QUALITY IMPROVEMENT: OFFERING CHOICE TO RESIDENTS

Week of_____   Observer_____

OFFERING CHOICES TO RESIDENTS Resident Name:_____ Room/Unit:_____	Observation		
	Date:		
	Time:		
	Present	Absent	N/A
A) AIDE APPROACH			
Knock on door			
Talk to resident			
Greet by Name			
B) OUT OF BED			
offers choice of *when* resident wants to get out of bed			
C) TOILETING ASSISTANCE/ INCONTINENCE CARE			
offers choice of *when/ where* resident want toileting/incontinence care			
D) DRESSING			
offers choice of *what* resident wants to wear			
offers choice of *when* resident wants to get dressed			
E) DINING LOCATION			
offers choice of *where* resident wants to eat			
F) Other Active Choices			
Comments:			

N/A= resident is independent for ADL or you did not observe

Comments could be any other type of choice offered