

Senior Housing Options Comparison and Checklist

Average Monthly Cost of Living

	Your Home	Community #1 Name:	Community #2 Name:	Community #3 Name:
Rent/Mortgage/Monthly Fee	_____	_____	_____	_____
Utilities (Electric, Gas, Water)	_____	_____	_____	_____
Property taxes/insurance	_____	_____	_____	_____
Home Maintenance	_____	_____	_____	_____
Yard Maintenance	_____	_____	_____	_____
Food/Groceries	_____	_____	_____	_____
Housekeeping/Laundry service	_____	_____	_____	_____
Cable TV/Telephone	_____	_____	_____	_____
Companion	_____	_____	_____	_____

Checklist

Is there handicap access with entryways for wheelchairs; are elevators available; are handrails available throughout and in bathrooms?	_____	_____	_____	_____
Is there a sprinkler system and visible signs of fire safety precautions (marked exits, fire extinguishers in units, etc.)?	_____	_____	_____	_____
Is there a written plan of care for each resident?	_____	_____	_____	_____
Are there any programs in place to help fund costs?	_____	_____	_____	_____
Do billing and payment procedures meet your needs?	_____	_____	_____	_____
Are trained professionals there to assist with the storage of and taking of medication if necessary?	_____	_____	_____	_____
Is 24-hour assistance available if needed?	_____	_____	_____	_____
Are you pleased with the listing of on-site services offered?	_____	_____	_____	_____

Does the individual unit have safety standards in place?	_____	_____	_____	_____
May residents bring their own furniture and décor into units, or are they provided?	_____	_____	_____	_____
Is there a kitchen? Cable TV? Telephone service?	_____	_____	_____	_____

Notes

1. What are your first impressions when entering the facility?	_____	_____	_____	_____
2. Do the residents seem happy and social?	_____	_____	_____	_____
3. Do staff members conduct themselves professionally?	_____	_____	_____	_____
4. Is the facility clean and kept at a comfortable temperature?	_____	_____	_____	_____
5. Is the residence secure?	_____	_____	_____	_____