How do I choose a residential care facility? Things to look out for.

By Sue Foster

One of the most difficult transition points in an older person’s life is when he/she has to confront the fact that they can no longer be cared for at home. This critical point is often carried out after an older person has been admitted to public hospital acutely and the decision has been made largely by medical staff in conjunction with the older person and their family. Once the decision is made then huge pressure is put on the family to find a place within a few days as the hospital leaves you in no doubt that they need the bed for someone who needs medical intervention.

Some families are more fortunate – their relative is still at home and the older person can make the decision about going into care in a more considered way. Much of the decision making is centred on an increased frailty and vulnerability living in a community where they often no longer know their neighbours, coupled with the reluctance to continue looking after a property, inability to move around the house with ease, and recognition that they have a growing need for personal and home care.

Either way – both the older person AND his/her family need to know what to consider when they are visiting potential facilities. If possible final decisions should only be made after two or three visits if you have time and one of these visits should be done unannounced.

These are some of the things to look out for:

1. **Retirement villages** -

   Retirement villages are often a first point of entry for older people, in the belief that when they get too frail to live in their apartment, there will be room for them in the hospital wing when they need it. **This is not necessarily true.** When you need hospital care (i.e. – when you need help in all of your cares and also need to be lifted) if there is no room at that point in the hospital wing then you will need to look for a bed in another facility. If you are considering a move into a retirement village then you need to be aware of this fact.

   **Questions to ask:**

   - Before buying into a retirement village ask what happens if there is not a bed available in the hospital wing
   - Be very aware of the resale value of the apartment once you vacate it.

2. **The lay-out of the facility and size of the room**

   The size of a facility is not necessarily in itself a determinant of good care. It is wrong to think that small facilities are better because there are fewer people. Indeed some of the larger facilities are better resourced because of their size and therefore are more consistent with
What should influence your decision is the feel of the place, the warmth emanated by staff, the ambience, and the physical layout of the facility.

Long corridors which are evident in some facilities can lead the more frail and immobile residents to feel very excluded from the life of the facility. There are also facility designs which are more suitable for residents with dementia. Most facilities will show you a room while they are giving you a tour. This room is not necessarily the one that your relative will use, so it is important to ask. Rooms vary in price as well. The size of the room is important – many people wish to bring important pieces of furniture with them and some rooms are too small or already furnished. How far is your relative’s room from any central lounge, the nurse’s station, the lunchroom? Does it feel isolated? Are those residents who are no longer ambulant placed in a circle in the lounge and left there? Or are they placed in circles where they can talk to one another? Are staff close by?

Questions to ask:

- What is the price of the room that my relative will have?
- What particular room will be allocated and what is the size of the room?
- What furniture can be brought into the room?
- Are pets allowed?
- Is there a more private space where you can sit with the resident and make a cup of tea?
- Are there smaller break out spaces where a few people can sit and talk or is there one big lounge?

3. Reception

When you visit a facility it is important that you feel welcome. When you first enter look for a person on reception – at times there is no-one as some facilities are not always able to pay someone full-time to look after the front desk but first impressions are important. Make sure that if there is no-one to greet you that there is at least a bell or there are some directions for you to find the staff member you are looking for. A welcoming reception is also important. Look out for the warmth of the reception you get – a bad day should not be passed on to you as a prospective client.

4. The Manager

Generally it is the manager who sets the culture of the facility – that is they have a personal philosophy that helps them decide how a facility should be run. Some have a flat hierarchical structure and encourage inclusive decision – making amongst staff. This structure encourages both RNs and health care assistants to come into the manager’s office to discuss issues with them and there is a general feeling of inclusiveness and positivity in the care of residents. Others have a closed door policy and leave the care of the residents to the nursing staff. Health care assistants in this structure invariably don’t talk to the manager at all and care decisions are mediated through the RNs. You should ask the manager questions about how often they are ‘on
the floor’, visiting residents’ rooms and talking with staff, how engaged they are with the day to
day running of the facility.

Questions to ask:

- What is the manager’s care philosophy for the facility
- What is the communication pathway if you want to information about your relative?
- Ask how much the manager knows about the day to day care of the residents
- Note the warmth given out by the manager and whether you feel s/he is engaged with you
- Can I visit my relative at any time of the day? What about evenings?

5. The Care staff

Often your first appointment is with the Clinical Nurse Manager or the RN on duty that day. She
or he will most likely be the person that shows you around the facility. As you become familiar
with the facility try to notice how busy the care staff are, how many bells might be going in the
rooms, and how quickly the staff are able to respond. Generally it is quite easy to get a ‘feel’ for
the warmth and happiness of a facility as one walks around. If at all possible, stop to talk to one
of the residents and ask them how happy they are at the facility. Ask the staff how will your
relative be introduced to other residents? This is often one area that is neglected with new
people. You also need to know the communication pathway when you want to have information
about your relative? Who communicates with you? The Clinical Nurse Manager? The RN?

Questions to ask:

- Who is the main person I communicate with about my relative?
- How will my relative be introduced to other residents?
- How happy are other residents?
- What is the staff to resident ratio?

6. The GP

Every facility will have a GP attached to it. You will need to know whether your relative’s care will
need to be transferred to this GP or whether s/he can keep her own GP if they are willing to visit.
Also you will need to know how to reach the GP should you want to talk to him/her. This can
sometimes be hard as GPs tend to visit once per week and have a lot of residents to see so
communicating with families is often done through the nurse in charge. However you are entitled
to see the GP should you wish.

Questions to ask:

- Who is the GP and when do they visit?
- Can my relative keep her/his own GP?
- How can I talk to the GP if I want to?
7. The dining room

It is important that one of your visits coincides with lunch so that you can see the presentation and the taste of the food. Many facilities will be happy for you to join them for lunch so that you can experience this at first-hand. Note how well the staff help residents with their meals should they need it? Does the food arrive hot? Is it well presented? Is it tasty? How will your relative be introduced to the dining room? Will they be placed at a table where they can interact with others?

Questions to ask:

- How will my relative be introduced to the dining-room?
- Am I able to come for lunch with my relative?
- Are residents able to change where they sit if they want to?
- Can I have meals in my room if I want?
- Can I have breakfast in bed?
- Is dinner served at a reasonable time?

8. Activities and Outings

In most facilities there are a variety of activities on offer during the week and these are placed in prominent places so that you can see the effort that is made to entertain the residents. Usually every day is divided into morning activities so that at any time you can choose between physical activities such as bowls, yoga or general stretching exercises or more intellectual pursuits such as the reading of the daily newspaper and a discussion of world events or word puzzles such as crosswords. Often in the afternoons there will be an outing which residents can decide to join. Find out what is on offer in the facility you are visiting and how often this is offered. Most facilities will have a diversional therapist/activities person.

Questions to ask:

- What activities are offered to residents?
- Is there a variety of activities?
- Can I talk to the activities person?
- Will my relative’s particular interests be catered for?
One of the most important aspects of the layout is the ease with which people are able to access the outdoors. This aspect is particularly important for residents who have dementia. Some facilities with dementia units will be on the second floor which helps to contain people who may wander. This often results in a very small garden or outdoor area. Outdoor activities are also important, such as being able to work in the garden, plant vegetables, and to pick flowers. The inclusion of animals in the life of the facility is also a factor to be considered. Many facilities will have resident cats and many will have a dog, especially if the facility is more rural.

Questions to ask:

- How much can my relative do in the garden?
- Does the garden have a loop walk that we can enjoy?
- Is there appropriate seating?
- Are the needs of dementia residents attended to?