

What Matters Right Now

Context, Observation & Handoff Guide

Know the context. Notice meaningful change. Capture facts. Share what the next person needs to know.

KNOW CONTEXT**NOTICE IT****CAPTURE IT****SHARE IT**

Built for Real Support Work

This guide helps DSPs, caregivers, case managers, group home staff, and support teams recognize the details that can easily be missed when information is scattered across shifts, conversations, appointments, and life changes. It does not replace an agency documentation system. It helps you use that system more thoughtfully.

THE CORE QUESTION

Why does this matter for this person, at this moment?

Context changes what is worth noticing and what needs to be passed along.

Use this guide to:

- Build a quick picture of what is happening in the person's life right now.
- Compare today with the person's usual baseline instead of relying on assumptions.
- Catch positive changes, concerns, patterns, and small "gold nugget" details.
- Turn everyday observations into clear factual notes and useful handoffs.
- Know when information should be shared with the next shift, supervisor, case manager, family/support person, or provider based on the person's plan and agency procedures.

How to Use This Guide

Start with context, then use the scenario pages and reusable worksheets at the end.

1

Know the context

What has changed recently, and what is happening in the person's life right now?

2

Know the baseline

What is typical for this person when things are going well?

3

Notice what is different

Look for change, patterns, progress, and small details that may matter later.

4

Capture facts

Write what you saw, heard, measured, or were told—not the conclusion you think it means.

5

Share appropriately

Pass along information to the right person using the person's plan and your organization's procedures.

A GOLD NUGGET

A small detail can become important when it shows a change, pattern, preference, response, barrier, or clue about what support is working. A conversation can become important when it gives the team useful information about a change, preference, barrier, response, or support need.

What Matters Right Now Snapshot

Use initials only. Update this when the person has a major change, transition, new concern, or new goal.

Person initials	Completed by / role	Date	Optional review date
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What has changed recently?

☐ Hospital / ER visit	☐ Recent loss / grief
☐ Incarceration / reentry	☐ Move / new placement
☐ New provider / appointment changes	☐ New medication, treatment, or provider instructions
☐ Relationship / family change	☐ Work / school / day program change
☐ Legal / benefits / documentation change	☐ Recent incident / conflict / safety concern
☐ New goal or major progress	☐ Other major stressor / life change

What is most important for staff to know right now?

Keep this practical. What should change how staff observe, support, or follow up?

Current goals / priorities

Known follow-ups / appointments / documents / contacts to track

Know the Baseline

A change only becomes meaningful when you have some idea of what is typical for this person.

Communication	How do they usually communicate needs, discomfort, preferences, and yes/no?
Mood / engagement	What is typical mood, energy, humor, interaction, and participation?
Sleep / rest	What is their usual sleep pattern or daytime fatigue?
Eating / drinking	What is typical appetite, food preference, pace, and hydration pattern?
Mobility / movement	What is typical walking, transfers, balance, pacing, or activity level?
Daily routines	What routines usually happen independently, with reminders, or with hands-on help?
Social / relationships	Who do they usually seek out, avoid, call, visit, or talk about?
Appointments / follow-through	What usually helps with appointments and follow-up?

After a Hospital or ER Visit

The visit may change what staff need to watch, follow up on, and communicate.

LOOK FOR

- Changes from baseline in appetite, sleep, mobility, communication, energy, or comfort.
- New equipment, supplies, restrictions, or routines.
- Signs that instructions are confusing, hard to follow, or not available.

ASK / CHECK

- Were there medication changes, follow-up instructions, or specific monitoring directions from the provider?
- Are discharge papers, appointments, transportation, or contacts clear?
- Who needs a copy or update according to the person's plan?

CAPTURE / SHARE

- What changed, when it was noticed, and how it compares with usual baseline.
- What instructions were given and whether there are barriers to following them.
- Who was notified and what follow-up is still needed.

KEEP IN MIND

Staff should not interpret medication changes clinically. Follow written instructions, notice what is different, and share useful observations with the appropriate provider or supervisor according to the plan.

