

## Questionnaire: Initial Questions For Administration & Staff

*Ask the following questions to help determine whether a residence is right for you.*

1. Is the facility licensed and, if so, what type of license does it have?
2. Is there an inspection report available to review?
3. How stable is the residence financially? [Ask for a copy of their annual report. Search online for any media coverage of the company.]
4. Who draws up the Resident Service Plan (an individualized list and schedule of which services each resident receives, and when they are to receive them)? How involved is the resident and family in this process?
5. If monthly fees are based on a service formula, how often is it reassessed? When fees rise, how far in advance are residents notified?
6. Who decides about transferring residents within and outside the residence?
7. Is a nursing home affiliated with or attached to the residence? [If yes, we recommend visiting the nursing home and viewing its rating on <https://www.medicare.gov/nursinghomecompare/search.html?>.]
8. How are grievances handled?
9. Is there a Resident Council? A Family Council? If so, who run the councils?
10. Is there a probationary period after a resident moves in?
11. What happens in a medical emergency?

*Questionnaire: Initial Questions For Administration & Staff*

12. What are the facility's training and professional requirements for staff who provide resident monitoring and services?

13. How many staff are in the facility during the day, overnight, and on weekends?

**14. Do frailty or a medical condition limit your choices and activities, such as walking or eating certain food? If so, ask the staff:**

14a. How do you deal with residents who have a history of falling, but who like to go for walks alone outside the building?

14b. How do you react to residents who occasionally eat foods not on their diets?

**15. Is it important for you to do things that others might consider unsafe, but seem either safe or worth the risk to you? If so, ask the staff:**

15a. Can I come and go as I please?

15b. Can I take a late night walk if I want?

16. Can I smoke? In my room? In special areas in the building or on the grounds?

17. Can I drink alcohol? In my room, public areas, or the dining room?

18. What if I want to do something my family deems unsafe?

Notes:

## Questionnaire: Your Needs and Preferences

These questions can help you better understand your needs and preferences, and how they can be addressed by a prospective residence.

What are your needs and preferences in respect to...	Questions to Ask
Walking? Dressing? Eating? Bathing? Toileting?	Can I decide when I: <ul style="list-style-type: none"> <li>• Get up?</li> <li>• Go to sleep?</li> <li>• Eat breakfast, lunch, and dinner?</li> <li>• Shower or bathe?</li> </ul> Are there snacks available 24/7 (and what are they)?
Cooking?	If there's a kitchenette, is it open 24/7? Can residents access appliances such as a refrigerator or microwave?  If no kitchenette, what opportunities are there to prepare snacks or meals?
Doing laundry?	Is there a laundry for residents' use?  Can I do my own laundry?
Having visitors?	Can I have visitors at many times of day?
Reading?	Can someone from the residence read to me? Can someone read to me in my language if it isn't English?  Are large-print books available? Audiobooks?
Getting places?	What transportation is available from the residence?  What options are there for individuals to schedule outings other than medical appointments, residence scheduled trips, or other group trips?  What public transportation is available, and is it accessible?  What's within safe walking distance for me? (Shopping? Park? Library? Bank?)  Do residents have a curfew?

*Questionnaire: Your Needs & Preferences*

	What are the procedures if I decide to stay overnight with a friend or go on trips overnight?
Maintaining involvement in your neighborhood and larger community?	What opportunities are there to continue my community activities, such as attending my place of worship, or clubs or organizations to which I belong?
Other community involvement?	What other opportunities are there to engage in community activities?
Regular supervision from a doctor or nurse because of a medical condition? Managing or taking your medications?	What opportunities are there to be involved and have a say in my medical treatment? Can I refuse medications, services or treatment?

Notes on Needs and Preferences:

## Questionnaire: Will the Physical Layout Meet Your Needs?

Each of your visits should include a tour of the building, grounds, and neighborhood, and should offer sufficient opportunity to ask questions. Here's what to look for on your visits.

**Note:** This questionnaire contains five pages and 12 categories. Focus on the categories that matter to you.

### 1. Entrance

- Does it allow easy access outdoors and to the rest of the building?
- Can I enter from the street without using steps?
- Is there room for wheelchairs and walkers?
- Are residents engaged in socializing or participating in activities in the lobby and other public areas? Or do too many seem stuck in their rooms?

