



Nursing Audit Checklist

26 Apr 2023 / Joan Florence

Complete

Score	0 / 0 (0%)	Flagged items	2	Actions	1
Audit on	26 Apr 2023 10:30 PST				
Prepared by	Joan Florence				
Location	9408 San Juan Ave South Gate, CA 90280, United States				
Room/Unit #	Burn unit				
Admissions date	22 Apr 2023 00:00 PST				

Flagged items & Actions

2 flagged, 1 action

Flagged items

2 flagged, 1 action

Nursing Audit / Medical Record

Proper evaluation dates and follow-ups.

No

Found that patient should have been re-evaluated this morning but the appointment was missed. Assigned Head Nurse Minni to address this miss.

To do | Assignee: SafetyCulture Staff | Priority: Low | Due: 3 May 2023 10:35 PST | Created by: SafetyCulture Staff

Evaluation

Nursing Audit / Special Needs

Water at bedside.

No

Patient complained that the bedside water has not been replaced since last night.

Other actions

0 actions

Nursing Audit	2 flagged, 1 action
Medical Record	1 flagged, 1 action
Admission assessment is fully completed, signed by RN (co-sign).	Yes
All other assessments done: pain, fall, skin, etc.	Yes
Treatment admin. records signed for.	Yes
Medication admin. records (MAR) signed.	Yes
Immunizations documented properly/done.	Yes
Weights charted monthly per order.	Yes
Does the documentation demonstrate:	
• Skilled observation and monitoring	Yes
• Assessment	Yes
• Progress notes	Yes
• Other	No
Is the care plan:	
Accurate and up to date?	Yes
Measurable goals?	Yes
Relevant problems?	Yes
Specific problems or potential problems identified and planned interventions identified?	Yes
Indication of daily or more frequent monitoring of vital signs, lung sounds, bowel sounds, skin condition, nutritional status, hydration, mental status, and mobility as it relates to instability or possible changes in condition to help identify if changes in nursing care are indicated.	Yes
Proper evaluation dates and follow-ups.	No

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Evaluation

Proper signatures on care plan.

Yes

Care planning reflects MDS and other assessments.

Yes

Evidence of teaching, training, and outcomes clearly noted.

Yes

Special Needs

1 flagged

Thickened liquids/dysphagia

Proper notation by the door (if permitted by state); proper protocol followed.

Yes

Water at bedside.

No

Patient complained that the bedside water has not been replaced since last night.

Fall risks

Fall risk evident.

No

Care planned.

Yes

Wounds

Wound care protocol followed/proper forms completed.

Yes

Care planned.

Yes

Pain management

Protocol/forms followed (assessment and outcome).

Yes

Care planned.

Yes

MAR completed.

Yes

Initial and ongoing pain assessments done.

Yes

Equipment in room

Respiratory, feeding pump equipment labeled/tagged.

Yes

IVs dated, labeled.

Yes

Wound dressings, IV site dated and signed.

Yes

Resident appearance

Properly positioned. WC, bed.

Yes

Appears clean, appropriate dress.

Yes

Any complaints/concerns.

Yes

Complained about the water but aside from that, patient says nurses have been very helpful making everything easy and comfortable.

Completion

Comments/Suggestions

Despite the water from last evening and the missed re-assessment this morning, patient says he is satisfied with the care he is being provided and that his needs are attended well.

Auditor name and signature



Joan Florence
26 Apr 2023 10:37 PST