Residential Care Facility Visitation Checklist

Sta	Staff		stand, reading light, chest of	
	Do the administrator/manager and director of nurses appear to know		drawers, and at least one comfortable chair for each patient?	
	the patients? Does the staff show interest in individual patients?		Are beds easy to reach? Is there room to maneuver a wheelchair easily?	
	Is the staff courteous?		Is closet space sufficient? Is	
	Is the staff's attitude condescending or are patients		additional storage space available if needed?	
	treated with dignity and respect?		Is there a call button near each bed?	
	Does the staff use childish nicknames when speaking with patients? Do they talk about patients as if they were not present or as if they were children?		Are patients allowed to have any of their own furniture? Can they hang pictures on the walls? Have patients personalized their rooms?	
	Examples: "She really doesn't understand" or "Isn't he cute?"		Are provisions made for privacy such as cubicle curtains around	
	Is privacy respected? Example: Knocking on doors before entering rooms; keeping cubicle curtains		each bed?	
		Resident Lounge Areas		
	drawn while care is being given.		How many lounge areas are available for patients? In nursing	
	Are calls for assistance responded to within a reasonable amount of time?		homes, there should be at least one such area.	
Resident Rooms			Does there seem to be sufficient space for visitors, conversation, TV	
	In which area of the home would a new patient be assigned a room?		watching?	
			Are lounges clean, comfortable, furnished, and generally pleasant?	
Ш	Are rooms active, cheerful, clean and well lit?		Are non-smoking and smoking	
	How many patients share a room? (Ordinarily, rooms should have no more than four beds, at least three feet apart.) Is there a bedside		areas established?	

Act	tivity Areas		Are there handrails in all		
	Is there a variety of equipment available?		corridors? Are exits clearly marked and easy		
	Is there adequate space to accommodate large groups of patients? To accommodate wheelchairs?		to reach?		
			Are fire extinguishers visible?		
			Are floors clean and non-slippery?		
Activity Programs			Are seasonal or holiday decorations evident, if		
	Are activity calendars posted? If not, ask for a description of regularly scheduled daily activities and upcoming events and ask why a calendar has not been posted.		appropriate? Is there an obvious odor? 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		
	Do the activities cover a variety of interests?				
	Do patients participate in planning the activities? Observe the degree of patient participation in planned		conscientious care and maintenance.		
	activities.	-	Specialized Service Areas – Occupational and Physical Therapy		
	Are activities planned for patients who are confined to their room or				
_	bed?	Roo	oms		
	Does the home have volunteers? What is the extent of their		Is there a variety of equipment?		
	participation?		Are the rooms clean?		
	Are arrangements made for patients to practice their religious		Is there evidence that the rooms are being used?		
	beliefs? Is there a patient council? How active is it? What functions does it perform?		How many people staff the department(s)?		
		Kitc	chen Area		
			Is there a variety of equipment?		
Ha	llways and Stairs		Is there adequate ventilation?		
	Are halls and stairs well lit and clean? Are stairways clearly marked?		Is there adequate refrigeration capacity?		
	Are halls wide enough to accommodate the passage of wheelchairs?		Are foods stored in a clean, dry area? Does the staff handle food in a safe, sanitary manner?		
	Are halls free of obstacles such as cleaning equipment, chairs, and laundry carts?		Does the staff wear hairnets?		

Dini	ing Area		Who plans the meals? If the facility
	Is the dining area pleasant, comfortable, clean and easily accessible?		does not have a full- or part-time dietician, there should be regularly scheduled consultations. Considerations must be given to ethnic food preferences unless a patient has special dietary needs prescribed by the physician. California law requires that not more than 14 hours elapse between evening meal and breakfast and that bedtime snacks be offered to all patients unless it is
	Are patients encouraged to eat there? Is it large enough to hold the majority of patients?		
	Are tables convenient for wheelchairs?		
	Is the atmosphere relaxing or do mealtimes appear chaotic?		
Mer	nus and Food		not medically advisable.
	Visit the facility at the time of the midday meal, often the main meal. Observe the manner in which the food is being served as well as the patients' general reaction to the food.	Batl	hs and Shower Rooms
			Are bathrooms conveniently located?
			How many patients share a bathroom?
	Has the home served the same food as is listed on the menu?		Do bathrooms have handgrip or rails near all toilet and bathing areas?
	What methods are used to keep hot foods hot and cold foods cold?		Is there a call button near the toilet?
	Are dishes and silverware used or are disposable plates and utensils used?		If bathrooms are without showers or tubs, ask to see the shower or
	Does the food appear appetizing? Does it smell appetizing?		
	Do patients appear to be enjoying their meal or do many leave portions of their food untouched?	Mis	patients receive baths. Miscellaneous Does the facility have a staff social worker? What duties does he or she perform?
	What provisions are made for patients who are ill and unable to		
	eat in the dining room? If patients are unable to eat in the dining room, is their food kept hot until it is served?		How is transportation provided for trips to hospitals, medical offices, or community functions? Is there a charge?
	Menus are often posted. If none are posted, ask to see a sample menu.		Are podiatry and dental services available?
	How often are meals repeated? Are alternatives available?		What arrangements does the home have for personal laundry?

Are beauty and barber shop		
services available? At what cost? How often?		
Are religious services available?		

For a home to become licensed, it has to meet the standards of the California Health and Safety and Administrative Codes. However, you should still check the facility in terms of its overall environment, including safety.

Resources

Southern Caregiver Resource Center

891 Kuhn Drive Ste. 200 Chula Vista, CA 91914

(858) 268-4432; (800) 827-1008 (in CA)

Fax: (858) 268-7816

E-mail: scrc@caregivercenter.org Web site: www.caregivercenter.org

Southern Caregiver Resource Center offers free support services to caregivers of adults with chronic and disabling conditions in San Diego and Imperial counties. Services include information and referral, needs assessments, care planning, family consultation, case management, individual counseling, legal and financial consultation, respite care, education and training, and support groups.

California Advocates for Nursing Home Reform (CANHR)

www.canhr.org

National Center for Assisted Living www.ncal.org