

JAC

20 8

Community Advisory Committee Quarterly/Annual Visitation Report

County Henderson	Facility Type - <input type="checkbox"/> Family Care Home <input checked="" type="checkbox"/> Adult Care Home <input type="checkbox"/> Nursing Home <input type="checkbox"/> Combination Home	Facility Name Carillon Asst. Living
Visit Date Dec 19, 2018	Time Spent in Facility 1 hr 30 min	Arrival Time 11:00 <input checked="" type="checkbox"/> am <input type="checkbox"/> pm
Name of Person Exit Interview was held with David Fardolis Adm.	Interview was held <input checked="" type="checkbox"/> In-Person <input type="checkbox"/> Phone <input type="checkbox"/> Admn. <input type="checkbox"/> SIC (Supervisor in Charge)	
Other Staff Rep Renee Gray (RES. Coord.)	Name & Title Angel Vaughan (Activity Dir.)	
Committee Members Present: Bernie Brodsky - Barbara Hickey	Report Completed by: Bernie Brodsky	
Number of Residents who received personal visits from committee members: 6		
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 <i>Required for Nursing Homes Only</i>		Staffing information is posted. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Resident Profile

Comments & Other Observations

- 1. Do the residents appear neat, clean and odor free? Yes No
- 2. Did residents say they receive assistance with personal care activities, Ex. brushing their teeth, combing their hair, inserting dentures or cleaning their eyeglasses? Yes No
- 3. Did you see or hear residents being encouraged to participate in their care by staff members? Yes No
- 4. Were residents interacting w/ staff, other residents & visitors? Yes No
- 5. Did staff respond to or interact with residents who had difficulty communicating or making their needs known verbally? Yes No
- 6. Did you observe restraints in use? Yes No
- 7. If so, did you ask staff about the facility's restraint policies? Yes No

Facility has 96 Beds "Occupied only 31-units"
#C-unit is "Memory Care" with 12 residents
Profit facility but concern is not indicated

Resident Living Accommodations

Comments & Other Observations

- 8. Did residents describe their living environment as home-like? Yes No
- 9. Did you notice unpleasant odors in commonly used areas? Yes No
- 10. Did you see items that could cause harm or be hazardous? Yes No
- 11. Did residents feel their living areas were too noisy? Yes No
- 12. Does the facility accommodate smokers? Yes No
- 12a. Where? Outside only Inside only Both Inside & Outside.
- 13. Were residents able to reach their call bells with ease? Yes No
- 14. Did staff answer call bells in a timely & courteous manner? Yes No
- 14a. If no, did you share this with the administrative staff? Yes No

Sanitation both kitchen and Building 95 - Reason - New Cook & plumbing repair
Sprinkler & Smoke alarm in every room.
Fire drills conducted once a month.

Resident Services

Comments & Other Observations

- 15. Were residents asked their preferences or opinions about the activities planned for them at the facility? Yes No
- 16. Do residents have the opportunity to purchase personal items of their choice using their monthly needs funds? Yes No
- 16a. Can residents access their monthly needs funds at their convenience? Yes No
- 17. Are residents asked their preferences about meal & snack choices? Yes No
- 18. Are they given a choice about where they prefer to dine? Yes No
- 19. Do residents have privacy in making and receiving phone calls? Yes No
- 20. Is there evidence of community involvement from other civic, volunteer or religious groups? Yes No
- 21. Does the facility have a Resident's Council? Yes No
- 22. Family Council? Yes No

Facility has a "Resident Council" meets 3rd Thurs. Monthly "4:30"
Activities "not indicated"
New Activity director will be on staff Jan 3, 2019

Areas of Concern

Exit Summary

Are there resident issues or topics that need follow-up or review at a later time or during the next visit?

Discuss items from "Areas of Concern" Section as well as any changes observed during the visit.

All new Management.