

Nursing Home Name: _____ Date: _____

RESIDENT Self-Bathing Skills Assessment:

CHG Showering

Please record resident responses after the resident showered with CHG liquid.

Questions

1. Were you provided a handout with instructions on how to apply the CHG liquid in the shower?
 Y N
2. Were you told that CHG kills germs better than regular soap and water?
 Y N
3. Did you soap up twice with CHG before rinsing?
 Y N
4. Were you told NOT to use other bathing soaps or lotions while in this nursing home?
 Y N
5. Were you told to bathe or shower with CHG while in this nursing home?
 Y N
6. Did you or an assistant clean your lines, tubes, and/or drains with a CHG cloth after showering?
 Y N N/A
7. Did you or an assistant clean your wounds with a CHG cloth after showering?
 Y N N/A