Quality Care Senior

FACILITY WORKSHEET · CHANGE-IN-CONDITION VISIBILITY

Quick-Scan Change-in-Condition Checklist

A six-item handoff sheet for support staff: what changed, when, in what context, and who was told.

This checklist supports a handoff. It does not replace assessment, clinical documentation, or emergency procedures. Adapt it to facility policy, documentation systems, and role-specific responsibilities. For a sudden or urgent change, follow your immediate escalation policy rather than waiting to complete this sheet.

Resident reference	Observed by	Routed to
Use the facility identifier required by policy	Role · shift · date	Licensed contact and time notified

The six prompts

Prompt	What to write	Recorded
1. What changed from baseline?	Describe the specific difference from the resident's usual status, not a label.	☐
2. When was it first observed?	Date and time, and whether it has happened before.	☐
3. What was happening at the time?	Activity, location, and any relevant context.	☐
4. What facts were seen or heard?	Observable details in plain language, no conclusions.	☐
5. Who was notified, and when?	Follow the facility's escalation protocol and record the time.	☐
6. What follow-up was directed?	The response received and any next steps required by policy.	☐

PAGE TWO · WORDING AND REVIEW

Describe it, do not label it

Say this	Not this
At lunch, the resident set down the fork and did not resume eating after a prompt.	The resident was difficult.
The resident asked where the dining room was twice while walking from the room.	The resident was confused.
The resident used a different word for a familiar item during the activity.	The resident is getting worse.

Closing the loop on what was noticed

What the licensed team should be able to answer

- What changed, compared with this resident's established baseline?
- When was it first observed, and by whom?
- Who received the report, and how quickly?
- What direction was given, and what follow-up is documented?

Local measures worth tracking

- **Reporting completeness:** share of reports that include timing, context, and observed facts.
- **Follow-up time:** elapsed time between an observation and its handoff to the appropriate licensed contact.
- **Staff utilization:** time spent locating, clarifying, or repeating information across shifts.
- **Care transitions:** whether concerns, notifications, and follow-up travel with the resident when needs change.

Base any measure on your own records. Do not assign a made-up dollar value to a gap.

Who does what: support staff observe, record facts, and report through the established channel. Licensed staff assess and direct clinical next steps. Questions about **The Alzheimer's Family Care Kit** or Shared Services staffing support can go to the contact line below. The kit is educational and does not diagnose.

Contact Quality Care Senior Today
678-996-6929 · qualitycareseniorsittingservices.com/contact

This worksheet does not diagnose. Everyday changes can have many causes, and only a health professional can evaluate them. The Alzheimer's Family Care Kit is educational and does not diagnose.