HealthCap
RISK MANAGEMENT SERVICES

DOCUMENTATION DURING COVID-19

Documentation is an ongoing means of communication among healthcare professionals. The medical record serves as the legal document in the event of a negative outcome/claim. Thorough documentation is critical to the facility's success to support proper assessment and care and services were provided to the resident.

Just the Facts:

Factual - make sure all entries represent the facts
Actual - record all entries as they happen, with the date and time of the entry
Complete - make sure all entries are complete
Timely - Document all events as close as possible to the time they occurred
Sensible - take care that all entries make sense and the reader understands what was written

Medical Record Documentation:

- All notifications to the physician; include the physicians name and the date/time of the notification.
- All notifications to the legal decision maker, include the person's name and the date/time of the notification.
- Utilize the nursing process when documenting:
    - Assessment of the resident
    - Diagnosis - nursing diagnosis such as SOB, pain, etc.
    - Plan - what is the plan based on the assessment such as notify the physician etc.
    - Implementation - implement the plan such as administer a medication, transfer to the hospital, etc.
    - Evaluation - evaluate the resident after the plan is implemented.

Facility Documentation

- Development and updates to policies
- Dates of Implementation of interventions to prevent the spread of infection:
    - When non-essential visitors were restricted
    - Education to staff and residents on policy changes
    - Communal activities were put on hold and individual activities were initiated
    - Screening of staff and essential HCP was implemented
    - Mandatory, universal use of face masks
    - Communications to residents and, family members and staff
    - Challenges faced by the facility such as shortages of PPE and efforts taken by the facility to solve those challenges.
    - Notifications provided to, or communications with, government entities, including local health departments, state licensing agencies, etc., regarding COVID-19. Include the name and title of the individual communication occurred with.

REV. 4/30/20