# Community Advisory Committee Quarterly/Annual Visitation Report

<table>
<thead>
<tr>
<th>County</th>
<th>Buncombe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility Type</td>
<td>□ Family Care Home&lt;br&gt;□ Adult Care Home&lt;br&gt;□ Nursing Home&lt;br&gt;□ Combination Home</td>
</tr>
<tr>
<td>Visit Date</td>
<td>3-16-14</td>
</tr>
<tr>
<td>Time Spent in Facility</td>
<td>hr 8 min</td>
</tr>
<tr>
<td>Actual Time of Visit</td>
<td>8:30 AM</td>
</tr>
<tr>
<td>Name of Person Exit Interview was held with</td>
<td>Carol H. Johnson&lt;br&gt;(Name &amp; Title)</td>
</tr>
<tr>
<td>Interview was held</td>
<td>In-Person&lt;br&gt;Phone</td>
</tr>
<tr>
<td>Other Staff Present</td>
<td>John Smith</td>
</tr>
<tr>
<td>Number of Residents who received personal visits from committee members</td>
<td>3</td>
</tr>
<tr>
<td>Resident Rights Information is clearly visible</td>
<td>Yes</td>
</tr>
<tr>
<td>The most recent survey was readily accessible</td>
<td>Yes</td>
</tr>
<tr>
<td>(Required for Nursing Homes Only)</td>
<td></td>
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</tbody>
</table>

## 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, e.g., 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 restraint 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 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
13. Where? Yes | No
14. Inside only | No
15. Outside only | No
16. Both Inside & Outside | No
17. Were residents able to reach their call bells with ease? Yes | No
18. Did staff answer call bells in a timely & courteous manner? Yes | No
19. If so, did you share this with the administrative staff? Yes | No

## Resident Services

20. Were residents asked their preferences or opinions about the activities planned for them at the facility? Yes | No
21. Do residents have the opportunity to purchase personal items of their choice using their monthly needs funds? Yes | No
22. Can residents access their monthly needs funds at their convenience? Yes | No
23. Are residents asked their preferences about meal & snack choices? Yes | No
24. Are they given a choice about where they prefer to dine? Yes | No
25. Do residents have privacy in making and receiving phone calls? Yes | No
26. Is there evidence of community involvement from other civic, volunteer or religious groups? Yes | No
27. Does the facility have a Resident Council? Yes | No
28. Are Resident Council meetings open to the public? Yes | No
29. Are proposed issues or topics that need follow-up or review at a later time or during the next visit? Yes | No

## Areas of Concern

Just 1: "Today Square on Calendar is still on Sunday on B-T."

## Exit Summary

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

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This Document is a PUBLIC RECORD. Do not identify any Resident(s) by name or inference on this form.

Top Copy is for the Regional Ombudsman's Record. Bottom Copy is for the CAC's Records.

Kudos: Jessica answered call bell quickly. Tequania cares & Mark is courteous.
<table>
<thead>
<tr>
<th>Areas of Concern</th>
<th>Exit Summary</th>
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<tbody>
<tr>
<td>Are there resident issues or topics that need follow-up or review at a later time or during the next visit?</td>
<td>Discuss items from &quot;Areas of Concern&quot; Section as well as any changes observed during the visit.</td>
</tr>
<tr>
<td>No complaints about anything!</td>
<td>Carole was glad to hear residents had no complaints.</td>
</tr>
</tbody>
</table>

Kudos:
15 folks at Chairacise. All are happy and glad to be here.

Mark- cont'd - helpful & protective worker was checking smoke alarms. They have set up the 2 duke boxes they purchased from our grant.