DementiaHelp

Care handoff

Share what matters for the next period of care.

Preferred name _____

Date _____ **Time period covered** _____

Handing over _____ **Contact** _____

Handing over to _____ **Contact** _____

Routines communication and comfort

What helps the person feel comfortable, communicate, and follow familiar routines?

_____

_____

_____

Today's updates

Write what happened and when. Record observations, not assumptions.

_____

_____

_____

Next items and questions

Note the next action or question, who will follow up, and when.

_____

_____

_____

Where to find the current guidance

Record locations only. Use the current documents for instructions.

Current care plan location _____

Care contacts location _____

Emergency instructions location _____

This sheet supports, but does not replace, the current care plan or emergency instructions.
Keep it accessible only to people providing care.