



**Orange County**

## **HAND HYGIENE AND NAIL POLICY DOCUMENTATION**

Date:

I have been informed of the Kaiser Permanente Policy about hand hygiene and nails. The policy establishes hand washing guidelines and prohibits long nails, artificial nails, nail tips, silk wraps and nail polish that is chipped and is more than 4 days old for all persons who provide direct patient care. I understand that non-compliance with this requirement may lead to corrective action.

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Employee Signature

## **ACKNOWLEDGEMENT OF SMOKE FREE ENVIRONMENT**

Date:

I understand that Kaiser Permanente prohibits smoking on any Kaiser Permanente campus. I understand that non-compliance with this requirement may lead to corrective action.

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Employee Signature