Community Advisory Committee Quarterly/Annual Visitation Report

Community: Sunnyside
Facility Type:
- Adult Care Home
- Family Care Home
- Combination Home
- Nursing Home
Facility Name: Brian Center

Visit Date: 6-5-17
Time Spent in Facility: 1 hr 30 min
Arrival Time: 12:51 am

Name of Person Exit Interview was held with: n/a
Interview was held: In-Person

Committee Members Present: Sarah Wess, Martha Aimes, Judy McDonald
Report Completed by: n/a

Number of Residents who received personal visits from committee members: 5 + 6 + 9 = (9)

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

Staffing information is posted. [ ] Yes [ ] No

Resident Profile
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 with 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

Resident Living Accommodations
8. Did residents describe their living environment as homelike? [ ] 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 and 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

Resident Services
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
17a. Are they given a choice about where they prefer to dine? [ ] Yes [ ] No
18. Do residents have privacy in making and receiving phone calls? [ ] Yes [ ] No
19. Is there evidence of community involvement from other civic, volunteer or religious groups? [ ] Yes [ ] No
20. Does the Facility have a Resident's Council? [ ] Yes [ ] No

Comments & Other Observations:
- Showers out-of-reach
- [ ] Yes [ ] No
Are there resident issues or topics that need follow-up or review at a later time or during the next visit?

- Resident lost 30#s & dietary take away fixed today - with no replacement offering
- Food in tray is never what it says on the "list"
- Keep running out of items - they will follow up
- Bring in a small one & it feels like a joke
- Not usually spray fresh strawberries/tomatoes - we do occasionally have fresh tomatoes
- Hard of hearing - Pocket talker? - will follow up

Kudos:

- "This is a great place."
- "Best people! My Friends are there."
- Love the Hairdresser poster!
- Clean, neat - Lobby - main hall
- No bad smells
- Laundry issue solved to residents satisfaction!
- PBa Spicy offers when resident didn't like Indian.