Careficient

Home Health Survey Readiness Self-Audit and Action Worksheet

Conference handout | Michigan Conference 2026 | Kristie Meers, RN, BSN, CHPN

How to use: Review one patient record or one operational workflow at a time. Mark findings, note evidence, assign ownership, and use the last page to turn findings into a corrective action plan.

1. Assessment and medication review

Checklist item	Status	Evidence / notes
[ ] Comprehensive assessment completed by the correct discipline and within the required timeframe.	Met / Partial / Not Met	
[ ] Assessment reflects current clinical, functional, cognitive, psychosocial, and home safety status.	Met / Partial / Not Met	
[ ] Medication regimen was reconciled and high-risk discrepancies were clarified.	Met / Partial / Not Met	
[ ] Significant medication or assessment findings were communicated to the physician/practitioner as indicated.	Met / Partial / Not Met	
[ ] Assessment narrative, OASIS items, and medication profile tell one consistent story.	Met / Partial / Not Met	

2. Individualized plan of care

Checklist item	Status	Evidence / notes
[ ] Plan of care reflects the current assessment and	Met / Partial / Not Met	

includes patient-specific goals and measurable outcomes.		
[ ] Ordered disciplines, treatments, frequencies, medications, and safety measures are present.	Met / Partial / Not Met	
[ ] Interventions are individualized rather than generic or copied forward.	Met / Partial / Not Met	
[ ] Condition changes and recertification updates are reflected in the current plan.	Met / Partial / Not Met	
[ ] Physician/practitioner review and signature workflow is timely and complete.	Met / Partial / Not Met	

3. Visit execution, missed visits, and communication

Checklist item	Status	Evidence / notes
[ ] Documented visits match the ordered frequency and discipline schedule.	Met / Partial / Not Met	
[ ] Missed, reduced, or refused visits are clearly explained and followed by appropriate action.	Met / Partial / Not Met	
[ ] Condition changes are escalated and physician communication is documented.	Met / Partial / Not Met	
[ ] Education provided is specific, patient/caregiver-centered, and shows response or understanding.	Met / Partial / Not Met	
[ ] Visit notes support the care and teaching expected from the current plan of care.	Met / Partial / Not Met	

4. Aide services and infection prevention

Checklist item	Status	Evidence / notes
[ ] Aide care plan is specific and aligns with what the aide documented doing.	Met / Partial / Not Met	
[ ] Supervisory assessment was completed within the required interval.	Met / Partial / Not Met	
[ ] Competency concerns or performance drift were followed by observation and coaching.	Met / Partial / Not Met	
[ ] Hand hygiene, bag technique, PPE use, and equipment handling match policy and practice.	Met / Partial / Not Met	
[ ] Field practice has been validated by observation, not only by annual policy sign-off.	Met / Partial / Not Met	

5. Transition, records, and patient communication

Checklist item	Status	Evidence / notes
[ ] Written instructions in the home are current, understandable, and reflect the latest visit schedule and medication information.	Met / Partial / Not Met	
[ ] Required notices were issued in advance when care was reduced, terminated, or non-covered.	Met / Partial / Not Met	
[ ] Transfer or discharge summary includes necessary clinical information and proof it was sent.	Met / Partial / Not Met	
[ ] Clinical record contains required signatures, dates, and complete visit documentation.	Met / Partial / Not Met	
[ ] Late entries, corrections, and	Met / Partial / Not Met	

order follow-up are completed according to policy.		

Corrective action planner

Finding / risk	Action	Owner	Due date	How we will verify sustainment

Plan -> Educate -> Monitor -> Sustain

- Plan: define the process failure and the exact standard at risk.
- Educate: provide role-based coaching tied to the actual documentation or workflow gap.
- Monitor: use a short-term audit report to confirm behavior changes occurred.
- Sustain: keep the metric on a QAPI dashboard until the risk is stable.

Tip: For best results, use the same worksheet structure for monthly chart review, ride-along observation, and aide supervision review so teams hear one consistent survey-readiness message.