Social Services Department Checklist

| Starting Date | | |
|----------------|-----------------|--|
| Social Service | es Professional | |

| Daily — Areas to be completed | Mon | Tue | Wed | Thu | Fri | Sat | Sun | |
|---|---|-----|-----|-----|-----|-----|-----|--|
| Department Head Meetings | | | | | | | | |
| Complete Assessments on New Admission | | | | | | | | |
| Complete Multidisciplinary Discharge Summary | | | | | | | | |
| Paperwork Related to Room Changes | | | | | | | | |
| Introduce Residents to New Roommates | | | | | | | | |
| Fix Up Room Changes with Visit about Move | | | | | | | | |
| Chart Room Changes and Adjustments | | | | | | | | |
| Document Significant Behavior Changes | | | | | | | | |
| Document Significant Changes in Condition | | | | | | | | |
| Record Lost Dentures, Glasses and Hearing Aids | | | | | | | | |
| Clothing and Personal Care Needs | | | | | | | | |
| Transportation Needs | | | | | | | | |
| Family and Resident Counseling | | | | | | | | |
| Deaths | | | | | | | | |
| Other | | | | | | | | |
| Weekly | | | | | | | 1 | |
| Quarterly, Annual Progress Note Updates (Including MDS) | | | | | | | | |
| Attend Resident Care Conferences | | | | | | | | |
| Attend Rehabilitation Meetings | | | | | | | | |
| Organize Rehabilitation Meetings with Resident and Family | | | | | | | | |
| New Resident Adjustment Issues | | | | | | | | |
| In-Service Training | | | | | | | | |
| Staff Meetings | | | | | | | | |
| Monthly | | | | | | | 1 | |
| | Send Out Notices for Next Month's Resident Care Conferences Notes: | | | | | | | |

Notes: