

**Community Advisory Committee
Quarterly/Annual Visitation Report**

County: Chatham	Facility Type <input type="checkbox"/> Family Care Home <input type="checkbox"/> Adult Care Home <input checked="" type="checkbox"/> Nursing Home	Facility Name: The Laurels Census – current/licensed: 131/ 140
Visit Date and day of the week October 14, 2015	Time spent in facility 1 hours 15 minutes	Arrival time 5:35 pm
Name of person(s) with whom exit interview was held Director of Nursing and Two Nurses		Interview was held in person
Committee members present: Two Committee Members		
Number of residents who received personal visits from committee members: 14, Two family members.		Report completed by:
Resident Rights information is clearly posted? Yes	Ombudsman contact information is correct and clearly posted: Yes	
The most recent survey was readily accessible. 8/4/15 Complaint Investigation - unsubstantiated	Staffing information clearly posted? Yes.	

Resident Profile	Yes No N/A	Comments/Other Observations (please number comments)
1. Do the residents appear neat, clean and odor free?	Y	1. Residents responsive and pleasant when approached.
2. Did residents say they receive assistance with personal care activities? (i.e. brushing their teeth, combing their hair, inserting dentures or cleaning their eyeglasses)	Y	
3. Did you see or hear residents being encouraged to participate in their care by staff members?	Y	
4. Were residents interacting with staff, other residents & visitors?	Y	
5. Did staff respond to or interact with residents who had difficulty communicating or making their needs known verbally?	Y	
5a Did staff members wear nametags that are easily read by residents and visitors?	Y	
6. Did you observe restraints in use?	N	
7. If so, did you ask staff about the facility's restraint policies? Note: Do not ask about confidential information without consent	N/A	

Resident Living Accommodations	Yes No N/A	Comments/Other Observations (please number comments)
8. Did residents describe their living environment as homelike?	Y	8. Some residents receiving rehab look forward to going home. Another resident has been meeting with social worker about going home. 12. Smoking is permitted outside.
9. Did you notice unpleasant odors?	N	
10. Did you see items that could cause harm or be hazardous?	N	
10a. Were unattended med carts locked?	Y	
10b. Were bathrooms clean, odor-free and free from hazards?	Y	
10c. Were rooms containing hazardous materials locked?	Y	
11. Did residents feel their living areas were kept at a reasonable noise level?	N/A	
12. Does the facility accommodate smokers?	Y**	
13. Were residents able to reach their call bells with ease?	Y	
14. Did staff answer call bells in a timely & courteous manner?	Y	
14a If no, did you share this with the administrative staff?	NA	

Resident Services	Yes No N/A	Comments/Other Observations (please number comments)
15. Were residents asked their preferences or opinions about the activities planned for them at the facility?	Y	15. Resident enjoys bingo but unable to go today due to lift not working. 17 a. Evening meal will be served in the dining room at 6 pm. Some residents are dining in their room. 17 b. One resident reported not liking the food. 18. Many residents have personal phones.
15a. Was a current activity calendar posted in the facility?	Y	
15b. Were activities scheduled to occur at the time of your visit actually occurring?	N	
16. Do residents have the opportunity to purchase personal items of their choice using their monthly needs funds?	Y	
16a. Can residents access their monthly needs funds at their convenience?	Y	
17. Are residents asked their preferences about meal & snack choices?	Y	
17a. Are they given a choice about where they prefer to dine?	Y	
17b. Did residents express positive opinions regarding their dining experience?	Y	
17c. Is fresh ice water available and provided to residents?	Y	
18. Do residents have privacy in making and receiving phone calls?	Y	
19. Is there evidence of community involvement from other Civic, volunteer or religious groups?	Y	
20. Does the facility have a functioning: Resident's Council? Family Council?	Y	

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? <hr/>	Discuss items from "Areas of Concern" Section as well as any changes observed during the visit. Give summary of visit with Administrator or SIC. Discussed the availability of the Hoyer lift for residents. The Laurels has several batteries and lifts available for use. Inquired about staff interest in contributing a sample case study about resident response to dementia care plans. Ombudsman invited to return the next day to discuss (this in preparation for the CE conducted by UNC-CH School of Nursing on Dementia on November 13 th at the Friday Center.

Quarterly/Annual Visitation Report Addendum

The Laurels October 14, 2015

Culture Change / Person Centered Thinking	Comments/Responses
<p>1. Directed to residents –</p> <ul style="list-style-type: none"> a. What is one thing you would change here to make your life better? b. Are you offered choices and encouraged to make your own decision about personal issues like what to wear or when to go to bed? c. What’s important to you while dining? d. What would make your dining experience here more like home? e. Is listening to music something you’ve enjoyed? 	<ul style="list-style-type: none"> a. b. Resident states able to decide what to wear when dressing for the day. c. Being with other people d. e.
<p>b. Directed to the administrator or supervisor-in-charge</p> <ul style="list-style-type: none"> a. What are you doing to incorporate residents’ wants and needs in every aspect of their lives and assure a home- like environment? b. Are you providing for consistent-assignment of your direct caregivers to take care of your residents? c. What are you doing to make the dining experience a pleasant one for your residents? d. Are you offering personalized music to your residents? 	<p>This information was reported at the November 2014 visit.</p> <p>Activity person on staff may take resident shopping or shopping is done for the resident. Residents may travel via motorized wheelchair to shops in town.</p> <p>Yes, same staff on same hall</p> <p>Flowers, tablecloths, food is plated and served. Residents are asked for their choice of drink.</p> <p>Administrator responded that the Activity Director does a good job with the Music and Memory program.</p>