<table>
<thead>
<tr>
<th>Resident Profile</th>
<th>Comments &amp; Other Observations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Do the residents appear neat, clean and odor free?</td>
<td>X Yes No</td>
</tr>
<tr>
<td>2. Did residents say they receive assistance with personal care activities, <em>Ex. brushing their teeth, combing their hair, inserting dentures or cleaning their eyeglasses?</em></td>
<td>X Yes No</td>
</tr>
<tr>
<td>3. Did you see or hear residents being encouraged to participate in their care by staff members?</td>
<td>X Yes No</td>
</tr>
<tr>
<td>4. Were residents interacting w/ staff, other residents &amp; visitors?</td>
<td>X Yes No</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>X Yes No</td>
</tr>
<tr>
<td>6. Did you observe restraints in use?</td>
<td>X Yes No</td>
</tr>
<tr>
<td>7. If so, did you ask staff about the facility’s restraint policies?</td>
<td>X Yes No</td>
</tr>
</tbody>
</table>

10 residents currently plus 2 openings. The facility is careful to get residents who would be compatible and not disruptive. Also hires only staff who are good and provide good care. SIC is very good, as is the owner.

Had limited conversation with residents but they seemed happy with the place, felt at home. Three were outside enjoying the sun, two watching TV, three putting around, at home in their rooms.

<table>
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<tr>
<th>Resident Living Accommodations Observations</th>
<th>Comments &amp; Other Observations</th>
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<tbody>
<tr>
<td>8. Did residents describe their living environment as homelike?</td>
<td>X Yes No</td>
</tr>
<tr>
<td>9. Did you notice unpleasant odors in commonly used areas?</td>
<td>Yes X No</td>
</tr>
</tbody>
</table>

All clean and neat. Dinner table already set attractively. A resident had requested a subscription to Archaeology magazine be renewed, which was done.
10. Did you see items that could cause harm or be hazardous?  
   - Yes [X]  
   - No [ ]  

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

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

13. Were residents able to reach their call bells with ease?  
   - Yes [X]  
   - No [ ]  

14. Did staff answer call bells in a timely & courteous manner?  
   - Yes [X]  
   - No [ ]  
   14a. If no, did you share this with the administrative staff?  
      - Yes [X]  
      - No [ ]  

15. Were residents asked their preferences or opinions about the activities planned for them at the facility?  
   - Yes [X]  
   - No [ ]  

16. Do residents have the opportunity to purchase personal items of their choice using their monthly needs funds?  
   - Yes [X]  
   - No [ ]  
   16a. Can residents access their monthly needs funds at their convenience?  
      - Yes [X]  
      - No [ ]  

17. Are residents asked their preferences about meal & snack choices?  
   - Yes [X]  
   - No [ ]  
   17a. Are they given a choice about where they prefer to dine?  
      - Yes [X]  
      - No [ ]  

18. Do residents have privacy in making and receiving phone calls?  
   - Yes [X]  
   - No [ ]  

19. Is there evidence of community involvement from other civic, volunteer or religious groups?  
   - Yes [X]  
   - No [ ]  

20. Does the Facility have a Resident’s Council?  
   - Yes [X]  
   - No [ ]  

**Areas of Concern**

- Several local churches pick up residents for church and sometimes come for visits. One church member used to come play the piano in the day room but has not recently.

**Exit Summary**

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

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