

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

County Orange	Facility Type <input type="checkbox"/> Family Care Home <input checked="" type="checkbox"/> Adult Care Home <input type="checkbox"/> Nursing Home	Facility Name: Crescent Green Assisted Living Community Census: 79/120
Visit Date and day of the week Wednesday, June 24, 2015	Time spent in facility 1 hours 0 minutes	Arrival time 4:30 pm
Name of person(s) with whom exit interview was held Resident Care Coordinator		Interview was held <input checked="" type="checkbox"/> in person
Committee members present: Three Committee Members		
Number of residents who received personal visits from committee members (20)		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 (Required for NHs only – record date of most recent survey posted) : N/A	Staffing information clearly posted? No	

Resident Profile	Yes No N/A	Comments/Other Observations (please number comments)
1. Do the residents appear neat, clean and odor free?	Yes	1. Generally, residents appear clean and dressed neatly, though there are exceptions. 3. Only a few staff members were observed during the visit. 5a. Very few, if any staff, were wearing nametags. This continues to be a trend.
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)	Yes	
3. Did you see or hear residents being encouraged to participate in their care by staff members?	No	
4. Were residents interacting with staff, other residents & visitors?	Yes	
5. Did staff respond to or interact with residents who had difficulty communicating or making their needs known verbally?	Yes	
5a. Did staff members wear nametags that are easily read by residents and visitors?	No	
6. Did you observe restraints in use?	No	
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?	Yes	8. Resident rooms vary considerably in cleanliness/tidiness. While some are well maintained, others are rather dirty, including one with Oreo cookies spread all over the floor. 9. The smell of urine was faintly present in one hallway. 10b. After several visits of noted improvement in bathroom facilities, at least one bathroom on the 100/200 hall had stained walls (soap scum), the floor was littered with toilet paper,
9. Did you notice unpleasant odors?	Yes	
10. Did you see items that could cause harm or be hazardous?	Yes	
10a. Were unattended med carts locked?	N/A	
10b. Were bathrooms clean, odor-free and free from hazards?	No	
10c. Were rooms containing hazardous materials locked?	No	
11. Did residents feel their living areas were kept at a reasonable noise level?	No	
12. Does the facility accommodate smokers?	Yes	
12a. Where? (Outside / inside / both)	Outside	
13. Were residents able to reach their call bells with ease?	N/A	
14. Did staff answer call bells in a timely & courteous manner?	N/A	
14a. If no, did you share this with the administrative staff?	N/A	

		<p>and there was a urine odor.</p> <p>10c. Multiple doors that should be locked were not, including the electrical panel room, a room marked “Biohazard”, two housekeeping closets, and the 300 hall storage room.</p> <p>12. Smoking continues to be a popular activity among residents.</p>
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*** N/A equals not applicable, not asked, not observed

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?	Yes	<p>15. The activity program did not receive high praise from residents interviewed. The offerings are not popular with many residents.</p> <p>15b. No activities were scheduled as the committee arrived at meal time. In general, though, no activities are scheduled after 2:15 pm.</p> <p>17. Several residents complained about the quality of food and portion sizes. Specific complaint was that food is high in carbs and fat and that there are few, if any, fruits and vegetable offerings.</p> <p>17b. As is often the case, opinions about meals were mixed; however, there seemed to be somewhat more dissatisfaction than in past visits.</p> <p>20. The Resident Council met on the day of our visit.</p>
15a. Was a current activity calendar posted in the facility?	Yes	
15b. Were activities scheduled to occur at the time of your visit actually occurring?	No	
16. Do residents have the opportunity to purchase personal items of their choice using their monthly needs funds?	Yes	
16a. Can residents access their monthly needs funds at their convenience? (#16 and 16a pertain only to residents on Medicaid/Special Assistance. NHs \$30 per month. ACHs \$66 minus medication co-pay and full cost OTC drugs)	Yes	
17. Are residents asked their preferences about meal & snack choices? (Adult Care Home residents should receive snacks 3X per day. Nursing Home residents should be offered snacks at bedtime.)	N/A	
17a. Are they given a choice about where they prefer to dine?	Yes	
17b. Did residents express positive opinions regarding their dining experience (the food provided)?	No	
17c. Is fresh ice water available and provided to residents?	N/A	
18. Do residents have privacy in making and receiving phone calls?	Yes	
19. Is there evidence of community involvement from other civic, volunteer or religious groups?	Yes	
20. Does the facility have a functioning: Resident’s Council? Family Council?	Yes No	

Areas of Concern	Exit Summary
<p>Are there resident issues or topics that need follow-up or review at a later time or during the next visit?</p> <hr/> <p><u>New and/or Persistent issues:</u></p> <ul style="list-style-type: none"> • Drab condition of physical plant • Unlocked storage/electrical rooms • Nutritional content of meals <p><u>Past areas of concern:</u></p> <ul style="list-style-type: none"> • Pain management • Handicap accessibility • Noise levels • Tension/violence between residents 	<p>Discuss items from “Areas of Concern” Section as well as any changes observed during the visit. Give summary of visit with Administrator or SIC. Does the facility have needs that the committee or community could help address?</p> <hr/> <p>Upon arrival, the committee advised Resident Care Coordinator that we were there for our quarterly visit. He was the only admin staff person on duty. The committee attempted to follow up with the Resident Care Coordinator at the conclusion of our visit; however, he was dealing with a resident who had fallen and the EMS crew that came to assist. We reported via email the following observations from our visit.</p>

- *Questionable nighttime occurrences/activity*
- *Smoking ban implications*
- *Limited activities schedule*
- *Unlocked storage/electrical rooms*
- *Resident Bill of Rights not present*
- *Call bells*
- *Nametag use*

After at least a year of prior visits noting meaningful upgrades to the physical plant and its overall condition, on this visit a drab, somewhat dirty condition was observed. We also had the impression that staffing was sparse. In general, it is difficult to differentiate staff members from residents, both due to a lack of a formal uniform and limited (if any) nametag use. A persistent concern is the number of unlocked utility closets, electrical rooms and housekeeping closets. If this issue was addressed following the committee's prior visit, as we were advised it would be, it does not appear that adequate steps have been taken to keep the doors secured. Although there were not an abundance of resident complaints, and some of the past areas of concern seem to be under control, this visit, overall, was a step backward from recent ones.

Discussion of past areas of concern:

Residents interviewed were asked about prior areas of concern. There were no reports of continued pain management or handicap accessibility issues. The tension/violence between residents has been monitored for several subsequent visits now and appears to be under control. It appears that the facility has not been able to ban smoking, and is accepting that this activity will continue. The issue of activities ending early in the afternoon has not been addressed. No true call-bell system has been implemented and there is little hope that a facility-wide system will be forthcoming.