

## Transition Checklist

- \_\_\_\_\_ Receive demographic information including eligibility for your site
- \_\_\_\_\_ Review care needs with current care staff, review notes and history
- \_\_\_\_\_ Talk to prior care staff and family
- \_\_\_\_\_ Review diagnoses, DNR, advanced directive
- \_\_\_\_\_ Personally meet and observe potential resident's abilities
  - Transfers \_\_\_\_\_
  - Ambulation \_\_\_\_\_
  - Toileting \_\_\_\_\_
  - Dressing \_\_\_\_\_
  - Bathing \_\_\_\_\_
  - Grooming \_\_\_\_\_
  - Eating/Diet \_\_\_\_\_
  - Respiratory, Visual, Hearing & Skin Care \_\_\_\_\_
  - Mental Status \_\_\_\_\_
  - Equipment Needs \_\_\_\_\_
- \_\_\_\_\_ Determine your staff's ability to meet those needs
- \_\_\_\_\_ Consider the appropriateness of the mix of residents and level of needs
- \_\_\_\_\_ Contact case manager and report household member change
- \_\_\_\_\_ Check on pay source, discuss costs, expectations and moving process
- \_\_\_\_\_ Review equipment needs, home visit with PT/OT evaluation if possible
- \_\_\_\_\_ Get medication list, incontinence products list and equipment list and determine
  - Who is ordering and delivering the prescriptions \_\_\_\_\_
  - Who is ordering and delivering incontinence prod. \_\_\_\_\_
  - Who is ordering and delivering equipment needed \_\_\_\_\_
  - When are the next appointments, PT/OT... \_\_\_\_\_
  - Who is referring for home health or other services \_\_\_\_\_
- \_\_\_\_\_ Get discharge orders with appropriate definition of needs
- \_\_\_\_\_ Get releases, necessary paperwork completed with family/client, finding out favorites, habits (see Resident Information and Discharge Form ideas)