

# Infection Prevention & Control Audit Tool: Hand Hygiene



**INFECTION CONTROL  
ASSESSMENT &  
RESPONSE**

**Facility name:** \_\_\_\_\_

**Unit:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Observer/auditor:** \_\_\_\_\_

**Start time:** \_\_\_\_\_

**End time:** \_\_\_\_\_

**Directions:** Place a single tally mark “|” for each ‘Hand hygiene opportunity’ observed. Under ‘Opportunity successful’, place a single tally mark “|” if successful and leave blank if not successful. In the ‘Notes’ column, record relevant information such as any missed hand hygiene opportunity (if applicable). Use a separate line for each role/discipline observed. **See backside for additional audit measure information.**

**\*Role/Discipline Key:** P = Physician/Independent Practitioner, N = Nurse, T = Patient Care Technician, D = Dietary, EVS = Environmental Services, R = Rehabilitation, SW = Social Worker, O = Other (e.g., Visitor, Volunteers)

Role/Discipline*	Hand hygiene opportunity**	Opportunity successful	Notes
Example: N			Before touching a patient/resident; Before clean/aseptic

To calculate the adherence rate, divide the total number of successful opportunities by the total number of hand hygiene opportunities and multiply by 100. Using the example above,  $2/5 \times 100 = 40\%$ .

Total number of successful opportunities:	_____	x 100 =	_____	%
Total number of hand hygiene opportunities:	_____			
				Adherence rate

**Hand Hygiene Opportunities** (Based on World Health Organization’s “[My 5 Moments for Hand Hygiene](#)”.)

Type of opportunity**	Examples
1. Before touching a patient/resident	<ul style="list-style-type: none"> <li>• Prior to entering a patient/resident care area or room</li> <li>• Prior to contact with a patient/resident</li> <li>• Prior to assisting a patient/resident</li> </ul>
2. Before clean/aseptic procedures	<ul style="list-style-type: none"> <li>• Prior to performing a treatment</li> <li>• Prior to administering medications</li> <li>• Prior to manipulating indwelling devices</li> </ul>
3. After body fluid exposure/risk	<ul style="list-style-type: none"> <li>• After performing point of care testing</li> <li>• After performing wound care or dressing changes</li> <li>• After removing gloves</li> </ul>
4. After touching a patient/resident	<ul style="list-style-type: none"> <li>• After transferring a patient/resident</li> <li>• After assisting a patient/resident</li> </ul>
5. After touching patient/resident surroundings	<ul style="list-style-type: none"> <li>• After assisting a patient/resident</li> <li>• After touching items in the patient/resident room (e.g., privacy curtain, call bell)</li> </ul>

**Hand Hygiene Policy** (Enter healthcare facility policy details below)

**Hand Hygiene Supply Checklist**

Check for the availability of the following	Available	Comments
Sufficient supply of alcohol-based hand sanitizer	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Sufficient supply of soap at handwashing stations	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Sufficient supply of paper towels at handwashing stations	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Visible and easy access to handwashing sinks	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Visible and easy access to alcohol-based hand sanitizer	<input type="checkbox"/> Yes <input type="checkbox"/> No	