

Nursing Home Name: \_\_\_\_\_ Date: \_\_\_\_\_

## STAFF Skills Assessment:

### CHG Liquid Basin Bath Observation Checklist

INSTRUCTIONS: Please complete for THREE different staff every week

#### 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    Resident told that the basin bath is “no rinse” and CHG protects from germs
- Y     N    Resident told that soaps and lotions from home can prevent CHG from working
- Y     N    Correctly diluted CHG for basin bath ( ½ cup water, ½ cup 4% CHG liquid)
- Y     N    Massaged skin *firmly* with disposable wipes to ensure adequate cleansing
- Y     N    Cleaned face and neck well, avoiding eyes and ears
- Y     N    Cleaned between fingers and toes
- Y     N    Cleaned between all skin folds
- Y     N     N/A    Cleaned occlusive and semi-permeable dressings with CHG disposable wipes
- 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 wipes in trash /did not flush

#### Query to Bathing Assistant/Nurse

1. Were at least 6 cloths used to perform the basin bed bath?

\_\_\_\_\_

2. How much water did you add to ½ cup of CHG?

\_\_\_\_\_

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?

\_\_\_\_\_