

# *Your Way!* Questionnaire

## For Assisted Livings

### Summary Sheet

**Directions:**

- Make copies of this form for each Assisted Living that you are going to visit for a tour.
- Number each Assisted Living so that you can correlate this number on the Assisted Living Comparisons Summary Sheet on page 7. Make sure you place this number on the top of each page so that you can easily keep track of the information.

Assisted Living Comparison Number:		
Name: _____		
Address: _____		
Phone: _____		
Contact: _____		
Notes:		
Evaluation Area	Assisted Living Score (number of “yes” responses in each category on the attached Questionnaire)	Comments
Care Practices		
Environment		
Dining		
Everyday Life		
Culture Change		

## *Your Way!* Questionnaire

<b>Assisted Living Comparison Number:</b>				
<b>Care Practices</b>				
Questions	Yes	No	Comments	
Is the same Nursing Assistant consistently assigned to care for the same elders?	<input type="checkbox"/>	<input type="checkbox"/>		
➤ When the regular Nursing Assistant is not scheduled to work, is a substitute Assistant consistently assigned to care for the same elders?	<input type="checkbox"/>	<input type="checkbox"/>		
Is the same Nurse consistently assigned to care for the same elders?	<input type="checkbox"/>	<input type="checkbox"/>		
➤ When the regular Nurse is not scheduled for work, is a substitute Nurse consistently assigned to care for the same elders?	<input type="checkbox"/>	<input type="checkbox"/>		
Can elders decide when to go to bed and wake up in the morning?	<input type="checkbox"/>	<input type="checkbox"/>		
Can elders get a bath or shower as often as they would like?	<input type="checkbox"/>	<input type="checkbox"/>		
➤ Can elders select between a bath or shower?	<input type="checkbox"/>	<input type="checkbox"/>		
Will the staff meet with the elders, and/or the family, to discuss concerns whenever they would like?	<input type="checkbox"/>	<input type="checkbox"/>		
Is an initial assessment of needs conducted and a written care plan/service plan developed?	<input type="checkbox"/>	<input type="checkbox"/>		
**Do you offer special services for Alzheimer's/Dementia care?	<input type="checkbox"/>	<input type="checkbox"/>		
Observations	Yes	No		Comments
Do the elders look well cared for?	<input type="checkbox"/>	<input type="checkbox"/>		
Do you observe staff smiling and saying hello to elders, each other and visitors?	<input type="checkbox"/>	<input type="checkbox"/>		
<b>Care Practice Totals</b>	<input type="checkbox"/>	<input type="checkbox"/>		

\*\* ask if pertinent to the elder/family

<b>Assisted Living Comparison Number:</b>			
<b>Environment</b>			
<b>Questions</b>	<b>Yes</b>	<b>No</b>	<b>Comments</b>
Is visiting time unrestricted?			
Does the Home have a garden/outdoor space that the elders can access without staff and is wheelchair accessible?			
Is there space available for families and visitors to visit in private besides just the elders' room?			
Can elders decorate their own rooms with bedding and pictures?			
Can elders bring in their own furniture to decorate their room?			
<b>Observations</b>	<b>Yes</b>	<b>No</b>	<b>Comments</b>
Do the elders rooms look spacious and comfortable?			
Does the Home appear clean and is it free of objectionable odors as you walk through the hallways?			
Are hallways well lit and easy to navigate, with handrails for safety and plenty of room for wheelchairs?			
Ask to see where elders bathe. Does this space look clean, comfortable and safe?			
Is there no overhead paging going on throughout the hallways?			
<b>Environment Totals</b>			

<b>Assisted Living Comparison Number:</b>				
<b>Dining</b>				
Breakfast:	Meal time Hours		Dinner:	
	Lunch:			
<b>Questions</b>	<b>Yes</b>	<b>No</b>	<b>Comments</b>	
Can the residents bring food back to their rooms, and/or are there kitchens in the rooms?				
If someone doesn't want to eat at the time of the meal, can they eat later?				
Can the community cater to specific dietary needs or special requests?				
Is there restaurant, buffet, and/or family style type of dining?				
Can elders select from at least two choices for their entree?				
Can visiting family members join the residents for meals? (at a cost or for free)				
Are snacks and drinks available 24-hours a day?				
Is there a private room available for family celebrations or private family dinners?				
<b>Observations</b>	<b>Yes</b>	<b>No</b>		<b>Comments</b>
Are elders eating without trays?				
Are elders sitting at the same table served their food about the same time?				
Are elders' mealtime requests provided in a prompt manner?				
Do staff give individual assistance to those that need it?				
Is there a pleasant aroma in the dining room?				
Sample the food. Does it taste good?				
Does the dining room have a comfortable feel to it?				
<b>Dining Totals</b>				

Assisted Living Comparison Number:			
Everyday Life			
Questions	Yes	No	Comments
Are elders' birthdays celebrated on the actual date and not just at a group celebration every month?			
Will the Home accommodate specific daily interests of the individual?			
Do children come into the Home to interact with the elders?			
Do elders have access to a computer and internet?			
Are barber and beauty services provided?			
Is there a store, gift shop or cart available where elders can purchase items?			
Does the Home have any pets?			
Are elders allowed to bring their own dog or cat to <i>live</i> with them in the Home?			
Do elders have access to washers and dryers to do their own laundry if they would like?			
Is housekeeping provided for units?			
Are visits to the residents allowed at any time?			
Are residents allowed to have overnight guests, such as a family member from out of town?			
Observations	Yes	No	Comments
Are elders smiling?			
Are families smiling?			
Look at the Activity Calendar. Are there a variety of activities offered such as religious, educational, and fun things as well as weekend and evening programs?			
<b>Everyday Life Totals</b>			

<b>Assisted Living Comparison Number:</b>			
<b>Culture Change</b>			
<b>Questions</b>	<b>Yes</b>	<b>No</b>	<b>Comments</b>
Are you a Culture Change Assisted Living?			
Have Staff received training in culture change and person centered/directed care?			
Do you measure staff satisfaction?			
Do you measure elder/family satisfaction?			
<b>Culture Change Totals</b>			
What other things do you do to consider yourself a Culture Change Assisted Living?			

<b>Assisted Living Comparison Number:</b>	
<b>Other Important Questions</b>	
<b>Questions</b>	<b>Response</b>
What is your percentage of Nursing Assistant Turnover?	
How long has the Administrator/executive Director worked here in this position?	
How long has the Director of Nursing worked here in this position?	
How many elders does each Nursing Assistant care for during a shift?	
How many elders does each Nurse care for during a shift?	
Do you provide staff with training and education?	
How many citations did the facility receive during the most recent survey from the state regulatory inspectors?	
Whom do I go to if I have a problem:	

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## Nursing Home Comparisons Sheet

Use the table below to compare the Assisted Livings that you have visited. Some of the questions asked are going to have more value and meaning for one person over another, so don't just make your decision based upon the overall score.

*In order to make the right decision for you or your loved one, you need to decide what is important to you personally.*

<b>Assisted Living:</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>Comments</b>
Care Practices:					
Environment:					
Dining:					
Every Day Life:					
Culture Change:					
Nursing Assistant Turnover percentage:					
Longevity of the Administrator:					
Longevity of the Director of Nurses:					
Number of Residents each Nursing Assistant cares for:					
Number of Residents each Nurse cares for:					