



This audit tool is for internal use only. 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.

This audit can given to the ward IC liaison nurse to complete or the HH project person can do.

Also check ward/area for the placement of other bottles on ABHR 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 in unnoticed).

This form is designed to be used as a spot audit tool, so arriving unannounced will get a "truer" reading of what's happening in your facility.

HHA does not require this information.

Issues identified:

Recommendations:

Action Required:

Follow up audit required: yes/no

Reported to: