

## Community Advisory Committee Quarterly/Annual Visitation Report

≎ounty		Facility Type -	V	Family C	are Hon	ne	Facility Name:
BUNCOMBE		Adult Care Home		Nursing Home			NORTHRIDGE #3
	1000001190	Combination Home					1000-1110-1100
visit Date	8 29 18			hr	20	min	Arrival Time 11: 20 o am pm
Jame of Per	rson Exit Interview was hel	d with BRENDA	14	CHAE			Interview was held  In-Person
Phone	Admn.	SIC (Supervisor in Charge)	. \	Other st	aff		
lep						(Name 8	Report Completed by:
	Members Present:	4 111111000 11	v aci	1 1 A	i an i		MARSAA SAFIAN
SHM	RON WHILE KIN	4 MALLICOAT, M,	momb	075 SIIF	11500		[17][03]]] 30]] ]])
Jumber of Residents who received personal visits from committee me 2 sident Rights Information is clearly visible. Yes No.				Ombudsman contact information is correct and clearly Yes No			
zesident Kiç	gnts information is clearly v	risible. V res	INO	posted.	IIIaii coi	mact mile	initiation is correct and oleany [5] 165
r <del>i</del>		ible Voc	No	posteu.			✓ Yes No
he most recent survey was readily accessible. Yes Required for Nursing Homes Only)			] 140	Staffing information is posted.			
	•		•		Acres 1	. 6	Comments & Other Observations
D (1		and adar frag?		Yes	No		
	sidents appear neat, clean			165	] 140	0.	sitents were well
. Did reside	ents say they receive assis x. brushing their teeth, com	tance with personal care	,			fle	sitents were
				Yes	No	10	Ken core of by staff of all said they were ppy is the home.
entures or cleaning their eyeglasses?  Did you see or hear residents being encouraged to participate					,	100	CEL COLO 100
	by staff members?	onodragou to participate		Yes	No	1 he	in all said They were
	idents interacting w/ staff, o	other residents & visitors?	H-/-	Yes -	No	1	
		residents who had difficulty			,	Ro	pry is the home.
	ting or making their needs			Yes /	No		
	bserve restraints in use?	•	$\overline{}$	Yes 🗸	No		
			_		1 1		
DIL 11.	you ask staff about the faci	ility's restraint policies?		Yes	No		
. If Jid		ility's restraint policies?		Yes	No	C	omments & Other Observations
	you ask staff about the fact Resident Living Accor ents describe their living er	mmodations		Yes Yes	No No		
. Did resid	Resident Living Accor ents describe their living er notice unpleasant odors in o	mmodations nvironment as homelike? commonly used areas?	V	Yes Yes	No No		
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re there resident issues or topics that need follow-up or review at a later time or during ne next visit?

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

5 RESIDENTS 1 VACANCY MALE 4 FEMALES AGES 65-95