After a Loss, Grief, or Major Life Stressor

Major stress can affect routines, energy, communication, participation, and follow-through in ways that may change over time.

LOOK FOR

- Changes in sleep, appetite, hygiene, participation, communication, or preferred activities.
- Periods when the person seeks more connection, quiet, routine, or reassurance.
- Positive signs of coping, reconnection, or return to usual routines.

ASK / CHECK

- What support does the person want or not want right now?
- Are there dates, people, places, or routines that may be especially difficult?
- What helps the person feel respected, steady, and supported?

CAPTURE / SHARE

- Document observable changes and the person's own words when useful.
- Share sustained or significant changes with the appropriate team member rather than assuming every change is simply part of grief.
- Capture positive progress, meaningful preferences, and strategies that appear helpful.

KEEP IN MIND

Support should be respectful, practical, and guided by the person's preferences, plan, and team expectations.

After Incarceration or During Reentry

Reentry can change contacts, appointments, paperwork, routines, transportation, and expectations all at once.

LOOK FOR

- New or time-sensitive appointments, paperwork, benefits, identification, or contacts.
- Transportation, phone, scheduling, or documentation barriers.
- Changes in routine, support needs, stress level, or follow-through.

ASK / CHECK

- What does the person say needs attention first?
- Are there deadlines, required documents, or contacts that must be tracked?
- Who is responsible for each follow-up within the person's plan?

CAPTURE / SHARE

- Capture concrete follow-up needs: who, what, where, when, and what document or contact is needed.
- Note barriers the person identifies—transportation, phone access, paperwork, anxiety, scheduling, cost, or confusion.
- Share time-sensitive legal, provider, or service information with the appropriate team member according to role and policy.
- Avoid assumptions about motivation, intent, or behavior; document what happened and what the person reported.

When Appointments Keep Getting Missed

A successful appointment can reveal just as much about what support works as a missed appointment reveals about barriers.

LOOK FOR

- Patterns in date, time, location, transportation, reminders, staffing, paperwork, or anxiety.
- What works on days the appointment does happen.
- Whether instructions, expectations, or appointment purpose are unclear.

ASK / CHECK

- What got in the way this time?
- What helped when the person attended successfully?
- Is a reminder, transportation change, support person, or clearer plan needed?

CAPTURE / SHARE

- Document barriers without blame.
- Capture successful supports that can be repeated.
- Share patterns and practical next steps with the right team member.

GOLD NUGGET

“She made it today because her sister called an hour before and the ride arrived 20 minutes early.”

That detail can become a repeatable support strategy.

After a Move, New Placement, or Major Routine Change

A new setting or routine can change comfort, communication, participation, sleep, eating, privacy, and follow-through.

LOOK FOR

- What seems familiar, calming, preferred, or successful.
- What seems confusing, difficult, tiring, or disruptive.
- Changes in communication, routines, relationships, or independence.

ASK / CHECK

- What still feels unfamiliar, difficult, or confusing?
- What helps the person feel oriented and supported?
- What routines should staff try to keep consistent?

CAPTURE / SHARE

- Document practical preferences and successful supports.
- Share barriers that may affect safety, comfort, participation, or follow-through.
- Update the baseline as the person settles into the new routine.

After New Medication or Provider Instructions

New instructions may change what staff need to observe, document, and share.

LOOK FOR

- Changes from baseline in alertness, appetite, sleep, movement, mood, communication, or comfort.
- Evidence that the person understands or does not understand the instructions.
- Practical barriers such as timing, transportation, supplies, cost, or missing paperwork.

ASK / CHECK

- What did the provider instruct the person or team to watch for?
- What follow-up appointment, lab, document, or contact is needed?
- Who needs to be updated based on the person's care plan and agency procedures?

CAPTURE / SHARE

- Record what was observed, reported, or instructed.
- Do not change doses, timing, or instructions unless authorized under the person's care plan and your role.
- Share concerns or unclear instructions with the appropriate supervisor or provider contact.

KEEP IN MIND

Stay within your role. Follow written provider instructions, the person's plan, and agency procedures. Document facts, communicate concerns, and escalate urgent issues appropriately.

