

Rest Homes Checklist

This checklist is designed to help you evaluate rest homes and narrow down your choices. We suggest you print several copies and fill them out when visiting different rest homes. A good home should be happy to let you look around and talk to the residents, preferably out of earshot of staff.

NAME OF REST HOME:

ATMOSPHERE

- Is the home warm, clean and homely?
- Are there comfortable, social areas where residents can gather?
- Are there quiet places, other than bedrooms, where they can relax?
- Is there a nice garden and places to stroll or relax outside?
- Are there any unpleasant odours noticeable?

MEALS

- Do meals look appetising and taste nice?
- Do they provide adequate nutrition?
- Is accommodation made for residents with special eating needs or diets?
- Is there a variety of meals on the menu?
- Can residents help themselves to hot and cold drinks and snacks at any time?

PRIVATE ROOMS

- Are the rooms clean and comfortable?
- Do the rooms get any sun?
- Is there adequate lighting?
- Can the bedroom temperature be individually controlled?
- Are the rooms well-insulated?
- Are the call button and reading lamp easily accessible from the bed?
- Are there outlets for a private phone and TV?
- Can residents bring their own furniture, or hang things on the wall?
- Are toilets and showers easily accessible and private?
- Are there policies and procedures to protect residents' possessions?
- Are pets allowed?

ACTIVITIES

- Is there a good range of leisure facilities, such as a pool table, music room, library, TV room?
- Are there regular outings to the beach, museums, concerts, etc?
- Is there a swimming pool?
- Is there a gym?
- Is there a formal activities programme?
- Are activities overseen by a registered occupational therapist?
- Does the therapist work individually with residents who aren't interested in group activities?
- Are residents able to access spiritual care within the home?

NOTES:

CURRENT RESIDENTS

- Do they appear happy and relaxed?
- Do they appear clean and well cared for?
- Are they treated with respect by staff?
- Can residents choose to have breakfast in bed and get up when they like?
- Can they choose to stay up late at night?

STAFF

- Are staff warm and friendly to residents, visitors and each other?
- Do staff knock and wait for an invitation before entering residents' rooms?
- Do they listen carefully when residents talk to them?
- Do they address residents by their preferred names?
- Are they observant and responsive if a resident requires any sort of help?
- Is there a formal schedule of on-going staff training?
- Do staff have a system for communicating with each other between shifts?
- Is there frequent staff turnover?
- What qualifications do the main caregivers have?

How many caregivers are present on each shift? *Don't trust an answer which refers to the "staffing ratio" which may include administrators, gardeners, cooks and cleaners. Also, be wary of homes which have fewer caregivers on duty in the weekends.*

MEDICAL CARE

- Is a GP on call at all times?
- Can residents retain their own GP?
- How many registered nurses are present on each shift?
- Is a registered nurse on duty at the home at all times?
- Does each resident have a care plan, outlining how their care will be managed over time? *Caregivers should read care plans at the beginning of their shift every day, to ensure they're up to date with residents needs.*
- If a resident has an accident, is the event recorded, the family informed, and steps taken to prevent it happening again?
- Are there regular visits by other professionals, such as dentist, podiatrist, physiotherapist, and occupational therapist?
- Does the home have a system to ensure residents receive the correct medication?
- How often is medication reviewed? Ideally the pharmacist, registered nurse and doctor should review medication together.
- What happens if a resident's condition deteriorates?
- When are their needs reassessed? Could family or friends ask for a reassessment?
- If a resident has a particular condition such as Parkinsons, what relevant facilities does the home provide, and does the staff have special training?

MEDICAL CARE CONTINUED ...

What specialist training to staff have in dementia?

How does the home deal with incontinence?
Be wary of an all-pervasive smell of urine in communal areas, and corridors. It's also not a good sign if chair cushions have been recovered in vinyl.

How is wandering and restless behaviour managed? *Check the security of gates and fences in a secure unit.*

What is the policy on resuscitation?

What is the policy on restraint and sedation?
A good answer will explain the circumstances when restraint is used, what would be tried first, who would be consulted, how long the resident would be restrained, and the follow-up.

FAMILY INVOLVEMENT

Can family and friends visit anytime?

How are the family members involved in planning care?

How does the rest home keep family members informed?

Is there a family members' group? If so, how often does it meet?

COMPLAINTS

Is there a clear and adequate complaints procedure?

Is there a residents' committee to act as a forum for complaints, thoughts and suggestions?

Is there an independent resident to advocate to help resolve the problems?

Has the home been the subject of any complaints? If so, what was the outcome?

SAFETY

Is there an evacuation plan?

Are exits clearly marked?

Are there adequate smoke alarms/sprinklers?

Is there easy access between areas, eg, no tricky stairs to climb?

Does the home keep an emergency contact list of residents' family, friends, medical contacts?

Are family members expected to notify the rest home if they go on holiday?

FEES

How much are the fees?

What is not included in the fees and should be budgeted for as an extra expense?

CERTIFICATION

When was the home last audited against the Health and Disability Services Standards?

Did the audit report identify any problems? If so, what were they and have they been rectified?

Will the home give you a copy of its latest audit report?

How long has the home been granted certification for? *The usual length of certification is three years.*

NOTES**VOLUNTARY ACCREDITATION**

Does the home have accreditation from any voluntary aged care accreditation scheme?
The main schemes you're likely to hear about are the Eden Alternative and Quality Health New Zealand accreditation programme.