

Morning Clinical Meeting: Medical Record and Care Plan Review

As a partner to senior living and long-term care organizations, Marsh McLennan Agency promotes the use of best-practices in resident care. Holding a morning clinical meeting can help control claims, streamline communication, ensure long-term success for teams and residents. Below is a sample check list for use during medical record and care plan reviews.

New Admission/Readmission (Review of Medical Record and Care Plan)

	Resident safety risks identified (e.g., fall risk, skin injury risk, elopement risk, behavioral risk, safety compliance risk $-$ e.g., ability and compliance with using the call light)	
	Resident clinical status – including new and pending orders, acute conditions	
	Interventions in place that support clinical status and identified resident risks	
	Care Plan in place with realistic goals (minimize, manage, reduce the risk of falls, skin injuries, elopement, etc)	
	Actions needed for the first 48/72 hour Care Plan	
	Status of provider and family communication	
	Documented resident and family teaching	
Incident with Injury (Review of Medical Record and Care Plan)		
	Brief, objective documentation of the incident	
	Clinically pertinent documentation of resident condition and description of injury	
	Documentation of provider communication	
	Documentation of family notification	
	New physician/provider orders initiated	
	Incident report completed	
	Incident investigation started	
	Interventions in place that support clinical status and identified resident risks	
	Care Plan in place with realistic goals (minimize, manage, reduce the risk of falls, skin injuries, elopement, etc)	
	72-hour charting alerts in place	

Change in Condition (Review of Medical Record and Care Plan)

Clinically pertinent documentation of resident condition (structured communication is recommended e.g., SBAR)
Documentation of provider communication
Documentation of family notification
New provider/physician orders initiated
Interventions in place that support clinical status and identified resident risks
Care Plan in place with realistic goals (minimize, manage, reduce the risk of falls, skin injuries, elopement, etc)
72-hour charting alerts in place

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