

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

County: Orange	Facility Type <input type="checkbox"/> Family Care Home <input type="checkbox"/> Adult Care Home <input checked="" type="checkbox"/> Nursing Home	Facility Name: Brookshire  Census: 70 of 80
Visit Date and day of the week 8 June 2011, Wednesday	Time spent in facility 1 hour	Arrival time 4:30 p.m.
Person(s) with whom exit interview was held Director of Medical Records		Interview was held in person yes
Committee members present: Two Committee Members		

Number of residents who received personal visits from committee members 6

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) : 11 October 2010	Staffing information clearly posted? Yes

<b>Resident Profile</b>	<b>Yes No N/A</b>	<b>Comments/Other Observations (please number comments)</b>
1. Do the residents appear neat, clean and odor free?	Yes	
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?	N/A	
5a. Did staff members wear nametags that are easily read by residents and visitors?	Yes	
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	

<b>Resident Living Accommodations</b>	<b>Yes No N/A</b>	<b>Comments/Other Observations (please number comments)</b>
8. Did residents describe their living environment as homelike?	Yes	10a - did not see any unattended med carts 10c - was not on halls with hazardous materials rooms 11 - did not ask this question 13 - one resident was unable to easily reach call bell; we moved the call bell to a place more easily reached 14 - several residents indicated delays in response time, esp important when help needed to get to the bathroom. All noted that the delays were associated with time of day, i.e., as many residents are awaking, right after meals when many residents are requesting help at the same time.
9. Did you notice unpleasant odors?	No	
10. Did you see items that could cause harm or be hazardous?	No	
10a. Were unattended med carts locked?	N/A	
10b. Were bathrooms clean, odor-free and free from hazards?	Yes	
10c. Were rooms containing hazardous materials locked?	N/A	
11. Did residents feel their living areas were kept at a reasonable noise level?	N/A	
12. Does the facility accommodate smokers?	Yes	
12a. Where? (Outside / inside / both)	Yes	
13. Were residents able to reach their call bells with ease?	No	
14. Did staff answer call bells in a timely & courteous manner?	No	
14a. If no, did you share this with the administrative staff?	Yes	

Facility / date: Brookshire 6 June 2011

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	16 and 16a - did not specifically ask these questions, but did ask if personal needs items were available - answers were yes.
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	17a - The main dining room was recently renovated. It's décor is inviting and pleasant. Plans are in place to renovate a smaller dining area.
16. Do residents have the opportunity to purchase personal items of their choice using their monthly needs funds?	N/A	
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)	N/A	17c - one resident had no water container in the room; resident said water was always available.
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.)	Yes	
17a. Are they given a choice about where they prefer to dine?	Yes	20 - Family Council not active since 2007; there is a Resident's Council
17b. Did residents express positive opinions regarding their dining experience (the food provided)?	Yes	
17c. Is fresh ice water available and provided to residents?	Yes	
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	

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>Check that residents who are confined to wheel chairs are able to reach their call bells when they are out of bed. Continue to ask residents about response time to call bells when assistance is needed to get to the bathroom to learn if improvements have been made.</p>	<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>The administrator had gone home by the time our visits were completed. We met with the Director of Medical Records who answered concerns we brought up, as listed in the report, and assured us that she would relay them to the administrator the next day.</p> <p>The Director of Medical Records indicates she would go immediately to the room of the resident who did not have a water container in sight to bring the resident a pitcher of ice water.</p> <p>All residents who indicated delays in call bell responses also indicated they have discussed it with the administrators .</p> <p>We asked the residents if they were aware of the process to issue concerns or complaints. None were aware of a formal process but several answered that they start with telling the nursing staff, who then report the concern to the administrators.</p>

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