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Community Advisory Committee Quarterly/Annual Visitation Report

City: <u>Buncombe</u>		Facility Type:		Facility Name: <u>Livens Estate Health Care Center</u>	
		<input type="checkbox"/> Adult Care Home	<input type="checkbox"/> Family Care Home		
		<input type="checkbox"/> Combination Home	<input checked="" type="checkbox"/> Nursing Home		
Visit Date: <u>5/2/14</u>	Time Spent in Facility: <u>5</u> hr <u></u> min	Arrival Time: <u>3</u> : <u>30</u> am <input checked="" type="checkbox"/> pm			
Name of Person Exit Interview was held with:			Interview was held <input type="checkbox"/> In-Person		
Name: <u>Robin Suddreth, Administrator</u>				Phone: <u>274-4800</u>	
Title: Check Box <input checked="" type="checkbox"/> Admn.		<input type="checkbox"/> SIC (Supervisor in Charge)		<input type="checkbox"/> Other staff	

Committee Members Present: <u>Ellen Baker, Sonya Suddreth</u>	Report Completed by: <u></u>
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Number of Residents who received personal visits from committee members: 11

Resident Rights Information is clearly visible. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Ombudsman contact information is correct and clearly posted. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
The most recent survey was readily accessible. <input type="checkbox"/> Yes <input type="checkbox"/> No (Required for Nursing Homes Only) <u>See back</u>	Staffing information is posted. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Resident Profile	Comments & Other Observations
1. Do the residents appear neat, clean and odor free? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Did you see or hear residents being encouraged to participate in their care by staff members? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
4. Were residents interacting w/ staff, other residents & visitors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
5. Did staff respond to or interact with residents who had difficulty communicating or making their needs known verbally? <input type="checkbox"/> Yes <input type="checkbox"/> No	
6. Did you observe restraints in use? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
7. If so, did you ask staff about the facility's restraint policies? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Resident Living Accommodations	Comments & Other Observations
8. Did residents describe their living environment as homelike? <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Did you notice unpleasant odors in commonly used areas? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10. Did you see items that could cause harm or be hazardous? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11. Did residents feel their living areas were too noisy? <input type="checkbox"/> Yes <input type="checkbox"/> No	
12. Does the facility accommodate smokers? <input type="checkbox"/> Yes <input type="checkbox"/> No	
12a. Where? <input type="checkbox"/> Outside only <input type="checkbox"/> Inside only <input type="checkbox"/> Both Inside and Outside.	
13. Were residents able to reach their call bells with ease? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
14. Did staff answer call bells in a timely & courteous manner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
14a. If no, did you share this with the administrative staff? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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

Areas of Concern**Exit Summary**

Are there resident issues or topics that need follow-up or review at a later time or during the next visit?

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

Residents we spoke to said the staff was doing a good job. One very upset resident was concerned about being abandoned by her family. In checking on the recent survey, there was one sheet from an old 2011 survey.

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In our interview we did express concern for the resident who felt abandoned. Robin said they have worked with and just haven't been able to find any way to relieve her distress. The daughter does visit and

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Robin said they use the small ditty bags to distract a resident who is restless or anxious or in pain prior to the time for the next round of medication.

the staff has tried to find a medication that would lessen her stress, but nothing has seemed to help. The resident will answer that every is okay when asked how things are going, but it will be in a very sad, trembling voice.

Robin said she would look into why the wrong survey information was posted on the bulletin board.

We had a good discussion about the use of meds and she said they work with physician to eliminate or reduce drugs whenever possible.

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