

## **Facility Evaluation Checklist**

## **How to Use This Checklist**

Print a checklist for each facility you are evaluating. Bring the checklist with you for on-site tours.

## **Facility Name**

On-site Services	Facility Priorities
<ul><li>Neurologist or Movement Disorder</li><li>Specialist</li></ul>	<ul> <li>Recognized in Huntington's Disease or neurodegenerative disorders</li> </ul>
Psychiatrist	Family support services
<ul><li>Internal Medicine Physician</li><li>Physical Therapists</li></ul>	Patient and family safety measures
Occupational Therapists	Care Team
<ul> <li>Speech and Language Pathologists</li> <li>Nutrition/Dietitian</li> <li>Social Worker</li> <li>Psychologist or Behavioral Therapist</li> <li>Recreational or Art Therapist</li> <li>Adaptive Equipment Specialist</li> </ul>	<ul> <li>Dedicated primary physician with Huntington's disease expertise</li> <li>Collaborative team environment led by primary care physician</li> <li>Pastoral and spiritual care</li> <li>Palliative and end-of-life</li> </ul>

## **Questions to Ask**

What types of psychiatric and behavior management services are available on-site?

What are the facility processes for symptom management, mobility assistance and fall prevention?

How does the facility address quality of life improvements like recreational or art therapy and spiritual needs?

What level of training can you expect from staff members related to neurodegenerative diseases?

How does the facility handle end-of-life care like hospice and palliative services?