

# Self-Assessment Questionnaire: Assisted Living Communities

Facility: \_\_\_\_\_

Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_

Employment Practices	Yes	No	N/A	Comment
<b>Hiring:</b>				
Are formal employment policies established?				
Do they include:				
a. Completion of application?				
b. Verification of educational programs?				
c. Formal verification of licenses and/or certification?				
d. Professional/personal reference checks?				
Are job descriptions established for all positions?				
Do job descriptions:				
a. Accurately reflect practice?				
b. Incorporate ADA requirements?				
Is there an established probationary period?				
<b>Clinical Skills Assessment:</b>				
Are skills/clinical competency evaluated upon hire and annually thereafter?				
Are competency evaluations formally documented?				
Do the evaluations assess skills, as outlined in the job description?				
<b>Staff Development:</b>				
Is there a formal orientation program?				
Is successful completion documented?				
Are ongoing staff development programs provided to all levels of staff?				
a. Is attendance documented?				

Employment Practices	Yes	No	N/A	Comment
Are staff education programs conducted throughout the year and do they address current risk issues, such as the basics of COVID-19 exposure and precautions?				
Are staff members trained annually on emergency preparedness provisions and disease containment strategy?				
<b>Personnel Files:</b>				
Do personnel files contain:				
a. Completed application and resume?				
b. Documentation of background checks?				
c. Signed job description?				
d. Signed confidentiality statement?				
e. Annual performance evaluations?				
f. Attendance at staff development programs?				
g. Health status, including Mantoux tests?				

Area Reviewed	Yes	No	N/A	Comment
<b>Staffing</b>				
<b>Staffing Levels:</b>				
Are there regulatory staffing requirements?				
If so, are these requirements consistently met?				
Is there a registered nurse available 24 hours per day?				
Is there a registered nurse available 8 hours, seven days per week?				
Is staff assigned to specific residents and/or units?				
Do staffing contingency plans accommodate the unexpected event, such as a natural disaster or emergency pandemic conditions?				
Is a list of staff, physicians, vendors, and volunteers who provide care in the facility maintained in the event of a pandemic, to determine non-essential personnel and those services that can be postponed?				
<b>Staff Communication:</b>				
Are formal written and/or verbal reports provided to all levels of staff on all shifts?				
Is a staff communication notebook maintained?				

Area Reviewed	Yes	No	N/A	Comment
a. Does this notebook contain specific information on residents?				
b. If so, is this notebook considered part of the facility's medical record documentation practices?				
Does the facility's emergency preparedness plan contain provisions to ensure staff members remain informed and updated on directives during times of emergency, including but not limited to natural disasters and pandemics?				
<b>Security:</b>				
Are all levels of staff required to wear a photographic identification badge?				
a. Is this monitored for compliance?				
<b>Physician Role</b>				
<b>Physician Orders:</b>				
Are physician orders available upon admission?				
Are only licensed staff permitted to:				
a. Take verbal physician orders?				
• Are these required to be co-signed by the physician?				
• Is this monitored for compliance?				
b. Transcribe physician orders?				
c. Are they entered into a medical record?				
Are there regulatory requirements for frequency of physician visits?				
a. Is compliance monitored?				
<b>Visits and Documentation:</b>				
If no regulatory requirements, are there established facility policies for frequency of physician visits?				
Are physicians' documentation requirements established?				
a. Is compliance monitored?				
Are policies in place governing actions in the event a primary care physician can not be contacted?				
<b>Admissions and Transfers</b>				
<b>Criteria:</b>				
Are criteria for admission established?				
a. Do they incorporate the scope of services that can be provided?				

Area Reviewed	Yes	No	N/A	Comment
Are there formal pre-admission screening activities, and do they include surveillance for infectious conditions?				
Do pre-admission activities include:				
a. Medical record/history review?				
b. In person interview with resident and/or family?				
c. Contact with the physician?				
Is the final admission decision made by the:				
a. Administrator/Community Director?				
b. Medical Director?				
Is there a formal admission packet provided to the resident/family?				
Does this admission packet include:				
a. Resident rights?				
b. Resident contract that includes arbitration clause?				
c. Roles and responsibilities of contracting party?				
d. Fire safety information and policies?				
e. Resident/family grievance policy?				
f. Healthcare proxy and living will information?				
g. Transfer policies?				
h. Medical emergency protocols?				
<b>Transfers:</b>				
Are criteria established that would warrant a resident's automatic transfer to another level of care?				
Are alternative solutions made available to residents/families prior to initiating transfer?				
Are processes in place to assist resident/family with transfer activities?				
<b>Nursing Assessments and Clinical Programs</b>				
<b>Initial Assessment:</b>				
Is an initial nursing assessment completed upon admission?				
a. Is this completed by a registered nurse?				
Does the initial nursing assessment include:				
a. Nursing physical assessment?				
b. Evaluation of cognitive/behavioral status?				

