

SHOWER Skills & Barrier Assessment

Assessment

Date: ___/___/___ Staff Initials _____ Resident Room # _____ Shower START time: _____ AM/PM STOP time: _____ AM/PM

Observed Cleansing Practices

Note: For each observation, if "N" provide observed reason for failure:

1 – Timing issue (rushed, too many demands, etc.)
2 – Resident issue (refused, combative, etc.)

3 – Training issue (unaware of problem, uncertain how to approach)
4 – Other (please describe)

If "No", provide # and likely explanation for failure:

- Y N N/A Devices/wounds waterproofed? _____
- Y N Sufficient lather created? _____
- Y N Massaged skin *firmly* _____
- Y N Cleaned hair _____
- Y N Cleaned face/neck well, avoided eyes/ears _____
- Y N Cleaned between all skin folds _____
- Y N Cleaned between fingers/toes _____
- Y N N/A Cleaned open wounds _____
- Y N N/A Cleaned over dressings that were not wrapped _____
- Y N Cleaned female or male genital area well _____
- Y N Are all parts of the skin towel-dried after the shower? _____
- Y N Wipes/cloths replaced with new ones when soiled _____
- Y N Disposed of used wipes in trash/did not flush _____
- Y N Resident complained about being cold during the shower _____

Wrapped Devices & Wrapped Wounds

- Y N N/A After shower, removed waterproofing? _____
- Y N N/A Notified treatment nurse for cleaning _____
- Y N N/A Cleaned occlusive/semi-permeable dressings _____
- Y N N/A Unwrapped devices/cleansed _____
- Y N N/A Cleaned 6 inches of all tubes/central lines/drains closest to body _____
- Y N N/A Cleaned superficial wounds/rash/stage 1 & 2 decubitus ulcers _____
- Y N N/A Cleaned surgical wounds (unless primary dressing or packed) _____

Comments on Showering Processes

Query to Bathing Assistant

1. If your resident has a wrapped device or wound, how would you ensure that it gets cleaned during a shower?

Lines/Drains/Tubes _____

Wounds _____

Dressings _____

2. How many cloths do you usually bring for a shower? What type? _____

3. What part of your bathing style or skills are you most proud of and why?

4. What bathing advice would you share with a new staff member that you wish you had known earlier? How did you learn this?

5. How many years have you worked as a CNA in a nursing home? _____