

Assisted Living Evaluation Checklist

NAME OF COMMUNITY

ADDRESS

PHONE / CONTACT PERSON

STAFF

- Are there adequate staff? What is the staff to resident ratio? Are call bells and resident requests responded to in a timely manner (5 minutes or so)?
- Are the staff courteous to residents? Do they treat residents with dignity and respect? Or is the staff attitude condescending? Are childish or otherwise inappropriate nicknames used when speaking with residents? Do staff talk about residents as if they were not present or as if they were children?
- o Does the administrator/manager and director of nurses appear to know the residents?
- 0 Is the administrator friendly and receptive to questions?
- Is privacy respected (e.g., knocking on doors before entering rooms, keeping privacy curtains drawn while care is being given)?
- Do staff wear name-tags?
- O Are there therapists on staff or does the facility contract out for therapy?
- Is there a licensed social worker on staff? Full-time?
- Does the facility have permanent full-time nurses and certified nurse assistants (CNA's) or are registry nurses and aides used?
- Are the staff visible and actively assisting residents?
- In addition to English, what languages do the staff speak?
- What is the facility's communication strategy when a resident's first language is not English?
- o Does the facility conduct background checks before hiring staff?

RESIDENT APPEARANCE

- Are residents up and dressed for breakfast? Does the staff get them up hours before breakfast (too early) or just before lunch (too late)?
- o Are the residents well-groomed (shaved, clothes clean, hair combed, nails trimmed and clean)?
- o Do residents appear alert, content and occupied? Or are they lethargic, or listless?
- Are residents comfortably positioned in comfortable chairs? Are they restrained in their chairs or beds? Are they in chairs that have a tray or "lap buddy?

RESIDENT ROOMS

- 0 In which area of the facility would the resident's room be located?
- How many residents share a room? Generally, rooms should have no more than four beds, at least three feet apart, with privacy curtains around each bed.
- Does each bedroom have a window?
- Is there a bedside stand, reading light, chest of drawers, and at least one comfortable chair for each resident? Is there adequate storage space and is it separate from other roommates?
- Are the beds easy to reach? Is there room to maneuver a wheelchair or Gerichair easily?
- Are call buttons accessible to residents?
- 0 Is there fresh drinking water at the bedside?
- Are residents allowed and encouraged to bring any of their own belongings or furniture? Have residents personalized their rooms?

FACILITY ENVIRONMENT

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- Is there an obvious odor in the facility? Strong urine and body odors may indicate poor nursing care or poor housekeeping. Heavy "air freshener", deodorants, and other temporary chemical cover–ups may be substitutes for conscientious care and maintenance.
- Is the facility maintained at a comfortable temperature? Do the rooms have heating, air conditioning, and individual thermostats?
- Is the facility clean, well-lit and free of hazards? Do you see soiled linen or is it properly disposed of? Is there adequate linen?
- o Is furniture sturdy and comfortable?
- Are floors clean and non-slippery?

MISCELLANEOUS

- o Is there a Family Council? When does it meet and who are the officers?
- How often do residents' physicians visit the facility? It should be at least once every 30 days.
- How long has the facility been operating under the present management? Are there any plans to change in the near future?
- O What hospital is used in emergencies?
- o What is the billing procedure?
- Who should be contacted when there is a problem? How does the facility notify the resident and family members of the time and place of the quarterly care planning meetings?
- o Is the Ombudsman Program's phone number posted?
- o Are the results from the last inspection by the Department of Public Health posted?
- Ask to review a copy of the admission agreement. Does the facility demand a "responsible party" signature? What is their "informed consent" policy?
- What is included in the basic costs and what is extra?
- If you are looking at an Alzheimer's Unit within a facility, what makes it different from the rest of the facility (especially if it costs more)?
- How is transportation provided for trips to hospitals, medical offices, or community functions? Is there a charge?
- How is personal laundry handled?
- o Is there a system to protect wanderers? Is it operational? Ask for a demonstration.
- Is there a mandatory arbitration agreement in the admission packet? If so, don't sign it! Nursing homes cannot require residents or their representatives to sign an arbitration agreement as a condition of admission. See <u>http://canhr.org/arbitration/index.html</u>

NOTES: