LONG-TERM CARE FACILITY CHECKLIST

If you will be visiting multiple facilities, make several copies of this form so you can use one at each place.

Facility Name:  ........................................................................................................................................

First Impressions

_____ Do you like the facility’s outward appearance?
_____ Is the location convenient for visits by family and friends?
_____ Is the residence clean, free of odors and appropriately heated/ cooled?
_____ Does the staff address residents by their names and interact with them during your tour?
_____ Do you notice the residents socializing with each other and do they appear content?
_____ Can you talk with residents about how they like living there and about the staff?
_____ Are staff members courteous to residents and to each other?
_____ Do staff respond to requests for assistance in a timely way?
_____ Are visits with the residents encouraged and welcome at any time?
_____ How many of the units are occupied?
_____ What is the noise level in the facility?

Living Area and Accommodations

_____ Is the floor plan well-designed and easy to follow?
_____ Are there different sizes and types of units available with optional floor plans?
_____ Are single units available and/ or double occupancy units for sharing with another person?
_____ What furniture is provided and what can residents bring from home?
_____ May residents decorate their own rooms?
_____ Is there adequate storage space in the individual units?
_____ Are the common areas attractive, comfortable and clean?
_____ Is there an outside courtyard or patio for residents and visitors?
_____ Are residents allowed to smoke in their units or are there designated public areas?
_____ What laundry services or facilities are available for residents’ personal clothing?

Safety and Accessibility

_____ Are doorways, hallways and rooms accessible to wheelchairs and walkers?
_____ Are bathrooms accessible for wheelchairs and walkers?
_____ Are elevators available for those unable to use stairways?
_____ Are there handrails in the hallways to aid in walking?
_____ Are floors of a non-skid material and carpets conducive to safe walking?
_____ Does the residence have good lighting, sprinklers and clearly-marked exits?
_____ Does the residence provide ample security and is there an emergency evacuation plan?
_____ Is a 24-hour emergency response system installed in each unit? What happens when it is activated?
long-term care facility checklist

Services

_____ What services are available to all residents at the base rate?

_____ Are there additional charges for personal care services? Who provides these services and what are their qualifications?

_____ Are housekeeping, linen service and personal laundry included in the fees, or are they available at an additional charge?

_____ Does the facility offer any special services or areas for dementia patients? How do these services differ from the usual? Is there an additional charge for these?

_____ To what extent are medical services available within the facility, and how are these services provided?

_____ How are medical emergencies handled? Does the residence have a clearly-stated procedure for responding to medical emergencies? Is there an arrangement with a nearby hospital?

_____ Is there a staff person to coordinate home care visits from a nurse, physical or occupational therapist, etc. when needed on a temporary basis?

_____ Does the residence provide transportation to doctors’ offices, the hairdresser, shopping and other activities desired by residents and how is it arranged?

_____ Are pharmacy, barber/beautician and/or physical therapy services offered on-site or nearby?

Social and Recreational Activities

_____ What kinds of group/individual recreational activities, if any, are offered? Who schedules them?

_____ Is there an organized activities program with a posted daily schedule of events?

_____ Does the facility schedule trips or go to other events off-premises?

_____ Are the resident social and activity areas appropriate and desirable to the prospective resident?

_____ Are there supplies for social activities/hobbies (games, cards, crafts, computers, gardening)?

_____ Are religious services held on the premises or are arrangements made for residents to attend nearby services?

_____ Are there fitness facilities? Regularly-scheduled exercise classes?

_____ Are residents’ pets allowed? Does facility have pets and who cares for them?

Food

_____ Does the residence provide meals? If so how many times a day, how many days a week, and how does the menu vary from meal to meal? Are menus posted?

_____ Can special diets be accommodated? Does a qualified dietitian plan or approve menus?

_____ Are residents involved in menu planning and may they request specific foods?

_____ Does the dining room environment encourage residents to relax, socialize, and enjoy their food?

_____ May residents eat meals in their units? May they keep snacks or other food in their units?

_____ Are meals provided only at set times or is there some flexibility? Are snacks available?

_____ Can residents have guests dine with them for an additional fee? Is there a private dining room for special events and occasions, if desired?

_____ Can you visit during a meal and eat with the residents?

_____ What do residents say about the food?
Moving In, Contracts, and Finances

- Is there a waiting list? If so, how long do they estimate it will be for a unit to become available?
- What is involved with the moving in/out process?
- Is there a written statement of residents’ rights and responsibilities?
- Does the contract clearly disclose all fees for healthcare, accommodations, personal care, supportive services, as well as admission and discharge provisions?
- How much is the monthly fee? What does this include?
- How often can fees be increased and for what reasons? Is there a limit on the amount of increase per year? What is the history of monthly fee increases?
- Are residents required to purchase renters’ insurance for personal property in their units?
- Do billing, payment and credit policies seem fair and reasonable?
- Is prepayment, a deposit, or an entrance fee required? Is any of that refundable?
- May resident handle his/her own finances with staff assistance if able or must a family member/outside party be designated?
- Is the contract for a specific period of time or month-to-month?
- When may a contract be terminated and what are the policies for refunds and transfers?
- What happens if funds are depleted and full payment can no longer be made?
- Does the facility accept Medicaid? Special Assistance for Adults?
- What additional services are available if the resident’s needs change? Is staff available to coordinate these services?
- Is there a procedure to pay for additional services such as skilled nursing care or physical therapy when the services are needed on a temporary basis?
- Under what circumstances would the resident be forced to move out because of increased needs for care?
- What happens if the resident needs to be hospitalized temporarily? How long can the facility hold a room for the resident, and what would it cost to do that?

Staff

- What are the hiring procedures and requirements for eligibility?
- Are criminal background checks, references, and certifications required?
- Is there a staff training program in place and what does it entail?
- What is the staff turnover rate for patient care aides? What does the facility do to encourage staff to stay?
- How long has the current administrator been there?
- What is the staff-to-patient ratio during the day? At night? On weekends?
- Does the facility have RNs on duty at all times? LPNs?

Licensure and Certification

- Does the facility have a current license displayed?
- If the state requires the administrator to be licensed/certified, does she/he have a current license?
- What reputation does the facility have in the community?
- How long has it been in business? Is it in good financial health?
Complaints and Problem-Solving

_____ Is the administrator, or other appropriate staff person, generally available to answer questions or discuss problems and would you be comfortable dealing with them on a daily basis?

_____ Is there a resident council or organization through which residents have a means of voicing their views?

_____ What is the procedure for handling resident or family concerns?

_____ Is there an appeals process for dissatisfied residents?

_____ Has the facility experienced any complaints or corrective actions? Are they willing to discuss past problems and how they were resolved?

_____ Has the facility ever been sanctioned or fined, or had its Medicare/Medicaid certification suspended?

Your questions and concerns:

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SOURCE: adapted from www.carepathways.com