Washington State Department of Social & Health Services
Transforming lives

Assisted Living Facility
Environmental Observations

ASSISTED LIVING FACILITY NAME	LICENSE NUMBER

INSPECTION DATE	LICENSOR NAME

Inspection Type: ☐ Initial ☐ Full ☐ Follow up ☐ Monitoring ☐ Complaint: Number _____

Observations of the environment occur throughout the inspection. Interviews with facility staff and residents are an important source of information to include.

YES	NO	**Quality of Life/Resident Rights**
☐	☐	Staff to resident interaction(s), responsiveness and meeting resident needs
☐	☐	Staff speaking over residents in another language
☐	☐	Appropriate staff communication with residents
☐	☐	Adaptive equipment available, clean and in good repair
☐	☐	Resident grooming, hygiene, and dress and/or delivery of care completed
☐	☐	Recognition of cultural diversity and preferences
☐	☐	Recognition of dignity, privacy, and resident rights (i.e., shades in room, knocking before entering room)
☐	☐	Presence of restraints
☐	☐	Communication system
☐	☐	Homelike

NOTES

YES	NO	**Physical Environment – Interior**
☐	☐	Information posted
☐	☐	CRU Hotline posted
☐	☐	Current ALF license posted
☐	☐	Ombudsman Hotline posted
☐	☐	Last full inspection, cover letter and report, posted

NOTES

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YES	NO	**Maintenance and Housekeeping adequate**
☐	☐	Furnishing, floors, walls, and ceilings
☐	☐	Presence of objectionable odors
☐	☐	Housekeeping supply area
☐	☐	Laundry – separate areas for clean and soiled linen
☐	☐	Infection control practices of staff
☐	☐	Hand washing
☐	☐	Temperature (68°+ wake hours / 60°+ sleep hours)
☐	☐	Adequate ventilation in resident rooms and common areas
☐	☐	Adequate lighting in resident rooms and common areas
☐	☐	Safe water temperature in resident rooms and sinks utilized by residents
☐	☐	Cleanliness of resident equipment maintained in good repair

NOTES

YES   NO   **Safety**

☐ ☐ Prevention of resident access to storage of:
- Cleaning supplies
- Cleaning carts
- Storage closet
- Toxic materials
- Medications

☐ ☐ Access to outdoors including dementia care unit
- Safe walking areas
- Walking areas protected from the elements
- Can summon staff in an emergency

☐ ☐ System to inform and permit exit without sounding alarm

☐ ☐ Secure outdoor space
- Accessible to residents without staff
- Surrounded by walls or fences at least 72" high
- Firm, stable walking surfaces and outdoor furniture

☐ ☐ Emergency / disaster preparedness
- Emergency lighting
- First Aid supplies
- Disaster plan
- Staff responsibilities

NOTES

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YES	NO	
☐	☐	**Common Bathrooms** Common bathrooms are:

- Safe / clean / adequate lighting / grab bars (if applicable for resident needs)
- Accessible for all resident / privacy available
- Water temperature: _____ **°F** ; _____ (date and time); _____ (place)
- Water temperature: _____ **°F** ; _____ (date and time); _____ (place)

NOTES

YES	NO	**Physical Environment - Outdoors**
☐	☐	Stairs / steps / ramps in good repair
☐	☐	Hand rails
☐	☐	Garbage / refuse
☐	☐	Presence of pests
☐	☐	General maintenance of sidewalks / walkways

NOTES

Use Attachment I – Environmental Observations and Attachment P- Food Service Observations for all full inspections.

Continue with Attachment O for further observations if the facility has a contract for AL, EARC, or EARC – Specialty Dementia Care.