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### 2. Individual Units

- Is there variation in the design and decoration of the resident units?
- How much of my own furniture and furnishings can I bring?
- Can I arrange furniture as I like?
- Do I have a key to my unit? Can I lock the door from the inside?
- Who else would have access to my unit?
- Do I have individual temperature control?
- Can I have overnight guests without checking with management?
- What storage space is available?

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*Questionnaire: Will the Physical Layout Meet Your Needs?*

**3. Kitchen**

- If there is a kitchen or kitchenette, can I reach the cupboards?
- What appliances are provided?
- What appliances may I have in my room (e.g., a small refrigerator, microwave, coffee maker, tea kettle)?
- If there's no kitchen, what opportunities are there to prepare my own meals?

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**4. Bathroom**

- Are bathrooms shared or private?
- Are there safety railings in the bathroom and a seat in the shower or tub?
- Are there call bells in the unit? In the bathroom?

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**5. Dining Room**

- What food choices do I have?
- Can I choose when to take my breakfast, lunch, and dinner?
- What if I'm hungry at 2 a.m.?
- How is dining room seating arranged, and what are my options?
- Can I eat alone?
- Can I eat in my room?

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*Questionnaire: Will the Physical Layout Meet Your Needs?*

**6. Common Areas**

- Where are the common areas for residents?
- What activities do they provide for residents (e.g., social lounges, quiet sitting areas, a library, a games or hobbies room)?

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**7. Hallways**

- Are there handrails?
- Is the lighting adequate?
- Are the floors non-skid?
- Is it easy to find my way around the building?

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**8. Lighting, Layout, and Physical Condition**

- Is the lighting bright?
- Do I like the layout?
- Does the building seem in good shape?

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**9. Outside Areas**

- Are there communal areas including covered porches protected from the weather?
- Are they safe (enclosed, visible from facility, with call bells)?
- Are there sidewalks, paths, and walkways accessible to people in wheelchairs or using canes and walkers?
- Are there benches and chairs for resting?

*Questionnaire: Will the Physical Layout Meet Your Needs?*

- Are tables available?

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**10. Staff**

- Do staff members refer to residents by name?
- Do they treat residents with dignity and respect?
- Do they seem to care about the residents? Do they ignore residents or seem patronizing?
- Is my tour guide asking me about my own needs?
- For how many hours are staff trained in first aid, CPR, emotional needs, and residents' rights?
- If I speak a language other than English, is there staff available to understand me and communicate my needs and preferences to others?
- Is a nurse on staff?
- Do doctors visit periodically?
- Can I continue to use my current doctor?

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**11. Pets**

- Is there a chance to keep my pet, which may help me feel much happier?
- If I'm allergic to pets or don't like them, is there a way for me to avoid them?

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## **12. Neighborhood**

- Is the residence integrated into the neighborhood or surrounding area?
- Is it in easy walking distance to local shops, a grocery, pharmacy, library, bank, post office, movie theater, park, church, mosque, or synagogue?
- Is public transportation or para-transit available?
- Is there enough outdoor space?
- Are the sidewalks flat?

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## Questionnaire: Questions & Considerations Before Signing a Residency Agreement

It is important to understand what services are included in the basic monthly fee and what services will incur additional costs. Use the following list of common services and fees to get a sense of a specific assisted living's charges and to compare charges and policies between different communities under consideration.

Service	Included?	Notes
Room		
Meals		
Snacks		
Housekeeping		
Activities in the assisted living		
Activities in the outside community		
Personal care services		
Bathing assistance		
Medication assistance		
Additional fees or recurring charges (such as an entrance fee or community fee)		

## Questions For Staff: When Might I Need to Move?

**Can you care for me here if I become frailer?** An assisted living residence may lack the staffing or expertise to care for you if you become sicker and more disabled. Ask:

1. How much staff is there? What are their qualifications? Is there an RN on staff and how frequently are they at the facility?
2. What is the facility's policy in respect to residents with Alzheimer's Disease or other cognitive impairment (including early stage and later stages)?
3. What disabilities would cause me to move?
4. What trainings are required for staff? (e.g., elder care, dementia care, medication management). How frequently do they receive training?
5. Are therapeutic programs and assistive devices available?
6. Can you adapt my apartment or room if I become more dependent?
7. What happens if I become incontinent (or need a wheelchair, oxygen, I.V.)?
8. Will I have to move my room or apartment if I become more dependent?

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