OBSERVATIONS

Instructions: Ask a team member to observe staff interaction in and near resident bedrooms at various times throughout the day and document observations. If **NO** is marked, comment on the specific observation in comment section below.

	Observation	YES	NO
1	Did staff always knock, announce self and wait for permission before entering		
	resident bedrooms?		
2	Did staff only enter resident bedrooms when occupied by the resident?		
3	Did staff avoid entering rooms when the resident was not home?		
4	Were doors and curtains closed when cares were being provided?		

Comments:	 	 	

OBSERVATIONS (CONT'D)

Instructions: Ask a team member to then look at some resident bedrooms and document observations. If **NO** is marked, comment on the specific observation in comment section below.

	Observation	YES	NO
1	Are resident rooms personalized according to the resident's preference?		
2	Are bedrooms painted different colors?		
3	Do bedroom have personal furniture, curtains, beds and/or bedding?		
4	Can individual adaptations be found in resident bedrooms to promote self-care and mobility? (For example, the closet rod has been lowered so a resident can select their own clothes)		

Comments:		 	

Discuss the findings of the audit as a team. Any "No" response *could* indicate an area of concern during your evaluation. Review the criteria for this core and discuss your current practices to see if they meet the criteria for this core. If not, discuss changes that may need to be made. Remember, you are only required to meet 2 of the 4 outcomes from Supporting Practice #2.

RESIDENT INTERVIEWS

Instructions: Ask a team member to interview a few residents and ask the questions below.

Supportin	g Practice #1 Privacy
	e about your ability to enjoy private space or time here.
	think staff come into your bedroom when you are not home?
Do you	ı find things moved around?
Supportin	g Practice #2 Personalization
• When	g Practice #2 Personalization you moved in, how did you decide to decorate your room? you moved in, how did you decide what you wanted to bring?
WhenWhen	you moved in, how did you decide to decorate your room?
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RESIDENT INTERVIEWS (CONT'D)

Supporting Practice #3- Self-care and mobility

Is there anything in your bedroom that is difficult for you to navigate independently? Could any changes be made in your bedroom to help you be more independent?					

RESIDENT INTERVIEW FOLLOW-UP

Once resident interviews are complete, review the responses. Responses other than the following examples *could* indicate an area of concern.

Supporting Practice #1- Privacy

- **Tell me about your ability to enjoy private space or time here.** \rightarrow Responses should indicate that residents feel their privacy is supported and they are able to find space and time to enjoy privacy.
- **Do you think staff come into your room when you are not home?** → Residents report that boundaries in their bedroom are respected and staff ask permission to enter their room at all times.
- **Do you find things moved around?** → Residents report they do not find personal items moved around and feel that staff respect their personal belongings.

Supporting Practice #2- Personalization

- When you moved in, how did you decide to decorate your room?
- When you moved in, how did you decide what you wanted to bring? → Residents should tell you they were involved in deciding how to decorate their room and deciding what to bring with them.
- Were you able to bring the things you wanted to bring? → Residents should report they were supported in bringing the personal items they wanted to bring, that space allowed, and the home supported and assisted them in this.

Supporting Practice #3- Self-care and mobility

- Is there anything in your bedroom that is difficult for you to navigate independently?
- Could any changes be made in your bedroom to help you be more independent? → Residents should report that their bedrooms have been arranged to make things most convenient for them and they are free of barriers to self-care or mobility to the extent possible.

Notes:	 	

TEAM INTERVIEW

Instructions: Gather team members from different areas of the organization to discuss the following questions. Be sure to include direct caregivers in this discussion. Any "No" response *could* indicate an area of concern during your evaluation. Review the criteria for this core and discuss your current practices to see if they meet the criteria for this core. If not, discuss changes that may need to be made.

Su	pporting Practice #1- Privacy		
	Questions	YES	NO
1	Are all of the resident bedrooms, whether private or semi-private, arranged to promote individual privacy (visual privacy, auditory privacy, privacy for personal items etc.)?		
2	Are all team members trained upon hire on the homes privacy expectations and practices?		
3	Do all team members receive regular training on privacy expectations?		

	Supporting Practice #2- Personalization (Remember - Homes are only required to meet 2 of the 4 outcomes of Supporting Practice #2)				
	Questions	YES	NO		
1	Are all resident bedrooms personalized according to the resident's preference?				
2	Are residents able to determine the paint color for walls in their bedroom?				
3	Are residents able to bring personal beds and furniture to the home and are they aware this is an option for them?				
4	Is there a policy in place to encourage personalization?				

Su	pporting Practice #3- Self-Care and Mobility		
	Questions	YES	NO
1	Has each resident bedroom been looked at from the resident's perspective to promote self-care and mobility to the fullest extent possible?		
2	Have barriers in resident bedrooms that impede mobility from the resident's point of view been eliminated?		