

Wellness checklist for people living in nursing and residential care homes

Important: In the event of a medical emergency, sudden deterioration or when hospitalisation is indicated, the usual communication and escalation process should continue. If the checklist prompts an alert – escalate to GP, Acute Care @Home, etc. requesting assistance, using SBAR*
Please complete all sections of this Screening Tool. Please note Clinical Observations need recorded twice daily

Resident's name: _____

Week commencing	MON		TUES		WED		THURS		FRI		SAT		SUN														
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM													
Clinical observations**														Measurement													
Temperature: Normal temp: 36.1- 37.7°C <i>Set alert – Temperature less than 36°C or greater than 37.7°C</i>																											
Pulse: Normal pulse rate: 51- 90 beats per minute (bpm) <i>Set alert – Pulse rate below 51 bpm or greater than 90 bpm.</i>																											
Oxygen level:*** Normal oxygen levels: 96% or above <i>Set alert – Oxygen level below 96%</i> <i>Baseline for this resident =</i>																											
Activities of daily living														(✓ YES or X NO)													
Has the resident a new persistent cough, or worsening of an existing cough in the past 24 hours?																											
Has the resident had a new or worsening shortness of breath in the past 24 hours, eg unable to speak more than a few words, unable to do all usual daily activities?																											
Has there been a loss of sense of smell or taste?																											
Is the resident more reluctant than usual to eat and/or drink in the past 24 hours?																											
Has the resident had a sudden onset of confusion or has their usual level of confusion increased in the past 24 hours?																											
Has the resident's behaviour changed in the past 24 hours, eg agitated, irritable, withdrawn?																											
Does the resident have an increased level of tiredness and fatigue in the past 24 hours, eg weariness, reduced alertness?																											
Has the resident had any stomach or bowel changes in the past 24 hours, eg nausea, vomiting, diarrhoea?																											
Has the resident passed less urine than normal in the past 24 hours?																											
Does the resident have any new or increased levels of aches or pain in the past 24 hours, eg sore throat, abdominal pain, headache, muscle aches?																											
Has the resident's skin colour changed in the past 24 hours, eg paler than usual, blotchy red-purplish areas, blue tinge around nose and mouth?																											
Has the resident had any falls in the past 24 hours?																											
Are you worried that the resident is unwell today?																											
<i>Set alert = responses indicate that this person is unwell and a further assessment is required – escalate to GP, Acute Care @Home, etc. requesting assistance, using SBAR*</i>																											

* SBAR is a well-recognised set of prompts that promote assertive and effective communication by framing information around the Situation, Background, Assessment and Recommendation. Refer to Combine9 tool.
 **Clinical observations in residential care homes may be undertaken by care staff who have been suitably trained. Assistance will be provided to residential care homes during the COVID-19 pandemic to support clinical observations.
 *** Note: the baseline oxygen level for people with respiratory conditions may be lower than 96%, so a baseline reading will need to be established for each individual.