

Printable Orange County Assisted Living Tour Question Worksheet

A direct-question worksheet to bring on every Orange County assisted living tour

How to use this worksheet

Print one copy per community you visit. Take notes during the tour so you can compare specific answers afterward. If a staff member does not know an answer or defers it for follow-up, note it clearly and request a written response before making a final decision.

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Community name: _____	Date of tour: _____	Staff member: _____
Address / city: _____	Phone / email: _____	Follow-up contact: _____
Primary concern: _____	Care level discussed: _____	Next step: _____

■ Before You Tour: Check the Public Record

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> Reviewed the CDSS Community Care Licensing facility search before arriving	Answer / note: _____

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> License status confirmed as active	Answer / note: _____
<input type="checkbox"/> Inspection history reviewed; any citations noted for follow-up	Answer / note: _____

■ California Licensing Questions

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> Is your RCFE license current and active? What is your licensed resident capacity?	Answer / note: _____
<input type="checkbox"/> Does your administrator hold a current California RCFE administrator certificate?	Answer / note: _____
<input type="checkbox"/> When was your most recent unannounced CCLD inspection, and what was the outcome?	Answer / note: _____
<input type="checkbox"/> Have you had any Type A or Type B citations in the past two years? What were they and how were they resolved?	Answer / note: _____
<input type="checkbox"/> How has your community implemented the 2025 Title 22 regulatory updates?	Answer / note: _____
<input type="checkbox"/> Are all applicable staff background-checked through California DOJ LiveScan?	Answer / note: _____
<input type="checkbox"/> If we need hospice services at some point, does your community have an appropriate hospice waiver and how does that coordination work?	Answer / note: _____

■ Care Needs and Staffing Questions

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> Can you walk me through staffing during the day, evenings, overnight and on weekends?	Answer / note: _____
<input type="checkbox"/> Is there always an awake staff member present overnight? Under what circumstances?	Answer / note: _____
<input type="checkbox"/> If a caregiver calls out sick on a Saturday night, what happens?	Answer / note: _____
<input type="checkbox"/> How do you develop a care plan for a new resident? Who is involved?	Answer / note: _____
<input type="checkbox"/> How often are care plans formally reviewed and updated?	Answer / note: _____
<input type="checkbox"/> If my parent's care needs increase significantly after move-in, what happens?	Answer / note: _____
<input type="checkbox"/> Do the same caregivers typically work with the same residents?	Answer / note: _____
<input type="checkbox"/> How long have your current caregivers been with the community?	Answer / note: _____
<input type="checkbox"/> What training do caregivers complete when they start, and what ongoing training is required?	Answer / note: _____

■ Medication Management Questions

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> Who is responsible for medication assistance here, and what is their training?	Answer / note: _____
<input type="checkbox"/> How are medications stored, tracked and assisted with? Walk me through the process.	Answer / note: _____
<input type="checkbox"/> How do you document medication assistance and who reviews those records?	Answer / note: _____
<input type="checkbox"/> What happens if a resident refuses a medication?	Answer / note: _____
<input type="checkbox"/> How do you handle a medication error?	Answer / note: _____
<input type="checkbox"/> If my parent's physician changes a medication, how does that update get communicated and implemented?	Answer / note: _____
<input type="checkbox"/> Are there medication types the community cannot manage? What would that mean for placement?	Answer / note: _____
<input type="checkbox"/> How do you coordinate with a resident's primary care physician around medication concerns?	Answer / note: _____

■ Safety and Emergency Preparedness Questions

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> Can you show me the emergency call system in rooms and bathrooms? How quickly do staff respond?	Answer / note: _____
<input type="checkbox"/> How do you assess fall risk for new residents and what fall prevention measures are in place?	Answer / note: _____

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> If a resident falls, what is the protocol for physician contact and family notification?	Answer / note: _____
<input type="checkbox"/> Does the community have a current Emergency Disaster Plan? When was it last reviewed?	Answer / note: _____
<input type="checkbox"/> Walk me through a wildfire evacuation scenario. What happens for residents with mobility limitations or dementia?	Answer / note: _____
<input type="checkbox"/> If a road closure cuts off access to the community, what is the contingency plan?	Answer / note: _____
<input type="checkbox"/> What happens during an extended power outage?	Answer / note: _____
<input type="checkbox"/> How are residents with wandering tendencies kept safe?	Answer / note: _____
<input type="checkbox"/> How are medical emergencies handled and how close is the nearest hospital or urgent care?	Answer / note: _____

■ Dementia Support Questions

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> What level of dementia support can you provide in place, and at what point would that change?	Answer / note: _____
<input type="checkbox"/> What specific dementia care training have your caregivers completed?	Answer / note: _____

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> How do you handle behavioral expressions in residents with dementia?	Answer / note: _____
<input type="checkbox"/> How are medication decisions for behavioral management made and who is involved?	Answer / note: _____
<input type="checkbox"/> How do you communicate with families when a resident's cognitive status changes?	Answer / note: _____
<input type="checkbox"/> What does your reassessment process look like when dementia progresses?	Answer / note: _____
<input type="checkbox"/> If dementia needs eventually exceed what the community can support, what does that transition look like?	Answer / note: _____
<input type="checkbox"/> Do you have secure outdoor spaces for residents with wandering tendencies?	Answer / note: _____

