

ADULT FAMILY HOME CHECKLIST

Carry this checklist with you when you visit an Adult Family Home. Simply print one checklist per home you plan to review. The checklist is designed to help you know what to look for and to remember what you saw. Use the back of the checklist to write down any additional comments. After visiting the homes, use the checklists to compare one provider with another.

Home Name: _____

Owner: _____

Address: _____

Phone: _____ Website or E-mail: _____

Who is Served?

Yes No

- Can the home provide the level of assistance you require, given your current condition?
- Are there medical conditions the home will not accept? If yes, what are these conditions? _____
- Are there medical conditions or other criteria which might require you to leave at some point? _____
- Is there a waiting list?
- Are pets allowed?
- Are you comfortable with the rules and regulations stipulated in the residency agreement?

Services

- Are meals provided at convenient times?
- Are special diets taken into consideration when meals are prepared?
- Are snacks available between meals?
- Can medication reminders be given if needed?
- Is there a hospital close by? How far to the nearest hospital? _____
- Is assistance provided with eating, bathing, dressing, toileting or other personal tasks, if needed?

- Does the home offer social and recreational activities that you enjoy?
 - Are there health promotion and exercise programs?
 - Are residents actively involved in planning activities and events?
 - Is transportation available to community activities that you enjoy?
 - Are other services available? If yes, what are they? _____
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Caregivers

- Are there sufficient caregivers in the home?
- What is the staff to resident ratio? _____
- Is staff trained in emergency procedures, including CPT?
- Does the home require criminal records checks and drug screening for caregivers?

Physical Environment

- Does the home have private rooms?
- Can you furnish the room with your own furniture?
- Is the room large enough that you feel comfortable?
- Are the common areas (family room, kitchen, etc.) sufficiently large and comfortably furnished?
- Are there outside areas that residents may use?
- Are there sufficient handrails and grab bars, especially in the bathroom?
- Is the home wheelchair accessible?
- Is there adequate security?

Credentials/Licensing

- Is the home certified?
 - Are caregivers credentialed? If yes, what are the credentials? _____
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How many years has the home been in operations? _____

Cost

- Is a written fee schedule provided?
- Approximately, what would the basic monthly rate be? _____
- Do you know what the basic rate does and does not include?
Includes: _____
Does not include: _____
- Can the basic monthly rate be raised? If so, how often? _____

- If there a cap on how much the rate can be raised?
- Is an application or deposit fee required? If yes, how much? _____

- Are these fees refundable (at least partially) if the event that you need to leave the facility?
- Are there fees for add-ons, such as cable, telephone, internet, etc.? If so, what and how much? _____
- What procedures are in place if you can no longer afford the fees? _____

Overall Quality

Rate the Adult Family Home in the following areas on a scale from one to ten with ten being a perfect score:

- | | |
|---|----------------------|
| Are the home and its grounds well maintained? | 1 2 3 4 5 6 7 8 9 10 |
| Is the home nicely furnished and homey? | 1 2 3 4 5 6 7 8 9 10 |
| Is the food tasty and served attractively? | 1 2 3 4 5 6 7 8 9 10 |
| Is the kitchen clean and well-stocked? | 1 2 3 4 5 6 7 8 9 10 |
| Do caregivers seem pleasant and responsive to your needs? | 1 2 3 4 5 6 7 8 9 10 |
| Is the location close to your family and friends? | 1 2 3 4 5 6 7 8 9 10 |