

Unit Post Binder — 24-Hour Coverage Timeline & Nursing Checklist

Resident profile: Memory care, 80+, post-hip fracture. Goal: Prevent unassisted transfers with bed exit and chair exit monitoring.

Generated by M365 Copilot (GPT-5 Chat) — 2026-02-03

24-Hour Coverage Timeline

Time Block	Primary Risk	Monitoring Focus	Notes
00:00–06:00 (Overnight)	Bed exit (confusion, toileting)	Bed pad armed; fast escalation	Quiet room; ensure hallway coverage
06:00–09:00 (Morning)	First stand of day	Chair pad armed after transfer; supervised	Watch for orthostatic hypotension
09:00–12:00 (Late morning)	Transfers to activities	Chair pad or supervised transfers	Consider transport chair
12:00–14:00 (Midday)	Post-meal drowsiness	Chair pad armed (napping risk)	Reposition for comfort to reduce fall risk
14:00–17:00 (Afternoon)	Therapy / fatigue	Chair pad during unsupervised sitting	Coordinate with PT/OT schedule
17:00–20:00 (Evening)	Sundowning agitation	Chair pad + frequent rounding	Lower threshold for escalation
20:00–24:00 (Night)	Bed exit	Bed pad armed; verify batteries	Night checks per policy

Rounding & Escalation Targets

- Acknowledge alerts within ≤ 60–90 seconds.
- Arrive at resident within ≤ 3 minutes (adjust to facility layout).
- Document delays and adjust staffing/coverage as needed.

Nursing Staff Checklist — Bed & Chair Exit Monitoring

Shift Start

- ☐ Verify bed pad placement (under shoulders/lower back).
- ☐ Verify chair/wheelchair pad placement (centered under seat cushion).
- ☐ Confirm sensors are armed and reporting.
- ☐ Test alert delivery to assigned caregiver(s).
- ☐ Review escalation timing and on-call coverage.

During Shift

- ☐ Respond immediately to bed or chair exit alerts.
- ☐ Assist resident with transfer or return to seated/lying position.
- ☐ Re-arm sensor after assistance.
- ☐ Observe for repeated alerts indicating discomfort or repositioning needs.

False■Alarm Reduction

- ☐ Re■check pad placement if nuisance alerts occur.
- ☐ Ensure pads are flat (no folds or bunching).
- ☐ Adjust sensitivity/escalation per facility policy.
- ☐ Document patterns (time of day, activity).

End of Shift

- ☐ Confirm sensors are active.
- ☐ Handoff any recurring issues to next shift.
- ☐ Flag equipment needing maintenance or replacement.

Weekly Review (Charge Nurse / Supervisor)

- ☐ Review response■time metrics.
- ☐ Identify false■alarm trends.
- ☐ Adjust care plan as mobility improves (consider tapering chair monitoring first).

Note: Chair■exit often becomes the primary daytime risk in hip■fracture recovery; keep chair monitoring armed during unsupervised sitting.