



Checklist for Evaluating a Nursing Facility or Assisted Living Facility

Facility Name and Address:

Phone:

Social Worker's Name:

Ample Parking? Yes / No	Comments:
Greeted As You Enter? Yes / No	Comments:
Nice and Clean Common Areas? Yes / No	Comments:
Do the Residents Look Happy and Attended? Yes / No	Comments:
Are the Floors Clean? Yes / No	Comments:
Is the Nurse's Station Attended? Yes / No	Comments:
Are the Call Buttons Being Answered Promptly? Yes / No	Comments: If Not, How Long Does It Take To Respond?
Are the Rooms Large Enough for Visitors? Yes / No	Comments:
How Many Residents Per Room?	Comments:
Are the Rooms Clean and Well-Maintained? Yes / No	Comments: How Do They Smell?
How Many Caretakers and Nurses Per Patient?	Comments:
Who Do You Go To When You Have Questions or Need Help?	
How Many Planned Activities Do They Have Per Day For Residents?	
What is the Meal Plan/Menu?	
Is the Food Served Healthy and Balanced? Yes / No	
Comments:	
Does the Food Taste Good? Yes / No	
Comments:	
Do They Offer Physical, Occupational, and Speech Therapy? Yes / No	
What Kind of Equipment Do They Have? _____	

Who Are the Doctors or Nurse Practitioners That Monitor Patients?	
How Often Will I Be Informed of My Loved Ones Progress?	
How Often Do Residents Get a Shower?	
How Long is The Average Stay for a Resident?	
What Are the Visiting Hours?	
Will I Be Informed of a Fall or Illness? Yes / No	
Comments:	

Are There Added Services for Residents like a Hair Salon or Barber Shop? Yes / No Cost? _____
Comments _____

What Items are Residents Allowed to Keep in Their Room? Comments _____

How Much Does It Cost? _____ How Much Does Insurance, Medicare, or
Medicaid Cover? _____ Can We Apply for Veteran's Benefits? Yes / No

Do the Residents Enjoy Living There and are Many Improving Enough to Leave? Yes / No Comments
