

Checklist To Help In Choosing A Nursing Home

You may want to use this checklist when you visit nursing facilities to help you compare one with another. An asterisk * indicates that this item is **required** by licensing or certification regulations.

Licensing & Certification

Facility #1 Facility #2 Facility #3

*1.	Does the facility have a framed, posted license from the State Department of Health?			
*2.	Does the administrator have a current license from the State Board of Examiners for Nursing Home Administrators?			
3.	Is the facility certified to participate in the Medicare and/or Medicaid program(s)?			

Location & Convenience

4.	Is the location of the home convenient for the resident's personal doctor(s)?			
5.	Is it convenient for frequent visits by family and friends?			
6.	Are the visiting hours convenient for family and friends?			

Accident Prevention

*7.	Are the rooms and halls well lighted and free from glare?			
*8.	Is the home free of hazards underfoot?			
*9.	Are the chairs sturdy and not easily tipped over?			
*10.	Is there a non-slip surface on the hall and bath floors?			
*11.	Are there handrails in hallways and grab bars in the bathroom?			

Fire Safety

*12.	Does the facility have a sprinkler system?			
*13.	Does the facility have a smoke detector?			
14.	Does the facility have a carbon monoxide detector?			
*15.	Does the facility have a written emergency evacuation plan?			
*16.	Do they conduct fire drills at least once every 4 months?			
*17.	Are exit doors clearly marked and not locked, and are there no obstructions on the inside?			
*18.	Are stairways enclosed?			
*19.	Are doors to stairways kept closed?			

Bedrooms

*20.	Do bedrooms open into a hall?			
*21.	Do bedrooms have one or more windows?			
*22.	Are there no more than four beds per room?			
*23.	Is there easy access to each bed?			
*24.	Is there linen for each bed?			
*25.	Is there a nurse call bell at each bed?			
*26.	Is there fresh drinking water available at each bed?			
*27.	Is there at least one comfortable chair for each resident?			

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*28.	Are there reading light(s) for each patient?			
*29.	Is there a clothes closet and drawer(s) for each patient?			
*30.	Is there space for a wheelchair to maneuver in the room?			

Toilet Facilities

*31.	Are the toilet facilities easy to use for a person in a wheelchair?			
*32.	Is the sink easy to use for a person in a wheelchair?			
*33.	Is there a nurse call bell in the bathroom?			
*34.	Are there handgrips or grab bars on or near the toilet and tub/shower?			
*35.	Are bathrooms, tubs and showers well-lighted?			
*36.	Do bathtubs and showers have non-slip surfaces?			

Facility Atmosphere & Dayroom

*37.	Does the home seem clean and free of unpleasant odors?			
*38.	Do incontinent patients receive prompt attention?			
39.	Is the overall atmosphere of the facility clean, comfortable and secure?			
40.	Does the home have a dayroom? Is it used by the residents and their families?			
41.	Does the dayroom have lamps, tables and comfortable chairs?			
42.	Are books and games available for residents' use?			

Dining Room/Food Services

*43.	Is the dining room attractive and pleasant?			
*44.	Does it have comfortable tables and chairs?			
*45.	Do meals match a posted menu?			
*46.	Are meals attractively served?			
*47.	Do residents who need help eating receive it promptly?			
*48.	Are meals served on a regular schedule?			
*49.	Are residents encouraged to eat in the dining room?			
*50.	Are special diets available for those who need them?			

Kitchen

*51.	Are food preparation, dish washing and garbage areas separated from each other?			
*52.	Is food that requires refrigeration sitting out on counters?			
*53.	Does the kitchen staff observe sanitation rules (washing hands, etc.)?			

Isolation

54.	Does the home have at least one bed and bedroom available for residents with contagious illnesses?			
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Condition of Facility

*55.	Does the facility seem to be in good repair & condition?			
*56.	Is the facility air-conditioned?			
*57.	Is the facility adequately heated?			

Grounds

58.	Is there a place that residents can walk and/or sit outside?			
59.	Is there a secure place outside where patients with dementia can sit or walk?			
60.	Are the grounds attractive and well-kept?			