■ Daily Life Questions

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> Walk me through a typical day for a resident at a similar care level.	Answer / note: _____
<input type="checkbox"/> How are activities matched to individual residents' interests?	Answer / note: _____
<input type="checkbox"/> Can I see this week's menu? How are dietary restrictions accommodated?	Answer / note: _____

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> Can I stay for a meal or arrive during a mealtime?	Answer / note: _____
<input type="checkbox"/> How do residents access outdoor spaces and how often are they typically used?	Answer / note: _____
<input type="checkbox"/> For a resident who prefers quieter engagement, what does daily life look like?	Answer / note: _____
<input type="checkbox"/> Can residents personalize their room? Are there restrictions?	Answer / note: _____
<input type="checkbox"/> What does a typical Saturday look like compared to a weekday?	Answer / note: _____
<input type="checkbox"/> What happens when a resident is having a difficult day emotionally or physically?	Answer / note: _____

■ Family Communication Questions

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> If my parent's condition changes, how and when will I be notified?	Answer / note: _____
<input type="checkbox"/> If my parent falls, even a minor fall, will I receive a call that day?	Answer / note: _____
<input type="checkbox"/> Who is my primary point of contact and how quickly do they typically respond?	Answer / note: _____
<input type="checkbox"/> How do I reach someone at 8 p.m. on a Sunday with a non-emergency concern?	Answer / note: _____

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> Are family members invited to care plan reviews?	Answer / note: _____
<input type="checkbox"/> What is the formal process for raising a concern about care that isn't being resolved?	Answer / note: _____
<input type="checkbox"/> What does communication look like for family members who live out of the area?	Answer / note: _____
<input type="checkbox"/> Does the community use any digital tools or family portals for updates?	Answer / note: _____

■ Pricing and Contract Questions

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> Walk me through the full fee structure. What is included in the base rate and what is billed separately?	Answer / note: _____
<input type="checkbox"/> What would my parent's projected full monthly cost be based on current care needs?	Answer / note: _____
<input type="checkbox"/> What services are billed as care-level add-ons and at what rates?	Answer / note: _____
<input type="checkbox"/> How does the community assess and adjust care level, and how does that affect cost?	Answer / note: _____
<input type="checkbox"/> What has the community's history been on annual rate increases?	Answer / note: _____
<input type="checkbox"/> What is the deposit structure and what is refundable?	Answer / note: _____

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> What are the conditions under which a resident could be asked to leave?	Answer / note: _____
<input type="checkbox"/> What happens if a resident's financial resources are depleted?	Answer / note: _____
<input type="checkbox"/> Can I take the admission agreement home to review before committing?	Answer / note: _____
<input type="checkbox"/> Does the community accept long-term care insurance?	Answer / note: _____

■ Current Resident and Family Questions

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> Resident or family reference available with consent: yes or no	Answer / note: _____
<input type="checkbox"/> Resident: How long have you lived here and what do you enjoy most?	Answer / note: _____
<input type="checkbox"/> Resident: Is there anything you wish were different?	Answer / note: _____
<input type="checkbox"/> Family: How responsive is the care team when you have questions?	Answer / note: _____
<input type="checkbox"/> Family: If you had to do it again, would you choose this community?	Answer / note: _____

■ Post-Tour Notes

Question or item	Staff answer, notes or follow-up needed
<input type="checkbox"/> Questions not answered or deferred: noted for follow-up	Answer / note: <hr/>
<input type="checkbox"/> Red flags observed or heard: noted	Answer / note: <hr/>
<input type="checkbox"/> Second visit scheduled: yes or no	Answer / note: <hr/>
<input type="checkbox"/> Admission agreement requested to take home: yes or no	Answer / note: <hr/>
<input type="checkbox"/> Overall impression of staff confidence and transparency	Answer / note: <hr/>

Using this worksheet

A community that answers every question on this list confidently, specifically and without deflection is demonstrating something meaningful beyond the content of the answers. Questions that are deferred, answered vaguely or met with discomfort are worth noting and following up on before making a final decision. This worksheet is a tool for structured evaluation, not a scoring system. Use it alongside guidance from a physician, elder care consultant or senior living advisor as appropriate.

Important Disclaimer

This worksheet is provided for general informational and organizational purposes only. It is not medical, legal, financial, clinical, regulatory, emergency or other professional advice.

It should not replace a personalized care plan, physician evaluation, licensed professional guidance, legal or financial advice, facility-specific documentation or emergency services. Assisted living needs, medication-related decisions, care options, safety risks, costs, licensing requirements and family circumstances vary by individual, community and time.

Families should verify current licensing information, facility records, inspection history and regulatory requirements directly through the California Department of Social Services before making a decision. Contracts, fee schedules, care levels, staffing practices, medication policies and provider procedures can vary and may change over time.

For sudden confusion, chest pain, serious injury, suspected stroke symptoms, suicidal statements or immediate danger, call 911 or seek urgent medical care. For concerns about cognitive decline, fall risk, medication safety, elder financial exploitation, abuse, care placement, licensing or contracts, speak with a qualified healthcare professional, licensed care provider, appropriate agency, attorney or financial professional.

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RAYA'S PARADISE
RESIDENTIAL CARE COMMUNITIES

Assisted Living · Memory Care · Respite Care · Hospice Support

Raya's Paradise is a licensed senior living community in San Clemente, CA, serving Orange County families with assisted living, memory care, respite care and hospice support. Boutique coastal care with more than 30 years of experience behind it.

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