When You Notice a Positive Change

Positive change deserves the same careful attention as concern because it can show what support is working.

LOOK FOR

- A return to baseline after a difficult period.
- New skills, confidence, participation, follow-through, or communication.
- Supports, timing, people, choices, or routines that appear to help.

ASK / CHECK

- What was different today?
- What did the person say helped?
- Can the helpful support be repeated, adjusted, or gradually faded?

CAPTURE / SHARE

- Describe the positive change with specific facts.
- Capture what support, setting, or timing may have contributed.
- Share the detail so the team can build on what works.

KEEP IN MIND

Progress notes can help the team repeat effective support, not just track concerns.

Facts Before Conclusions

Good documentation lets the next person understand what happened without needing your interpretation.

OBSERVATION “He ate about half of lunch, pushed the plate away twice, and said, ‘My stomach feels weird.’”	INTERPRETATION “He refused lunch because he is depressed.”
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This may or may not be accurate, and the note does not show what observations support the conclusion.

FACTS check

F — Firsthand	What did you directly see, hear, measure, or receive from a reliable source?
A — Actual words	What did the person say? Use a short direct phrase when it adds meaning.
C — Context	What happened before, during, and after? What known life context matters?
T — Time / trend	When did it happen? Is this new, repeated, improving, worsening, or back to baseline?
S — Support / share	What helped? What did you do within your role? Who needs this information next?

Observation & Handoff

Use this when a detail, change, pattern, or conversation feels important enough not to lose.

Person initials	Date / time	Completed by / role
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Known context that matters right now
What I noticed / what was said
How this compares with usual baseline
What happened before / after, or what seemed to help
Why this may matter / what needs follow-up Stay within your role: identify the practical reason for continued observation, follow-up, or sharing—without diagnosing.
Who needs to know / next handoff

A Useful Handoff in 60 Seconds

Make it easy for the next person to understand what changed and what still needs attention.

1. Context

What is happening in the person's life right now that may affect support?

2. Change

What is different from baseline, repeated, improving, worsening, or back to typical?

3. Fact / person's words

What did you see, hear, measure, or what did the person say?

4. What helped / what happened next

What support was tried, and what changed afterward?

5. Next need

Who needs to know, and what follow-up is still needed?

WHEN TO ESCALATE

Use the person's support plan, agency policy, supervisor or clinical instructions, and emergency procedures. If something is urgent, unsafe, or outside your role, do not wait for the next routine handoff.

From Gold Nugget to Useful Handoff

Fictional scenario: a person has been missing appointments, then unexpectedly attends successfully.

CONTEXT The person has missed several appointments recently. Transportation timing and uncertainty about plans have been barriers.
WHAT HAPPENED TODAY The person attended the appointment as scheduled.
GOLD NUGGET The person’s sister called one hour before the appointment, and the ride arrived twenty minutes early.
WHY IT MATTERS Today’s success suggests that an early reminder and a clear transportation time may reduce uncertainty and support follow-through.
USEFUL HANDOFF For the next appointment, consider confirming the ride time early and asking whether the sister can provide a reminder call if consistent with the person’s preferences and plan.

WHY THIS IS BETTER THAN “CLIENT ATTENDED APPOINTMENT” The richer note gives the team a repeatable support strategy, not just a record that attendance happened.

- Use only the information needed for the person's support, safety, goals, and required coordination.
- Use initials or the minimum identifying information needed when working in a reusable worksheet.
- Follow the person's consent, privacy rules, care plan, agency policy, and documentation requirements.
- Document behavior and communication without labeling the person or guessing at motives.
- For medication or medical concerns, follow licensed-provider instructions and your role.
- Do not diagnose, change treatment, or give clinical advice.
- For legal/reentry information, document only what is relevant to support and required follow-up; avoid unnecessary sensitive detail.
- If an urgent safety or medical concern arises, use the established emergency/escalation process rather than waiting for routine documentation or handoff.

This image shows a blank sheet of white paper with horizontal blue ruling lines. On the left side, there are short vertical blue lines that serve as margins, creating a narrow column for writing. The paper is otherwise empty of any text or markings.