Area Reviewed	Yes	No	N/A	Comment
c. Nutritional needs?				
d. Fall assessment?				
e. Medication regime?				
<b>Care Plan:</b>				
Are care plans established by a registered nurse upon admission?				
Is direct care staff monitored to ensure compliance to care plan activities?				
Is a formal process in place to advise non-licensed direct care staff of changes to care plan?				
Are policies in place to evaluate the effectiveness of the care plan?				
<b>Ongoing Nursing Assessments:</b>				
Are there established policies for required ongoing assessments?				
Do all members of the healthcare team participate in the ongoing assessment?				
Do changes in physical, cognitive and/or behavior automatically trigger a nursing assessment?				
<b>Medications:</b>				
Are medications provided by an outside pharmacy?				
a. Is there a formal process for verifying supplied medications?				
b. Are MAR maintained?				
c. Are these medications verified against a physician order by licensed nursing staff?				
Are policies in place for medication self-administration?				
a. Is a physician order required?				
b. Is resident compliance monitored?				
c. Are these medications noted in the MAR?				
Does non-licensed staff provide medication assistance?				
a. Is this role outlined in the job description?				
b. Is medication assistance competency incorporated into the performance review?				
c. Is ongoing training provided in this area?				

Area Reviewed	Yes	No	N/A	Comment
d. Is there oversight of medication assistance from a licensed nurse?				
e. Is resident compliance noted in MAR?				
<b>Medical Emergency Protocols:</b>				
Are advance directives/living wills obtained upon admission?				
Are residents with advance directives/living wills identified in some manner?				
Are protocols established for medical emergencies?				
a. Is staff trained in medical emergency protocols?				
Do these protocols include:				
a. Response team identified for all shifts?				
b. Actions to be taken?				
Are AEDs available?				
a. Is staff trained in use?				
b. Is competency evaluated?				
Are resident rooms equipped with call/emergency lights?				
a. Is this equipment included in preventive maintenance program?				
b. Are residents oriented to use upon admission?				
c. Are protocols established for staff response on all shifts?				
Are residents required and/or offered the use of an emergency call pendant?				
If resident refuses emergency pendant, does policy require resident to sign a refusal form?				
<b>Resident Rounds:</b>				
Are protocols established outlining frequencies of routine resident rounds for all shifts?				
a. Are formal documentation records of resident rounds maintained?				
b. Is compliance to frequency of rounds monitored by licensed staff?				
c. Are protocols in place in event resident is not located during routine rounds?				
<b>Nutritional Needs:</b>				
Is a nutritional assessment by a registered dietician conducted upon admission?				

Area Reviewed	Yes	No	N/A	Comment
Are nutritional goals established as part of the care plan?				
Is nutritional status monitored and documented?				
<b>Resident Photographs:</b>				
Are resident identification photographs taken upon admission?				
a. Are pictures incorporated into the medical and/or medication record?				
b. Is resident consent obtained?				
<b>Changes in Health Status:</b>				
Are changes in a resident's health status identified through:				
a. Daily interaction with staff members?				
b. Discussion with family?				
c. Notification by other residents?				
Are protocols in place that assists staff members with identifying changes in health status while protecting the privacy of residents?				
<b>Infection Control:</b>				
Is there a formal infection control program that includes specimen collection, handling, and testing protocols in the event residents and staff are presumed to have infectious conditions?				
Is there assigned responsibility for this program?				
Are staff members trained on the basics of viral/bacterial pathogen transmission and preventive measures, including symptom identification, universal precautions, and reporting requirements?				
Does the program ensure adequate supplies of personal protective equipment (PPE) and is staff trained on their appropriate use?				
Does the program include environmental maintenance requirements and documentation parameters, including disinfection procedures of high-touch surfaces?				
Are care environments supplied with ample cleaning and disinfection supplies, including alcohol-based hand sanitizer and EPA-registered disposable disinfectant wipes?				
Are monthly infection control statistics reviewed by administration/committee?				
Are health departments promptly notified about residents and personnel with suspected or confirmed reportable infectious conditions?				

