Community Advisory Committee Quarterly/Annual Visitation Report

County	Facility Type:	☐ Family Care Home	Facility Name	
Buncombe	☐ Adult Care Ho☐ Combination	me 🗵 Nursing Home Home	The Laurels at GreenTree Ridge	
Visit date Time Spent in Fa		,	Arrival Time	
12/12/2018	2 Hr. 0		Am 01:00 PM	
Name of person Exit Interview was held with Kevin Poole, Administrator (Name & Title)				
Interview was held ☐ In-Person ☐ Phone ☒ Admin ☐ SIC (Supervisor in Charge) ☐ Other Staff Rep				
Committee Members Present: Patti Turbyfill, Susan Schiemer			Report completed by: Susan Schiemer	
Number of Residents who received personal visits from committee members: 8				
Resident Rights Information is clearly visible.		Ombudsman contact information is correct and clearly		
☑ Yes ☐ No		posted.		
The most recent survey was readily accessible. ☑ Yes ☐ No		Staffing information is posted.		
☑ Yes ☐ No (Required for Nursing Homes Only)		ĭ Yes	□ No	
Resident Prof	Sec.	Comments a	and Other Observations	
 Do the residents appear neat, clean and odor free? ☑ Yes ☐ No Did residents say they receive assistance with personal care activities, ex. brushing 			id that "yes, when not short	
their teeth, combing their hair, inserting dentures or cleaning their eyeglasses? ☑ Yes ☐ No		handed" there w	as a recent snow storm	
3. Did you see or hear residents being encouraged to participate in their care by staff members? ☐ Yes ☒ No				
4. Were residents interacting w/ 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		#5 Not observed th	is visit	
6. Did you observe restraints in use?				
		#6 One resident ha	d safety belt type restraint	
7. If so, did you ask staff aborestraint policies? ✓ Yes		that they could not told by staff that a f	get out of. Volunteer's were	
		requested the belt.		

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Resident Living Accommodations	Comments and Other Observations
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 & 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	# 8 Rooms in the Long-Term Care (LTC) wing were only sparsely decorated with personal items. # 9 Urine smell in one hallway of LTC wing #10 Unattended housekeeping carts on the Rehab wing. #11 On the Rehab wing, one resident was crying out "help me" staff took several minutes to respond #14 Volunteers observed call bell ringing in TLC wing while staff were gathered around nursing station talking to each other. Another staff member entered the semi private room and spoke with a resident but did not address the call bell. A staff member who was working at a medicine cart, did go to the room and ask "Are you OK?"
Basidandial Caminas	Comments and Other Observations
Residential Services	Comments and Other Observations
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 Family Council? ☐ Yes ☑ No	

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Areas of Concern	Exit Summary
Are there resident issues or topics that need	Discuss items from "Areas of Concern" Section as well
follow-up or review at a later time or during the next visit?	as any changes observed during the visit.
.) On Laurels of GreenTree website is	
posted "5 star Medicare Quality	
Rating" which is correct however the	
community has a 3 star Overall	
Medicare Rating. See	
Medicare.gov /Nursing Home Compare	
2.) One of the rotating photos on	
Laurels of GreenTree website declares	
"Congratulations on Deficiency Free	
Annual Survey" however from	
Medicare.gov/Nursing Home Compare	
their 2/2/2018 Health Inspection had 6	
deficiencies. Fire Safety on 3/7/18 had	
14 deficiencies	

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