Medical Services

*61.	Is a physician available in case of an emergency?			
*62.	Are residents assured of receiving regular medical attention?			
*63.	Does the home require that a resident have a thorough medical check-up before or immediately after admission?			
*64.	Are medical records and plans for care kept and updated regularly?			
*65.	Are other medical services (dental, optometrist, etc.) available to the residents regularly?			
*66.	Do residents have the freedom to choose which pharmacy they would like to use?			
*67.	Does the home have an x-ray machine?			
*68.	Is emergency transportation available for residents if they need it?			

Nursing Services

*69.	Is a Registered Nurse (RN) responsible for the nursing staff in a skilled nursing facility or a nursing facility with 25 or more beds?			
*70.	Is a Licensed Practical Nurse (LPN) or RN on duty on all shifts seven days a week?			
*71.	Have nurse aides working at the facility been certified through a state-approved training program?			

Activities

*72.	Are individual resident choices and preferences observed and respected?			
*73.	Are both group and individual activities offered?			
*74.	Are residents encouraged, but not forced, to participate?			
75.	Are outside trips arranged for residents who are able to go?			
76.	Do volunteers from the community interact with the residents?			

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77.	Is there an activities director or coordinator on staff?			
*78.	Are activities offered to residents who are confined to their beds or bedrooms?			
79.	Do residents appear alert, dressed and well cared for?			

Religious Observances

*80.	Are arrangements made to allow a resident to worship as he or she pleases?			
*81.	Are religious observances voluntary?			

Social Services

*82.	Is a social worker available to help residents or their family members?			
83.	Are family forums or meetings held on a regular basis?			
84.	Does the facility have a Residents' Council that meets on a regular basis?			
85.	Does the facility have a Families' Council that meets on a regular basis?			

Grooming & Laundry Services

86.	Are barbers and beauticians available to the residents on a regular basis?			
87.	Is a resident's personal clothing laundered at the facility?			
88.	Is a laundry cost included in the monthly fee?			
*89.	Are special efforts made to insure that resident's clothing does not get lost?			

Special Considerations

*90.	Does the facility offer special therapies (physical, speech, occupational) to meet a resident's individual needs?			
*91.	Can arrangements be made to meet a resident's individual needs or requirements?			
*92.	Is additional supervision or assistance provided to residents who easily become confused or are suffering from dementia?			
*93.	Are orientation aids such as large signs, clocks, calendars, etc. conspicuously displayed?			

Staff

*94.	Are staff members courteous and helpful towards residents and their family members?			
*95.	Is the facility administrator available to residents and their family members during normal working hours?			

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Financial Considerations

*96.	Does the contract clearly state what goods and services are/are not included in the basic fee (for example personal toiletries, adult diapers, special diets, therapies, medical supplies, extra supervision or assistance, etc.)?			
*97.	Are the monthly charges prorated in case the resident has to be discharged, or dies, before the end of the billing period?			
*98.	Is the resident or a designee given a monthly itemized accounting of services and fees, and an accounting of the personal funds that they may have available?			

Resident's Rights

*99.	Are new residents informed of their rights and responsibilities at the facility?			
*100.	Are they encouraged to exercise their rights as a resident and as a citizen (voting, etc.)?			
*101.	Can a resident choose to manage his or her own finances and receive a monthly accounting?			
*102.	Do residents have privacy for telephone calls, visits, etc.?			
*103.	Can residents choose their own physician, pharmacy, and care providers as long as they can afford any fees associated with such choices?			
*104.	Are residents encouraged to take part in planning their own care?			
*105.	Can residents keep their own personal clothes and possessions in their living space, as long as they do not exceed space limitations?			
*106.	Can married couples share a room if they want to?			
*107.	Are the telephone numbers for: The Department of Health, Office of Health Facilities Regulation, Complaint Coordinator; The State Long-Term Care Ombudsman (toll-free 1-800-552-3402); and any local Ombudsman Program; The Virginia Office for Protection and Advocacy (toll-free 1-800-552-3962); and The Medical Fraud Control Unit posted in conspicuous location(s)?			
*108.	Is there an admission preference based upon payment source?			
*109.	Is a vacancy available at the facility?			
*110.	If not, will the facility provide information on the facility's waiting list, including the number of persons on the list and the dates when other persons were placed on the waiting list?			

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