

Guidelines for Spot audit tool, Hand Rub/Moisturiser audit tool and Community Workers Hand Hygiene audit tool.

These audit tools are based on criteria that are important to help maintain and sustain your Hand Hygiene program.

- These audit tools are for internal use only.
- HHA does not require this information.
- The results of each audit should be used as a base for your local education.
- The results should be feedback to the area manager with actions required.
- A follow up audit is recommended to ensure that all recommendations have been actioned.
- Any subsequent audit should allow time for changes to be implemented.
- This audit can be given to the ward IC liaison nurse to complete or the HH project person can do.
- Check ward/area for the placement of other bottles on ABHR and cleaning wipes e.g. trolleys, treatment room, entrance ways
- It's important to note if other hand hygiene products are being used by staff (as often products seem to filter into facilities unnoticed).
- These forms are designed to be used as a spot audit tool, so arriving unannounced will get a "truer" reading of what's happening in your facility.
- On arrival to each ward/area inform manager of the audit to be undertaken and where possible encourage a permanent staff member to accompany you.