION & CONTROL GROUP (NASIPCG)

Bare Below Elbow Guidance

POSITION STATEMENT – March 2025 (V3.0)

Bare Below the Elbows: Confirmation of National Ambulance Service Infection Prevention and Control Consensus Position

This is a consensus statement developed by the IPC leaders in all UK NHS ambulance services

Background.

Healthcare-associated infections (HCAIs) can develop in all healthcare settings. The term HCAI covers a wide range of infections. HCAIs pose a serious risk to patients and staff as a result, infection prevention and control is a key priority for the NHS.

The transmission of micro-organisms that may cause a HCAI can occur directly via hands, or indirectly from the environment or via an environmental source (e.g., medical device). Evidence indicates that the hands of healthcare workers are a contributing factor in the acquisition and spread of infection. Hand hygiene can only be effective if the correct technique is used which includes the decontamination of the wrists. It is therefore imperative that staff comply with BBE to facilitate this.

Bare Below the Elbows in Practice.

Bare below the elbows (BBE); includes the removal of wrist watches (including those with washable straps), fitness trackers, stoned rings, wrist jewellery (string and metal bracelets), and no long sleeves, (sleeve protectors are worn as mitigation) long nails, nail extensions, gel polish and nail varnish (clear or coloured). Hand hygiene is not performed adequately if there is anything to impede the process which therefore puts others at risk by transmitting infections.

The practice of BBE is contained within the National Infection Prevention and Control Manuals that applies to all NHS organisations. The following points in this consensus must be reflected in all UK ambulance services policies to ensure consistency and compliance with legislation and regulatory requirements.

- Every ambulance service IPC policy / procedure and uniform policy must describe the requirement for BBE.
- ALL staff who have potential to be patient or public facing as part of their duties must be BBE.
- All ambulance service staff who are visiting the clinical environment (for example visiting staff at emergency departments) should adhere to BBE.



- The only exception to being BBE while in uniform is where health and safety requirements take precedence such as when long sleeves are required as part of personal protective equipment (PPE), i.e. wearing high visibility jackets, air ambulance suit or other organisation issue PPE or during inclement weather. Sleeve protectors must be worn as appropriate in these situations to prevent jacket sleeves becoming contaminated. Where possible and if safe to do, long sleeved jackets should be removed or sleeves rolled up to mid forearm to allow effective hand hygiene to take place.
- Managers and senior leaders should role model good practice, i.e. maintain a clean environment, demonstrate good hand hygiene and BBE.
- Managers and senior leaders must be active in ensuring staff adhere to their organisation's BBE policy and take appropriate steps if there is repeated non-compliance.
- IPC teams within organisations are required to provide education to all levels of staff on the importance of hand hygiene and rationale for adherence to BBE.
- IPC teams will oversee regular hand hygiene auditing or ensure auditing is taking place, which will include the requirement for staff to be BBE.

Any derogations from this consensus statement must only be in place following the completion of a local risk assessment and shared with NASIPCG for reference in reviewing the consensus statement.

Review:

BBE consensus statement will be reviewed every three years to ensure it remains aligned with current best evidence-based practices. However, if new evidence or guidance is issued sooner by the UK four nations' public health bodies, an earlier review will be undertaken to incorporate the latest recommendations to ensure maintenance of the standards of infection prevention and control within the ambulance service.

References.

A Multifaceted Approach to the "Bare below the Elbow" Concept and Hand Hygiene Compliance among Healthcare Professionals—Multicenter Population-Based Study (2023)
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10002297/>

Health and Social Care Act (2008) (updated December 2022) code of practice on the prevention and control of infections: [Health and Social Care Act 2008: code of practice on the prevention and control of infections - GOV.UK](#)

Indications and Techniques for Hand Hygiene. Literature review (2023).
<https://www.nipcm.hps.scot.nhs.uk/media/2081/2023-01-26-hh-indications-and-techniques-v20.pdf>

National IPC manual for England:

[NHS England » National infection prevention and control manual \(NIPCM\) for England](#)

National IPC manual for Northern Ireland:

[NI Infection Control Manual](#)



National IPC manual for Scotland:

[National Infection Prevention and Control Manual: Home](#)

National IPC Manual for Wales:

[NIPCM - Public Health Wales](#)

NHS Ambulance guidelines from the Department of Health : [New-DH-Guidelines-Reducing-HCAIs.pdf \(aace.org.uk\)](#)

NICE guidelines: Healthcare associated infections: prevention and control in primary and community care (March 2012) (Updated August 2017). The approach supports the wider health economy in its drive to reduce the risk of Healthcare Associated Infections and enables staff to effectively decontaminate their hands. [1 Guidance | Healthcare-associated infections: prevention and control in primary and community care | Guidance | NICE](#)

Uniforms and Workwear Guidance: [Report template - NHSI website \(england.nhs.uk\)](#) 2020

This list is not exhaustive.

Further information can be sought from national and regional IPC leads and your local organisation IPC leads.

Thank you for your cooperation.