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Community Advisory Committee Quarterly/Annual Visitation Report

County Buncombe	Facility Type: <input type="checkbox"/> Family Care Home <input type="checkbox"/> Adult Care Home <input checked="" type="checkbox"/> Nursing Home <input type="checkbox"/> Combination Home	Facility Name Brian Center
Visit date 11/26/18	Time Spent in Facility 1 Hr. 15 Min	Arrival Time 11:40 Am PM
Name of person Exit Interview was held with Amber Morgan (Name & Title) Interview was held <input checked="" type="checkbox"/> In-Person <input type="checkbox"/> Phone <input type="checkbox"/> Admin <input type="checkbox"/> SIC (Supervisor in Charge) <input type="checkbox"/> Other Staff Rep		
Committee Members Present: Nancy Kniffen, Stephan Idhe and Judy McDonough		Report completed by: Judy McDonough
Number of Residents who received personal visits from committee members: 8		
Resident Rights Information is clearly visible. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Ombudsman contact information is correct and clearly posted. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
The most recent survey was readily accessible. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Required for Nursing Homes Only)	Staffing information is posted. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Resident Profile	Comments and Other Observations	
<ol style="list-style-type: none"> Do the residents appear neat, clean and odor free? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Did residents say they receive assistance with personal care activities, ex. brushing their teeth, combing their hair, inserting dentures or cleaning their eyeglasses? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Did you see or hear residents being encouraged to participate in their care by staff members? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Were residents interacting w/ staff, other residents & visitors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Did staff respond to or interact with residents who had difficulty communicating or making their needs known verbally? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Did you observe restraints in use? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If so, did you ask staff about the facility's restraint policies? <input type="checkbox"/> Yes <input type="checkbox"/> No 		

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Areas of Concern	Exit Summary
<p>Are there resident issues or topics that need follow-up or review at a later time or during the next visit?</p> <p>One resident said her bed had not been made up in a week.</p> <p>CNA's answer call bells and say "Be back soon."</p> <p>One resident was concerned that her roommate needed help eating, and I observed she was flat in her bed with the food tray inaccessible. The staff just remove the full tray asking if she were not hungry. Roommate said she had company over Thanksgiving and with their help "ate like a pig!"</p>	<p>Discuss items from "Areas of Concern" Section as well as any changes observed during the visit.</p> <p>Kudos: the outside entrance is beautiful and welcoming, with Fall decorations.</p> <p>"in comparison, I'm SO GLAD I'm here!"</p> <p>Great new photos on walls of locked unit.</p> <p>Beauty shop is open Mon. and Wed.</p> <p>Living room has both snack and soda machines and an ongoing jigsaw puzzle.</p>

