

Facility Name: \_\_\_\_\_ Date: \_\_\_\_\_

## STAFF Skills Assessment: CHG Cloth Observation Checklist

### Individual Giving CHG Bath

Please indicate who performed the CHG bath.

Nursing Assistant (CNA)     Nurse     LVN     Other: \_\_\_\_\_

### Observed CHG Bathing Practices

Please check the appropriate response for each observation.

- Y     N    Patient received CHG cloth bathing handout
- Y     N    Patient told that bath is a no rinse cloth that provides protection from germs
- Y     N    Provided rationale to the patient for not using soap at any time while in unit
- Y     N    Massaged skin *firmly* with CHG cloth to ensure adequate cleansing
- Y     N    Cleaned face and neck well
- Y     N    Cleaned between fingers and toes
- Y     N    Cleaned between all folds
- Y     N     N/A    Cleaned occlusive and semi-permeable dressings with CHG cloth
- Y     N     N/A    Cleaned 6 inches of all tubes, central lines, and drains closest to body
- Y     N     N/A    Used CHG on superficial wounds, rash, and stage 1 & 2 decubitus ulcers
- Y     N     N/A    Used CHG on surgical wounds (unless primary dressing or packed)
- Y     N    Allowed CHG to air-dry / does not wipe off CHG
- Y     N    Disposed of used cloths in trash /does not flush

### Query to Bathing Assistant/Nurse

1. How many cloths were used for the bath? (1 cloth set = 3 cloth packs with 2 cloths each, 1 single cloth pack = 2 cloths)

\_\_\_\_\_

2. If more than 1 cloth set (6 cloths) was used, provide reason.

\_\_\_\_\_

3. Do you reapply CHG after an episode of incontinence has been cleaned up?

\_\_\_\_\_

4. Are you comfortable applying CHG to superficial wounds, including surgical wounds?

\_\_\_\_\_

5. Are you comfortable applying CHG to lines, tubes, drains and non-gauze dressings?

\_\_\_\_\_

6. Do you ever wipe off the CHG after bathing?

\_\_\_\_\_