

RN Supervision of LPN

G=Guidance C=Compliance I=Instruction O=Oversight F=Follow-up

Patient: _____ MID# _____

LPNs Evaluated _____

Care Plan:

- _____ Current plan of care available and reviewed
- _____ Tasks are within scope of LPN practices identified on plan of care
- _____ Review of doctor's orders/new doctor's orders reflected on plan of care
- _____ Any changes of new nurse interventions
- _____ Update of care plan needed

Review of LPN Notes:

- _____ Documentation present that reflects LPN adhering to plan of care
- _____ Documentation of skilled services performed safely/any documented incidents regarding omission of nursing care
- _____ Nurse assessments documented
- _____ Notes are legible and meet legal standards

Medications:

- _____ Review of medication sheets
- _____ Any medication changes/new orders
- _____ Evidence that medications are administered as ordered/signed off by LPN
- _____ Medication errors
- _____ adverse reactions/LPN's response

Professionalism:

- _____ Consistent care and evidence of team nursing
- _____ Supplies available to nursing staff for patient's care needs
- _____ Communication with family occurring at shift change
- _____ Family satisfied with services

Evaluation of LPN Services:

- _____ Authorized continued delegation of nursing practices

Instruction/RN Comments:

Signed: _____ Date: _____

Supervising RN