

nursing home guide

nursing home evaluation checklist

The following checklist will give you, as an observer, a general idea of the quality of care provided in a nursing home. Depending on a resident's needs, preferences and payment source, questions will vary.

Ask to see the entire facility, not just the nicely decorated lobby and one wing or floor. Remember that appearances can be deceptive. Though environment is important, try to get a feel for the care provided and how the residents are treated by 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)?
- ❑ Are the residents well-groomed (shaved, clothes clean, hair combed, nails trimmed and clean)?
- ❑ Do residents appear alert, content and occupied? Or are they lethargic, listless or stuporous?
- ❑ 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"?

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?
- ❑ Does the administrator/manager and director of nurses appear to know the residents?
- ❑ 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?
- ❑ 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?

Facility Environment

- 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 clean, well lit and free of hazards? Do you see soiled linen or is it properly disposed of? Is there adequate linen?
- Are floors clean and nonslippery?

Resident Rooms

- 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.
- 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?
- 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?

Hallways, Stairs and Lounges

- Are halls free of obstacles and debris?
- Are stairways and exits clearly marked?
- Are there handrails in all corridors?
- Are fire extinguishers visible? Is there a disaster plan posted and does the facility have drills?
- How many lounge areas are available for residents and visitors? Are they clean and comfortably furnished? Is there sufficient room for visiting?

Bath and Shower Rooms

- How many residents share a bathroom?
- Do bathrooms have handgrips or rails near all toilet and bathing areas?
- Are bathrooms conveniently located?
- Do residents have a choice between a shower or bath, how frequent and during which shift?

Kitchen and Dining Areas

- Is the kitchen clean and well organized?
- Is the food handled and stored in a safe and sanitary manner?
- Is the dining area pleasant, clean and comfortable?
- How many residents eat in the dining area? Is it large enough to accommodate most of the residents? Are there shifts for meals?
- Do chairs fit under the table so that residents are comfortably close to their food?

Menus and Food

- Try to visit the facility during a meal. Observe the way the food is served, how residents are assisted with eating and what their reaction is to the food. You can probably buy a meal to sample the food.
- A menu for the current and following week should be posted. If a menu is not posted, ask to see one. Is the food listed on the menu actually being served?
- How often are meals repeated? Are alternatives available, as required by law?
- Does the food appear and smell appetizing? Is it nutritious? Are fresh foods used, or is it mostly canned or frozen? Do residents enjoy the food?
- Are dishes and silverware used, or are disposable plates and utensils used?
- Are those residents who need assistance with eating and who are being fed by nurse's aides finishing their meals and eating at their own pace? Are assistive devices available to those who may be able to feed themselves with a little help?
- Are meals served at appropriate temperatures?
- What provisions are made for patients who are unable to eat in the dining room?
- Who plans the meals? Is a professional dietician on staff? How are special dietary needs met?

Activities

- Are activity calendars posted? If not, ask for a description of the activity program. Meet the Activity Director if possible.
- Do the activities cover a broad range of interests?
- Are activities tailored to individual preferences?
- What activities are available to residents confined to their rooms?
- Do volunteers visit the facility?
- What arrangements are made for residents to participate in religious services of their choice?
- What is done for holidays and birthdays?
- Is there a resident council? When does it meet and what is its function?

Miscellaneous

- ❑ 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?
- ❑ What hospital is used in emergencies?
- ❑ 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?
- ❑ Is the Ombudsman Program's phone number posted?
- ❑ Are the results from the last inspection by the Department of Health Services 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?
- ❑ Is there a system to protect wanderers? Is it operational? Ask for a demonstration.