THE NEW WISHARD
ESKENAZI HEALTH

1001 West 10th Street, Indianapolis, IN 46202 • 317-639-6671 • Wishard.edu

Nursing Home Checklist

Basic Information

- ✓ Is the facility Medicare/Medicaid certified?
  - Medicare is for short stays requiring skilled nursing care
  - the longer it's been certified, the better
- ✓ Is it a skilled nursing facility?
- ✓ Is it accepting new patients?
  - Who would potential roommates be? Are they similar personality? You can request room changes if a bed is available
- ✓ Is there a waiting period?
- ✓ Tour the facility during 'off' hours in the evening and weekends
- ✓

Nursing Home information

- ✓ The Administrator should be licensed with the State
- ✓ Background checks should be done on all staff
- ✓ All staff should be educated annually on abuse/neglect
  - Examples: verbal, physical, laundry
- ✓ Specialty care units (Alzheimer's) should be offered
- ✓ What disciplines are present daily
  - Nursing, aides, recreation, social work, dietitian/dietary manager
- ✓ What additional services are provided?
  - Dental, wound care, psychiatrist/psychologist
  - The facility should allow an outside MD to follow a resident
  - How often does the medical director come or his nurse practitioner?
- ✓ Resident Rights should be clearly posted
- ✓ Board of Health/State Survey book should be at the front desk or available upon request
  - Have there been citations for abuse? Fines been made?
  - Are all citations resolved?

Facility Atmosphere

- ✓ Well lit, welcoming and free of odor
- ✓ Floor clean of trash and spills
  - dirty clothes, rags should not be on the floor, but in dirty clothes bins in the hall (closed)

- ✓ Handrails along walls
- ✓ Residents should be allowed to have some personal belongings/furniture in rooms
- ✓ Wheelchair accessible doorways (dining room, chapel, etc)
- ✓ Extra services provided (salon, gift shop, library, transportation to other places)

Staff

- ✓ Ask the ratio of staff to residents
- ✓ Observe the interaction between staff and residents
- ✓ Are the staff attending to residents of talking on the phone, reading, etc

Care

FACILITES DO NEED TO FOLLOW STATE GUIDELINES, BUT ALL CARE SHOULD BE INDIVIDUALIZING CARE BASED ON THE RESIDENT!!

- ✓ Recreation calendars should be posted with varied activities planned throughout the day.
    - Observe participation (are they attended and enjoyed?)
    - Religious activities offered?
    - Is there a hobby or interest of the resident that the facility can help facilitate
        - Folding laundry
- ✓ Resident Council monthly
- ✓ Watch for signs of isolation
    - Doors should be opened
    - Privacy curtains pulled back
- ✓ Residents should be clean and dressed
    - Check shower schedule
- ✓ Call light response time
- ✓ Water at bedside, in reach. Should be fresh at every shift change
- ✓ Residents unable to turn themselves
    - Turn schedules
    - Special mattress
- ✓ Incontinence care/Bowel and Bladder Program
- ✓ Wound care prevention

- ✓ ADL (activity of daily living) assistance
- ✓ Limited use of physical restraints
- ✓ Records
    - Medication, skin, weight, pain
- ✓ Therapeutic services available
    - Physical, occupational, speech therapy
    - Restorative therapy program

Diet/Nutrition

- ✓ Water at bedside
- ✓ Menu selection
- ✓ Food appearance and temperature
- ✓ Dining room appearance/environment
- ✓ Food Committee monthly to voice concerns
- ✓ Snacks offered b/t meals and *HAS* to be offered in the evening
- ✓ Modified diets
- ✓ Supplements
- ✓ Food Acceptance Records
- ✓ Assistance provided
- ✓ Dignity maintained

Care Plans

- ✓ offered within 2 weeks of being admitted, then every 3 months
- ✓ resident and responsible party/advocate to be notified of date/time and asked to attend
    - social worker normally takes care of this, so ask if you're not being notified and want to
- ✓ should identify problems AND ***potential*** problems and what the facility is doing to correct/help and/or prevent the problem
    - Resident A is a picky eater, is at risk for wt loss so what has the facility done to help this problem and prevent to weight loss
    - Resident B can't feed/dress herself due to a stroke and can't voice her needs- does the care plan address the assistance she needs to eat and how are they addressing/monitoring her needs
    - If you see a problem or potential problem and it wasn't already addressed in the care plan, don't be afraid to ask!
- ✓ normally ~20 min long
- ✓ If there are issues, you can ask for a care plan meeting before your next scheduled date!!

Resources:

www.medicare.gov

- choose 'resource locator', select 'nursing homes'
- you can search and compare nursing home ratings and assess state survey results
- also provides a checklist and rating sheet you can use as you tour

www.in.gov/isdh/reports/QAMIS/rptcrd/rptcrd1.htm