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Nursing home:

MFS°

Ekua O. Anyanful, MBA, CFP® EA Wealth Management, LLC 4724 Poplar Ridge Drive, Fort Worth, TX 76123 Office: 1.888.539.4470 Website: www.eawealthmangement.com

### ELDERCARE

# **NURSING HOME CHECKLIST**



Choosing a nursing home for a family member can be one of the most difficult decisions you make. Once you have created a list of homes to consider, you may want to make several copies of the checklist on the right and fill in one for each nursing home you visit.

This material should be used as helpful hints only. Each person's situation is different. You should consult your investment professional or other relevant professional before making any decisions.

| Address:   |            |
|--|------------|
| Phone:   |            |
| Contact:   |            |
| Credentials and overall environment  |            |
| Is the facility certified by Medicare and Medicaid?  | 🗌 Yes 🗌 No |
| How long has the facility been certified?  |            |
| Has the facility had stable ownership for some time, with the same administrator and director?                         | 🗆 Yes 🗆 No |
| Is a statement of residents' rights clearly posted?  | Yes No     |
| Does the facility have an Alzheimer's unit or other special-care area restricted to residents with special-care needs? | 🗌 Yes 🗌 No |
| Is this specialty unit separate from other areas of the facility?  | 🗌 Yes 🗌 No |
| Is the facility well lit, clean, safe and welcoming?   | 🗆 Yes 🛛 No |

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#### Location and visiting

Frequent visits will generally improve the resident's mental and emotional well-being and ensure that quality-of-care issues can be addressed as they arise.

| Is the facility convenient to the resident's family members and friends?    | □ Yes □ No |
|---|------------|
| What are the visiting hours?  |            |
| Are family visits welcomed?   | □ Yes □ No |
| Are there restrictions on visits by children?                               | □ Yes □ No |
| Are family members allowed to take the resident out for a day or overnight? | □ Yes □ No |
| Are there areas where family and friends can visit privately?               | □ Yes □ No |
| Is the facility close to the office of the resident's doctor?               | □ Yes □ No |
| Is the facility convenient to public transportation?                        | 🗆 Yes 🗆 No |

#### Mental and emotional well-being

| Are mental health services available?   | 🗆 Yes | □ No |
|---|-------|------|
| Are activities planned each day for the residents?  | □ Yes | □ No |
| Are events regularly scheduled? (Ask to look at the schedule.)  | □ Yes | □ No |
| Are there activities for residents who cannot leave their beds?   | 🗌 Yes | □ No |
| Is there a library available for residents, with large-print and audio books?                               | 🗌 Yes | □ No |
| Is there a small store for purchasing personal items, such as shaving cream, hair care products and snacks? | □ Yes | □ No |
| Are residents able to enjoy outdoor areas, such as an enclosed garden?                                      | 🗆 Yes | □ No |
| Are plants, pets and other natural elements added to the residents' environment?                            | 🗌 Yes | □ No |
| Are residents taken to special community events and cultural activities?                                    | 🗆 Yes | □ No |

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| Rooms |
|-------|
|-------|

| Will the resident share a room and/or a bathroom with one or more other residents?  | 🗌 Yes       | 🗆 No  |
|---|-------------|-------|
| How are roommates and rooms selected?   |             |       |
| f the resident is dissatisfied, can roommates be changed?   | 🗌 Yes       |       |
| How is this accomplished?   |             |       |
| Can the resident bring some of his or her own furniture and decorations?  | □ Yes       | □ Nc  |
| is there enough room to get around between the beds? (Factor in whether wheelchairs must be maneuvered.)  | 🗆 Yes       | 🗆 No  |
| Are nurse and emergency call buttons within easy reach of bed, toilet and bath?   | □ Yes       | 🗆 No  |
| Individual care plans must be implemented for each resident.<br>How often is the care plan reviewed and changed?<br>What is the protocol for handling problems? |             |       |
| Are there regular fire drills?  | □ Yes       | 🗆 No  |
| What bathing facilities are available, and how is bathing handled when the person nee   | eds assista | ance? |
| Nursing home employees  |             |       |
| How are employees selected?   |             |       |
|   | □ Yes       |       |
| Are employees screened for drug use, criminal records or other potential problems?  |             |       |

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#### Nursing home employees (continued)

What is the turnover rate for employees who perform ancillary services, such as meal preparation and financial recordkeeping?

| Are registered nurses or licensed practical nurses on duty at all times?   | □ Yes     |      |
|--|-----------|------|
| s a social worker on staff?  | □ Yes     |      |
| What is the ratio of staff to residents during each shift?<br>Ideally, a facility will have one nurse's aide for every five or six residents between 7 a.n | n. and 11 | p.m. |
| Does the staff treat residents with respect?   | 🗌 Yes     |      |
| Can you talk privately to residents to ask what they think of the facility?  | □ Yes     |      |
| Are staff members available to talk if you have a question about a loved one's care?   | □ Yes     |      |
| Medical care   |           |      |
| s there a physician used by the majority of residents?   | 🗌 Yes     |      |
| What are his or her qualifications?  |           |      |
| How often is the doctor on the premises?   |           |      |
| Does the doctor have a good bedside manner with residents?   | □ Yes     |      |
| May residents consult their personal physicians if they choose?  | □ Yes     |      |
|  | 🗆 Yes     |      |
| Are there arrangements with a nearby hospital in the event of a medical emergency?   |           |      |

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## continued from page 4 Meals **ELDERCARE** Are meals served in a communal dining room or brought to the resident's room? If meals are served in a communal dining room, how are tables assigned? How long does it take for a meal to be delivered to a bedridden resident? How does the food taste, and how is it presented to the resident? Can you stay for a meal? (This will help you gauge the quality of the food service.) ☐ Yes ☐ No Ask for a sample menu. □ Yes □ No Are there special meals for the holidays? **Admission requirements** What financial information will the facility require during the admissions process? Can the resident or his or her representative have copies of all □ Yes □ No admissions documents and contracts for review in advance? How long does the admissions process take? Cost of care What is included in the cost of care? How are extra items billed? □ Yes □ No Can laundry be taken off premises? □ Yes □ No Does this save the resident some costs? How are prescription drugs handled? What is the cost difference between a private and a semiprivate room?

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#### Transportation services

If required nonemergency medical services (such as dialysis) are not available on the premises, how is transportation arranged?

What about transportation to other places, such as local stores and religious services?

| Resources  |                                 |
|--|---------------------------------|
| On the Internet or by phone                                    |                                 |
| AARP<br>www.aarp.org   | 1-888-OUR-AARP (1-888-687-2277) |
| Eldercare Locator<br>www.eldercare.gov                         | 1-800-677-1116                  |
| Family Caregiver Alliance<br>www.caregiver.org                 | 1-800-445-8106                  |
| National Caregiving Foundation<br>www.caregivingfoundation.org | 1-800-930-1357                  |
| Leading Age<br>www.leadingage.org                              | 1-202-783-2242                  |

#### Contact your financial advisor for more information or visit mfs.com.

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