

Checklist for visiting Communities



SENIOR LIVING OPTIONS^{LLC}
Caring advice for the next step in life

| | |
|----------------|---------|
| COMMUNITY NAME | CONTACT |
| PHONE | EMAIL |

COMMUNITY SERVICES

Staff available 24 hours a day Yes No

MEALS:

3 meals per day Yes No

2 meals per day Yes No

Meal plan packages Yes No

Special dietary needs such as low sodium, sugar free options Yes No

Emergency call or response system in each apartment Yes No

Activities & events (frequency, types, quality) Yes No

Scheduled transportation to doctors/errands Yes No

Utilities are they included Yes No

Cable and telephone Yes No

Housekeeping Yes No

Linen service included or extra Yes No

Laundry facilities on site Yes No

Barber/beauty salon on site Yes No

Fitness equipment and exercise programs Yes No

Frequency and with instructor Yes No

Pet policy Yes No

Emergency protocol for residents Yes No

Spiritual services available on site Yes No

Or other

NOTES

VISIT TOUR

Grounds, landscape and building exterior kept up Yes No

Pleasantly greeted upon entering the community Yes No



Checklist for visiting Communities

VISIT TOUR (continued)

- Activity in the building upon entering Yes No _____
- Décor was attractive and home-like Yes No _____
- Community in good repair, clean, free of odor and pleasant in temperature Yes No _____
- Floor plan layout was easy to navigate Yes No _____
- Wide hallways Yes No _____
- Ample natural and artificial lighting Yes No _____
- Staff members interacted with you when you passed by during the tour Yes No _____
- Care levels- how many and related costs Yes No _____
- Medication management costs included or separate Yes No _____

APARTMENT

- Full Kitchen Yes No _____
- Kitchenette Yes No _____
- Emergency pull cords or emergency response system Yes No _____
- Handrails in bathroom Yes No _____
- Pull down shower chair Yes No _____
- Hand held shower Yes No _____
- Good natural and artificial lighting Yes No _____
- Individual climate control Yes No _____
- Non-skid flooring and firm carpets for walking ease Yes No _____

WHAT ARE THE APARTMENT/ROOM TYPE CHOICES? CHECK ALL THAT APPLY:

- Studio apartment
- 1 bedroom apt.
- 2 bedroom apt.
- Bedroom with private bath
- Bedroom with shared bath
- Shared bedroom with bath

MONTHLY BREAKOUT OF COSTS

- Monthly rent: _____
- Estimated monthly Care: _____
- Any additional cost: _____
- Security deposit: _____
- Other: _____