Area Reviewed	Yes	No	N/A	Comment
Are staff members, visitors and vendors informed of directives regarding the self-reporting of symptoms of a presumed or confirmed infectious condition?				
Does the facility have isolation procedures in place to quarantine residents with suspected or confirmed infectious conditions?				
<b>Quality Assurance and Improvement:</b>				
Is there a formal quality assurance and improvement program?				
a. Is there assigned responsibility for the program?				
b. Are activities reported to an oversight committee?				
c. Is the effectiveness of the program evaluated annually?				
d. Are defined indicators established?				
e. Does it include all aspects of clinical and support services?				
Are unusual resident related events:				
a. Formally documented via an occurrence report?				
b. Investigated to establish causative factors?				
c. Analyzed for trends?				
d. Presented to QI committee for review and interventions?				
Have staff received training regarding:				
a. Purpose of incident reports?				
b. Documentation of incident reports?				
Are processes in place to report potential litigation occurrences to broker/insurance company?				
a. Are criteria established to define potential litigation?				
Are processes in place to comply with State mandatory reporting of unusual events?				
a. Are policies in place to ensure timely reporting?				
Are policies in place to secure all items that may be relevant to pending litigation?				
<b>Documentation:</b>				
Are medical records maintained on all residents?				
a. Are they located in a central location?				
Are all levels of direct care staff permitted to document in the medical record?				



Area Reviewed	Yes	No	N/A	Comment
Are flowsheets utilized to monitor:				
a. Intake and output?				
b. Cognitive status?				
c. Physical activities?				
Self-administration of medications?				
Are flowsheets incorporated into the medical record?				
<b>Retention and Release Practices:</b>				
Are medical record retention protocols established?				
a. Do they meet State specific requirements?				
Are guidelines in place for the release of the medical record to a requesting party?				
<b>Life Safety</b>				
<b>Fire Safety:</b>				
Are fire drills conducted as per requirements?				
Are results of fire drills incorporated into safety/QAI activities?				
Are residents and staff provided with fire safety education upon admission and annually thereafter?				
Are smoking rules established?				
Are practices in place to ensure smoking safety in resident rooms?				
Are resident rooms equipped with smoke/heat detectors?				
Is the facility protected by required fire detection and suppression systems?				
Is the fire detection and suppression systems evaluated as per requirements?				
Is there assigned responsibility to ensure appropriate testing is conducted?				
<b>Environmental Safety:</b>				
Are safety inspections completed on all resident rooms per an established schedule?				
Are results of these environmental safety rounds documented and retained?				
Does this room inspection include evaluation of:				
a. Bathroom and kitchen area?				
b. Flooring and lighting?				
c. Electrical outlets?				

Area Reviewed	Yes	No	N/A	Comment
d. Personal electronics and lamps?				
e. Fire detection and suppression systems?				
Are environmental safety rounds conducted throughout the interior and exterior of the building?				
Does building inspection include evaluation of:				
a. Hallways and common areas?				
b. Kitchen and dietary storage?				
c. Maintenance and boiler rooms?				
d. Walkways, entrances and parking areas?				
e. Perimeter lighting and security?				
f. Fire detection and suppression systems?				
<b>Facility Access:</b>				
Does the facility have written protocols on visitation policies or restrictions, especially in the event of an emergency or pandemic?				
Are facility access records maintained for visitors, vendors and volunteers?				
Are there access controls in use to monitor and restrict the flow of pedestrian traffic in and out of the facility?				
Is there one central point of entry to the facility in the event of an emergency or pandemic, to facilitate disease surveillance screening, if applicable, and enforce visitation restrictions?				
Are visitors and personnel denied entrance if they have a fever or symptoms consistent with an infectious condition, such as COVID-19?				
Are alternative methods of visitation planned in the event of an emergency or pandemic, such as video conferencing with residents?				
Is signage posted at all entrances for contract service providers with information about current visitation policies or restrictions?				
<b>Preventive Maintenance:</b>				
Is there a formal preventive maintenance program?				
a. Is responsibility assigned to one individual?				
b. Is there a routine inspection schedule established?				
c. Are inspection and repair records maintained?				

Area Reviewed	Yes	No	N/A	Comment
Do policies exist for the removal of equipment or items in need of repair?				
a. Is staff oriented to policy?				
<b>Pandemic Preparedness:</b>				
Is there a written plan and mechanism to regularly communicate with staff, vendors, residents, and family in the event of an emergency or pandemic?				
Is there a reporting protocol to inform staff, vendors, residents, and family about actions the facility is taking during an emergency or pandemic?				
Are records maintained of inventory levels for critical supplies, including PPE, and are dates and times recorded of supply orders and receipt?				
Are sick leave policies flexible and non-punitive?				
Are staff, vendors and volunteers informed of work restriction policies and return-to-work directives?				
Are staff members, physicians, vendors and family members apprised of residents who are presumed to be positive for an infectious condition, within the confines of resident privacy?				
Are resident group activities modified or cancelled, to accommodate social distancing requirements during a pandemic?				
Is there a written response plan for staff who may have worked with an infectious condition, including identifying potentially exposed residents and co-workers, as well as performing risk assessments?				
Are staff members trained on the importance of practicing social distancing protocols during a pandemic, including while in break rooms and common areas?				

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