

NURSING FACILITY CHECKLIST

This list is intended to be used as a tool to assist you as you visit and assess facilities. Not all questions may be applicable to your situation.

FACILITY NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

CONTACT NAME: _____

	YES	NO	NOTES
LOCATION			
Is the facility located near family and friends?			
GENERAL			
Is the facility's license with the state current?			
Is the facility Medicare / Medicaid Certified?			
Does the facility provide special services that the resident needs? <ul style="list-style-type: none"> • Skilled Nursing Care • Physical Therapy • Rehabilitative Therapy • Speech Therapy • Special Dietary Needs • Other... 			



	YES	NO	NOTES
Is the atmosphere in the facility pleasant? <ul style="list-style-type: none">• Is it generally clean?• Are there any persistent unpleasant odors?• Are the furniture and window treatments in common areas clean and in good condition?• Is the furniture sturdy?• Do the walls appear to be washed or painted regularly?• Is the facility well lighted?• Are rooms well ventilated and kept at a comfortable temperature?			
Is the administrator courteous and helpful?			
Are staff members cheerful, courteous and enthusiastic?			
Is there a high turnover rate among the staff? Are there long time staff members, who help provide a sense of constancy for ill and / or elderly residents?			
Do staff members show genuine interest in and affection for residents?			
Do residents look well cared for and generally content? <ul style="list-style-type: none">• Is there a community atmosphere?• Do the residents seem to get along well together?• Is it an atmosphere that encourages friendships?			



	YES	NO	NOTES
Do residents, other visitors and volunteers speak favorably about the facility?			
Are residents able to personalize their environment? <ul style="list-style-type: none">• Are they allowed to wear their own clothes?• Can they decorate their rooms?• Can they keep a few prized possessions on hand?			
Is there a place for private visits with family and friends?			
Is there a written statement of residents' rights posted in a central location?			
Are toilet and bathing facilities easy for disabled patients to use?			
If the facility has more than one floor, how many functioning elevators are there? <ul style="list-style-type: none">• Are the elevators large enough to accommodate medical personnel and a patient on a gurney in the event that a patient needs to be transported to a hospital in an emergency?			
SAFETY			
Are wheelchair ramps provided where necessary?			
Is the nursing facility free of obvious hazards: <ul style="list-style-type: none">• Obstacles in the hallways• Hazards underfoot• Unsteady chairs			
Are there grab bars in toilet and bathing facilities and handrails on both sides of the hallways?			
Do bathtubs and showers have non-slip surfaces?			



	YES	NO	NOTES
Are there... <ul style="list-style-type: none">• Smoke detectors• An automatic sprinkler system• Portable fire extinguishers			
Is there automatic emergency lighting?			
Are exits clearly marked and exit signs illuminated?			
Are exit doors unobstructed and unlocked from inside?			
Are certain areas posted with no smoking signs? Do staff, residents and visitors observe them?			
Is an emergency evacuation plan posted in prominent locations?			
MEDICAL, DENTAL, AND OTHER SERVICES			
Does the facility have arrangements to provide: <ul style="list-style-type: none">• Dental Care• Routine Medical Care• Transportation to and from outside doctors and hospital appointments.			
In case of medical emergencies, is a physician available at all times, either on staff or on call?			
Does the facility have arrangements with a nearby hospital for quick transfer of nursing facility residents in an emergency?			
PHARMACEUTICAL SERVICES			
Does a qualified pharmacist supervise pharmaceutical services?			
Is a room set aside for storing and preparing drugs?			
Does a qualified pharmacist maintain and monitor a record of each resident's drug therapy?			



	YES	NO	NOTES
NURSING SERVICES			
Is at least one registered nurse (RN) or licensed practical nurse (LPN) on duty day and night?			
Is an RN on duty during the day, seven days a week? (For skilled nursing facilities)			
Does an RN serve as director of nursing services? (For skilled nursing facilities)			
Are nurse or emergency call buttons located at each resident's bed and in toilet and bathing facilities?			
FOOD SERVICE			
Is the kitchen clean and reasonably tidy?			
Is food requiring refrigeration not left standing out on counters?			
Is waste properly disposed of?			
<p>Ask to see the meal schedule.</p> <ul style="list-style-type: none"> • Are there at least three meals served each day? • Are meals served at normal hours, with plenty of time for leisurely eating? • Are nutritious between-meal and bedtime snacks available? • Are residents given enough food? • Does the food look appetizing? • Sample a meal. Is the food tasty and served at the proper temperature? • Does the meal being served match the posted menu? • Are special meals prepared for residents who require therapeutic diets? 			



	YES	NO	NOTES
<p>Is the dining room attractive and comfortable?</p> <ul style="list-style-type: none"> • Is there enough room to navigate wheelchairs? • Is there room to push chairs aside so that wheelchairs can be pushed up to the tables? 			
<p>Do residents who need assistance eating, receive it in a timely manner?</p>			
SOCIAL SERVICES AND RESIDENT ACTIVITIES			
<p>Are there social services available to aid residents and their families?</p>			
<p>Does the nursing facility have a diverse program of recreational activities for residents?</p> <ul style="list-style-type: none"> • Is suitable space available for resident activities? • Are tools and supplies provided? • Are activities offered for residents with limited mobility or who are confined to their rooms? • Are activities scheduled daily, at various times of the day? 			
<p>Do residents have an opportunity to attend religious services and talk with their clergymen, both in and outside the facility?</p>			
RESIDENTS' ROOMS			
<p>Does each room open onto a hallway?</p>			
<p>Does each room have a window to the outside?</p>			



	YES	NO	NOTES
Does each resident have: <ul style="list-style-type: none">• A reading light• A comfortable chair• Closet space and drawers for personal belongings• Either a telephone provided by the facility, or the option of having a phone installed in their room at their own expense.			
Is there fresh drinking water within reach?			
Is there a curtain or screen to provide privacy for each bed?			
Do bathing and toilet facilities have adequate privacy?			
OTHER AREAS OF THE NURSING FACILITY			
Is there a lounge where residents can chat, read, play games, watch television or just relax away from their rooms?			
Is a public telephone available for residents and visitors use?			
Are there separate bathroom facilities available for visitors?			
Does the nursing facility have an outdoor area where residents can get fresh air and sunshine?			
FINANCIAL AND RELATED MATTERS			
Do the estimated monthly costs (including extra charges) compare favorably with those of other facilities?			
Is a refund made for unused days paid for in advance?			
Are visiting hours convenient for residents and visitors?			
Are these and other important matters specified in the contract?			