



Name of Facility: _____

Date: _____

Hand Hygiene Observation Audit Tool

Hand Hygiene Opportunity	Hand hygiene		What was the opportunity observed? (☑ 1 per line only)				
	Discipline (if known)	Opportunity Successful ✓ or 0					
Example	N	✓	<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input checked="" type="checkbox"/> after touching patient surroundings
	T	0	<input checked="" type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH1.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH2.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH3.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH4.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH5.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH6.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH7.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH8.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings room
HH9.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH10.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH11.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH12.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH13.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings

Discipline: P=physician, N=nurse, T=technician, S=student, W=social worker, V=Visitor, O=other, U=unknown

✓ =Opportunity Successful 0= Missed opportunity

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HH14.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH15.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH16.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH17.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH18.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH19.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH20.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH21.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH22.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH23.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH24.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings
HH25.			<input type="checkbox"/> prior to touching patient	<input type="checkbox"/> before aseptic task	<input type="checkbox"/> after body fluid exposure	<input type="checkbox"/> after touching patient	<input type="checkbox"/> after touching patient surroundings

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 ✓ =Opportunity Successful 0= Missed opportunity

Successful _____
 # Opportunities _____
 % Adherence _____%

Note during this Hand Hygiene Observation Session

	Yes	No	Comments
HH26. There is visible and easy access to hand washing sinks or hand sanitizer where most needed			
HH27. There is a sufficient supply of soap at hand washing stations			
HH28. There is a sufficient supply of paper towels at hand washing stations			
HH29. There is sufficient supply of alcohol-based hand sanitizer (e.g. no empty containers)			