

HOMESTEAD NEIGHBORHOOD MOVE-IN CHECKLIST



The following checklist is meant to help you to prepare to move your family member into the Homestead Program. Feel free to ask the Marketing Director or Homestead Program Director if you have any questions.

I. ROOM FURNISHINGS

Look at your family member's present living situation, and identify the items that mean the most to them. These are items that you may want to move in. If possible, set up the room similar to the set up at home. This helps to minimize the newness.

- _____ Bedspreads, pillows, and comfortable chairs are items that the resident may recognize. *New* items will not be recognized by the resident.
- _____ Sturdy chairs with arms help residents get up safely.
- _____ Automatic light-sensitive night light for the bathroom & bedroom are recommended.
- _____ 2 – 3 sets of sheets, towels and facecloths.
- _____ Waterproof mattress cover for the bed. Accidents do happen.
- _____ Photo albums of fond memories and family pictures; diplomas or plaques for the wall.
- _____ Most residents do not have a T.V. News programs, especially, can be frightening, and T.V. controls are often too complicated to manage.
- _____ Most residents do not have a phone; a resident may no longer be able to use the phone independently or may call family repeatedly.
- _____ Rugs and area rugs are **not** recommended – they create an increased fall risk.
- _____ Please supply a clothes hamper.

II. CLOTHING

- _____ Limit clothing. This cuts frustration. Also, remember the size of the closet. Pairing 7-10 mix and match outfits is a good plan. Additionally, clothes can be rotated on a seasonal basis to simplify.
- _____ Clothing that can be laundered is a must, and mix and match is highly recommended. Dry cleaning articles are discouraged (*as they will need to be taken care of by the family*).
- _____ **Label all clothing with the resident's name or initials.**
- _____ A few washable cardigan sweaters and a coat, hat and gloves in winter months.
- _____ If purchasing new clothes, consider one size larger for comfort.
- _____ 2 – 3 pairs of supportive shoes or sneakers and 1 – 2 pairs of slippers. No high heels. Please label shoes with resident's name. (*Indelible marker.*)

III. OTHER SUPPLIES

- _____ Glasses and hearing aids should be labeled with the resident's name.
- _____ False teeth should be labeled and can be etched by the dentist.
- _____ Handicap bars that attach to the toilet may be helpful for some residents.
- _____ Tissues are in common areas, but please purchase tissues for the resident's private room.
- _____ Electric shaver for men, labeled.
- _____ Bath mat for outside the shower.
- _____ Personal care items. like toothpaste, body wash & lotions.
- _____ Incontinence products, such as Depends, which can be supplied monthly.
- _____ Please provide wipes for proper cleansing. Toilet paper **is** provided by Heritage.
- _____ Digital thermometer, small supply of band-aids.

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IV. MEDICATIONS

- _____ **All medications**, even over the counter medications, need to be discussed with a nurse.
- _____ **All medications**, even over the counter medicines, **must** be in the **locked box** in the resident's room.
- _____ If family members choose to prefill pill dispensing boxes, they need to be done regularly weekly or every two weeks. Prefill boxes will be provided.

OR

- _____ A pharmacy service that will blister pack medications can be arranged by families.
- _____ **Always** notify the nurse (extension 114) with updated medication changes or new medical diagnoses.

V. VALUABLES

- _____ **Jewelry of sentimental or financial value should be held by the family.** Heritage cannot be responsible for missing or misplaced items. (Tip: Replace valuable pieces with similar costume jewelry.)
- _____ Please do not include valuable or irreplaceable items in the resident's furnishings or decorations.

VI. MAIL / CHANGE OF ADDRESS

Mail must be directed as indicated below.

Sent to family representative	Sent to resident at Heritage
<ul style="list-style-type: none">• Phone bills• Financial statements• Cable & Other bills	<ul style="list-style-type: none">• Magazines• Newspapers – see instructions below• Cards & letters

We encourage families & friends to send cards, magazines, etc. The resident's bills or financial statements should be mailed to the power of attorney, guardian or responsible family member.

Please complete a change of address notification, to **specific billing sources** (i.e.; phone, banking, etc.)

VII. MOVE-IN STRATEGIES: FURNITURE & BELONGINGS

Families should plan to allow time for furniture delivery and set up. The goal of move-in day is for the resident to join others in activities and meals. Our objective is to begin establishing a daily routine as soon as possible.

IMPORTANT BED SELECTION TIP:

Experience suggests that a lower bed is helpful and makes getting in and out of bed safer. Since the trend in furniture stores is to market very high beds, ask if you can get something lower. Or you can ask for extra slats for the bed frame and eliminate the box spring. Alternatively ½ sized boxed springs are now available.

Best Option: Move furniture in **a day or more before** the resident moves in:

- This allows us to concentrate fully on the resident and their needs on move-in day.
- Our Maintenance Dept. has time to hang pictures *before* the resident occupies the apartment.

Option 2: Move in furniture the day of resident move-in:

- You must be sure the movers can arrive **no later than noon**.
- Furniture and unpacking should be **completed by 2 p.m.** Please avoid moving large items/furniture in during meal times 8am to 9am, 11:15am to 12:15pm.
- We want to avoid new residents being in the middle of the move-in of their furnishings.
- Our Maintenance Dept. needs enough time to hang pictures by the end of move-in day.

**HOMESTEAD NEIGHBORHOOD
MOVE-IN CHECKLIST
NEWSPAPER DELIVERY SIGN UP**



WE CAN DELIVER NEWSPAPERS TO APARTMENTS IF:

STEP 1 – Call papers of choice and arrange for a subscription

STEP 2 – Fill in choices below

STEP 3 – Return form to front reception desk with choices “**X**”ed off

PLACE AN “X” IN THE APPROPRIATE BOX

Names	Contact #	Every Available Day	Sun. Only
THE BOSTON GLOBE	1-888-694-5623 or 617.929.2000		
THE NEW YORK TIMES	800.631.2500		
METRO WEST DAILY NEWS	508.626.3800		
WALL STREET JOURNAL	1-800-JOURNAL or (1-800-568-7625)		

RESIDENT NAME _____ APARTMENT NUMBER _____

FAMILY MEMBER PLACING ORDER _____

PHONE #s _____

NOTE TO FRONT DESK: RETURN TO DEANNA LEFRANCOIS