### Community Advisory Committee Quarterly/Annual Visitation Report

<table>
<thead>
<tr>
<th>County:</th>
<th>Facility Type:</th>
<th>Facility Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buncombe</td>
<td>Adult Care Home</td>
<td>NC State Veterans Nursing Home</td>
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<tr>
<td></td>
<td>Family Care Home</td>
<td></td>
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<td></td>
<td>Combination Home</td>
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<tr>
<td></td>
<td>Nursing Home</td>
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</table>

| Visit Date: 1/29/18 | Time Spent in Facility: hr 40 min | Arrival Time: 4 : 10 am X pm |

| Person Exit Interview was held with: | Interview was held: X In-Person |

**Tonia Holderman, Director of Admissions**

**Adm** | **SIC (Supervisor in Charge)** | **Other Staff: (Name & Title)**

**Committee Members Present:** John Bernhardt, Diane Duerrmit

**Report Completed by:** John Bernhardt

### Number of Residents who received personal visits from committee members: 3

- Resident Rights Information is clearly visible. (X Yes No)
- Ombudsman contact information is correct and clearly posted. (X Yes No)
- The most recent survey was readily accessible. (Required for Nursing Homes Only) (X Yes No)
- Staffing information is posted. (X Yes No)

#### Resident Profile

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

#### Comments & Other Observations

- Residents must be veterans. Most are men but there are a few women.

- Cookies and coffee are available in the lobby and some residents go there often, where they interact with staff at the desk.

### Resident Living Accommodations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>8. Did residents describe their living environment as homelike?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>9. Did you notice unpleasant odors in commonly used areas?</td>
<td>Yes</td>
<td>No</td>
</tr>
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</table>

**Comments & Other**

- Rooms are private, large and well furnished. Residents enjoy this luxury so much they spend little time in the common areas with other residents or participate in activities.
10. Did you see items that could cause harm or be hazardous?  
   Yes  No  
   X

11. Did residents feel their living areas were too noisy?  
   Yes  No  
   X

12. Does the facility accommodate smokers?  
   12a. Where?  [X ] Outside only [ ] Inside only [ ] Both  
   Inside and Outside.  
   Yes  No

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

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

They are encouraged to eat in the dining room or their wing, for social interaction, but can choose to eat in their rooms.

Trips are taken into town but they also enjoy going to the "Pub" for snacks (no alcohol) and visiting with staff, considered an activity.

Activities are announced on the public address system, but on a visit the team did not hear an announcement that an activity was about to begin.

There is a residents' council with residents who are serious about making suggestions, though these may not get any action.

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**Areas of Concern**

**Exit Summary**

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