STANDARD OPERATING PROCEDURE

Hand Hygiene SOP

Document no.	SOP-HLC-002
Revision	1.0
Owner	Infection Prevention Coordinator
Effective date	September 15, 2026
Review cycle	Every 12 months

1. Purpose

To reduce the spread of infection by making sure every staff member cleans their hands correctly at the right moments, and that compliance is monitored and corrected.

2. Scope

Applies to all clinical and support staff who have direct or indirect contact with patients, equipment or patient surroundings. Surgical hand scrub is covered by a separate SOP.

Definitions

Point of care	The place where a patient, staff member and care or treatment involving contact with the patient come together.
Alcohol-based hand rub	A gel or foam sanitizer used to clean visibly clean hands when soap and water are not required.
Hand hygiene moment	A specific time during care, such as before touching a patient, when hands must be cleaned.

3. Responsibilities

Clinical Staff Member	Performs hand hygiene at every required moment during patient care and reports broken or empty dispensers.
Charge Nurse	Coaches staff in real time, reinforces technique and reviews unit audit results at handover.
Infection Prevention Coordinator	Runs the audit program, tracks compliance rates and plans refresher training.
Environmental Services Technician	Restocks hand hygiene stations and reports empty, damaged or malfunctioning dispensers.

RACI matrix

Activity	Clinical Staff Member	Charge Nurse	Infection Prevention Coordinator	Environmental Services Technician
Perform hand hygiene at point of care	R/A	I	I	-
Coach and correct missed hand	I	R/A	C	-

Activity	Clinical Staff Member	Charge Nurse	Infection Prevention Coordinator	Environmental Services Technician
hygiene				
Stock and inspect hand hygiene stations	I	-	C	R/A
Conduct compliance audits	I	C	R/A	-

R = Responsible, A = Accountable, C = Consulted, I = Informed

4. Materials and PPE

Materials, tools and systems

- Alcohol-based hand rub dispensers at point of care
- Soap and water handwashing stations
- Disposable paper towels
- Skin moisturizer approved for use with gloves
- Hand hygiene audit form or mobile audit app
- Compliance dashboard or tracking log

Personal protective equipment

- Disposable nitrile or vinyl gloves

5. Procedure

Step	Task	Owner	Done
5.1	**Identify when hand hygiene is required** Clean your hands before touching a patient, before a clean or aseptic task, after any risk of exposure to body fluids, after touching a patient, and after touching the patient's surroundings.	Clinical Staff Member	☐
5.2	**Remove jewelry and prepare** Remove rings, watches and bracelets that interfere with cleaning, and keep nails short and free of artificial extensions per facility policy.	Clinical Staff Member	☐
5.3	**Choose the right method** Use alcohol-based hand rub for most moments unless hands are visibly soiled, or the patient is on precautions requiring soap and water for spore-forming organisms. **Warning:** Alcohol-based rub does not reliably remove spores. Use soap and water when caring for a patient on precautions for a spore-forming organism.	Clinical Staff Member	☐
5.4	**Perform the alcohol-based hand rub** Apply enough product to cover all surfaces of both hands, then rub palms, backs of hands, between fingers, fingertips and thumbs until hands are completely dry, for at least 20 seconds or as directed by the product label. **Checkpoint:** Hands are rubbed until completely dry; no residue is wiped off early.	Clinical Staff Member	☐
5.5	**Perform soap-and-water handwashing** Wet hands, apply soap, scrub all surfaces including between fingers and under nails for at least 20 seconds, rinse under running water, and dry with a disposable towel, using the towel to turn off the faucet.	Clinical Staff Member	☐

Step	Task	Owner	Done
5.6	**Don gloves only after hands are dry** Put on gloves only after hands are completely dry from hand hygiene, and select the correct size and type for the task. **Warning:** Gloves are not a substitute for hand hygiene. Clean hands before donning and immediately after removing gloves.	Clinical Staff Member	☐
5.7	**Clean hands between tasks and glove changes** Remove gloves and clean hands before moving from a contaminated task to a clean one, and between patients even during the same encounter if care tasks change.	Clinical Staff Member	☐
5.8	**Care for skin** Apply facility-approved moisturizer during breaks to prevent cracked skin, and report any dermatitis, cuts or skin breakdown to your supervisor before the next shift.	Clinical Staff Member	☐
5.9	**Coach and correct in real time** When a missed or incorrect hand hygiene moment is observed, the charge nurse corrects it on the spot in a respectful, non-punitive way and documents the coaching if it recurs. **Checkpoint:** Real-time corrections are logged so repeated issues can be identified at the unit level.	Charge Nurse	☐
5.10	**Stock and inspect hand hygiene stations** Check dispensers on rounds, refill or replace empty or malfunctioning units immediately, and report any station that cannot be fixed on the spot. **Checkpoint:** No hand hygiene station on the unit is empty or non-functional at the end of the shift.	Environmental Services Technician	☐
5.11	**Conduct compliance audits** Perform scheduled and unannounced direct observation audits using the standard audit form, covering a representative sample of moments across shifts and roles.	Infection Prevention Coordinator	☐
5.12	**Share results and plan training** Post unit-level compliance rates, review trends with unit leadership monthly, and schedule refresher training for units or individuals below the facility's target.	Infection Prevention Coordinator	☐

6. Quality checks

- Direct observation audits are completed on every unit at least monthly.
- Hand hygiene compliance rate meets or exceeds the facility's target.
- No hand hygiene station is found empty during environmental rounds.
- New hires demonstrate correct technique before working unsupervised.

7. Records

- Hand hygiene compliance audit results
- Real-time coaching log
- Station inspection and restocking log
- Training and competency sign-off records

8. KPIs

- Hand hygiene compliance rate by unit

- Number of missed opportunities corrected in real time
- Dispenser downtime
- Healthcare-associated infection rate trend

9. Common mistakes

- Applying alcohol-based rub and wiping it off before hands are dry.
- Wearing the same pair of gloves between patients without changing them.
- Skipping hand hygiene after removing gloves because hands look clean.
- Using alcohol-based rub instead of soap and water for a patient on spore precautions.

10. Revision history

Revision	Date	Description	Reviewed by
1.0	September 15, 2026	Initial release	Ilia Pirozhenko

Approval

Prepared by	Approved by	Date

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